



Pregnancy and asthma

If you have asthma and are planning a pregnancy, or have recently found out you are pregnant, keeping your asthma well managed is important for both you and your baby's development.

Well-controlled asthma helps ensure your baby receives enough oxygen during pregnancy.

Before pregnancy

If possible, take steps to manage your asthma before becoming pregnant:

- Continue taking your asthma medication as prescribed
- Have an up-to-date Asthma Action Plan
- Talk with your doctor about your asthma medicines and triggers
- Stop smoking. Smoking can worsen asthma symptoms and affects your baby's growth. Contact Quitline (13 78 48) for support

During pregnancy

Asthma symptoms

Asthma symptoms can occur when sensitive airways react to triggers.

This can cause swelling, extra mucus and tightening of the airways. Symptoms may include:

- Shortness of breath
- Coughing
- Wheezing
- Chest tightness

Asthma may improve, worsen or stay the same during pregnancy. Some women notice symptoms worsen during the second trimester and improve later in pregnancy.

As your baby grows, you may feel more breathless due to pressure on the diaphragm. This is common during pregnancy, even for people without asthma.

If your symptoms worsen, follow your written Asthma Action Plan. If symptoms do not improve or you are concerned, call 000 for an ambulance and tell them that you are pregnant.

Some people who have never had asthma may develop breathing symptoms during pregnancy. Your doctor can help determine whether symptoms are related to asthma or normal pregnancy changes.

Asthma management during pregnancy

Asthma treatment during pregnancy is essentially the same as at other times, with the goal of keeping asthma well controlled and preventing flare-ups.

Asthma medications, including inhaled corticosteroids, are considered safe during pregnancy. They reduce inflammation in the airways.

Uncontrolled asthma poses a greater risk to your baby than asthma medications, as flare-ups can reduce oxygen supply and increase the chance of pre-term birth and low birth weight.

Your doctor or healthcare team may adjust your treatment as needed to keep your asthma under control throughout your pregnancy.

Tips for during pregnancy:

- Take your preventer medication every day as prescribed
- If you have hay fever, continue taking your medications as prescribed
- See your doctor if you need your reliever inhaler more than twice as week

- Have your asthma reviewed every 4–6 weeks
- Ensure you and your family know Asthma First Aid
- Ask your doctor, midwife, pharmacist or Aboriginal Medical Service about recommended vaccines during pregnancy, including influenza, respiratory syncytial virus and whooping cough vaccines
- Review your Asthma Action Plan regularly with your doctor and share it with your obstetrician or midwife
- Tell your obstetrician or midwife if you are taking oral corticosteroids
- Practice good hand hygiene and avoid contact with people who are unwell
- Stay physically active at a safe level during pregnancy
- Avoid smoking and second-hand smoke

Giving birth

Asthma medication does not delay labour or increase the risk of complications.

People with well controlled asthma have the same pain relief options during labour as those without asthma.

Asthma flare-ups during labour are uncommon, but can occur.

If this happens, treatment is the same as for someone who is not pregnant.

If you have asthma that is severe or unstable, your Asthma Action Plan should include planning for labour and pain relief. This should be discussed with your doctor and obstetrician.

After your baby is born

Most asthma medications are safe to use while breastfeeding and are not known to affect milk supply. Other medicines, including certain antibiotics and over the counter products, may not be suitable while breastfeeding. Always check with your doctor or pharmacist before taking new medicines.

Continue to follow your Asthma Action Plan and have your asthma reviewed after birth, especially if symptoms change. Keep your baby away from cigarette smoke.

Sources:

1. National Asthma Council Australia. *Asthma in pregnancy*. 2026.
2. National Asthma Council Australia. *Pregnancy and asthma fact sheet*. 2025.
3. Asthma Australia. *Pregnancy and Asthma*. 2025.
4. Asthma in Pregnancy Toolkit. *Asthma in Pregnancy*. 2026.
5. Asthma in Pregnancy Toolkit. *Frequently Asked Questions*. 2026.

How we can help

Respiratory Care WA has a team of respiratory healthcare professionals here to provide information and support for Western Australians living with asthma and COPD. We offer in-person education and support at our respiratory hubs or via telehealth. Our team can also visit schools, workplaces or community and sporting groups to deliver free asthma management sessions.

Email ask@respiratorycarewa.org.au to find out more.