

Getting through Hyperemesis Gravidarum

Non-clinical guidance for
women suffering from
Hyperemesis Gravidarum in
New Zealand

Acknowledgements

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About the authors

This document was created by local women who have experienced Hyperemesis Gravidarum (HG) in pregnancy. They have created this guidance to support other women who are experiencing HG in New Zealand.

Questions?

Please email us your questions at hguidancenz@gmail.com.

Did we get something wrong?

Please let us know so we can correct it. You can email us at hguidancenz@gmail.com.

We will correct errors as they are identified and will release updated versions of this document as needed.

Disclaimer

This guidance is not medical advice. It is not intended to aid in medical diagnosis or treatment, and should not be taken as a substitute for advice from a qualified medical practitioner. You should meet regularly with your Lead Maternity Carer to manage your health and wellbeing throughout your pregnancy.

Versions

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Topics to be added into future versions include:

- Guidance for partners and support people
- Getting help for family harm
- Planning for subsequent pregnancies

If you would like to be involved in supporting future versions, please get in touch at hguidancenz@gmail.com.



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About this guidance

This guidance was created to help women experiencing hyperemesis gravidarum (HG) in New Zealand to navigate the support available to women locally. It is for women experiencing HG, their whānau and other support people.

About HG

HG is extreme, persistent nausea and/or vomiting during pregnancy. It can lead to dehydration, weight loss, depression, anxiety and electrolyte imbalances. There is currently no cure for HG, but it can be managed with appropriate support from healthcare professionals.

Hyperemesis Education & Research Foundation (HER) is the world leader in HG research and support. Check out their [About Hyperemesis Gravidarum](#) page for more information about HG¹

Broader impacts of HG

HG can be debilitating and impact all aspects of your life, not just your physical health. This guidance provides information on ways to access support to help you and your whānau get through HG.



Broader impacts of HG

¹ <https://www.hyperemesis.org/about-hyperemesis-gravidarum/>

Managing your physical health

Management of HG usually involves treatments aimed at reducing nausea and vomiting and ensuring adequate nutrition and hydration. In New Zealand, **you do not need a formal diagnosis to request or receive treatment for HG.**

Your treatment will be led by your [lead maternity carer \(LMC\)](#), likely with support from other health professionals.²

Your lead maternity carer

In Aotearoa New Zealand, women are assigned or will select an LMC who will see them regularly throughout their pregnancy, usually attend their labour, and provide care and support for up to six weeks post-birth. Your LMC will be your go-to person for managing your health while pregnant, which includes managing your HG.

Types of lead maternity carers

Midwives: Most pregnant women will have a midwife as their LMC. HG is included in all midwifery training courses, but the depth of coverage varies between education providers. HG occurs in about 1-2% of pregnancies, so your midwife may or may not have first-hand experience managing it.

Midwives often come to their patient's homes but will also have a clinic or space where patients will visit. If you are too unwell to leave the house, you could ask your midwife to come to you.

Midwives can prescribe medications related to pregnancy, which include medications that help to manage nausea and vomiting.

Hospital/community midwives: Many hospitals have a staff of midwives who will act as LMC for women who need additional care or cannot find a private midwife.

Hospitals operate differently. In some, registered women will see the same midwife each time. With others, they will see whichever midwife is rostered on.

Obstetricians: Obstetricians are doctors who specialise in pregnancy and birth. Some women choose to have a private obstetrician as their LMC for their pregnancy. They have a higher level of training than midwives and can provide more comprehensive specialist medical care. Obstetric practices will usually have their own midwives. Private obstetricians are not publicly funded, and the costs for the pregnancy, labour and birth will usually be between \$5,000-\$10,000. Some health insurance policies cover pregnancies.

GPs: A small number of GPs are qualified to act as LMCs. You can ask your GP if they are able to be your LMC for your pregnancy.

If you feel that your LMC is not managing your health effectively, **you can change to a different one at any time in your pregnancy.** You do not need to tell your LMC why you have changed.

²<https://www.nationalwomenshealth.adhb.govt.nz/womens-health-information/maternity/lead-maternity-carers-lmcs/>

If you feel the support your LMC is providing is inadequate, or, you would like a second opinion, or you want co-management treatment approach for your HG symptoms then your LMC should be able to consult Maternal Foetal Medicine in your local health district and/or make a formal referral back to your GP. This referral should enable you to access free or heavily subsidised GP appointments beyond your first trimester.

Medical treatments and strategies for managing HG

In 2023, the *Society of Obstetric Medicine of Australia and New Zealand* (SOMANZ) published an updated [Guideline for the management of nausea and vomiting in pregnancy and hyperemesis gravidarum](#) (SOMANZ Guidelines).³ It provides clinical guidelines from doctors specialising in pregnancy. You should ensure your LMC, and other health professionals you see, are familiar with this guidance.

HER Foundation has created guidance on [best practice for treatments](#) globally.⁴ They have a [detailed treatment protocol](#) you should share with your LMC⁵.

Treatment of HG in New Zealand will differ from patient to patient and from health professionals. Typically, it will include one or more of the following treatments:

Fluids and nutritional support	<p>Intravenous (IV) fluids: Provision of IV fluids is an important part of management of nausea and vomiting, as well as for correction of dehydration.</p> <p>Nutritional support: If oral intake is not sufficient, nutritional supplementation through intravenous feeding, a feeding tube or liquid meals on prescription (e.g. Ensure) may be necessary.⁶</p> <p>See also pages 23-24 of the <i>SOMANZ guidelines</i> for more information on IV fluids and nutrition support.</p>
Medications	<p>Your LMC will work with you to prescribe appropriate medications for your needs. They may work with specialist doctors such as obstetricians or psychiatrists to ensure they are suitable for you and your baby.</p> <p>Medications that you may be prescribed include:</p> <ul style="list-style-type: none">● Antiemetics (medications that help suppress vomiting)● Acid suppressants● Laxatives● Steroids <p>See pages 12-24 of the <i>SOMANZ guidelines</i>. HER Foundation also has detailed information on medication options.⁷</p> <p>Because this guidance is not medical advice, we cannot provide information on medications.</p>

³<https://www.somanz.org/content/uploads/2023/12/SOMANZ-Management-of-NVP-Position-Statement-Updated-Oct-2023-FINAL-1.pdf>

⁴<https://www.hyperemesis.org/about-hyperemesis-gravidarum/treatment/>

⁵<https://www.hyperemesis.org/tools/treatment-protocol/>

⁶<https://www.hyperemesis.org/about-hyperemesis-gravidarum/treatment/parenteral-nutrition/>

⁷<https://www.hyperemesis.org/about-hyperemesis-gravidarum/treatment/medications/>

Vitamins and mineral supplements	<p>Pyridoxine (vitamin B6): Used first-line in many countries for nausea and vomiting in early pregnancy. Studies have shown that pyridoxine improves mild to moderate nausea but does not significantly reduce vomiting.</p> <p>See page 18 of the <i>SOMANZ guidelines</i>.</p> <p>Multivitamin supplements: can help address potential nutritional deficiencies due to inadequate oral intake.⁸</p>
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Non-medical strategies for managing HG

Other strategies and lifestyle changes may also be recommended to help manage your symptoms. See pages 13-14 of the *SOMANZ guidelines*.

Food strategies and lifestyle adjustments	<p>HG can make eating and drinking impossible. However, it is important to try to eat and drink as much as possible to minimise the risks of dehydration and weight loss.</p> <p>HER Foundation has detailed guidance on food strategies.⁹ HER Foundation recommends that in managing pregnancy-related nausea, patients should consume tolerable foods to prevent weight loss and maintain nutrition. When your diet is limited to simple carbohydrates and sugars, weekly IV multivitamins, especially vitamins K and B1, are recommended to prevent nutritional deficiencies and complications.</p>
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Complementary therapies	<p>Complementary therapies could include treatments such as:</p> <ul style="list-style-type: none"> ● acupuncture ● homoeopathy ● herbal remedies¹⁰ <p>Rongoā Māori (traditional Māori healing) may be an option for you to consider.¹¹</p>
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Mental health supports	Refer to page 10 of this document for guidance on the available mental health support.
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Other healthcare services in New Zealand

You should always contact your LMC if you have urgent healthcare needs. If you cannot see them or want a second opinion, you may be able to get access to support through other providers.

Note: costs are for eligible residents and citizens.

If you are a low income earner, or have had to give up work due to your HG you may be eligible

⁸ If you are worried about taking tablets while experiencing HG some supplements can be provided in liquid form e.g MTHFR Clinical Folate 400 Drops, Liquid Vitamin D Restore- Be Pure, Biocare nutrisorb vitamin B6 to give some examples. Ask your LMC, Dr or a nutritionist/dietician which ones are best for your circumstances

⁹ <https://www.hyperemesis.org/who-we-help/mothers-area/get-info/food-strategies/>

¹⁰ <https://www.hyperemesis.org/about-hyperemesis-gravidarum/treatment/complementary-therapies/>

¹¹ <https://healthify.nz/health-a-z/r/rongoa-maori/>

for a Community Services Card which can help you with the cost of healthcare. See the [MSD Community Services](#) Card page for more information

<p>General Practitioners (GPs)</p>	<p>GPs can usually provide maternity care in the first trimester, or until you have found an LMC. Because most women will have a midwife as their LMC, GPs do not usually provide maternity care.</p> <p>GPs can:</p> <ul style="list-style-type: none"> ● prescribe supplements and medications ● request blood tests ● administer IV fluids ● refer you to other services, such as mental health clinics or specialists 	<p>Appointments for pregnancy-related issues are usually free up to 12 weeks.</p> <p>A standard doctor's consult can be between \$50-\$80</p>
<p>After hours</p>	<p>After hours clinics (sometimes also called Accident and Urgent care) are medical practices that can see patients without appointments. Many are open 24 hours per day.</p> <p>Because they operate on a triage system, you may have to wait several hours to be seen during peak times. You can ask staff for a bag to vomit in or to lie down while you wait.</p>	<p>These are usually more expensive than standard GP clinics. Visits may be around \$100 or more.</p>
<p>Accident and Emergency (A&E)</p>	<p>Many public hospitals have Accident and Emergency wards. You may be able to access supports like IV hydration and medication through your local A&E.</p>	<p>Usually no charge</p>
<p>Pharmacists</p>	<p>Pharmacists dispense medications. They cannot prescribe medications (except for a small number of 'pharmacist prescribers') but can offer advice on how to take medications in the most effective way.</p> <p>You can ask to speak with a pharmacist at your local pharmacy.</p>	<p>Usually no charge for advice</p>
<p>Obstetricians</p>	<p>Your LMC may refer you to a publicly funded obstetrician (usually in a clinic at a local hospital) to help manage your HG. You can also ask for a referral.</p> <p>If you prefer, you could also use a private obstetrician as your LMC.</p>	<p>No charge for publicly funded obstetricians</p> <p>Private obstetrician costs vary</p>
<p>Dieticians and nutritionists</p>	<p>Dietitians may help you to find foods that will be easier to tolerate or help you find ways of getting</p>	<p>Costs will vary. Publicly funded</p>

essential vitamins or minerals with your limited diet. Nutritionists can also offer help for managing your dietary needs. They do not have to be trained to call themselves a nutritionist, but many have completed training.

They may be able to help you access meal replacements which reduce the cost of things like liquid meals.

dieticians are free but there may be a waitlist for funded services

Doulas	<p>Doulas are not medically trained and do not perform medical tasks. They provide support in a number of emotional, practical, spiritual, cultural and social ways instead.</p> <p>Doulas are not widely used in New Zealand, but may be a useful addition to your support team. They can help you advocate for yourself.</p> <p>Find out more www.nzdoulas.nz</p>	Doulas are not publicly funded, and their rates will vary
Healthline 0800 611 116	Healthline provides a 24-hour a day, 7 days a week over-the-phone health service. You can call for free health advice, information and treatment from professional healthcare providers.	Free

Managing your mental health

HG can significantly harm your mental health. It's important to reach out to your support people, LMC or other healthcare providers so that they can provide or refer you to appropriate support.

If you are having a **mental health crisis and need urgent support:**

- contact your LMC or
- go to the nearest hospital emergency department or
- call emergency services (dial 111) for immediate assistance

HG can cause severe emotional distress which can lead to the development of mental health conditions, or make existing mental health conditions worse.

Common emotional concerns from women experiencing HG



Common emotional concerns from women with HG

Mental health support available

Lead Maternity Carer	Your LMC can provide initial support and guidance for mental health concerns during pregnancy. They can assess your mental health, provide guidance and refer you to specialised services if needed.	Usually free
Maternal Mental Health Services	Some regions have dedicated maternal mental health teams that specialise in supporting women during pregnancy and after childbirth. These teams often include psychiatrists, psychologists, mental health nurses, and social workers who are trained to address perinatal mental health issues. ¹²	Usually free
Health Improvement Practitioners	Health Improvement Practitioners provide support for people with concerns about mental health, long-term conditions and general wellbeing. ¹³ They are part of many General Practices around New Zealand. You can be referred by your GP or ask to see one yourself.	Free
Counselling	Counselling can be effective in managing perinatal mental health conditions such as anxiety and depression. These therapies may be available through public health services or private practitioners. For example: Little Shadow provides low-cost counselling and group support to women experiencing perinatal distress. ¹⁴ Hope Always provides pregnancy counselling based in Rodney, Auckland or online. Funding support available upon request. ¹⁵	Costs involved for some services
Phone and text support	There is a range of free phone and text services available for anyone needing counselling or other support with their mental health. You can call or text 1737 to speak or text with a trained counsellor. See mentalhealth.org.nz/helplines for a full list of phone and text support options.	Free

¹² To access these services, speak with your LMC. Treatment options might include medication, a referral to a mental health professional, a referral to your local perinatal adjustment program, or if your condition is assessed as moderate to severe, a referral to an obstetric specialist under [Section 88 referral guidelines](#).

¹³ <https://healthify.nz/hauora-wellbeing/h/health-improvement-practitioner>

¹⁴ <https://www.littleshadow.org.nz/>

¹⁵ <https://hopealways.co.nz/>

Medication management	Many pregnant women take antidepressants to help manage their mental health. Your doctor will discuss with you the benefits of taking medications as well as any risks.	Appointments may have a cost. Medications should be funded for a \$5 co-payment ¹⁶
Support groups and peer support	Organisations such as Perinatal Anxiety and Depression Aotearoa (PADA) offer peer support networks and resources for women and families affected by perinatal mental health issues. ¹⁷	Usually free
Self-care and wellbeing strategies	Mindfulness and Relaxation Techniques: Learning and practising techniques such as mindfulness meditation or progressive muscle relaxation can help manage stress and anxiety.	Free
Apps	There are a range of mental health apps available, many of which have been created in New Zealand. ¹⁸ Positively Pregnant is made specifically for pregnant women. ¹⁹	Free

¹⁶ This may be more if the medicine is not fully-funded. See [here](#) for more info on charges. Some pharmacies may still provide free prescriptions search for your local [here](#)

¹⁷ <https://pada.nz/>

¹⁸ <https://healthify.nz/apps/m/mental-health-and-wellbeing-apps-new-zealand/>

¹⁹ <https://healthify.nz/apps/p/positively-pregnant-app/>

Managing your family, home and lifestyle

Family

Many women with HG have difficulty managing their responsibilities within their home. For those with HG looking after themselves can be impossible, let alone children.

Support for childcare

You may be able to access some support for looking after your children.

Extend daycare hours: If you have children in daycare part-time, ask your daycare provider if you can extend your hours temporarily. Costs for extra hours will vary based on your circumstances.

Enrol in daycare: If you have pre-school children who aren't in daycare, you may be eligible for [free or part-funded care](#).²⁰

After-school and holiday care: Look at enrolling your children in after-school and/or school holiday care. [OSCAR subsidies](#) are available to low and middle-income families.²¹

Support for school run: get in touch with your school to see if there are any parents living close by that could help with school or daycare run temporarily. The same applies for your children's sports or other hobbies. Many people are happy to support fellow parents.

Home

Keeping your household running can be incredibly challenging, especially if you are too unwell to leave the house. Leaning on friends and family is so important, but you can also look at bringing support to your home.

The government [provides support](#) to people who need assistance in their daily lives.²² You can complete an assessment to [find out if you are eligible](#) for any support.²³

Other support options

Support for the household: Consider whether you can afford a cleaner for a few weeks or whether you can outsource tasks like laundry.

Ask your network: Now is an appropriate time to ask extended family, friends and/or neighbours for help. When people 'see' how unwell you are they may assist more than you imagined.

Delivery services are available for a wide range of products and services. Consider whether you can outsource some of these tasks.

Note: the authors are not affiliated with any of the below companies or organisations.

²⁰ <https://www.workandincome.govt.nz/products/a-z-benefits/childcare-subsidy.html>

²¹ <https://www.workandincome.govt.nz/products/a-z-benefits/oscar-subsidy.html>

²² <https://www.govt.nz/browse/health/help-in-your-home/>

²³ <https://www.govt.nz/browse/health/help-in-your-home/needs-assessment/>

Medications + prescriptions	PillDrop : PillDrop is an online pharmacy delivering New Zealand-wide. ²⁴ Free if you take 4 or more medications.
Groceries	Milkrun : Milkrun offers quick grocery delivery from Woolworths New Zealand-wide. ²⁵ Woolworths : Pick-up and delivery options available. Costs are based on grocery spend, but are not excessive. ²⁶
Meals	Bellyful : Bellyful can provide a few free meals to families in need, in some parts of New Zealand. Bellyful is run by volunteers and supported by donations. ²⁷ Meals on Wheels : Meals on Wheels delivers prepared meals to people who are unable to prepare food for themselves. You can ask your LMC about eligibility criteria. ²⁸ Meal Train is a free tool that can be used to organise meals for a person during illness, birth or after surgery. ²⁹ See if a friend or family member is willing to coordinate something on your behalf.

Lifestyle

Many women with HG are too unwell to continue their usual activities or attend routine appointments or other commitments. Knowing you have an appointment or activity looming can be an added stressor in your life. You can reduce some of this stress by cancelling or avoiding non-essential tasks.

Put memberships and subscriptions on hold: Most gyms and other membership-based services allow for pauses.

Cancel non-essential appointments early to avoid cancellation fees. See if you can reschedule to later in your pregnancy when many women feel better.

²⁴ <https://pilldrop.co.nz/>

²⁵ <https://www.milkrun.com/>

²⁶ <https://www.woolworths.co.nz/info/online-shopping>

²⁷ <http://bellyful.org.nz>

²⁸ <https://www.govt.nz/browse/health/help-in-your-home/cooking-and-meals/>

²⁹ <https://www.mealtrain.com/>

Managing your employment and income

Many HG sufferers are too sick to work for some or all of their pregnancy. For those who can work, HG is likely to impact their ability to carry out their job effectively. In New Zealand, there are protections and supports available to pregnant women to help them with their employment and income.

Protections for pregnant women

Protection from discrimination: It is illegal for employers to discriminate against employees on the basis of pregnancy. This includes discrimination in hiring, promotion, or termination of employment due to pregnancy.

Health and safety: Employers are required to ensure that pregnant employees are not exposed to any work conditions that may harm their health or the health of their baby. If necessary, adjustments to work conditions or duties should be made to accommodate the pregnancy.

Flexible work arrangements: Pregnant employees have the right to request flexible work arrangements, such as changes to hours of work or duties, to accommodate their pregnancy and caregiving responsibilities. Ask your employer what accommodations they can make to enable you to continue work.

Community Law has a detailed document called [Pregnancy Rights](#) which sets out these rights.³⁰

Taking leave from work

Pregnant women have access to several types of leave to support them during their pregnancy. Employers have responsibilities to support pregnant employees and ensure they receive the leave and accommodations they are entitled to.

Types of leave available to pregnant women

Sick leave	Eligible employees are entitled to 10 days of paid sick leave each year, to care for themselves, their partners and children, or other dependants. ³¹ When you take sick leave, your employer can ask for a medical certificate for one day of sick leave, but they must pay for the costs. They can ask for a medical certificate for more than 3 consecutive days. Partners can take accrued sick leave to look after their unwell spouse/partner or other children.
Special leave	In addition to any parental leave taken, pregnant women can also take up

³⁰ https://communitylaw.org.nz/wp-content/uploads/2015/07/Pregnancy-Manual_PDF-for-Web_2021.pdf

³¹ <https://www.employment.govt.nz/leave-and-holidays/sick-leave/taking-sick-leave>

to 10 days' unpaid [special leave](#) for pregnancy-related reasons such as antenatal classes, scans or midwife appointments.³²

Annual leave	You are entitled to at least 4 weeks paid annual leave when you have worked for an employer for 12 months unless you are employed casually. ³³ Annual leave can be taken for any reason, including pregnancy-related needs. You can take annual leave with your employer's approval. If you have used all your sick leave, you can request to take annual leave.
Leave without pay (extended unpaid leave)	If you have used your annual leave and sick leave, your employer may allow you to take leave without pay . ³⁴ This can be for a short-term or extended period. It must be mutually agreed between the employer and employee.
Leave in advance	If you have used your annual leave and sick leave, your employer may allow you to take sick leave or annual leave in advance. Your leave balance will go into negative until you accrue the leave.
Additional leave	Some employers may offer compassionate leave, which can be used for personal or family reasons, including pregnancy-related appointments or emergencies. It could be paid or unpaid.

Paid Parental Leave (PPL)

[PPL](#) is available to primary caregivers (including biological mothers, fathers, and other primary caregivers) to care for a child.³⁵ To be eligible for PPL, you must work at least 10 hours per week, for at least 26 of the past 52 weeks (at your due date). If you are too sick to work, you may find you are not be able to meet these requirements. However, if you apply for **extended unpaid leave**, rather than leaving your job, you may qualify.

You can start your paid parental leave up to six weeks before the expected date of the child's arrival or earlier if: agreed with your employer or directed by a doctor or midwife.

Self-employment

In New Zealand, maternity leave rights for self-employed individuals differ from those of employees. Eligibility information is available on the [employment.govt.nz](#) website.³⁶

Income support

In New Zealand, if you're unable to work due to sickness, some support options may be available to you through Work and Income New Zealand (WINZ). Most supports will take into account your partner's income. As many pregnant women with HG have a partner, their eligibility for support is impacted or reduced.

Income support available through WINZ

³² <https://www.employment.govt.nz/leave-and-holidays/parental-leave/types-of-parental-leave/>

³³ <https://www.employment.govt.nz/leave-and-holidays/annual-holidays/taking-annual-holidays>

³⁴ <https://www.employment.govt.nz/leave-and-holidays/other-types-of-leave/leave-without-pay>

³⁵ <https://www.employment.govt.nz/leave-and-holidays/parental-leave/taking-parental-leave>

³⁶ <https://www.employment.govt.nz/leave-and-holidays/parental-leave/if-youre-self-employed>

To access these entitlements, you will need to apply through WINZ. You can use the [Check what you might get](#) assessment form to work out your eligibility and apply for support.³⁷

Jobseeker Support - Health Condition	<p>If your illness or injury prevents you from working, you may qualify for Jobseeker Support - Health Condition.³⁸ It is for individuals who are temporarily unable to work due to a health condition.</p> <p>To qualify, you must be available for and actively seeking work (unless your health condition prevents this). You must also provide medical certificates and other documentation to support your claim.</p>
Disability Allowance	<p>The Disability Allowance provides extra financial support for ongoing costs related to a disability, medical condition, or health-related needs.³⁹ This can include costs for medical supplies, transport for medical appointments, and other disability-related expenses.</p>
Other support services	<p>WINZ provides various support services and programs to assist individuals with health conditions or disabilities, including job placement assistance, and access to medical professionals and specialists.⁴⁰</p>

Other possible income support avenues

Income protection insurance	<p>Income protection insurance cover enables you to protect your income by insuring a percentage of your income. You have to have applied before your pregnancy. If you have previously had HG, you might not be covered.</p>
ACC - Accident Compensation Corporation	<p>Aotearoa New Zealand has a comprehensive income support system for people involved in accidents in the workplace and outside.</p> <p>Unfortunately, HG is a medical condition and not an accident, so it is not covered.</p> <p>If you have an accident (or are recovering from an accident) while you are pregnant, you could be covered. The medical specialist who treats you will say if your injury is likely to be covered, and will ask you to complete a form so they can lodge a claim. ACC will let you know if it is accepted.</p>
Kiwisaver withdrawal for hardship	<p>You may be eligible to withdraw some of your KiwiSaver savings early if you can provide evidence that you're suffering significant financial hardship, and have exhausted all other reasonable alternative sources of funds.</p> <p>You should contact your scheme provider to find out whether you may be eligible.</p>

³⁷ <https://www.workandincome.govt.nz/online-services/eligibility/>

³⁸ <https://www.workandincome.govt.nz/products/a-z-benefits/jobseeker-support.html>

³⁹ <https://www.workandincome.govt.nz/products/a-z-benefits/disability-allowance.html>

⁴⁰ <https://www.workandincome.govt.nz/eligibility/index.html>

Common questions

General questions

HER Foundation has a detailed range of [Frequently Asked Questions](#) which provide answers to common questions.⁴¹

These include:

- *What causes HG?*
- *Will HG recur with every pregnancy?*
- *How long will HG last?*
- *The doctor says there is nothing available to treat HG. Is that true?*

Questions specific to New Zealand

Is abortion (termination of pregnancy) legal in New Zealand?

Note: If you are considering ending a wanted pregnancy because of HG, please ensure you speak with your LMC to discuss other treatment options.

Abortion is legal and free for most residents. There are two main methods of abortion: medical abortion involves taking pills to end the pregnancy, and surgical abortion involves a minor operation. How far along you are in your pregnancy will determine which option or options are available to you.

You can visit abortion.org.nz for detailed information about accessing abortion health care in New Zealand.⁴²

For those that have to make the difficult decision to terminate due to HG, [SANDS New Zealand](#) offer judgement free support/resources for any gestation or any reason.⁴³

Can I be induced so that I have my baby early?

Most hospitals and birthing centres will not consider induction ahead of your due date unless you have a separate condition or health need that makes induction medically necessary.

Even if you continue to be unwell into your third trimester, it is unlikely you will be offered an induction because of your symptoms. This is because the risks to baby of preterm birth outweigh the benefits to mum. As every pregnancy is different, you should speak to your LMC about whether induction is an option for you.

⁴¹ <https://www.hyperemesis.org/who-we-help/mothers-area/get-info/faqs-for-mothers/>

⁴² <http://abortion.org.nz>

⁴³ <https://www.sands.org.nz/>

Support and networks

There is a small, but growing, network of local social media accounts and online groups offering support and guidance for women suffering from HG in Aotearoa, New Zealand.

[Hyperemesis Peer Support NZ](#): Peer support Facebook group for Kiwi women experiencing HG.⁴⁴ Includes an Excel document with details of local health professionals with expertise in HG.

Hyperemesis Peer Support NZ

Private group · 887 members



[Hyperemesis Awareness Aotearoa](#): Instagram page run by Wellington-based HG mama Danii O'Malley



hyperemesisawarenessaotearoa ...



Hyperemesis Awareness Aotearoa

Awareness page for Hyperemesis Gravidarum run by Danii O'Malley - find me at [@flourishwithdani](#)

Overseas

HER Foundation has a broad range of [networks and support groups](#) for women suffering from HG as well as family members and support people.⁴⁵

⁴⁴ <https://www.facebook.com/groups/885735235288936/>

⁴⁵ <https://www.hyperemesis.org/who-we-help/family-friends/support-for-mothers-families/>

Region-specific support

If you know of support available in your region that isn't listed here, please let us know at hguidancenz@gmail.com.

Auckland

[Waitemata Maternal Mental Health Service](#)

[Auckland Maternal Mental Health Service](#)

[Counties Manukau Maternal Mental Health Service](#)

Nelson

[Perinatal Support Nelson](#) Offers 10 free counselling sessions in your home

Wellington

[CCDHB Maternal Mental Health Service](#)

Dr Te Kahui Tapsell (a psychiatrist who works with MMHS) highly recommended

Tips and guidance from former sufferers

If you would like to share a tip, please let us know at hgguidancenz@gmail.com.

Ku

My midwife told me I had tried all medications available. The Maternal Mental Health doctor disagreed and offered to try me on mirtazapine. It was a miracle drug for me. Always seek a second opinion if you aren't satisfied with an answer.

Casey, Wellington

Always go in for IV fluids if your medication isn't working today and you can't keep anything down. It could be at a local clinic or ED. The longer you leave it the longer it will take to stabilise you.

Elizabeth, Wellington

Ask for help from others - tell them specifically what you need (e.g. help with childcare, a cooked meal, cleaning). People are generally more than happy to help but just don't know how.

Jaime, Auckland

Post-pregnancy there was definitely trauma to be processed. Counselling was a Godsend!
I used HopeAlways.co.nz

Anna, Auckland

What advice would you give to women currently experiencing HG?

Nausea medication can be cumulative. Make you take it regularly and consistently for best results.

Rest whenever you can. For me, a late night would always mean a terribly sick day the following day. Make sure you are getting to bed early and not over-doing things.

Emma, Auckland

Ask a partner, friend or family member to help watch out for when things are bad enough that you need further support - in the thick of coping with it all, it can be hard to tell for yourself when things are getting worse.

Carlene, Auckland

I wish I'd thrown my pride away earlier. Ask for proactive assistance; do not wait until you are in urgent need. HG pushes you to the end of yourself, likely your partner too. For a muma-to-be with HG staying alive is a moment-by-moment challenge.

Anna, Auckland

Hydration is crucial. Drink as often as you can and if it isn't staying down, seek additional support.

I found cold drinks and sour lollies helpful in reducing nausea. Frozen cokes also seem to be very beneficial for many pregnant women with HG.

Emma, Auckland

Links to resources and guidance

New Zealand

Web articles

Healthify 'Severe vomiting in pregnancy',

<https://healthify.nz/health-a-z/s/severe-vomiting-in-pregnancy/>

Patient guidance/information sheets

Capital and Coast District Health Board 'Hyperemesis Gravidarum: Patient Information'

<https://www.ccdhb.org.nz/our-services/a-to-z-of-our-services/gynaecology/ga-pib-31-hyperemesis-gravidarum-2013.pdf>

Auckland District Health Board, 'Hyperemesis in Pregnancy pathway - AED, Gynaecology and Maternity Patients',

<https://www.nationalwomenshealth.adhb.govt.nz/assets/Womens-health/Documents/Policies-and-guidelines/Hyperemesis-in-Gynaecology-and-Maternity-Patients-.pdf>

Blog Posts

Emma Michelsen for *Daisy* 'Accessing Support When You Have Hyperemesis Gravidarum',

<https://drinkdaisy.co.nz/blogs/news/accessing-support-during-hyperemesis-gravidarum>

Soteria, 'What Is Hyperemesis Gravidarum and How Is It Treated?'

<https://soteria.co.nz/pregnancy-health/hyperemesis-gravidarum-symptoms-and-treatment/>

New Zealand College of Midwives, 'Nausea and vomiting'

<https://www.midwife.org.nz/women/pregnancy/nausea-and-vomiting/>

Tahlia Hutchison for *Little & Brave*, 'Helping a Mum with Hyperemesis',

<https://littleandbrave.co.nz/blogs/sustainable-families/helping-a-mum-with-hyperemesis>

Journals

BPAC NZ - *Better medicine*, 'Nausea and vomiting in pregnancy'

<https://bpac.org.nz/bpj/2011/november/pregnancy.aspx>

Overseas resources

Websites

HER Foundation <https://www.hyperemesis.org/>

Pregnancy Sickness Support <https://pregnancysicknesssupport.org.uk/>

Hyperemesis Australia <https://www.hyperemesisaustralia.org.au/>

Hyperemesis Ireland <https://www.hyperemesis.ie/>

Digital media

The Sick Film <https://thesickfilm.co.uk/>