Background: Exposure to certain medicines during pregnancy has been linked to a number of neonatal and maternal complications. Several studies have demonstrated widespread use of medicines during pregnancy whose safety and effects on the developing fetus is not known. The extent and the characteristics of medication use during pregnancy in Kenya has not been widely reported. The objective was to investigate medicine use among pregnant women in Central Kenya to provide future guidance.

Methods: Hospital based cross-sectional study to determine prevalence and characteristics of medicine use among pregnant women at a Sub County Hospital in Kenya. A total of 385 pregnant women were recruited and data collected through questionnaire-guided interviews, review of patient treatment files and registers. Descriptive and exploratory data analysis was conducted using STATA version 10.

Results: The prevalence of over the counter (OTC), prescription and herbal medicines was 65%, 41% and 11.4% respectively. Paracetamol was the most used OTC and prescription medicine while ginger was the most frequently used herbal medicine. Co-morbidity was an independent predictor of prescription medicine use whereas drug allergy and alcohol consumption were positively associated with the use of herbal medicines. Urban residence significantly decreased the odds of using OTC medicines. Medicines belonging to US-FDA pregnancy risk category C were the most frequently used at 50% while categories D and X accounted for 10% and 1.1% respectively (Fig 1.0). The use of medicines with known fetal risks without prior risk-benefit assessment was observed.

Conclusions: There was significant self-medication with OTC medicines and herbal products in pregnancy without any documentation. Drug allergy, alcohol use, urban residence and co-morbidity were the predictors of medicines use in pregnancy. This study has focused on pregnant women who constitute a special population where use of medicines requires caution and thorough understanding of the possible outcomes particularly on the fetus. The results suggest further vigilance among physicians to improve risk-benefit analysis to ensure safe use of medications in pregnancy. Programs that promote awareness creation on the dangers of self-medication in pregnancy should be enhanced among community pharmacists.