

**"All of my friends say that they had an increased sex drive early in pregnancy. How come I feel so unsexy?"**

Pregnancy is a time of change in many aspects of your life, not the least of them sexual. Hormones, which, as you've undoubtedly noticed, play a role in every physical and emotional high and low, also play an important role in sexuality. But those hormones hit every woman differently, turning up the heat for some and spraying a cold shower on others. Some women who have never had either an orgasm or much of an appetite for sex suddenly experience both for the first time when they're expecting. Other women, accustomed to being sexually insatiable and easily orgasmic, suddenly find that they're completely lacking in libido and are difficult to arouse—or don't even want to be touched. And even if your hormones have pushed your passion turn-on button, pregnancy symptoms (that nausea, that fatigue, those painfully tender breasts) can stand between you and a good time when things get real. These changes in sexuality can be thrilling, disconcerting, guilt provoking, or a confusing combination of all three. And they are all perfectly normal.

Most important is recognizing that your sexual feelings during pregnancy—and your partner's as well—may be more erratic than erotic: You may feel sexy one day and not the next. Mutual understanding and open communication will see you through, as will a sense of humor. And remember (and remind your partner) that many women who've lost that loving feeling in the first trimester get it back in the second, in

spades, so don't be surprised if a very warm front moves into your bedroom soon. Until then, you might want to try the tips on page 279 to help heat things up.

## Cramp After Orgasm

**"I get crampy after orgasm. Is that normal, or does it mean something's wrong?"**

Not to worry—and not to stop enjoying sex, either. Cramping (sometimes accompanied by lower backache)—both during and after orgasm—is common and harmless during a low-risk pregnancy. Its cause can be physical: a combination of the normal increased blood flow to the pelvic area during pregnancy, the equally normal congestion of the sexual organs during arousal and orgasm, and the normal contractions of the uterus after orgasm. Or it can be psychological: a result of the common, but unfounded, fear of hurting the baby during sex. Or it can be a combination of physical and psychological factors, since the mind-body connection is so strong when it comes to sex.

In other words, that cramping isn't a sign that you're hurting your baby while you're enjoying yourself. In fact, unless your practitioner has advised you otherwise, it's perfectly safe to mix the pleasure of sex and the business of making a baby. If the cramps bother you, ask your partner for a gentle low back rub. It may relieve not only the cramps but any tension that might be triggering them. Some women also experience leg cramps after they have sex; see page 291 for tips on relieving those.

## ALL ABOUT:

## Pregnant on the Job

If you're pregnant, you've already got your work cut out for you. Add a full-time job to the full-time job of baby making, and your workload doubles. Juggling it all—practitioner visits with client meetings, trips to the bathroom with trips to the conference room, morning sickness with business lunches, telling your best friend in accounting (who'll be excited for you) with telling your boss (who might not be), staying healthy and comfortable with staying motivated and successful, preparing for baby's arrival with preparing for maternity leave—can be a 9-to-5 challenge that keeps you working overtime. This section can help the employed mama-to-be navigate what's to come.

### When to Tell the Boss

Wondering when to belly up to your boss's desk to spill the pregnancy beans? There's no universally perfect time (though it's a sure bet you should do it before that bump gets too big to miss). A lot will depend on how family friendly (or unfriendly) your workplace is. Still more will depend on your feelings (the physical and emotional). Here are some factors to consider:

**How you're feeling and whether you're showing.** If morning sickness has you spending more time hovering over the toilet than sitting at your desk, if first-trimester fatigue has you barely able to lift your head off your pillow in the morning, or if you're already packing a pooch that's too big to blame on your breakfast, you probably won't be able to keep your secret long. In that case, telling sooner makes more sense than

waiting until your boss (and everyone else in the office) has come to his or her own conclusions. If, on the other hand, you're feeling fine and still zipping your pants up with ease, you may be able to hold off on the announcement until later.

**What kind of work you do.** If you work under conditions or with substances that could be harmful to your pregnancy or your baby, you'll need to make your announcement—and ask for a transfer or change of duties, if at all feasible—as soon as possible.

**How work is going.** A woman announcing her pregnancy at work may unfortunately—and unfairly—raise many red flags, including, “Will she still have the energy to produce while pregnant?” and “Will her mind be on work or on her baby?” and “Will she leave us in the lurch?” You may head off some of those concerns by making your announcement just after finishing a report, scoring a deal, ringing up record sales, coming up with a great idea, or otherwise proving that you can be both pregnant and productive.

**Whether reviews are coming up.** If you're afraid your announcement might influence the results of an upcoming performance or salary review, try to wait until the results are in before sharing your news. Keep in mind that proving you've been passed up for a promotion or raise based solely on the fact that you're expecting (and that you'll soon be a worker and a mother, not necessarily in that order) may be difficult.

**Whether you work in a gossip mill.** If gossip is one of your company's chief

## The Pregnant Worker's Rights

There is much room for improvement in the U.S. workplace when it comes to families and their needs—in fact, the U.S. is one of only a tiny handful of countries in the world that don't mandate paid leave for moms. Though individual policies on what's due a pregnant or new mom worker vary from company to company, here's what federal law recognizes:

- The Pregnancy Discrimination Act of 1978. This act prohibits discrimination based on pregnancy, childbirth, or related medical conditions. Under this law, employers must treat you as they would treat any employee with a medical disability. However, it does not protect you if you end up not being able to do the job you were hired to do—or require that you be offered a transfer to a position with less physical stress while you're expecting.

It is considered discriminatory—and illegal—to pass up a woman for a promotion or a job or fire her solely on the basis of her pregnancy. But this kind of discrimination, like all kinds of discrimination, can be difficult to prove. Complaints of pregnancy discrimination can be reported to the U.S. Equal Employment Opportunity Commission (EEOC) at [eeoc.gov](http://eeoc.gov).

- The Family and Medical Leave Act (FMLA) of 1993. All public agencies and private-sector companies that employ at least 50 workers within a 75-mile radius of each other are subject to regulation under this act. If you have been employed by such a company for at least a year (working at least 1,250 hours during the year), you are entitled to take a total of up to 12 weeks of unpaid maternity

products, be especially wary. Should word of mouth of your pregnancy reach your boss's ears before your announcement does, you'll have trust issues to deal with in addition to the pregnancy-related ones. Make sure that your boss is the first to know—or, at least, that those you tell first can be trusted not to squeal.

**What the family-friendliness quotient is.** Try to gauge your employer's attitude toward pregnancy and family if you're not sure what it is. Ask coworkers who have walked in your soon-to-be-swollen footsteps before, if there are any (but keep inquiries discreet). Check the policies on maternity leave in the employee handbook. Or set up a confidential meeting with someone in human resources or the person in charge of

benefits. If the company has had a history of being supportive of moms and moms-to-be, you may be inclined to make the announcement sooner. Either way, you'll have a better sense of what you'll be facing.

## Making the Announcement

Once you've decided when to make your announcement, you can take some steps to ensure that it's well received:

**Prepare yourself.** Before you break the news, do your research. Learn everything you need to know about your employer's maternity-leave policy (or lack of). Some companies offer paid leave, others unpaid. Still others allow

leave (the leave can also be used to care for a sick child or another family member) each year that you are employed. Barring unforeseen complications or early delivery, you must notify your employer of your leave 30 days in advance. During your leave, you must continue to collect all benefits (including health insurance), and when you return, you must be restored to an equivalent position with equal pay and benefits. Keep in mind, too, that you're entitled to use some of your leave during your pregnancy if you're not feeling well. In some cases, companies may be able to exclude from FMLA women who are considered key employees—those the company can't do without for 12 weeks and who are in the top 10 percent compensation bracket. The Wage and Hour Division of the U.S. Department of Labor can offer information on FMLA. For more help, contact them at [dol.gov](http://dol.gov).

- **State and local laws.** Some state and local laws offer additional protection against pregnancy discrimination. A few states and some larger companies also offer “temporary disability insurance,” which allows for partial wages during time off for medical disabilities, including pregnancy. Three states (California, New Jersey, and Rhode Island) offer 4 to 6 weeks of paid leave—though not at full salary—to bond with a new baby or care for a seriously ill family member.

Don't like what you're reading about your rights as a pregnant worker who's about to become a new mom worker? Use social media and your vote to mom-mobilize around the issue. And consider supporting companies that voluntarily offer a substantial amount of paid leave to their employees, sometimes for both moms and dads.

you to use sick days or vacation days as part of your leave.

**Know your rights.** Pregnant women—and parents in general—have fewer rights in the U.S. than almost anywhere in the world. Still, some baby steps have been made on behalf of expectant workers (see box, above). Many other big steps—including paid leave for new moms and dads—have been taken voluntarily by some forward-thinking, family-friendly companies.

**Put together a plan.** Efficiency is always appreciated on the job, and being prepared invariably impresses. So before you go in to make your announcement, prepare a detailed plan that includes how long you plan to stay on the job (barring any unforeseen complications),

how long your maternity leave will be, how you plan to finish up business before you leave, and how you propose that any unfinished business be handled by others. If you would like to return part-time at first, propose that now. Writing up your plan will ensure you won't forget the details, plus it may score you extra efficiency points.

**Set aside the time.** Don't try to tell your boss the news when you're on the way to a meeting or when he or she's got one foot out the door Friday night. Make an appointment to meet, so no one will be rushed or distracted. Try to make it on a day and at a time that is usually less stressful at your workplace. Postpone the meeting if things suddenly take a turn for the tense.

## The Juggling Act

Even if you don't have any kids at home yet, staying on the job while you're expecting will require that you practice the fine art of juggling work and family (or, at least, a family-to-be). Especially during the first trimester and the last, when the symptoms of pregnancy may be dragging you down and the distractions of pregnancy may be competing for your attention, this juggling act may be exhausting, and sometimes overwhelming—in other words, good preparation for the years of working and parenting you may have ahead of you. These tips won't make working simultaneously at those dual jobs easier, but they may help make your working life work more smoothly with your making-a-baby life:

- **Schedule smart.** Make appointments for checkups, ultrasounds, blood tests, that glucose tolerance test, and other procedures before your workday begins (you may be too tired afterward) or during your lunch break. If you need to leave work in the middle of the day, explain to your boss that you have a doctor's appointment, and keep a log of the visits (just in case anyone accuses you of slacking off). If necessary, request a note from your practitioner verifying your appointment, and give it to your employer or someone in your human resources department.
- **Remember not to forget.** If your brain cells seem to be dropping like flies, you can blame your hormones—and start taking precautions so your pregnancy-impaired memory doesn't get you into workplace hot water. To ensure that you don't forget that meeting, that lunch date, those calls that had to be made by noon: Make lists, set reminders, load up on

post-its, and keep your smartphone or tablet handy (if you can remember where you put it).

- **Know your limits and stop before you reach them.** This isn't the time to volunteer to take on extra projects or extra hours unless it's absolutely necessary. Focus on what needs to be done—and realistically can be done—without wearing yourself out. To avoid feeling overwhelmed, complete one task at a time.
- **Just say yes.** If coworkers offer to help out when you're not feeling well, don't hesitate to take them up on their kindness (maybe you can return the favor someday). And for all of you expectant micromanagers: If there were ever a time to learn how to delegate, this would be it.
- **Recharge as needed.** When you find yourself emotionally overwhelmed, and you will (a stuck stapler can start the tears flowing when you're pregnant), take a brief walk, a bathroom break, or some relaxation breaths to clear your head. Keep a stress ball handy, to knead as needed, too.
- **Speak up.** Not only are you only human, but you're human and pregnant. Which means you can't do it all and do it all well—especially if you feel crappy, as you will sometimes feel. If you can barely lift your head off your pillow (or leave the bathroom for more than 5 minutes) and you've got a pile of stuff on your desk or a major deadline looming, don't panic. Tell your boss you need extra time or extra help. And don't beat yourself up—or let anyone else beat you up. You're not lazy or incompetent, you're making a baby—and that's the hardest job of all.

**Accentuate the positive.** Don't start your announcement with apologies or misgivings. Instead, let your boss know that you are not only happy about your pregnancy but confident in your ability and committed in your plan to mix work and family.

**Be flexible (but not spineless).** Have your plan in place, and open it up to discussion. Then be ready to compromise (make sure there is room for negotiation built into your plan) but not to back down completely. Come up with a realistic bottom line and stick with it.

**Set it in writing.** Once you've worked out the details of your pregnancy protocol and your maternity leave, confirm it in writing so there won't be any confusion or misunderstanding later (as in, "I never said that . . .").

**Never underestimate the power of parents.** If your company is not as family friendly as you'd like, consider joining forces to petition for better parental perks. Making sure that similar allowances are made for employees who must take time off to care for sick spouses or parents may help unite, rather than divide, the company around the cause.

## Staying Comfortable on the Job

Between nausea and fatigue, backaches and headaches, puffy ankles and a leaky bladder, it's hard for any expectant mom to have a completely comfortable day. Put her at a desk or on her swollen feet or at a job that requires standing, and you've got a recipe for even more pregnancy discomfort. To stay as comfortable as possible on the job when you're expecting, try these tips:

- Dress for success and comfort. Avoid tight, restrictive clothing, socks or

knee-highs that cut off circulation, and heels that are too high or too spiky (2-inch chunky heels, low wedges, or flats with arch support work best). Wearing support hose designed for pregnancy will help ward off or minimize a variety of symptoms, from swelling to varicose veins, and may be especially important if you're spending a lot of the day on your feet. As you get bigger and achier, you may find that a belly sling or band is your favorite workday accessory.

- Watch the weather—inside you. No matter the climate in your city (or your office), when you're pregnant, the forecast is for wildly swinging body temperatures. Sweating one minute and chilly the next, you'll want to favor the layered look—and have a layer ready for every possible condition. Thinking of bundling up in a wool turtleneck to brave a subfreezing day? Don't do it unless you've got a lightweight layer underneath that you can strip down to when a hormone-driven heat wave starts burning inside. And even if you're usually toasty in just a tee, stash a sweater in your drawer or locker. Your body temp goes both ways fast these days.
- Stay off your feet—at least as much as possible. If your job demands that you stand for long stretches, take sitting or walking breaks. If possible, keep one foot on a low stool, knee bent, while you stand, to take some of the pressure off your back. Switch feet regularly. Flex them periodically, too.
- Put your feet up. Find a box, low stool, or other tip-proof object on which to discreetly rest your weary feet under your desk (see illustration, page 253).
- Take a break. Often. Stand up and walk around if you've been sitting,



## Working with Carpal Tunnel

If you spend your day (and maybe your nights, too) tap-tap-tapping on a keyboard, you may already be familiar with the symptoms of carpal tunnel syndrome (CTS). A well-known worker's malady, CTS causes pain, tingling, and numbness in the hands and most often strikes those who spend a lot of time doing repetitive tasks (typing, punching numbers, working a smartphone). What you might not know, however, is that CTS affects the majority of pregnant women. Even moms-to-be who rarely touch a keyboard are prone to it, thanks to swollen tissue in the body that presses on nerves. The good news is that carpal tunnel syndrome is not dangerous—just uncomfortable, especially on the job. Even better, you can try a number of remedies until you see the light at the end of the carpal tunnel:

- Raise your office chair so your wrists are straight and your hands are lower than your elbows as you type.
- Switch to a wrist-friendly ergonomic keyboard (one that has a wrist rest) as well as a mouse that offers wrist support.
- Wear a wrist brace while typing.
- Take frequent breaks from the computer.
- Go hands-free if you're on the phone a lot.
- In the evenings, soak your hands in cool water to reduce any swelling.
- Ask your practitioner about other possible remedies, including vitamin B<sub>6</sub> supplements, acupuncture, or pain relievers.

For more tips, see page 291.

sit down with your feet up if you've been standing. If there's a spare sofa and a slot in your schedule, lie down for a few minutes. Do some stretching exercises, especially for your back, legs, and neck. At least once (or even twice) every hour, do this 30-second stretch: Stand up, raise your arms above your head, clasp your fingers, palms up, and reach up. Next, place your hands on a desk or table, step back a bit, and stretch out your back. Sit down and rotate your feet in both directions. If you can bend over and touch your toes—even from a seated position—go for it to release the tension in your neck and shoulders. (Looking for more desk-side exercises? The *What to Expect When You're Expecting: The Workout* DVD has plenty.)

- Adjust your chair. Back hurt? Add a lumbar cushion for extra support. Bottom sore? Slide a soft pillow onto your seat. Hips bothering you? Be sure to get up and walk around at least once an hour, if not more. If your chair reclines, consider setting it back a few notches to create more (and more!) space between your belly and your desk. And if you need more belly support, try a belly band.
- Hang out by the water cooler. Not just for the latest office dish but for frequent refills of your cup. Or keep a refillable water bottle at your desk. Drinking plenty of water can keep many troublesome pregnancy symptoms at bay, including excessive swelling, and may help prevent a UTI.

- Don't hold it in. Emptying your bladder as needed (but at least every 2 hours) also helps prevent UTIs. A good strategy: Plan to pee every hour or so, whether you need to or not. You'll feel better overall if you avoid getting to the bursting point.
- Take time for your tummy. Every expectant mom's job description includes feeding her baby regularly, no matter what else is on her workday agenda. So plan accordingly—making room in even your busiest days for 3 meals, plus at least 2 snacks (or 6 mini-meals). Scheduling meetings as working meals may help. So will keeping a supply of nutritious snacks in your desk, as well as in the office fridge, if there is one. Rediscover brown bags, or pack your lunch or mini-meals in some easy-to-tote food storage containers—that way you'll be able to keep baby fed even when time's not on your side.
- Keep an eye on the scale. Make sure job stress—or erratic eating—isn't keeping you from gaining enough weight, or is contributing to too many pounds (as it can for stress eaters, especially if they work near a vending machine).
- Pack a toothbrush. If you're suffering from morning sickness, brushing your teeth can protect them between bouts of vomiting—plus it helps freshen up your breath when it most needs freshening. Mouthwash will also be a welcome addition to the breath-freshening team, and it can help dry out a mouth that's full of excess saliva (drooling and gagging are common in the first trimester and can be extra embarrassing at work).
- Lift with care. Do any necessary lifting properly, to avoid strain on the back (see page 253).
- Watch what you breathe. Stay out of smoke-filled areas, even outdoor areas where smokers take their breaks. Not only is secondhand smoke bad for you and your baby, but it can also increase fatigue.
- Chill mama, chill. Too much stress isn't good for you or your baby. So try to use breaks to relax as fully as you can: Listen to music or a nature sounds app, close your eyes and meditate, do some soothing stretches, or take a 5-minute stroll around the building.
- Listen to your body. Try to slow down your pace if you're feeling tired.

## Staying Safe on the Job

Most jobs are completely compatible with the job of making a baby, which is very good news to the millions of expectant moms who must manage to work full time at both occupations. Still, some jobs are obviously safer and better suited to pregnant women than others. Most on-the-job problems can be avoided with the right precautions or a modification of duties (check with your practitioner for other workplace recommendations in your case):

**Office work.** Anyone with a desk job knows the pain of stiff necks, aching backs, and headaches, all of which can make a pregnant woman feel more uncomfortable than she already is. No harm done to baby—but a lot of wear and tear on your achy expectant body. If you spend a lot of time sitting, be sure to stand up, stretch, and walk away from your desk frequently. Stretch your arms, neck, and shoulders while sitting in your chair, discreetly put your feet up on a low box or stool to reduce swelling, and support your back with a cushion.



## Quiet, Please

By about 24 weeks, your baby's outer, middle, and inner ear are well developed. By 27 to 30 weeks, your baby's ears are mature enough to start responding to the sounds that filter into the womb. The sounds, of course, are muffled—and not just by the physical barrier of amniotic fluid and your own body. In his or her fluid-filled home, a baby's eardrum and middle ear can't do their normal job of amplifying sounds. So even sounds that are quite loud to you won't be for your baby.

Still, since noise is one of the most prevalent of all occupational hazards and has long been known to cause hearing loss in those exposed to it regularly, you might want to play it safe when it comes to excessive noise during pregnancy. That's because studies suggest that prolonged and repeated exposure to very loud noise raises the odds of a baby suffering some hearing loss, especially at lower frequencies. Such prolonged noise exposure—say, daily 8-hour shifts in an industrial workplace where the sound level is more than 90 or 100 decibels (about the same as standing next to a loud lawn mower or a chain saw)—can also increase the risk

of premature delivery and low-birth-weight babies. Repeated brief exposure to extremely intense sound of 150 or 155 decibels (like standing next to a screaming jet engine) can cause similar problems. Generally, it's safest to avoid more than 8 hours of continuous exposure to noises louder than 85 or 90 decibels (such as a lawn mower or truck traffic) or more than 2 hours a day of exposure to noise louder than 100 decibels (such as that from a chain saw, pneumatic drill, or snowmobile).

More research needs to be done, but in the meantime, expectant mothers who work in an extremely noisy environment—such as a club where loud music is played, in a subway, or in a factory where protective hearing devices are required (you can't put these devices on your fetus)—or who are exposed to heavy vibrations on the job should play it safe and seek a temporary transfer or a new job. And try to avoid prolonged exposure to very loud noises in your everyday life: Don't take front seats at a concert, turn down the volume in your car, and wear headphones instead of blasting the music while you're vacuuming.

What about computer safety? Luckily, computer monitors are not a hazard to pregnant women, and neither are laptops. More worrisome is the multitude of physical discomforts, including wrist and arm strain, dizziness, and headaches, that can result from too much time spent in front of the computer. For fewer aches and pains, use a height-adjustable chair with a backrest that supports your lower back. Adjust the monitor to a comfortable height; the top should be level with your eyes and about an arm's length away from you. Use an ergonomic keyboard, designed

to reduce the risk of carpal tunnel syndrome (see box, page 204), if possible, and/or a wrist rest. When you put your hands on the keyboard, they should be lower than your elbows and your forearms should be parallel to the floor.

**Health care work.** Staying healthy is every health care professional's top on-the-job priority, but it ranks even higher when you're staying healthy for two. Among the potential risks you'll need to protect yourself and your baby from are exposure to chemicals (such as ethylene oxide and formaldehyde) used

for sterilization of equipment, to some anticancer drugs, to infections (such as hepatitis B and HIV), and to ionizing radiation. Most technicians working with low-dose diagnostic x-rays are not exposed to dangerous levels of radiation. It is recommended, however, that women of childbearing age working with higher-dose radiation wear a special device that keeps track of daily exposure, to ensure that cumulative annual exposure does not exceed safe levels (most health care professionals wear these exposure trackers anyway).

Depending on the particular risk you are exposed to, you might want to either take safety precautions as recommended by NIOSH (see box, page 208) or switch to safer work for now, if possible.

**Manufacturing work.** If you have a factory or manufacturing job that has you operating heavy or dangerous machinery, talk to your boss about a change of duties while you're pregnant, if possible. You can also contact the machinery's manufacturer (ask for the corporate medical director) for more information about the product's safety. How safe conditions are in a factory depends on what's being made in it and, to a certain extent, on how responsible and responsive the people who run it are. OSHA lists a number of substances that a pregnant woman should avoid on the job. Where proper safety protocols are implemented, exposure to such toxins can be avoided. Your union or other labor organization may be able to help you determine if you are properly protected. You can also get useful information from NIOSH or OSHA.

**Physically strenuous work.** Work that involves heavy lifting, physical exertion, long hours, rotating shifts, or continuous standing may somewhat raise an

expectant mom's risk for preterm delivery. If you have such a job, you should request a transfer to a less strenuous position by 20 to 28 weeks until after delivery and postpartum recovery. (See page 208 for recommendations on how long it is safe for you to stay at various strenuous jobs during your pregnancy.)

**Emotionally stressful work.** The extreme stress in some workplaces seems to take its toll on workers in general and on pregnant women in particular. So it makes sense to cut down on the stress as much as possible, especially now. An obvious (but not often feasible) way to do that is to switch to a job that is less stressful or take early maternity leave. Understandably, if the job is critical financially or professionally, you may find yourself even more stressed if you leave it.

You might, instead, consider ways of reducing stress, including meditation and deep breathing, regular exercise (to release those feel-good endorphins), and taking breaks when you can. If you're self-employed, cutting back may be even tougher (you're probably your own most demanding boss), but wise to consider.

**Other work.** Teachers and social workers who deal with young children may come into contact with infections that can potentially affect pregnancy, such as chicken pox, fifth disease, and CMV. Animal handlers, meat cutters, and meat inspectors may be exposed to toxoplasmosis (though if they've developed immunity already, their babies would not be at risk). If you work where infection is a risk, be sure you're immunized as needed and take appropriate precautions, such as washing hands frequently and thoroughly, wearing protective gloves and a mask, and so on.

Flight attendants or pilots may be at a slightly higher risk for miscarriage

## Getting All the Facts

By law, you have the right to know what chemicals you are exposed to on the job, and your employer is obliged to tell you. The Occupational Safety and Health Administration (OSHA) is the regulatory body that monitors those laws. Contact them for more information on your rights regarding workplace safety at [osha.gov](http://osha.gov). Further information on workplace hazards can also be obtained by contacting the National Institute for Occupational Safety and Health (NIOSH), Clearinghouse for Occupational Safety and Health Information, [cdc.gov/niosh/topics/repro](http://cdc.gov/niosh/topics/repro).

If your job does expose you to hazards, either ask to be transferred temporarily to a safer post or, finances and company policy permitting, begin your maternity leave early.

or preterm labor (though studies are inconclusive) because of exposure to radiation from the sun during high-altitude flights, and they might want to consider switching to shorter routes (they're usually flown at lower altitudes) or to ground work during pregnancy.

Artists, photographers, hairstylists, cosmeticians, dry cleaners, those in the leather industry, agricultural and horticultural workers, and others may be exposed to a variety of possibly hazardous chemicals in the course of work, so be sure to wear gloves and other protective gear. If you work with any suspect substances, take appropriate precautions, which in some cases may mean avoiding the part of the job that involves the use of chemicals.

## Staying on the Job

Planning to work until that first contraction hits? Many women successfully mix business with baby making right through the 9th month, without compromising the wellbeing of either occupation. Still, some jobs are better suited to pregnant women during the long haul (so to speak) than other jobs. And chances are, the decision of whether you'll continue to work until delivery will be impacted by the kind of work you do. If you have a desk job, you can probably plan on going straight from the office to the birthing room. A sedentary job that isn't particularly stressful may actually be less of a strain on both you and baby than staying at home nesting. And some walking—an hour or two daily, on the job or off—is not only harmless but beneficial (assuming you aren't carrying heavy loads as you go).

Jobs that are strenuous, very stressful, and/or involve a great deal of standing, however, may be another, somewhat controversial, matter. Some research has found that women who were on their feet 65 hours a week didn't seem to have any more pregnancy complications than women who worked many fewer and usually less stressful hours. Other research, however, suggests that steady strenuous or stressful activity or long hours of standing after the 28th week—particularly if an expectant mother also has other children to care for at home—may increase the risk of certain complications, including premature labor, high blood pressure, and a low birthweight baby.

Should women who stand on the job work past the 28th week? Most practitioners give the green light to work longer if a mom-to-be feels fine and her pregnancy is progressing normally. Standing on the job all the way

to term, however, may not be a good idea, less because of the theoretical risk to the pregnancy than the real risk that such pregnancy discomforts as backache, varicose veins, and hemorrhoids will be aggravated.

It's probably a good idea to take early leave, if possible, from a job that requires frequent shift changes (which can upset appetite and sleep routines, and worsen fatigue); one that seems to exacerbate any pregnancy problems, such as headache, backache, or fatigue; or one that increases the risk of falls or other accidental injuries. But the bottom line: Every pregnancy, every woman, and every job is different. Together with your practitioner, you can make the decision that's right for your workplace situation.

## Changing Jobs

With all the changes going on in your life (like your growing belly and the ever-expanding responsibilities that come with it), it may seem counterintuitive to want to add another to your list. But there are dozens of valid reasons why an expectant mom might consider a job change. Maybe your employer isn't family friendly and you're

concerned about balancing career and motherhood when you return from maternity leave. Maybe the commute is too long, the hours are inflexible, or the grind is all-consuming. It could be that you're bored or not fulfilled (and, hey—change is in the air anyway, so why not make the most of it?). Or perhaps you're worried that your current workplace might be hazardous to you and your developing baby. Whatever your reason, here are some things to consider before you make a job move:

- Looking for work takes time, energy, and focus—three things you may be lacking these days as you concentrate on having a healthy pregnancy. Will you be up for all those interviews (especially if morning sickness has you frequently running for the nearest toilet or if pregnancy forgetfulness has you fumbling for your thoughts)? Even if you're confident you can ace the interview process, consider that starting a new job also demands a great deal of concentration (all eyes are on you, so you have to be extra careful not to make mistakes).
- Before you jump ship, you'll need to be sure the new job you're seeking out is really all it's cracked up to be (in

## Unfair Treatment at Work

Think you're being treated unfairly on the job because of your pregnancy? Don't just sit there, do something. Let someone you trust—your supervisor, someone in human resources—know how you feel. If that doesn't fix the problem, see if there is a procedure for employees to follow in the case of pregnancy discrimination (you can probably find it in your employee handbook, if there is one).

If that still doesn't work, contact the U.S. Equal Employment Opportunity Commission ([eeoc.gov](http://eeoc.gov)) to find your local office. They'll be able to help you determine if you have a legitimate complaint.

Remember to keep records of everything that'll bolster your claim (copies of emails, letters, a journal of events). This trail will also be helpful in case you ever need to contact an attorney.

your mind, at least). Does the company you're smitten with offer twice as much vacation time but charge double for health insurance? Do they allow employees to work from home yet expect them to be on call morning, noon, and night? Are the salaries higher and, likewise, the travel demands? Keep in mind that what looks like a great job now may not be so great when you're juggling it with new-baby care (your home life will be a lot more complicated, so you might not want your workplace life to be). Also consider that companies often offer fewer paid short-term disability days or pay a lower percentage of your salary during leave if you have been employed for less than one year.

- By law, your potential employer has no right to ask whether you're pregnant (if it isn't already obvious)—and can't deny you an offer because you're pregnant, though that kind of discrimination is often hard to prove. Consider that some companies will

have a hard time justifying (as justified as it may be by law) bringing you on, training you, and then letting you take maternity leave so quickly. And not all employers appreciate what they consider to be a bait-and-switch strategy (you accept a job, then tell them you'll be out on maternity leave). So though it may be smart in the short run to keep your pregnancy a secret as you interview, it may damage your relationship with the company in the end. On the other hand, sometimes it's better to secure the offer first and then discuss the future once you know the company wants to hire you—but before you accept the position.

- What if you started a new job before you found out you were pregnant? Be up front about the situation, and then get down to the business of doing your job to the best of your expectant ability. Just make sure you know your rights about job security should the situation take a negative turn.

# The Fourth Month

.....

Approximately 14 to 17 Weeks

.....

**F**inally, the beginning of the second trimester—which for most expectant moms is the most comfortable of the three. And with the arrival of this momentous milestone (1 down, 2 to go!) often come some welcome changes. For one, most of the more pesky early pregnancy symptoms may be gradually easing up or even disappearing. That queasy cloud may be lifting (which means that food may actually smell and taste good for the first time in a long time). Your energy level should be picking up (which means you'll finally be able to pick yourself up off the sofa), and your visits to the bathroom should be dropping off. And though your breasts will likely still be supersize, they're less likely to be super tender. Another change for the better: By the end of this month, the bulge in your lower abdomen may be looking less like a large lunch and more like a pregnant belly.

---

## Your Baby This Month

---

**Week 14** Beginning in the second trimester, fetuses (like the children they'll eventually become) start growing at different paces, some faster than others, some more slowly. Despite the differences in growth rates, all babies

follow the same developmental path in utero. This week, that path is leading your baby—who is about the size of your clenched fist—toward a straighter position as the neck gets longer and the head more erect. And on top of that





**Your Baby, Month 4**

cute little head, your baby might actually be sprouting some hair. Eyebrow hair is also filling in about now, as is body hair, called lanugo. Don't worry, it's not permanent. This downy coating of hair is there to keep your baby warm for now—like a furry blanket. As baby fat accumulates later on in your pregnancy, most of that hair will be shed—though some babies, especially those born early, still have a temporary fuzzy coating at delivery.

**Week 15** Your baby, who measures approximately 4 inches this week and weighs around 2½ ounces, is about the size of a navel orange and looking more and more like the baby you're picturing in your dreams: His or her ears are positioned properly on the sides of the head (they used to be in the neck), and the eyes are shifting from the sides of the head to the front of the face. By now your baby has the coordination, strength, and smarts to wiggle his or her fingers and toes and even suck a thumb. But that's not all your baby can do now. He or she can make breathing movements, suck, and swallow—all in preparation for that big debut and

life outside the womb. And though it's still unlikely that you'll be feeling any movements from your little one this week, your baby is certainly getting a workout—kicking, flexing, and moving those arms and legs.

**Week 16** With a whopping weight of anywhere from 3 to 4 ounces and a length (crown to rump) of 4 to 5 inches, your baby is growing up fast. Muscles are getting stronger (you'll start to feel movement in a few weeks), especially the back muscles, enabling your little one to straighten out even more. Your baby-to-be is looking more baby-like with a face that has eyes (complete with eyebrows and eyelashes) and ears in the right spots. What's more, those eyes are finally working! Yes, it's true: Your baby's eyes are making small side-to-side movements and can even perceive some light, though the eyelids are still sealed. Your baby is also becoming more sensitive to touch. In fact, he or she will squirm if you poke your belly (though you probably won't be able to feel those squirms just yet).

**Week 17** Take a look at your open hand. Your baby is about palm-size now, with a crown-to-rump length of 5 inches and an approximate weight of 5 (or more) ounces. Body fat is just beginning to form (baby's fat, that is, though yours is probably forming pretty quickly these days, too), but your little one is still quite skinny, with skin that is practically translucent. This week, your baby is all about practice,

## More Baby

For week-by-week videos of your baby's amazing development, download the What To Expect app.

practice, practice in preparation for birth. One important skill your baby is busy sharpening: sucking and swallowing—to get ready for that first (and second . . . and third) suckle at breast

or bottle. Your baby's heart rate is regulated by the brain now (no more spontaneous beats) and clocks in at 140 to 150 beats per minute (roughly twice your own heart rate).

## Your Body This Month

Here are some symptoms you may experience this month (or may not experience, since every pregnancy is different). Some of these symptoms may be continuing from last month, while others may be brand new. With the start of the second trimester, some symptoms may be tapering off, others intensifying:

### Physically

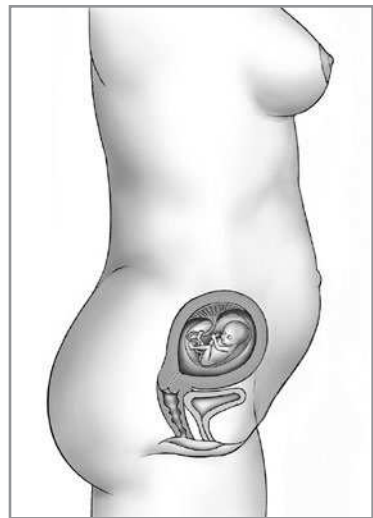
- Fatigue
- Decreasing urinary frequency
- An end to, or a decrease in, nausea and vomiting (for a few women,

morning sickness will continue—for a very few, it is just beginning)

- Constipation
- Heartburn, indigestion, flatulence, bloating
- Continued breast enlargement, but usually decreased tenderness
- Occasional headaches
- Occasional lightheadedness or dizziness, particularly with sudden change of position
- Nasal congestion and occasional nosebleeds; ear stuffiness

## Your Body This Month

Your uterus, now about the size of a small melon, has grown large enough to rise out of the pelvic cavity, and by the end of the month, you'll be able to feel the top of it around 2 inches below your belly button (if you don't know what you're feeling for, ask your practitioner for some pointers at your next visit). You'll probably begin to outgrow your regular clothes, though some moms can zip their way comfortably through 5 months or more without turning to maternity clothes, and that's normal, too.



- Sensitive gums that may bleed when you brush
- Increased appetite
- Mild swelling of ankles and feet, and occasionally of hands and face
- Varicose veins of legs or vulva
- Hemorrhoids
- Slight increase in vaginal discharge
- Fetal movement near the end of the month (but usually not this early, unless this is your second or subsequent pregnancy)

### Emotionally

- Mood swings, which may include irritability, irrationality, inexplicable weepiness
- Excitement and/or apprehension—if you have started to feel and look pregnant at last
- Frustration at being “in between”—your regular wardrobe doesn’t fit anymore, but you’re not looking pregnant enough for maternity clothes
- A feeling you’re not quite together—you’re scattered, forgetful, drop things, have trouble concentrating

---

## What You Can Expect at This Month’s Checkup

---

This month, you can expect your practitioner to check the following, though there may be variations, depending on your particular needs and on your practitioner’s style of practice:

- Weight and blood pressure
- Urine, for sugar and protein
- Fetal heartbeat
- Height of fundus (top of the uterus)

- Size of uterus, by external palpation (feeling from the outside)
- Hands and feet for swelling, and legs for varicose veins
- Symptoms you’ve been experiencing, especially unusual ones
- Questions or problems you want to discuss—have a list ready

---

## What You May Be Wondering About

---

### Dental Problems

**“Suddenly my gums bleed every time I brush, and I think I have a cavity. Is it safe to have dental work done?”**

Smile—you’re pregnant! But with so much of your attention understandably centered on your belly during

pregnancy, it’s easy to overlook your mouth—until it starts screaming for equal time. For starters, pregnancy hormones aren’t kind to your gums—which, like your other mucous membranes, become swollen and inflamed, and tend to bleed easily. Those same hormones also make the gums more

## Expecting X-Rays?

Routine dental x-rays (and other routine x-rays or CT scans) are usually postponed until after delivery, just to be on the extra-safe side. But if putting off x-rays during pregnancy just isn't a good idea (the risk of having one is outweighed by the risk of not having one), most practitioners will green-light the procedure. That's because the risks of x-rays during pregnancy are really very low and can be easily made even lower. Dental x-rays target your mouth, of course, which means the rays are directed far away from your uterus. What's more, a typical diagnostic x-ray of any kind rarely delivers more radiation than you'd get from spending a few days in the sun at the beach. Harm to a fetus occurs only at very high doses, doses you're extremely unlikely to ever be exposed to. Still, if you do need an x-ray during pregnancy, keep the following guidelines in mind:

- Always inform the doctor or dentist ordering the x-ray and the technician performing it that you're pregnant, even if you're pretty sure they know and even if you checked it off on any forms you filled out.
- Have any necessary x-ray done in a licensed facility with well-trained technicians.
- The x-ray equipment should, when possible, be directed so that only the minimum area necessary is exposed to radiation. A lead apron will be used to shield your uterus, and a thyroid collar should protect your neck.

Most important, if you had an x-ray before you found out you were pregnant, don't worry.

susceptible to plaque and bacteria, which can soon make matters worse in some moms-to-be, possibly leading to gingivitis (inflammation of the gums) and tooth decay.

To keep your mouth happy:

- Floss and brush regularly using a soft toothbrush, and use toothpaste with fluoride for cavity protection. Brush up on your technique, too, since brushing too aggressively can injure sensitive gums, leading to bleeding and even recession. Brushing your tongue (with a tongue scraper or a separate toothbrush) will also help combat bacteria while keeping your breath fresher.
- Ask your dentist to recommend a rinse to reduce bacteria and plaque, protecting your gums and your teeth.
- When you can't brush after eating, chew gum. Chewing sugarless gum increases the amount of saliva, which rinses the teeth, and if the gum's sweetened with xylitol, chewing can actually help prevent decay. Or nibble on a chunk of hard cheese (it decreases the acidity in your mouth, and it's the acid that causes tooth decay).
- Watch what you eat, particularly between meals. Save sweets (especially sticky ones, and even dried fruit or fruit leather) for times when you can brush soon after. Chow down on fruits and veggies high in vitamin C, which strengthens gums, reducing the possibility of bleeding. Also be sure to fill your calcium requirements daily. Calcium is needed throughout life to keep teeth strong and healthy—plus

## A Gum Bump

If it's not one thing for your poor pregnant gums, it's another. Besides inflammation and sensitivity, canker sores are more common when you're expecting. And your gums might encounter other bumps, as well—literally. If you notice a bump on your gum that bleeds when you brush, get it checked out. It's probably a pyogenic granuloma (also known as a “pregnancy tumor,” despite the fact that it's perfectly harmless, if often uncomfortable). These bumps usually regress on their own, but if it becomes really annoying, it can be removed by a dentist or doctor.

you'll be giving baby's growing teeth a boost, too.

- See your dentist. Even if you're not having any noticeable dental discomfort, be sure to make an appointment with your dentist for a checkup and cleaning at least once during your 9 months—preferably earlier than later. The cleaning is important to remove plaque, which can not only increase the risk of cavities but also make your gums more vulnerable. You may also need to schedule an appointment with the periodontist if you've had gum problems in the past. Stay away from any sealants or any cosmetic dental procedures (like whitening; see page 153) until after delivery (though topical fluoride treatment should be safe during pregnancy). Wondering about the safety of routine x-rays? See the box, page 215, for the lowdown.
- Don't keep your pregnancy a secret. From the dentist, that is. Even if you

haven't broken the news widely, your dentist and hygienist should both get the heads-up before you open wide. Not only so they can take extra precautions with x-rays and treatment plans, but also because your gums may need to be handled with extra care. Something else you may want to share with them: if pregnancy has revved up your gag reflex.

Seeing your dentist or periodontist is especially important if you suspect a cavity or other tooth or gum trouble. Untreated gingivitis can develop into periodontitis, a more serious gum condition associated with a variety of pregnancy complications such as pre-eclampsia. Decay that isn't cleaned up or other tooth issues that aren't tended to can also become a source of infection (and infection isn't good for you or your baby).

What happens if major dental work becomes necessary during pregnancy? Luckily, in most dental procedures a local anesthetic will suffice, and that's safe. A low dose of nitrous oxide (laughing gas) is also safe to use after the first trimester, but more serious sedation should be avoided during pregnancy. In some cases, it may be necessary to take an antibiotic before or after major dental work, so check with your practitioner.

## Breathlessness

**“Sometimes I feel a little breathless. Is this normal?”**

Take a deep breath (if you can!) and relax. Mild breathlessness is normal, and many pregnant women experience it beginning in the second trimester. And you can blame—what else?—those pregnancy hormones for taking your breath away. Here's why:

Those hormones stimulate the respiratory center to increase the frequency and depth of your breaths during pregnancy, which can give you that out-of-breath feeling after nothing more strenuous than a trip to the bathroom. They also swell the capillaries in the body—including those of the respiratory tract—and relax the muscles of the lungs and bronchial tubes, making those breaths seem even harder to catch. Your ever-growing uterus will also likely contribute to your breathlessness as pregnancy progresses, pushing up against your diaphragm as it swells, crowding your lungs and making it more difficult for them to expand fully (something else to look forward to!).

Fortunately, though the mild breathlessness you're experiencing may make you feel uncomfortable, it doesn't affect your baby—who isn't breathing at all yet, but (not to worry) is kept well stocked with oxygen through the placenta. If, however, you're feeling constantly breathless, mention it to your practitioner, who may want to test your iron levels (see page 251). And if you're having a very hard time breathing, if your lips or fingertips seem to be turning bluish, or if you have chest pain and a rapid pulse, call your practitioner right away.

## Nasal Stuffiness and Nosebleeds

**"My nose has been stuffed up a lot, and sometimes it starts bleeding randomly. Is that pregnancy related?"**

Your belly's not the only thing that's starting to swell these days. Thanks to the high levels of estrogen and progesterone circulating in your body, which bring with them increased blood flow, the mucous membranes of

your nose start to swell, too, and soften (much as the cervix does in preparation for childbirth). Those membranes also produce more mucus than ever, with the intention of keeping infections and germs at bay. What's not so swell is the result—which your nose undoubtedly already knows: congestion, and possibly even nosebleeds. Also not so swell: The stuffiness may only get worse as your pregnancy progresses. You may develop postnasal drip, too, which in turn can occasionally cause coughing or gagging at night (as if you didn't have enough other things keeping you up—or enough gagging going on).

You can safely try saline sprays or rinses, or sleep with a nasal strip (like Breathe Right) to ease nighttime stuffiness. A cool mist humidifier in your room may also help overcome the dryness associated with any congestion. Medications or antihistamine nasal sprays are usually not prescribed during pregnancy, but do ask your practitioner what he or she recommends (some practitioners okay decongestants or steroid nasal sprays after the first trimester; see page 539).

Taking an extra 250 mg of vitamin C (with your practitioner's okay), plus eating plenty of vitamin C-rich fruits and veggies, may help strengthen your capillaries and reduce the chance of bleeding. Sometimes a nosebleed will follow overly energetic nose blowing, so easy does it.

To stem a nosebleed, sit or stand leaning slightly forward, rather than lying down or leaning backward. Using your thumb and forefinger, pinch the area just above your nostrils and below the bridge of your nose, and hold for 5 minutes. Repeat if the bleeding continues. If the bleeding isn't controlled after 3 tries, or if the bleeding is frequent and heavy, call your practitioner.



## Snoring

**"My husband tells me that I've been snoring lately. Is this another pregnancy symptom, hopefully a temporary one?"**

Men get the snoring blame in most households—and for good reason, since they're twice as likely to snore as women. That is, until pregnancy hormones invade the bedroom—then all bets are off on who's disturbing whose sleep.

Yes, that's right—you can add snoring to the list of unexpected (and thankfully temporary) symptoms of expecting. Usually, pregnancy snoring is nothing to lose sleep over (though your bedmate may be losing plenty over it). The noisy nasal soundtrack that plays as you sleep is probably triggered by normal pregnancy stuffiness, which increases when you're lying down. Sleeping with a nasal strip on and a humidifier running can ease the congestion and help everyone sleep better—as can keeping your head well elevated with several pillows (which will also help with any heartburn you're

having, so win-win). Extra weight can also contribute to snoring, so make sure you aren't gaining too much.

Rarely, snoring can signal an elevated risk for gestational diabetes or be a sign of sleep apnea, a condition in which breathing stops briefly during sleep. Since you're breathing for two, it's a good idea to mention your snoring to your practitioner at your next visit.

## Allergies

**"My allergies seem to have gotten worse since I've been pregnant. My nose is runny all the time."**

Expectant noses are stuffy noses, so it's possible that you're mistaking the normal (though uncomfortable) congestion of pregnancy for allergies. But it's also possible that pregnancy has aggravated your allergies. Though some lucky expectant allergy sufferers (about a third) find a temporary respite from their symptoms during pregnancy, the less lucky (also about a third) find their symptoms get worse, and the rest (that final third) find their symptoms stay about the same. Since it sounds like you're among the less lucky third, you're probably itching (and tearing and sneezing) for relief. But before you join the rest of the other allergy sufferers in the antihistamine aisle, check with your practitioner to see what you can safely pull off the shelf or have filled at the pharmacy. Some antihistamines and other medications are safe for use in pregnancy, while others (which may or may not include your usual over-the-counter or prescription medication) may not be. Don't worry about any that you took before you knew you were pregnant or before you read this.

Allergy shots are considered safe for pregnant women who were on the receiving end of them before they

## Snooze or Lose

Are pregnancy hormones—or that growing belly—getting between you and a good night's sleep? Sleep problems are common in pregnancy, and while insomnia may be good preparation for the sleepless nights that lie ahead once your baby arrives, you're likely eager to catch some expectant z's while you can. Before turning to over-the-counter (or prescribed) sleep aids, however, talk to your practitioner. He or she may have other suggestions to help summon the sandman. You can also read the tips on page 284 to help with your insomnia.

## Breathing Easier with Asthma

Being pregnant can leave you breathless—literally, once your growing uterus starts crowding out your diaphragm. But what if you're pregnant, breathless, and asthmatic, too? While it's true that poorly controlled severe asthma does put a pregnancy at a somewhat higher risk for complications (such as preterm delivery, low birthweight, or preeclampsia), this risk can be almost completely eliminated. In fact, if you're under close, expert medical supervision by a team that includes your ob, your internist, and/or your asthma doctor, and you keep your asthma well controlled, your chances of having a normal pregnancy and a healthy baby are about as good any mama's (which means you can breathe a little easier now).

You and your doctors may need to take a fresh look at the medications you're taking for your asthma (in general, inhaled medications like budesonide appear to be safer than oral meds). Since you're breathing for two now, getting enough oxygen is doubly important. Treating an asthma attack promptly with prescribed medication—usually albuterol—will help ensure your baby isn't shortchanged on oxygen. Since an asthma attack may

trigger early uterine contractions, be sure to call your doctor or head for the nearest emergency room if your rescue inhaler doesn't help. Happily, any contractions that are triggered by an attack will usually stop when the attack does—which is why it's so important to stop it quickly.

When it comes to labor and delivery, yours is likely to be pretty much like other moms', though if your asthma has been serious enough to require oral steroids or cortisone-type medications, you may also require IV steroids to help you handle the added stress of childbirth.

Though well-controlled asthma has only a minimal effect on pregnancy, pregnancy can have an effect on asthma. But the effect varies from expectant mom to expectant mom. For about a third of pregnant asthmatics, the effect is positive: Their asthma improves. For another third, their condition stays about the same. For the remaining third (usually those with the most severe form of the disease), the asthma worsens. Happily, no matter what pregnancy does to your asthma, your chances of having a healthy, safe pregnancy with well-controlled asthma are excellent.

conceived. Most allergists say it's not a good idea to start allergy shots during pregnancy because they may cause unexpected reactions.

In general, however, the best approach to dealing with allergies in pregnancy is prevention—which can be worth a pound of tissues this season. Steering clear of what causes your allergies may also reduce the risk that your baby will develop allergies to those triggers.

To ease the sneeze, try these tips:

- If pollens or other outdoor allergens trouble you, stay indoors in an air-conditioned and air-filtered environment as much as you can during your susceptible season. When you come indoors, wash your hands and face and change clothes to remove pollen. Outdoors, wear large curved sunglasses to keep pollens from floating into your eyes.

## Peanuts for Your Little Peanut?

**I**t's as American as the sandwich bread it's spread on—plus it makes a convenient and wholesome snack—but is peanut butter safe for the little peanut you're feeding in utero? Will eating it now cause your peanut to have a peanut allergy later?

Good news: The latest research suggests that eating peanuts while pregnant not only doesn't trigger peanut and other allergies in babies-to-be, but it may actually prevent them. So as long as you're not personally allergic to peanuts, there's no need to skip the Skippy—and maybe more reason than ever to reach for it.

Ditto for dairy products or other highly allergenic foods. If you're not allergic to them yourself (in which case you'd clearly want to steer clear), there's no reason to avoid any allergenic foods during pregnancy. Eating them will not trigger allergies in your little one.

That said, if you yourself have ever suffered from allergies, speak to your practitioner and an allergist about whether you should think about restricting your diet in any way while you're pregnant and/or breastfeeding. The recommendations may be slightly different for you.

- If dust is a culprit, make sure someone else does the dusting and sweeping (how's that for a good excuse to get out of housecleaning?). A vacuum cleaner (especially one with a HEPA filter), or a damp mop or sweeper kicks up less dust than an ordinary broom, and a microfiber cloth will do better than a traditional feather duster. Stay away from attics, basements, and other musty places.
- If animals bring on allergy attacks, keep your distance from cats and dogs. And of course, if your own pet is suddenly triggering an allergic response, try to keep one or more areas in your home (particularly your bedroom) pet-free.

## Vaginal Discharge

**"I've noticed a slight vaginal discharge that's thin and whitish. Does this mean I have an infection?"**

**A**thin, milky, mild-smelling discharge (known in the ob business

as leukorrhea) is normal throughout pregnancy. Its purpose is noble: to protect the birth canal from infection and maintain a healthy balance of bacteria in the vagina. Unfortunately, in achieving its noble purpose, leukorrhea can make a mess of your underwear. Because it increases as pregnancy progresses and may become quite heavy, you may be more comfortable wearing panty liners during the last trimester. Don't use tampons, which could introduce unwanted germs into the vagina.

Though it might make you feel a little icky and sticky (or possibly be a tad of a turn-off during oral sex), this discharge is nothing to worry about. Just keep yourself clean (daily showers or baths) and dry (choose panties with breathable cotton liners). One thing you don't need to do (and shouldn't): douche. Douching upsets the normal balance of microorganisms in the vagina and can lead to bacterial vaginosis (BV; see page 529). You also don't need feminine vaginal wipes, since the vagina does a pretty good job of keeping itself

clean. If you really can't live without that "fresh feeling," be sure to choose wipes that are pH safe, and free of alcohol and chemicals (changing the pH of your natural juices could increase the risk of infection). If you notice any unusual vaginal odors (fishy smelling, for instance), gray or green discharge, irritation, burning, or any other signs of infection (see page 529), be sure to tell your practitioner.

## Elevated Blood Pressure

**"My blood pressure was up a little bit at my last visit. Should I be worried?"**

**R**elax. Worrying about your blood pressure will only send the readings higher. Besides, a slight increase at one visit is probably nothing to worry about at all, and might have been just a temporary blip. Maybe you were stressed because you were caught in traffic on the way to your appointment or because you were having a bad day at work. Maybe you were just nervous—you were afraid you'd gained too much weight or not enough, or you had some strange symptoms to report, or you were eager to hear the baby's heartbeat. Or maybe just being in a medical office set you on edge, elevating your blood pressure in what's commonly dubbed "white coat hypertension." To make sure anxiety doesn't do a number on those numbers again, do some relaxation exercises and some deep breathing (see page 148) while you're waiting for your next appointment—and, especially, while your blood pressure's being taken (think happy baby thoughts).

Even if your blood pressure remains slightly elevated at your next reading, such transient high blood pressure (which about 1 to 2 percent of women develop during pregnancy) is

perfectly harmless and disappears after delivery (so you can still relax).

Most expectant mothers will see a slight drop in blood pressure readings during the second trimester as blood volume increases and the body starts working long hours to get that baby-making factory up to speed. But when you hit the third trimester, it usually begins to rise a bit. If it rises too much (if systolic pressure, the upper number, is 140 or more or the diastolic pressure, the lower number, is over 90) and stays up for at least 2 readings, your practitioner will monitor you more closely. That's because elevated readings in pregnancy sometimes increase cardiovascular risk later in life—but more relevant now, if it's also accompanied by protein in the urine, excessive swelling of the hands, ankles, and face, and/or severe headaches, it may turn out to be preeclampsia (see page 550).

## Sugar in the Urine

**"At my last office visit, the doctor said there was sugar in my urine, but that it wasn't anything to worry about. Isn't it a sign of diabetes?"**

**T**ake your doctor's advice—don't stress. Your body is probably doing just what it's supposed to do: making sure that fetus of yours, which depends on you for its fuel supply, is getting enough glucose (sugar).

The hormone insulin regulates the level of glucose in your blood and ensures that enough is taken in by your body cells for nourishment. Pregnancy triggers anti-insulin mechanisms to make sure enough sugar remains circulating in your bloodstream to nourish your fetus. It's a perfect idea that doesn't always work perfectly. Sometimes the anti-insulin effect is so strong that it leaves more than enough sugar in the

## FOR FATHERS

## It's Your Hormones (Really)

Think just because you're a guy, you're immune to the hormonal swings of pregnancy? Not so much. Research has revealed that expectant and new dads experience a drop in the famously male sex hormone testosterone and a surge in the famously female sex hormone estrogen. And these hormonal fluctuations, which are actually common across the animal kingdom, aren't random or a sign of Mother Nature's twisted sense of humor. It's speculated that they're designed to turn up the tenderness in males—to bring out a soon-to-be dad's nurturing side, and bring out the parent in him. Which doesn't only help prepare you for the diaper changing ahead, but helps you cope with the changes (including the

changes in the dynamics of your relationship) that you're both facing now.

These hormonal shifts may also contribute to some pretty strange and surprising pregnancy-like symptoms in dads-to-be (see page 162). What's more (or less), they may keep dad's libido in check (often a good thing, since a raging sex drive can sometimes be inconvenient during pregnancy—and definitely when there's a new baby in the house). Hormone levels typically return to normal within 3 to 6 months of baby's arrival, bringing with them an end to those pseudo pregnancy symptoms—and a return to libido business as usual (though not necessarily to sex life as usual until baby's sleeping through the night).

blood to meet the needs of both mom and baby—more than can be handled by the kidneys. The excess is “spilled” into the urine. So, “sugar in the urine” is not uncommon in pregnancy, especially in the second trimester, when the anti-insulin effect increases. In fact, roughly half of all pregnant women show some sugar in the urine at some point in their pregnancies.

In most women, the body responds to an increase in blood sugar with an increased production of insulin, which usually eliminates the excess sugar by the next office visit. This may well be the case with you. But some moms-to-be, especially those who are diabetic or have tendencies toward diabetes (because of a family history or because of their age or weight), may be unable to produce enough insulin at one time to handle the increase in blood sugar, or they may be unable to use the insulin they do produce efficiently. If that's the

case with you, you'll continue to show high levels of sugar in both blood and urine as your pregnancy progresses. If you weren't previously diabetic, this means you have developed gestational diabetes (see page 548).

You—like every pregnant woman—will be given a glucose screening test around the 28th week to check for gestational diabetes (those at higher risk, such as obese women, may be screened earlier). Until then, don't give the sugar in your urine another thought.

## Fetal Movement

**“I haven't felt the baby moving yet—could something be wrong? Or could I just not be recognizing the kicking when I feel it?”**

Forget that positive pregnancy test, the early ultrasound, that expanding belly, or even the lub-dub of a baby's heartbeat. Nothing says you're pregnant like fetal movement.

That is, when you finally feel it. And you're sure you felt it. However, few expectant moms, particularly first timers, feel the first kick—or even the first flutter—in the 4th month. Though an embryo starts making spontaneous movements by the 7th week, these movements, made by very tiny arms and legs, don't become apparent to mom until much later. That first flutter can be felt anytime between the 14th and 26th week, but most moms feel it closer to the average of 18 to 22 weeks. A mom expecting her second baby is likely to feel those early flutters sooner than a mom who's expecting her first, not only because she knows what a kick feels like, but because her looser uterine and abdominal muscles make it easier to feel a kick. A mom who's on the skinny side may notice early flutters, while one who's sporting lots of padding on her belly may not be aware of movements until they start packing more of a punch. The position of the placenta can also play a role: If it's facing front (an anterior placenta), it can muffle the movements and make the wait for those kicks weeks longer. Even then, the movements may feel weaker.

Sometimes, fetal movements aren't noticed when expected because of a miscalculated due date. Other times, mom doesn't recognize the movement when she feels it—she may mistake it for gas or other digestive gurgles.

So what do early movements feel like? They're almost as hard to describe as they are to recognize. Maybe it'll feel like a flutter (sort of like the “butterflies” you can get when you're nervous). Or a twitch. Or a nudge. Or even like the growling of hunger pangs. Maybe it'll feel like a bubble bursting—or that upside-down, inside-out sensation you get on a roller coaster. No matter what it feels like, it's bound to put a smile on your face—at least once you figure out for sure what it is.

## Body Image

**“I've always watched my weight—and now when I look in the mirror or step on a scale, I get so depressed. I feel so fat.”**

When you've watched your weight for so many years, watching the numbers on the scale creep up in a matter of weeks can be unnerving—and maybe a little depressing, too. But it shouldn't be. If there's one place where thin is never in, it's in pregnancy. You're supposed to gain weight when you're pregnant. And there's a very important difference between pounds gained from overeating (say, from too many midnight dates with Ben and Jerry) and pounds gained from making a baby.

In the eyes of most beholders, a pregnant woman's rounded silhouette is among the most sensuous of female shapes—beautiful not only on the inside, but on the outside as well. So instead of longing for the thinner old days (they'll be back, eventually), try getting on board with your expectant body. Embrace those new curves (which will become even more fun to embrace as they grow). Celebrate your new shape. Relish being rounder. Enjoy the pounds you pack on, instead of dreading them. As long as you're eating well and not exceeding the recommended guidelines for pregnancy weight gain, there's no reason to feel “fat”—just pregnant. The added inches you're seeing are all legitimate by-products of pregnancy, and they're temporary. The baby will be a keeper, for sure—but the extra inches won't be.

If you are packing on too many pounds too fast, feeling down probably won't keep your weight from climbing ever higher—and if you're a typical estrogen producer, will only send you to the freezer for that vat of vanilla more often. But taking a good look at your eating habits might. Remember, the idea



isn't to stop the weight gain (your baby needs that weight to grow)—only to slow it down to the right rate if it's adding up a little too quickly. To do that, become more efficient in your eating—for instance, instead of digging into a pint of ice cream to score some calcium, sip a strawberry smoothie (you'll get far more calcium, far fewer calories, plus a bonus of vitamin C).

Watching your weight gain isn't the only way to give your image an edge. Exercise will definitely help, too, by ensuring that the weight you do gain ends up in all the right places (more belly, less hips and thighs). Another workout plus: It'll give you a mood lift (it's hard to host a pity party when you've got an exercise-induced endorphin high going).

Being maternity fashion-forward can also help you make friends with your mirror. Instead of trying to squeeze into your civilian wardrobe (nothing flattering about the mommy muffin-top look, especially when buttons keep popping), choose from the vast selection of creative maternity styles that accentuate the pregnant shape, rather than trying to hide it. You'll like your mirror image better, too, if you get a hairstyle that's slimming, pamper your complexion, and experiment with new makeup routines (the right techniques can take pounds off your pregnancy-rounded face; see page 152).

Most of all, remember that the body that's reflected in your mirror is working hard making a baby. And what could be more beautiful than that?

## Maternity Clothes

**"I can't squeeze into my regular clothes anymore, but I dread buying maternity clothes."**

There's never been a more styling time to be pregnant. Gone are the days when pregnancy wardrobes were

limited to polyester pup tents intended to keep the pregnant shape under cover. Not only are today's maternity clothes a lot more fashion-forward and practical to wear, but they're designed to hug (and highlight) your beautiful baby-filled belly. Visit a nearby maternity store (or shop one online) and you'll likely be filled with excitement instead of dread.

Here are some tips to consider when clothes shopping for two:

- You still have a long way to grow. So don't set off on a spending spree on the first day you can't button your jeans. Maternity clothes can be costly, especially when you consider the relatively short period of time they can be worn. So buy as you grow, and then buy only as much as you need. Though the pregnancy pillows available in maternity store dressing rooms can give a good indication of how things will fit later, they can't predict how you will carry (high, low, big, small) and which outfits will end up being the most comfortable when you crave comfort most.
- You're not limited to maternity clothes. If it fits, wear it. Buying non-maternity clothes for maternity use (or using items you already own) is, of course, the best way to avoid investing a fortune on outfits you'll wear only briefly. And depending on what the stores are showing in a particular season (hopefully the look will be flowy and drapery), anywhere from a few to many of the fashions on the regular racks may be suitable for pregnant shapes—though you may need to size up. Still, be wary of spending a lot on such purchases. Though you may love the clothes now, you may love them considerably less after you've worn them throughout your pregnancy. Plus, if you've bought them on the big side, they may not fit once you've shed your baby fat.

## Trimming Tricks

**B**ig is beautiful when you're expecting, but that doesn't mean you can't try some tricks of the trim. With the right fashion choices, you can highlight your baby-licious bump while slimming your overall silhouette. Here's how to show in all the right places:

**Make black a basic.** And navy blue, chocolate brown, deep purple, dark maroon, or charcoal. You've heard this before, but dark colors are slimming, minimizing body bulk and giving you an overall trimmer appearance, even if you're wearing a t-shirt and yoga pants.

**Think monotone.** One color fits all—or at least looks slimmer. Sticking to a single hue (or to one color with slight variations) from top to bottom will make you look longer and leaner. A two-tone look, however, will create a break in your figure, causing the eye to stop right at the color change (and possibly right where your hips start spreading).

**Be picky with prints.** Tired of the monotone and want to add some pattern to your life? Choose a print that's just the right size. Too small and you'll look large, too large and you'll look even larger. Aim for a print that's midsize—about the size of a golf ball—to get it just right. And look for prints that have only 2 or 3 colors. More just makes, well, more.

**Go long.** It's the oldest trick in the

fashion book, but for good reason—it works. As you widen, choose clothes with vertical lines (which create height and give you a leaner look) instead of horizontal lines (which widen you even further). Look for clothes with vertical stripes, vertical zippers, vertical stitching, and vertical rows of buttons. Go vertical with jewelry and accessories, too: a low-hanging necklace, mega-dangling earrings, an extra long scarf.

**Focus on the pluses.** Like those probably plus-size breasts of yours (there's never been a better time to spotlight your cleavage). And minimize attention to the spots that you might be less inclined to want to show off, such as those swollen ankles (keep them under pants, long flowing skirts, or comfortable boots, or wear slimming black tights or leggings).

**Stay fit.** With your clothes, that is. While you'll definitely want clothes that have room to grow in the bust and the belly, look for tops—shirts, sweaters, jackets, and dresses—that fit you well in the shoulders (probably the only part of your body that won't be widening). Hanging shoulders will give you a sloppy (and bulky) look. And though clinging can be slimming, watch out for clothes that are so clingy they appear too tight—like you've outgrown them (which you probably have). The overstuffed sausage look is never in style, after all.

- You've got it, so flaunt it. Bellies are out of the closet—and out from under those mama muumuus. Most maternity clothes celebrate the pregnant bump (and the more voluptuous rump) with clingy fabrics and snug-fitting styles (say, in a wrap dress, instead of under wraps). And that's something to celebrate, since

belly-accentuating maternity wear actually slims your silhouette down. Not crazy about the cling? Long, flowing maxidresses are comfortable and easy-to-wear options, too, especially as your belly grows. Another great option: low-rise jeans and pants that can be worn under your belly. A low rise is also elongating because it

doesn't cut you off in the middle (and what expectant mom couldn't use a little elongating?).

And talking about flaunting what you've got, pick a body part that you feel most comfortable with (let's say your arms or legs . . . or cleavage) and choose clothes that highlight that great asset (or butt) of yours.

- Dip into his dresser. It's all there for the taking (though it's probably a good idea to ask him first): over-size shirts that look great over pants or leggings, sweatpants that accommodate more inches than yours do, running shorts that will keep up with your waistline for at least a couple more months, belts with the few extra notches you need. Keep in mind, though, that by the 6th month (possibly a lot sooner), no matter how big your man is around the middle, you're likely to outgrow him and his clothes.
- Both a borrower and a lender be. Accept all offers of used maternity clothes, as long as they fit. In a pinch, any extra dress, skirt, or pair of jeans may do—you can make any borrowed item your own with accessories. When your term is over, offer to lend those maternity outfits you bought and can't or don't want to wear postpartum to newly pregnant friends. Between you and your friends, you'll be getting your money's worth.
- Be a renter, too. Have a wedding or other formal event to attend and don't feel like shelling out the big bucks for a one-night-only maternity ensemble? Consider renting it from one of the growing number of maternity clothing rental services (some moms even rent their entire maternity wardrobes!).
- Don't overlook those accessories the public never sees. A well-fitting, supportive bra should be your bosom

buddy during pregnancy, especially as that bosom expands . . . and expands. Skip the sale racks and put yourself in the hands of an experienced fitter at a well-stocked lingerie department or shop. With any luck, she will be able to tell you approximately how much extra room and support you need and which kind of bra will provide it. But don't stock up. Buy just a couple, and then go back for another fitting when you graduate to the next cup.

Special maternity underwear isn't usually necessary, but if you do decide to go that route, you'll probably be relieved to find that it's a lot sexier than it used to be (goodbye granny panties, hello thongs and bikinis). You can also opt for regular bikini panties—bought in a larger-than-usual size if you need the room—worn under your belly. Buy them in favorite colors and/or sexy fabrics to give your spirits a lift (but make sure the crotches are cotton).

- Cotton is cooler. Hot stuff (fabrics that don't breathe, such as nylon and other synthetics) isn't so hot when you're pregnant. Because your metabolic rate is higher than usual, making you feel warmer than usual, you'll feel more comfortable in cotton. You'll also be less likely to get heat rash (a common complaint among the pregnant set). Knee highs or thigh highs will also be more comfortable than tights or panty hose, but avoid those that have a narrow constrictive band at the top. If you do tights, opt for cotton (yes, even support hose come in cotton). Light colors, mesh weaves, and looser fits will also help you keep your cool in warm weather. When the weather turns cold, dressing in layers is ideal, since you can selectively peel off as you heat up or when you go indoors.

## Unwanted Advice

**"Now that it's obvious I'm expecting, everyone—from my mother-in-law to strangers on the elevator—has advice for me. It drives me crazy."**

There's just something about a bulging bump that brings out the so-called expert in everyone—and breaks down social barriers that usually keep strangers minding their own business. Take your morning jog around the park and someone is sure to chide, "You shouldn't be running in your condition!" Lug home 2 bags of groceries from the supermarket and you're bound to hear, "Do you think you should be carrying that?" Double dip at the ice cream shop, and expect the fingers to start wagging: "That baby fat's not going to be easy to lose, honey."

Between the pregnancy police, the gratuitous advice-givers, and all those inevitable predictions about the sex of the baby, what's an expectant mother to do? First of all, keep in mind that most of what you hear is probably nonsense. Old wives' tales that do have foundation in fact have been, for the most part scientifically substantiated and have become part of standard medical practice. Those that do not might still be tightly woven into pregnancy mythology but can be confidently dismissed. Those recommendations that leave you with a nagging doubt ("What if they're right?") are best checked out with your doctor, midwife, or childbirth educator.

Whether it's possibly plausible or obviously ridiculous, however, don't let unwanted advice get you going—who needs the added stress anyway? Instead, keep your sense of humor handy and try one of these approaches: Politely inform the well-meaning stranger, friend, or relative that you have a trusted practitioner who counsels you on your pregnancy

and that, even though you appreciate the thought, you can't accept advice from anyone else. Or, just as politely, smile, say thank you, and go on your way, letting their comments go in one ear and out the other—without making any stops in between.

But no matter how you choose to handle unwanted advice, you might also want to get used to it. If there's anyone who attracts a crowd of advice-givers faster than a woman with a belly, it's a woman with a new baby.

## Unwanted Belly Touching

**"Now that I'm showing, everyone—even people I barely know—comes up to me and touches my belly, without even asking. I find that kind of creepy."**

They're round, they're cute, and they're filled with something even cuter. Let's face it, pregnant bellies just scream out to be touched, and they often are—usually without permission. And that's just fine with some moms-to-be, who don't mind being the center of so much touching attention—or even enjoy it. Still, bottom line: your belly, your business. It may take a village, after all, but bumps aren't the communal property some people view them as—and bellies can (and should) have borders. If the uninvited rubbing is rubbing you the wrong way, you have every right to head off those hands headed toward your bump.

You can do this bluntly (if politely): "I know you find my belly tempting to touch, but I'd really rather you didn't." Or playfully: "No touching, please—the baby's sleeping!" Or, you can try turning the tummy tables, rubbing the rubber right back (patting someone's paunch might make him or her think twice before touching another pregnant

belly without permission). Or make your statement without saying a word: Cross your arms protectively over your bump, or take the rubber's hand off your midsection and place it somewhere else (like on his or her own belly).

## Forgetfulness

**"Last week I left the house without my cell phone. This morning I completely forgot an important appointment. I can't focus on anything, and I'm beginning to think I'm losing my mind."**

You're in good (forgetful) company. Many moms-to-be begin to feel that as they're gaining pounds, they're losing brain cells. Even women who usually manage to micromanage to the max, stay focused and organized in the face of chaos, and cope with (no, crush!) whatever a day sends their way, suddenly find themselves forgetting appointments, missing meetings, losing their train of thought (along with their cool . . . and their wallets and cell phones). And this pregnancy forgetfulness isn't in their heads—it's in their brains. Researchers have found that a woman's brain-cell volume actually decreases during pregnancy (which could explain why you won't remember what you just read in that last paragraph). And—for reasons as yet unexplained—moms expecting girls are more forgetful, on average, than those carrying boys. Fortunately, this pregnancy brain fog (similar to what many women experience with PMS, only thicker) is only temporary. Your brain will plump back up a few months after delivery.

Like most pregnancy symptoms, pregnancy forgetfulness (often dubbed "placenta brain" or "pregnancy brain") is hormonally triggered. Sleep deprivation can also play a role (the less you sleep, the less you remember), as can

the fact that you're constantly low on energy—energy your brain needs to stay focused. Also contributing to your scatterbrained self: the mom-to-be mind overload that's keeping all brain circuits busy.

Feeling stressed about this intellectual foggy feeling will only make it worse (stress also compounds forgetfulness). Recognizing that it is normal (and not imagined), even accepting it with a sense of humor, may help to ease it—or, at least, make you feel better about it. Realistically, it might just not be possible to be as efficient as you were before you took on the added job of baby making. Keeping checklists on your smartphone (along with reminder alarms) can help contain the mental chaos—that is, if you can remember where you put your phone last. Set electronic reminders of important dates and appointments, and tap into the What to Expect app. Strategically placed post-its (one on the front door to remind you to take your keys, for instance) can also help keep you on track.

Although ginkgo biloba has been touted for its memory-boosting properties, it's not considered safe for use during pregnancy, so you'll have to forget about using that and any other herbal preparation in your battle against pregnancy-induced forgetfulness. You may find more focus, though, from regular infusions of protein and complex carbs—in the form of those maxi-sustaining mini-meals. Low blood sugar caused by too-long stretches between eating (and eating well) can definitely contribute to that foggy feeling.

And you might as well get used to working at a little below peak efficiency. The fog may well continue after your baby's arrival (because of fatigue, not hormones) and perhaps may not lift completely until baby (and you) start sleeping through the night.

ALL ABOUT:

## Working Out When You're Expecting

You're aching and you can't sleep and your back is killing you and your ankles are swelling and you're constipated and bloated and you're passing more gas than a busload of high school football players who just stopped for fast food. In other words, you're pregnant. Now, if only there were something you could do that might minimize the

aches and pains and unpleasant side effects of pregnancy.

Actually, there is, and it'll take just minutes (make that 30 minutes) a day: exercise. Thought pregnancy was a time to take it easy? Not anymore. Lucky for you (or unlucky, if you're a member of the couch potato club), the official advice of ACOG reads like a personal

### Your Main Squeeze

Looking for a workout that you can do anytime, anywhere (on the sofa, at your desk, in line at the supermarket, sitting in traffic, eating lunch, browsing baby sites, even while you're having sex)—without heading to the gym or breaking a sweat?

Say hello to the Kegel—an exercise that works out one of the most important sets of muscles in your body: your pelvic floor muscles. Never thought much about your pelvic floor muscles—or maybe never even realized you had them? It's time to start paying attention. They're the muscles that support your uterus, bladder, and bowels, and they're designed to stretch so your baby can come out. They're also the muscles that keep your urine from leaking when you cough or laugh (a skill set you're likely to appreciate only when it's gone, as can happen with postpartum incontinence). These multitasking muscles can also make for a much more satisfying sexual experience.

Luckily, Kegels can easily whip those miracle muscles into shape with minimal time and minimal effort. Just 5 minutes of Kegels, 3 times a day, and you'll tone your way to a long list of

both short- and long-term benefits. Toned pelvic floor muscles can ease a host of pregnancy and postpartum symptoms from hemorrhoids to urinary and fecal incontinence. They can help you prevent an episiotomy or even a tear during delivery. Plus, doing your Kegels faithfully during pregnancy will help your vagina snap back more gracefully after your baby's grand exit (and even if you end up having a c-section).

Ready to Kegel? Here's how: Tense the muscles around your vagina and anus and hold (as you would if you were trying to stop the flow of urine), working up to 10 seconds. Slowly release and repeat; shoot for 3 sets of 20 daily. Keep in mind when you Kegel that all your focus should be on those pelvic muscles—and not any others. If you feel your stomach tensing or your thighs or buttocks contracting, your pelvis aren't getting their full workout. Make Kegels your main squeeze during pregnancy, and you'll reap the benefits of stronger pelvic floor muscles for a lifetime. Try doing them during sex, too—both you and your partner will feel the difference (now, that's a workout you can get excited about!).



trainer's pep talk: Women with normal pregnancies should get 30 minutes or more a day of moderate exercise on most (if not all) days.

And barring any activity restrictions from your practitioner, you can, too. It doesn't matter whether you started out as an iron woman in peak physical condition or a sofa slacker who hasn't laced up sneakers since your last gym class (except as a fashion statement). There are plenty of perks to exercising for two.

## The Benefits of Exercise

So what's in it for you? Regular exercise can help:

- **Your stamina.** It seems counterintuitive, but sometimes getting too much rest can actually make you feel more tired. A little exercise can go a long way when it comes to giving your energy level the boost it needs.
- **Your sleep.** Many pregnant women have a hard time falling asleep (not to mention staying asleep), but those who exercise consistently often sleep better and wake up feeling more rested. Just don't work out right before bed.
- **Your health.** Exercise, especially when teamed with reasonable weight gain and a healthy diet, may prevent gestational diabetes, a growing problem among pregnant women.
- **Your mood.** Exercise causes your brain to release endorphins, those feel-good chemicals that give you a natural high—improving your mood, diminishing stress and anxiety.
- **Your back.** A strong set of abs is the best defense against back pain, which bothers many pregnant women. But

even exercise that's not directly targeting the tummy can also relieve back pain and pressure. An example: Swimming or water aerobics can be the perfect prescription for pregnancy back pain (sciatic pain, too).

- **Your (tense) muscles.** Stretching does your body good—especially a pregnant body, which is more prone to muscle cramps in the legs (and elsewhere). Stretching can help you uncover little pockets of tension, warding off sore muscles. Plus you can do it anywhere, anytime—even if you spend most of your day sitting down—and you don't even have to break a sweat.
- **Your bowels.** An active body encourages active bowels. Even a 10-minute stroll helps get things going. Kegels can, too (see box, page 229).
- **Your labor.** Though exercise during pregnancy can't guarantee that you'll race through childbirth, moms who exercise tend to have shorter labors and are less likely to need labor and delivery interventions (including c-sections).
- **Your postpartum recovery.** The more fit you stay during pregnancy, the faster you'll recover physically after childbirth (and the sooner you'll be zipping up those skinny jeans again).

What's in it for baby? Plenty. Researchers theorize that changes in heart rate and oxygen levels in exercising moms-to-be stimulate their babies. Babies are also stimulated by the sounds and vibrations they experience in the womb during workouts. Exercise regularly during pregnancy, and your baby might end up being:

- **More fit.** On average, babies of moms who exercise during pregnancy are

## Working in Workouts

**Y**our mission when it comes to exercise during pregnancy, should you choose to accept it (and there are lots of reasons why you should), is to work your way up to 30 minutes of some sort of activity a day. And if that sounds daunting, keep in mind that three 10-minute walks or even six 5-minute mini-workouts sprinkled throughout the day are just as beneficial as 30 minutes on the treadmill. (See, it's not as hard as it sounds.)

Still not convinced that you have the time? To make your mission possible, try thinking of exercise as part of your day—like brushing your teeth and going to work—and build it into your routine (that's how it becomes routine, after all).

If there's no place in your schedule to block out gym time, just incorporate exercise into your daily activities: Get off the bus 2 stops from the office, and walk the rest of the way. Park your car in a faraway spot at the mall instead of cruising for the closest (and while you're at the mall, take a few extra laps around—those count, too). Take a brisk

walk to the deli instead of ordering in your sandwich. Use the stairs instead of the elevator. Walk up the escalator instead of going along for the ride. Use the restroom that's farther away instead of the one across the hall.

Have the time but lack the motivation? Find it in a pregnancy exercise class (the camaraderie will help cheer you on) or by exercising with a friend (form a lunchtime walking club or hit the hiking trails with your buds on Saturdays before your weekly brunch). Just plain bored with your workouts? Switch it up—try pregnancy yoga if you're tired (literally) of running, or swimming (or water aerobics) if the stationary cycle is getting you nowhere. Find your exercise excitement in a pregnancy workout video.

Sure, there'll be days (especially in those fatigue-prone first and third trimesters), when you're too pooped to lift your legs off the coffee table, never mind actually do leg lifts. But there's never been a better time, or better reasons, to get yourself moving.

born at healthier weights, are better able to weather labor and delivery (they're less stressed by it), and recover from the stresses of birth more quickly. And since a baby's heart rate gets pumped up as his or her mom pumps up, it's as if the baby is also getting a cardio workout, which may result in a healthier heart later in life.

- Smarter. Believe it or not, research shows that babies of moms who exercise throughout pregnancy score higher, on average, on IQ tests by age 5 (meaning that your workout may boost both your muscle power and baby's brain power!).

- Easier. Babies of pregnant exercisers, on average, tend to sleep through the night sooner, are less prone to colic, and are better able to soothe themselves.

## Exercising the Right Way

**N**ot only does your pregnant body not fit into your regular workout clothes anymore—it may not fit into your regular workout routine, either. Now that you're exercising for two, you'll need to make doubly sure you're exercising the right way. Here are some

## Exercise Smarts

**E**xercising with a baby on board? Remember to use your exercise smarts:

- Replenish fluids. For every half hour of moderate activity, you will need at least a full glass of extra liquid to compensate for fluids lost through perspiration. You will need more in warm weather or whenever you're sweating a lot. Drink before, during, and after exercising—but no more than 16 ounces at a time. It's a good idea to start your fluid intake 30 to 45 minutes before your planned workout.
- Bring on the snacks. A light but sustaining before-workout snack will help keep your energy up. Follow up with a light snack, too, especially if you've burned a lot of calories. You'll have to consume about 150 to 200 additional calories for every half hour of moderate exercising.
- Stay cool. Any exercise or environment that raises a pregnant woman's temperature more than 1.5 degrees

should be avoided (it causes blood to be shunted to the skin and away from the uterus as the body attempts to cool off). So stay out of saunas, steam rooms, or hot tubs, and don't exercise outdoors in very hot or humid weather or indoors in a stuffy, overheated room (no Bikram or hot yoga). If you generally walk outdoors, try an air-conditioned mall instead when the temperature soars.

- Dress for exercise success. Play it cool by wearing loose, breathable, stretchable clothes. Choose a sports bra that provides plenty of support for your probably bigger breasts but doesn't pinch once you get moving.
- Put your feet first. If your sneakers are showing their age, replace them now to minimize your chances of injury or falls. And make sure you choose workout shoes that are designed for the sport you're pursuing.
- Select the right surface. Indoors, a wood floor or a tightly carpeted

pointers, whether you're a gym junkie or a Sunday stroller:

**The starting line is the practitioner's office.** Before you lace up your sneaks and hit the cardio class, make a pit stop at your practitioner's office for the workout green light. You'll almost certainly get it—most women do. But if you have any medical or pregnancy complications, your practitioner may limit your exercise program, nix it entirely, or—if you have or are at increased risk for gestational diabetes—even encourage you to exercise more. Be sure you're clear about what exercise programs are appropriate

for you and whether your normal fitness routine (if you have one) is safe to continue while you're expecting. If you're in good health, your practitioner will likely encourage you to stick with your regular routine as long as you feel up to it, with certain modifications (especially if your regular routine includes pregnancy-taboo sports, like ice hockey).

**Respect your body as it changes.** Expect your routines to change as your body does. You'll need to modify your workouts as your sense of balance shifts, and you'll probably also have to slow down to avoid taking a spill (especially