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Smoking in Pregnancy



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Introduction

Smoking in pregnancy has well known detrimental effects for the growth and development of the baby and health of the mother. Smoking during pregnancy can cause serious pregnancy-related health problems. These include complications during labour and an increased risk of miscarriage, premature birth, stillbirth, low birth-weight and sudden unexpected death in infancy.

On average, smokers have more complications during pregnancy and labour, including bleeding during pregnancy, placental abruption and premature rupture of membranes. Encouraging pregnant women to stop smoking during pregnancy may also help them kick the habit for good, and thus provide health benefits for the mother and reduce exposure to second-hand smoke by the infant.

The new Tobacco Control Plan for England '[Towards a smoke free generation](#)' contains an ambitious new goal of reducing smoking amongst pregnant women to 6% by the end of 2022. This is critical to the drive to ensure children have the best start in life. Smoking in pregnancy varies hugely, from 2% in Westminster to 26% in Blackpool so to reach this ambition for all pregnant women, particular attention must focus on disadvantaged groups and localities where prevalence remains much higher.

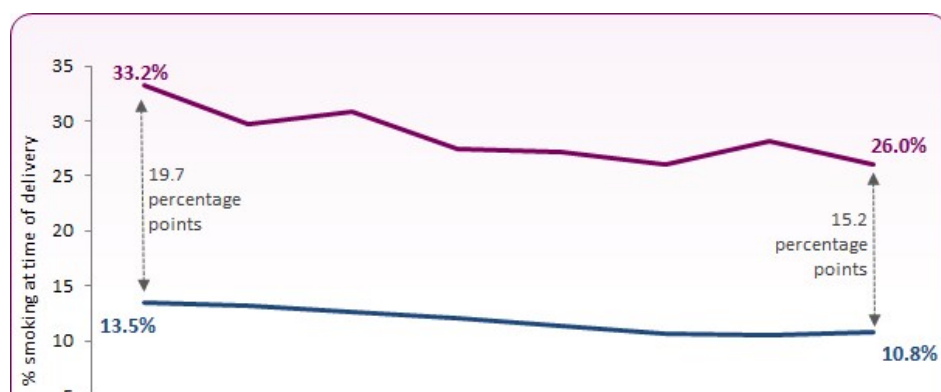
The inclusion of this indicator in the Public Health Outcomes Framework will ensure that the local tobacco control activity is appropriately focused on pregnant women, in order to try to achieve this national ambition. Inclusion of this indicator will also encourage the continued prioritisation of action to reduce smoking at delivery. Decreases in smoking during pregnancy will result in health benefits for the infant and mother, as well as cost savings to the NHS.

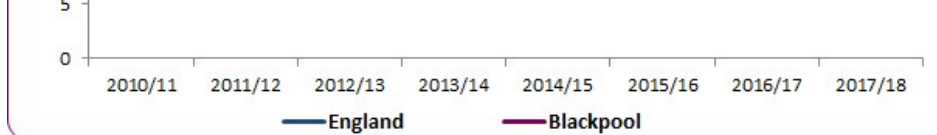
Facts and figures

Statistics on [Women's Smoking Status at Time of Delivery](#) data is published on a quarterly basis by NHS Digital to monitor the prevalence of smoking in pregnancy.

- In Blackpool, 454 (26%) pregnant women were known to be smokers at the time of delivery in 2017/18
- This compares to 10.8% nationally.
- [Figure 1](#) shows the proportion of new mothers smoking in Blackpool has decreased from 33% in 2010/11 but rates are still significantly higher than national averages.
- Blackpool has the highest proportion of new mothers who smoke out of 149 upper tier local authorities ([figure 3](#))

Figure 1: Trend in percentage of women smoking at the time of delivery, Blackpool and England





Source: PHE, Public Health Outcomes Framework, Indicator 2.03

Figure 2: Trend in percentage of women smoking at the time of delivery, Blackpool, the North West and England

		2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18
England	%	13.6	13.3	12.8	12.2	11.7	11.0	10.7	10.8
North West	%	17.8	17.1	16.5	15.5	14.8	13.8	13.4	13.4
Blackpool	No.	522	497	523	485	521	463	507	454
	%	32.7	30.0	31.0	27.6	27.2	26.0	28.1	26.0

National and local strategies

NICE guidance [PH26] [Smoking: stopping in pregnancy and after childbirth](#) (June 2010) says all pregnant women who smoke - and all those who are planning a pregnancy or who have an infant aged under 12 months - should be referred for help to quit smoking.

Locally, **Tobacco Free Lancashire** is a partnership of organisations from across Lancashire. The pan-Lancashire partnership includes colleagues from district councils, clinical commissioning groups, acute trusts, mental health trusts, and providers and other public sector bodies and voluntary and 3rd sector organisations from across Lancashire, Blackpool and Blackburn.

Partners have collaborated to produce a new strategy that mirrors the new Tobacco Control Plan for England which sets out the ambition to achieve a smokefree generation by:

- preventing children from taking up smoking in the first place
- stamping out inequality for example smoking in pregnancy
- supporting smokers to quit

The strategy has an overarching framework of achieving a smokefree Lancashire and has prioritised the following areas based on detailed local intelligence in order to reduce health inequalities and improve quality of life by reducing smoking prevalence in the following groups:

- pregnancy
- people with mental health conditions
- people with long-term conditions

[Tobacco Free Lancashire: Towards a Smokefree Generation 2018-2023](#)  (1.8 MB)

Recommendations

NICE guidance recommendations include:

- Identify pregnant women who smoke and refer them to NHS Stop Smoking Services
- NHS Stop Smoking Service - contact referrals, provide initial and ongoing support
- Use NRT and other pharmacological support
- NHS Stop Smoking Service to meet the needs of disadvantaged women who smoke
- NHS Stop Smoking Service to advise/support partners and others in the household who smoke

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