

Marijuana Use While Pregnant or Lactating- Topic of the Month

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On August 1, 2023, Minnesota became the 23rd state to legalize recreational marijuana for persons aged 21 and above. Legalization of marijuana does not imply that it is safe or recommended for all individuals. This topic of the month will focus on what WIC staff should know about marijuana and the information we should be sharing with our participants.

What is marijuana?

Marijuana is the common name for the drug Cannabis. It refers to the dried stems, flowers, and leaves of the Cannabis Sativa or Cannabis Indica plant. Tetrahydrocannabinol (THC), a mind-altering chemical, is the primary active substance in marijuana. THC is highly lipophilic, meaning that it can permeate cells easily and then readily distribute throughout the body and will ultimately be stored in fat tissue. THC use may result in altered judgement, impaired memory, and/or mood changes.

Marijuana is one of the most commonly used addictive drugs after tobacco and alcohol.¹ Marijuana use during and after pregnancy *is increasing* nationwide. The increased legalization of marijuana for medical or adult recreational use may be giving people a false sense of safety.

A 2019 Warning, [U.S. Surgeon General's Advisory: Marijuana and the Developing Brain](#):

“No amount of marijuana use during pregnancy or adolescence is known to be safe. Until and unless more is known about the long-term impact, the safest choice of pregnant women and adolescents is not to use marijuana.” –*Surgeon General VADM Jerome Adams*

WIC staff should know the facts about marijuana and its use and be prepared to discuss the potential harmful effects of drugs, alcohol, and other substances as a part of initial education and whenever appropriate.

Things WIC staff should know:

- Marijuana available today is much stronger than it ever was and may be mixed with other substances with negative or unknown health effects.
- THC levels are often increased in the more concentrated forms; edibles, dabs, drinks, and/or vape pens.
- Physical dependence, addiction, and other negative consequences (anxiety, paranoia, psychosis) increase with exposure to higher THC concentrations.
- Marijuana use during pregnancy may impact fetal brain development and increase the risk of low birth weight, preterm birth, and stillbirth.

- **THC can pass to the baby through the bloodstream into the placenta and breastmilk. THC can be detected in infant’s urine for 2-5 weeks after exposure. Since THC is stored in fat, it could continue to expose baby over time.**
- There is an increased effect after exposure for infants due to their small size. There is particular concern regarding infant’s long-term neurobehavioral development with continued use.
- Marijuana smoke has many of the same chemicals as tobacco smoke and may increase the risk of breathing problems for the parent and developmental delays in baby.
- The *American Academy of Pediatrics (AAP)*, the *American College of Obstetricians and Gynecologists (ACOG)*, and the *U.S. Food & Drug Administration (FDA)* all encourage the parent to abstain from marijuana use while pregnant, planning to become pregnant, or breastfeeding.^{2/3/4}
- The *American Psychiatric Association* states: “There is no current scientific evidence that cannabis is in any way beneficial for the treatment of any psychiatric disorder.”

Be aware that some pregnant women may get encouragement from family or friends to use marijuana to alleviate morning sickness or other health concerns. Additionally, since marijuana is now legal and widely available in many states, participants might assume it is safe to use as a “natural” alternative to medication.

WIC CPAs should inform participants that there is a lack of data on safety and of the potential risks with using marijuana as “medicine”. It is best practice to refer participants to their health care provider for safe and FDA-approved treatments for symptoms related to nausea, depression, pain, and other health related conditions.

Associated risk factor

Legalization of marijuana does not change WIC nutrition assessment and risk assignment policy or procedures. Additionally, education about the potential harm from the use of marijuana and other drugs is still required.

*** Educational requirements:** Education about the danger of marijuana use is still required for pregnant participants, breastfeeding participants, and parents of infants and children.

WIC MOM Policy [Section 6.4](#) requires WIC staff to inform participants of the potential harm that alcohol, tobacco, and other drugs (including marijuana) can cause, *whether they report using or not*.

-Share the nutrition education card [Alcohol, Tobacco and Other Drugs](#) with participants.

*** Risk assessment and Risk Code assignment:** Use of drugs or alcohol (including marijuana) will continue to be part of the [WIC Nutrition Assessment](#) questions. Read the examples in the [Brief Questions and Probes: Pregnant Woman](#) tool: under E: 900’s Environmental/Other Factors.

WIC Risk Code [372- Alcohol and Substance Use](#) may be assigned during pregnancy or for breastfeeding and non-breastfeeding postpartum participants in the following conditions:

- Any illegal substance use or abuse of prescription medications.
- Any marijuana use in any form.

It is important to note that WIC's role is to screen and provide education, referrals, and coordination of services. WIC does not diagnose or provide in-depth counseling regarding the use of substances. When talking to a participant, keep assessment non-judgmental and education factual. It is helpful to have a list of referral resources to offer participants as needed. As always, be sure to document what was discussed and what resources were provided.

Safe and responsible use

Marijuana may be legal for people over age 21, but it is important to make sure participants and caregivers who plan to use marijuana understand how they may reduce potential risks associated with use. If you notice that a strong smell of marijuana is coming from a participant or family member during the assessment portion of the appointment, you might ask, "Does anyone in your home currently use tobacco, marijuana, or other substances?" Depending on the answer, you may probe further with questions specific to the participant's situation, whether pregnant, breastfeeding, non-breastfeeding, or a parent to a child to further assess the situation and what information you may share.

Sharing evidence-based facts such as the ones shared in this memo will offer the participant informed consent so that they will be able to make the best decision regarding safe and responsible use for themselves and their family.

Things to share with participants (if asked):

- Being high, buzzed, or sleepy from marijuana use while caring for a child is not safe!
- Studies have shown that the effects of [Secondhand Marijuana Smoke](#) can be passed on to infants and children.
- Make sure cannabis is stored safely. Keep marijuana products such as edibles and drinks in child-resistant packaging, clearly labeled and locked up.
- If pregnant or breastfeeding or have been diagnosed with or are predisposed to serious mental illness, talk with a health care provider before using cannabis.
- To avoid dangerous interactions with prescribed medications, talk to a health care provider or pharmacist before using cannabis.
- Cannabis should always be used responsibly and never used before driving a vehicle or operating heavy machinery. Driving under the influence of cannabis will remain illegal and subject to additional DWI/DUI sanctions.

- If you think your or a family member's cannabis use is disrupting daily life or causing problems at home, work, or school, talk to a health care provider or substance use counselor. *Minnesota Drug Addiction and Substance Abuse Hotline is free and available 24/7 at (866) 210-1303.*
- The *Colorado Department of Public Health & Environment* has [Marijuana fact sheets in multiple languages](#) that may be shared with participants upon request.

Mandatory reporting

As a general rule, anyone who works with children, cares for children, or offers professional services for children is considered a mandatory reporter.

- If you are concerned about a participant's use of marijuana or other illicit drugs while pregnant, breastfeeding, or in the presence of their children, refer to your local agency's policy and procedure on mandatory reporting.
- If you haven't already, consider connecting with your local agency's child protection staff to provide staff training and for additional guidance/resources.

NOTE: The information offered in this memo provides some initial guidance for local agency staff. The state of MN is working on additional resources and guidance that will support our work in educating families.

Watch for updates:

[Minnesota Office of Cannabis Management](#) (Minnesota.gov)

[Cannabis](#) (Minnesota Department of Health (MDH))

Training tips (Group activity):

Discussing topics such as marijuana use can be very difficult. Practicing that conversation is often helpful in making staff feel more at ease in providing information to participants.

- **Read** through the facts above. Break into small groups (or if alone, discuss virtually with a colleague) to discuss the facts and concerns about this sensitive topic.
- **Practice.** Imagine what it might feel like if a participant shared with you that they are using marijuana while pregnant or breastfeeding. Role-play a conversation about marijuana use during pregnancy or while breastfeeding. Take turns playing the CPA and participant.
- **Share your experiences.** Has a participant ever informed you of their marijuana use? How did you handle it? What did you learn?

Resources:

1. [Cannabis \(Marijuana\) DrugFacts](#) (National Institute of Health (NIH))
2. [Marijuana and Pregnancy](#) (American College of Obstetricians and Gynecologists (ACOG))

3. [Marijuana Use During Pregnancy and Breastfeeding: Implications for Neonatal and Childhood Outcomes](#) (American Academy of Pediatrics (AAP))
4. [What You Should Know About Using Cannabis, Including CBD, When Pregnant or Breastfeeding](#) (United State Food and Drug Administration (FDA))
5. [Substance Use Prevention Screening, Education, and Referral Resource Guide for Local WIC Agencies](#) (United States Department of Agriculture Food and Nutrition Service (FNS))
6. [Marijuana Safety for Children and Pregnant and Breastfeeding Women](#) (WIC Works Resources System (WLOL))

Reference – Complete Listing of Hyperlinks

[U.S. Surgeon General’s Advisory: Marijuana and the Developing Brain \(www.hhs.gov/surgeongeneral/reports-and-publications/addiction-and-substance-misuse/advisory-on-marijuana-use-and-developing-brain/index.html\)](#)

[Section 6.4](#)

[\(www.health.state.mn.us/docs/people/wic/localagency/program/mom/chsctns/ch6/sctn6_4.pdf\)](#)

[Alcohol, Tobacco and Other Drugs](#)

[\(www.health.state.mn.us/docs/people/wic/nutrition/english/gendrugs.pdf\)](#)

[WIC Nutrition Assessment \(www.health.state.mn.us/people/wic/localagency/training/na.html\)](#)

[Brief Questions and Probes: Pregnant Woman](#)

[\(www.health.state.mn.us/docs/people/wic/localagency/training/pcs/assessment/briefpregnant.pdf\)](#)

[372- Alcohol and Substance Use](#)

[\(www.health.state.mn.us/people/wic/localagency/riskcodes/372.html\)](#)

[Cannabis \(Marijuana\) DrugFacts \(nida.nih.gov/publications/drugfacts/cannabis-marijuana\)](#)

[Marijuana and Pregnancy \(www.acog.org/womens-health/infographics/marijuana-and-pregnancy#:~:text=Research%20is%20limited%20on%20the,or%20breastfeeding%20not%20use%20marijuana.\)](#)

[Marijuana Use During Pregnancy and Breastfeeding: Implications for Neonatal and Childhood Outcomes \(publications.aap.org/pediatrics/article/142/3/e20181889/38625/Marijuana-Use-During-Pregnancy-and-Breastfeeding?autologincheck=redirected?nfToken=00000000-0000-0000-0000-000000000000\)](#)

[What You Should Know About Using Cannabis, Including CBD, When Pregnant or Breastfeeding \(www.fda.gov/consumers/consumer-updates/what-you-should-know-about-using-cannabis-including-cbd-when-pregnant-or-breastfeeding\)](#)

[Substance Use Prevention Screening, Education, and Referral Resource Guide for Local WIC Agencies](#)

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wicworks.fns.usda.gov/sites/default/files/media/document/ResourceManual%20rev%204-17-18.pdf)

[Marijuana Safety for Children and Pregnant and Breastfeeding Women](https://wicworks.fns.usda.gov/resources/marijuana-safety-children-and-pregnant-and-breastfeeding-women)

wicworks.fns.usda.gov/resources/marijuana-safety-children-and-pregnant-and-breastfeeding-women)

[Secondhand Marijuana Smoke \(www.cdc.gov/marijuana/health-effects/second-hand-smoke.html#:~:text=THC%20can%20be%20passed%20to,effects%2C%20such%20as%20feeling%20high.\)](https://www.cdc.gov/marijuana/health-effects/second-hand-smoke.html#:~:text=THC%20can%20be%20passed%20to,effects%2C%20such%20as%20feeling%20high.)

[Minnesota Office of Cannabis Management](https://cannabis.mn.gov/#:~:text=Minnesota%20has%20become%20the%2023rd,Learn%20more%20about%20the%20legislation.)

cannabis.mn.gov/#:~:text=Minnesota%20has%20become%20the%2023rd,Learn%20more%20about%20the%20legislation.)

[Cannabis \(www.health.state.mn.us/communities/cannabis/index.html\)](https://www.health.state.mn.us/communities/cannabis/index.html)

Minnesota Department of Health - WIC Program, 625 Robert St N, PO BOX 64975, ST PAUL MN 55164-0975; 1-800-657-3942, health.wic@state.mn.us, www.health.state.mn.us; to obtain this information in a different format, call: 1-800-657-3942.

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