



# Healthy Pregnancy Tips

## Keeping mom and baby healthy

### Before Pregnancy

- ▶ Keep yourself healthy to increase the chance of having a healthy baby. If you're thinking of getting pregnant, talk to your doctor to optimize your current health and help minimize potential health risks. Talk with your doctor about medicines you take for a chronic condition to make sure that they are the right drugs to use during pregnancy. Do not stop any medications without your doctor's approval.
- ▶ The best time to stop smoking and avoid secondhand smoke is before you get pregnant. Talk to your doctor if you need help.
- ▶ Using illegal drugs could not only decrease your fertility, it could also be harmful to your baby's health. Don't use illegal drugs — no amount is safe.
- ▶ It's important to know your family history and if there have been problems with pregnancies or birth defects in your family. Discuss any issues with your doctor.
- ▶ All women who are of childbearing age should take 400–800 micrograms of folic acid a day to help prevent birth defects. You may require more depending upon your unique health needs. A recent study suggests that women who take folic acid for at least one year before they become pregnant can:
  - Cut their risk in half for having a baby born before 37 weeks of pregnancy.
  - Cut their risk for having a baby born before 32 weeks of pregnancy by up to 70 percent.<sup>1</sup>
- ▶ Premature babies are at increased risk of newborn complications and lasting disabilities, including developmental disorders, cerebral palsy and vision loss, with very premature babies at highest risk.
- ▶ Did you know that specialists in reproductive endocrinology specialize in the diagnosis and treatment of infertility? Primary care physician or obstetrician/gynecologists (OB/GYN) generally have a particular group of reproductive endocrinology specialists to whom they refer. Couples should discuss their concerns with their primary care physician or OB/GYN to determine whether or not they should seek infertility care.
- ▶ There are variations in care outcomes among reproductive endocrinologists who specialize in infertility. Variations in outcomes that couples should be most interested in are full-term birth rates and triplet rates (considered a complication). Reproductive endocrinologists typically report their annual outcomes to a national organization. Ask your reproductive endocrinologist about their outcomes and how they compare to national averages.

## During Pregnancy

- ▶ Be sure to see your doctor as soon as you think you may be pregnant to start your prenatal care, determine any risks, and help prevent complications during your pregnancy. The first prenatal visit should occur during your first trimester.
- ▶ It's important to see your doctor regularly throughout pregnancy, so be sure to schedule your prenatal care appointments.
- ▶ Follow the Center for Disease Control (CDC) recommendation for immunization against both seasonal flu and H1N1 flu.
- ▶ When you're pregnant, your developing baby drinks what you drink. Say no to alcohol — there is no safe amount during pregnancy.
- ▶ One in three elective deliveries are conducted too early, which puts your baby at an increased risk for complications. A scheduled delivery should not occur earlier than 39 weeks unless there is laboratory documentation of fetal lung maturity. Get the facts and talk to your doctor about the risks of delivering before your 39th week of pregnancy.
- ▶ Most people only need to add around 300 calories per day to eat for two. Maintaining a healthy weight during pregnancy lowers your risk for health complications such as gestational diabetes, high blood pressure (also called hypertension) and a condition called preeclampsia, which may indicate kidney problems. Talk to your doctor about your specific caloric intake needs.
- ▶ Get at least 1,000 milligrams of calcium per day to help form and grow your developing baby's heart, muscles, bones and teeth.
- ▶ Your doctor may advise that you take 27 milligrams of iron per day. Iron helps form blood cells for both you and your developing baby.
- ▶ Physical activity during pregnancy may benefit both you and your baby by lessening discomfort and fatigue, providing a sense of well-being, and increasing the likelihood of early recovery after delivery. Talk to your doctor to develop a plan that is best for you and your developing baby before beginning any kind of exercise.
- ▶ Saunas, hot tubs and steam rooms should be avoided while you are pregnant. Excessive heat may be harmful during your pregnancy.



All of the tips are suggestions for a healthy pregnancy. These tips do not replace your doctor's care. Always consult with your doctor about what healthy pregnancy activities are right for you and your developing baby. For more information on a healthy pregnancy, parenting, general health and wellness, and more visit [www.uhcmilitarywest.com](http://www.uhcmilitarywest.com).



## After Pregnancy

- ▶ At least one out of every 10 pregnant women experience postpartum depression. Postpartum depression is treatable. Learn to recognize the symptoms. If you don't have interest in your baby, talk to your doctor right away. If you have thoughts of hurting yourself or your baby, seek immediate medical care.
- ▶ Reduce the risk of sudden infant death syndrome (SIDS) by placing your baby on his or her back to sleep. Placing babies on their backs to sleep does not increase the risk of other problems (for example, choking, flat head, or poor sleep). However, premature infants with certain medical problems (such as lung problems) may need to sleep on their side. Whether your baby sleeps on his or her back or side, a certain amount of supervised “tummy time” is needed when your baby is awake. Ask your child's physician about the best sleeping position for your baby. In addition to proper sleeping position, you can reduce the risk of SIDS by:
  - Keeping blankets, pillows, soft bedding and large stuffed toys out of your baby's crib.
  - Making sure your baby's room is not too hot or too cold.
  - Not allowing smoking in your home.
  - Getting regular health care for your child.
  - Breastfeeding.
- ▶ Many studies continue to demonstrate the numerous benefits of breastfeeding and its superiority to bottle feeding for most women and their babies. For this reason, breastfeeding is encouraged and is the preferred method of feeding your baby. Make sure your newborn gets the appropriate amount of nutrition. Babies usually feed a couple of ounces 8–12 times in a 24-hour period in the first weeks after birth. By the time your baby is 2–3 months, your baby should be feeding around 6–8 times a day. Your baby is usually feeding much more by this time. If you are breastfeeding, you will know if the baby is getting enough milk if:
  - Your baby has at least 3–5 wet diapers a day. (To tell if a disposable diaper is wet, take it off the baby. Hold it in one hand. Hold a dry diaper in the other hand. A wet diaper will feel heavier.)
  - Your baby has several mustard-colored bowel movements a day. (There should be at least one stool a day.)
  - You can see your baby moving his or her jaw while on the breast.
  - You can see your baby sucking while on the breast.
  - You can hear your baby swallow in a quiet room.
  - Your breasts feel softer after the feeding than they did before.
- ▶ If you are having a hard time feeding your baby, talk to your doctor. If you must bottle feed, talk to your doctor to find out if your baby is getting the recommended amount of nutrition.
- ▶ Get back in shape after your pregnancy to restore energy levels and help you sleep better. If you gained excess weight during pregnancy, remember that it came on over a period of months, so losing the weight will take time and effort. The best approach is to eat a healthy, nutrient-rich diet, drink enough liquid every day to keep up with your needs and your baby's needs if you are breastfeeding, and do some form of moderate intensity exercise for at least 30 minutes a day, on most days of the week.<sup>1</sup> Talk to your doctor about your nutritional needs, and about when and what type of physical activity is right for you.





## Immunization & Pregnancy<sup>2</sup>

Vaccine	Before pregnancy	During pregnancy	After pregnancy
Hepatitis A	If at high risk for disease	If at high risk for disease	If at high risk for disease
Hepatitis B	Yes, if at risk	Yes, if at risk	Yes, if at risk
Human Papillomavirus (HPV)	Yes, if 9 through 26 years of age	No, under study	Yes, if 9 through 26 years of age
H1N1 - Trivalent Inactivated Vaccine (TIV)	Yes	Yes	Yes
H1N1 - Live vaccine	Yes, if less than 50 years of age and healthy	No	Yes, if less than 50 years of age and healthy
Influenza - Trivalent Inactivated Vaccine, IM	Yes	Yes	Yes
Influenza - Live, Attenuated Influenza Vaccine (LAIV)	Yes, if less than 50 years of age and healthy	No	Yes, if less than 50 years of age and healthy
Measles, Mumps and Rubella (MMR)	Yes, avoid conception for 4 weeks	No	Yes, avoid conception for 4 weeks
Meningococcal: ▪ polysaccharide ▪ conjugate	If indicated	If indicated	If indicated
Pneumococcal Polysaccharide	If indicated	If indicated	If indicated
Tetanus/Diphtheria (Tdap)	Yes, Tdap preferred	If indicated	Yes, Tdap preferred
Tdap, one dose only	Yes, preferred	If high risk of pertussis	Yes, preferred
Varicella	Yes, avoid conception for 4 weeks	No	Yes, avoid conception for 4 weeks

Please consult with your doctor about which immunizations are right for you.

## Recommended Childhood Immunization Schedule<sup>2</sup>

Vaccine / Age	Birth	1 month	2 month	4 month	6 month	12 month	15 month	18 month	19-23 month	2-3 years	4-6 years
Hepatitis B <sup>1</sup>	HepB	HepB			HepB						
Rotavirus <sup>1</sup>			RV	RV	RV <sup>1</sup>						
Diphtheria, Tetanus, Pertussis <sup>1</sup>			DTaP	DTaP	DTaP <sup>3</sup>		DTaP				DTaP
Haemophilus influenzae type b <sup>1</sup>			Hib	Hib	Hib <sup>1</sup>	Hib					
Pneumococcal <sup>1</sup>			PCV	PCV	PCV	PCV				PPSV	
Inactivated Poliovirus			IPV	IPV	IPV						IPV
Influenza and H1N1 <sup>1</sup>					Influenza and H1N1 (Yearly)						
Measles, Mumps, Rubella <sup>1</sup>						MMR					MMR
Varicella <sup>1</sup>	<div> Range of recommended ages</div> <div> Certain high-risk groups</div>					Varicella					Varicella
Hepatitis A <sup>1</sup>						HepA (2 doses)			HepA Series		
Meningococcal <sup>1</sup>										MCV	

Please consult with your child's physician about which immunizations are right for your child.

<sup>1</sup> www.marchofdimes.com, April 2009.

<sup>2</sup> Centers for Disease Control, May 2009.

<sup>3</sup> There are two vaccines available for Rotavirus, one requires 2 doses and the other requires 3 doses (the additional dose is given at 6 months of age).



This material is for informational purposes only. It is neither intended nor implied to be a substitute for professional medical advice. Always seek the advice of your physician or other qualified health care provider if you have any questions regarding a medical condition. Some services or treatments may not be covered under your health benefit plan.