

HYPEREMESIS GRAVIDARUM PATHOCHART

PATHOPHYSIOLOGY

Hyperemesis gravidarum is extreme morning sickness, possibly caused by a rapid rise in hormone (hCg) levels, that causes long-lasting intense nausea, vomiting and weight loss. While many pregnant women experience morning sickness, hyperemesis gravidarum develops between the 4th - 6th weeks of pregnancy and may last longer than week 20. Symptoms may be so severe that they interrupt the patient's daily activities. Complications that may arise from excessive vomiting include dehydration, renal impairment, malnutrition and electrolyte imbalance.

ASSESSMENT FINDINGS

- Nausea & Vomiting
- Dizziness & Syncope
- Fatigue & Weakness
- Food/Smell Aversions
- Headache & Confusion
- Hypotension & Tachycardia
- Dehydration
- Jaundice

DIAGNOSTICS

- Clinical Findings
- Blood Chemistries

NURSING PRIORITIES

- Optimize Fluid & Electrolyte Balance
- Promote Comfort
- Optimize Nutritional Intake

THERAPEUTIC MANAGEMENT

- IV fluids as needed
- Severe cases may require TPN
- Monitor weight
- Promote bed rest
- Electrolyte replacement as needed
- Identify and avoid triggers (smells)

MEDICATION THERAPY

- Antiemetics - Promethazine, Prochlorperazine, Chlorpromazine
- 5-HT₃ Antagonists - Ondansetron
- Motility Agents - Metoclopramide
- Antihistamines - Diphenhydramine