

Your Pregnancy: Frequently Asked Questions

How much weight should I gain?

Pregnancy doesn't equal a get-out-of-jail-free card for caloric spending. Weight gain during pregnancy is a lot like Goldilocks and the Three Bears: you don't want too much, you don't want too little—you want "just right". If you gain too much weight, you're at risk for conditions like gestational diabetes; too little, and your baby might be born at a lower birth weight. What's just right for you? If you're at a normal weight before pregnancy, gain between 25 to 35 pounds during pregnancy. If you are overweight before pregnancy, gain 15 to 25 pounds. If you are underweight prior to pregnancy, gain 28 to 40 pounds. For multiple births, consult your doctor (usually, you should gain about 35 to 45 pounds for twins). The average woman should gain about 2 to 4 pounds during her first trimester, and 1 pound a week for the remainder of pregnancy.

What should I do before I get pregnancy to ensure a healthy pregnancy for me and my baby?

A typical pregnancy is nine months long, but to give your baby a healthy start, think of it as twelve months -- including the three months *before* you get pregnant. This means that when you start thinking about trying to conceive, you should:

- See your doctor for a pre-pregnancy checkup. Don't forget to ask about things like family medical history, risk of birth defects, genetic conditions, and chronic illnesses. Discuss all the medications you take and make sure they're safe during pregnancy.
- In addition to eating a healthy diet (lots of leafy greens, lean proteins, and fiber), boost your nutrients with a multivitamin specially formulated for pregnancy -- usually called a prenatal vitamin. It's particularly important to get sufficient folic acid *before* getting pregnant. This nutrient helps prevent birth defects like spina bifida; since many of these conditions arise very early in pregnancy, you need healthy levels of folic acid right from the start. Look for a multivitamin that contains 400 micrograms of calcium. Ask your doctor or midwife to recommend a vitamin for you.
- If you smoke, quit. Smoking poses a host of risks to a developing baby, including birth defects and low birth weight. It also doubles your risk of having an ectopic pregnancy. You may also find it more difficult to become pregnant in the first place if you smoke, as smoking is strongly linked with infertility in both women and men.
- Get checked for hepatitis B and C, sexually transmitted infections, and HIV.

What medicines can I take?

Before taking any over-the-counter or prescription medication not mentioned below, you should check with the office. You should not take aspirin, ibuprofen, or naproxen sodium unless directed to do so by your physician or midwife. Regular strength acetaminophen (Tylenol) is the medication of choice for pain or fever. If you have a fever of 100.4 or higher, please call the office. For sinus congestion with colds, allergies, or flu, pseudoephedrine (Sudafed) may be used. You also may use a saline nasal spray, such as Ocean or Nasal. Do not use Neosynephrine nasal spray for longer than 3 days. You may take Robitussin DM for coughs or chest congestion. A warm salt-water gargle is recommended for a sore throat. Throat drops, spray, or lozenges are acceptable. A cool air vaporizer may help you sleep at night. Increased fluid intake and getting sufficient rest are essential. If your nasal or throat drainage changes from a clear color, please call the

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What are the warning signs of pregnancy?

The important warning signs of pregnancy are and If any of these occur please contact the office immediately:

- Vaginal bleeding
- Leaking vaginal fluid
- Change or decrease in baby's movement (once you start feeling movement at 18-24 weeks)
- Severe headaches accompanied by increased swelling in hands and feet and/or face and visual changes such as spots before your eyes
- Burning with urination

How much weight gain can be expected?

The weight gain recommended during pregnancy is generally 20-30 pounds. However, this can be different for each individual. As everyone is different you should discuss your particular situation with your doctor.

Can I eat meat, fish, and poultry?

Meat, fish and poultry are all part of a healthy diet but you should make sure they are well cooked. However, fish and shellfish all contain traces of mercury which may be harmful to a baby's developing nervous system. Pregnant or breastfeeding mothers should avoid shark, swordfish, mackerel and tilefish. Limit other seafood including canned tuna

Can I drink or use any drugs when I'm pregnant?

Alcohol

- Alcohol can cause mental retardation and slow growth. Because medical researchers do not know how much alcohol it takes to affect the developing baby during pregnancy we recommend you do not drink. The fetus is especially vulnerable during the first trimester when all the major systems are forming.

Drugs

- Recreational drug use, especially cocaine, can cause serious complications - miscarriage, fetal stroke, brain damage, and even fetal death. Your baby may become addicted to any drugs you take. If you have used such a substance during pregnancy, please alert your physician or midwife.

Can I smoke?

Smoking harms your baby! Women who smoke during pregnancy have a greater risk of smaller babies, premature births, miscarriage, stillbirth, and increased respiratory problems in the baby after birth because smoking interferes with the oxygen and nutrient supply. In addition, the fetus is exposed to carbon dioxide, tar, and nicotine. Some studies show an increased risk of Sudden Infant Death Syndrome (SIDS) in babies exposed to cigarette smoke during pregnancy. There is recent evidence linking smoking to learning disabilities and growth retardation.

Why do my gums bleed?

Your gums may bleed more easily when you are pregnant. This is because of the increased blood supply to the oral tissues during pregnancy. You should brush at least twice daily using a soft toothbrush and also floss once a day. You should continue routine dental care during your pregnancy but you must inform your dentist that you are pregnant. They will need to know this so that they can use the correct anesthetic and take the necessary precautions for X-rays

Can I have dental work done?

Dental work is okay when you are pregnant, but you should make sure the dentist knows you are pregnant. If they take x-rays you should be covered with a lead drape.

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What are some common problems experienced during pregnancy?

Diarrhea

Should this happen increase your fluids intake to at least 6 to 8 glasses every day. Avoid milk or milk products until the diarrhea has stopped. Eat foods such as bananas, rice, apple sauce, tea, and toast for 24 hours. If you obtain no relief you may use Kaopectate or Imodium which can be purchased without a prescription. If the diarrhea continues for more than 24 hours, please call the office.

Constipation

You should be drinking 8 to 10 glasses of liquids a day while you're pregnant. This will help to prevent you becoming constipated in the first place. Fruit juices such as prune and apple juice are very good at keeping you regular and should be included. You should also increase the fiber in your diet by eating bran or shredded wheat cereals, bran muffins, raw fruits and vegetables. Daily exercise, particularly walking, will also help to prevent constipation. If constipation should occur, there are several non-prescription medications that may be used - Metamucil, Citrucel, Fibercon, Per Diem, Fibermed Biscuits, Haley's MO, and Milk of Magnesia.

Heartburn or Indigestion

Eat small, frequent meals (5 or 6 a day). Drink liquids, especially milk, between meals rather than with meals. Avoid fatty or fried foods, alcohol (which we recommend you avoid at all times during your pregnancy) and carbonated beverages. Sit up during and for one hour following meals. You may use non-prescription low sodium antacids such as Maalox, Tums or Rolaids - do not use one with simethicone (an anti-gas formula). Zantac or Pepcid may be helpful. You can also try eating crackers. If no relief with these measures, notify your provider.

Nausea (Morning Sickness)

Nausea and vomiting in pregnancy is commonly referred to as "morning sickness", but it can occur at any time of the day or night, usually when the stomach is empty. Keeping something in your stomach by eating small, frequent meals (5 or 6 a day) will help to prevent it from happening. Avoid spicy and greasy foods. Try antacids to help settle your stomach and eat a clear liquid diet for 24 hours. If nausea is a problem when you get up in the morning, try a high protein snack before bed and eat something before getting out of bed in the morning such as pretzels or soda crackers. Dehydration can also increase your nausea so drink plenty of fluids. Avoid unpleasant odors. Over-the-counter seasickness medication helps some people. Taking your vitamin at night may help, or switching to a chewable formula. Emetrol, a sugar-based syrup, can be purchased without a prescription and may be helpful. Vitamin B6 over-the-counter is a good first choice in treating morning sickness. If these conservative measures are not successful in getting your nausea/vomiting to an acceptable level, please notify your provider. You should call the office anytime you are unable to keep fluids down for 24 hours.

Urinary Tract Infections

Symptoms of a urinary tract infection include pain or burning with urination and increased frequency of urination. The urine may be cloudy or have a strong odor. Unexplained lower abdominal cramping, often accompanied by a backache, can also mean a UTI. An untreated urinary tract infection can cause premature labor, so do not delay seeking treatment. If you suffer from these symptoms you should call the office and we will arrange a urinalysis for you. It is essential to drink plenty of water and fruit juices (8 to 10 glasses a day) if you think you have a urinary tract infection. You should also avoid caffeinated and carbonated beverages, as they can irritate the bladder and increase your pain and discomfort.

Edema

Some edema, or swelling, is normal. Generally edema appears in the ankles and legs during the final months. To reduce your discomfort you should elevate your legs whenever possible. Other things you can do are to rest on your left side and reduce your intake of foods containing salt. Drinking an adequate amount of water is the best way to get rid of excess swelling, so drink 8 to 10 glasses a day. Please call the office if the swelling is severe or if accompanied by a headache unrelieved by Tylenol, or if you have visual changes, or upper right abdominal pain.

Bleeding

- Spotting of blood may occur in 40% of all normal pregnancies during the first trimester. If you are spotting, begin best rest and call the office. Avoid heavy lifting, exercise, and sexual intercourse for 48 hours after the last episode of spotting.

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Should I exercise?

Regular exercise is important. Walking, swimming, cycling, and prenatal exercise classes are all recommended. Swimming is safe during pregnancy as long as your bag of water is not leaking. Low impact aerobics are an excellent way of exercising during pregnancy and classes are available in the community. You may continue normal sports activity although you should keep your heart rate under 140 (take your pulse for 6 seconds, multiply by 10). Do not exercise lying flat on your back after 16 weeks of pregnancy. If any activity causes you pain you should discontinue it immediately. Be sure to discuss specific sports activities with your physician. Some exercises that are not recommended during pregnancy are snow or water skiing, ice skating, horseback riding, or other exercises that may expose your body to extreme physical jarring or impact.

Can I have sexual intercourse?

Unless you've been told to refrain or there is a specific problem with the pregnancy, such as bleeding, leaking bag of water, or preterm contractions, sexual intercourse is safe during pregnancy. It may be necessary to experiment to avoid discomfort. If intercourse is painful or causes bleeding or prolonged contractions (it is normal to have some contractions following intercourse), please talk with your physician or midwife.

Is caffeine safe?

Caffeine, in moderation, is safe. Moderation is considered two or fewer caffeine containing beverages per day. If a mother drinks more caffeine, the baby can be born with a caffeine addiction. This addition will interfere with sleep patterns and eating during the first weeks. Beverages that contain caffeine include coffee, tea, chocolate and many carbonated soft drinks.

Can I change my cat's litter box during pregnancy?

You should avoid changing the kitty litter if at all possible since cat bowel movements may contain a parasite that can cause a serious infection. These infections can lead to birth defects. If you have to change the litter, use rubber gloves, wear a mask and wash your hands afterward. You should also wear gardening gloves when digging in the dirt in an area the neighborhood cats may use as a kitty litter box.

Can I color my hair?

As long as you have your hair colored, highlighted or permed in a well-ventilated room it is safe. However, due to hormonal changes caused by pregnancy your hair is unlikely to react in the same way as it did before you became pregnant.

Can I travel during pregnancy?

We do not recommend traveling during the first three months or the last three months of pregnancy. If you must travel, stop frequently, empty your bladder and walk. Travel to high altitudes may cause headaches, nausea, or shortness of breath until you become acclimated to the area.

Are saunas, hot tubs, and tanning booths safe during pregnancy?

There is some controversy about the safety of hot tubs during pregnancy so you should avoid them during the first three months of your pregnancy. During the second and third trimesters you should limit your time to less than 10 minutes and never have the water temperature above 105 degrees. You should also get out very slowly since dizziness may occur. You should also avoid a tub bath where the water is so hot that your skin becomes reddened and you become dizzy when you stand up. Water this hot raises the core temperature of your body and is not healthy for your baby.

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What type of tests will be performed during pregnancy?

We will do the following routine tests during your first visit:

Rubella Titer – We do this test to determine your immunity status to Rubella (German Measles). If the test shows non-immunity, the immunization will be offered to you when you deliver.

CBC - A complete blood count is done to determine your body's ability to carry oxygen and nutrients through it to your baby. This is repeated when we do the glucose challenge test (see below) and sometimes at around 36 weeks if we find you are anemic on an earlier visit.

Blood Type and Rh, Antibody Screen - If you are Rh negative and the father of the baby is Rh positive, there is the possibility the baby could inherit the father's blood type which could cause a problem during this or future pregnancies. Fortunately, we can prevent this in most cases by giving you an injection of Rhogam - this prevents your immune system from responding to the baby's Rh-positive blood cells. If you are Rh positive, there is nothing to worry about.

Hepatitis B - This test determines whether you have Hepatitis B, or if you are a carrier. If you are a carrier, your baby will need to be vaccinated at birth.

HIV – we recommend HIV testing to all pregnant women. If you are infected, you can transmit the virus to the baby. We can decrease the chances of this happening with medications and pregnancy management, which is why we like to perform this test. The test can be performed at any time during your pregnancy if you decide not to have it at your first visit.

Gonorrhea/Chlamydia/Syphilis - Testing for sexually transmitted diseases.

Pap Smear - This test detects cancerous and pre-cancerous changes in the cervix (the opening to the womb, located at the top of the vagina).

The following tests may be offered later in your pregnancy:

Quadruple Screen Test - This blood test combines the results of four laboratory values, alpha-fetoprotein (AFP), estriol, Beta Human Choriogonadotropin (BHCG), and inhibin A to predict the chance that your baby has a chromosomal abnormality such as Down Syndrome or Trisomy 18 while also providing valuable information as to whether or not the spinal cord was inadequately developed leading to a neural tube defect (such as Spina Bifida). Results are reported as a ratio, such as 1:200 or 1:50,000. This test is done between 15 and 20 weeks and is offered to all pregnant women. It is your choice if you would like to have this test. This is a screening tool that if abnormal would lead to the recommendation for ultrasound and/or amniocentesis.

Amniocentesis - Women who are 35 years or older during pregnancy have a greater risk than younger women of giving birth to a baby with a chromosomal defect (the most well-known is Down's Syndrome). Amniocentesis is offered at this age because the risk of miscarriage from the procedure equals or is less than the risk of chromosomal birth defects. (Approximately 1:270 at the age of 35). We generally perform this test between the 15th and 18th week of pregnancy. Using ultrasound as a guide, a needle is placed through the abdomen into the uterus to collect amniotic fluid for testing. Cells obtained are cultured in a laboratory for evaluation of the chromosomes. Results of the studies are available in about two weeks. In addition, the fluid is tested for the level of alpha-fetoprotein, to detect a neural tube defect such as Spina Bifida.

Glucose Challenge Test (GCT) - This screening test is performed on all pregnant patients (who are not already known to be diabetic) between the 24th and 30th week of pregnancy as a screening test for gestational diabetes (diabetes during pregnancy). If your score is elevated, a nurse will call you to arrange for a 3 hour glucose tolerance test, a definitive test for gestational diabetes.

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What type of tests will be performed during pregnancy, continued?

Chorionic Villi Sampling (CVS) - This test is offered to the same age group as amniocentesis, but is performed earlier in the pregnancy (10 to 12 weeks). A small sample of cells is taken from the placenta where it is attached to the wall of the uterus, rather than from amniotic fluid. Chromosomal birth defects, such as Down's Syndrome, can be detected. Results of the chromosomal studies are available in approximately two weeks. The risk of miscarriage is about the same as with an amniocentesis but there is an additional risk of limb deformities with this test. The CVS is performed too early to detect neural tube defects. A separate blood test (AFP) can be performed between 15 and 20 weeks.

Glucose Challenge Test (GCT) - This screening test is performed on all pregnant patients (who are not already known to be diabetic) between the 24th and 30th week of pregnancy as a screening test for gestational diabetes (diabetes during pregnancy). If your score is elevated, a nurse will call you to arrange for a 3 hour glucose tolerance test, a definitive test for gestational diabetes.

Ultrasound or Sonogram - A sonogram is an image of the developing fetus produced using specially directed sound waves. This painless procedure can give information concerning the age of the baby, the position, the possibility of multiple gestation, and some major birth defects. Minor birth defects are usually not seen on routine ultrasound screens. Ideally this test is done between 18 and 20 weeks to allow for confirmation of the due date and adequate evaluation of the fetus.