

Electronic Cigarette Impact On Pregnant Womens

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Electronic cigarettes (e-cigarettes) are designed to deliver vaporized nicotine for absorption through the respiratory tract through noncombustible means. The current incarnation of the e-cigarette was developed in China in 2003 and introduced in China in 2004, Europe in 2006, and the United States in 2007. Conventional cigarette manufacturer Philip Morris conducted research with e-cigarettes as early as the 1990s. The basic components of an e-cigarette include a cartridge containing a nicotine solution, a heating element that vaporizes the solution, and a power source for the heating element, which is frequently a rechargeable lithium battery (Figure). Activation of the ecigarette through inspiration by the user or manual activation with a button triggers the delivery of a vaporized nicotine solution that can be inhaled (termed vaping).

Cigarette use among pregnant ladies is lower than use among non-pregnant ladies, yet the paces of e-cigarette use among the two gatherings are for all intents and purposes indistinguishable. That implies ladies are noticing the call to kick their cigarette propensity, yet some might be going to e-cigarettes as another option or not seeing the threat in their current vaping propensity. That could have unintended outcomes. While the examination for e-cigarettes is in its earliest stages, early investigations recommend they are not innocuous, particularly to moms with developing babies. For these individuals, smoking end is as yet a critical objective.

While some individuals perceived e-cigs as a tool for smoking cessation, current research on the impact of e-cig use on pregnancy outcomes is not available, and e-cigs are not an approved smoking cessation aid. There is no safe level of nicotine consumption during pregnancy. Providers therefore should continue to warn women of the potential adverse maternal and fetal health implications associated with nicotine consumption in any form.

Pregnancy is a motivator for women to quit smoking; however, there are no evidence-based strategies shown, to date, to be safe and effective at assisting pregnant women to quit smoking. Recently, the U.S. Preventive Services Task Force, (a panel of national experts in prevention and evidence-based medicine) reported that evidence of using electronic nicotine delivery systems as a smoking cessation tool during pregnancy is insufficient. Further research on the health implications of e-cig use and the efficacy of using e-cigs as an aid to smoking cessation in pregnancy is important. Novel interventions are needed to support smoking cessation attempts among pregnant women, using evidenced-based approaches.

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