Healthy Lifestyle Choices

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Healthy Lifestyle Choices

You probably have many questions and concerns ranging from childbirth options to your health while you are pregnant to how to be a good parent. All of these are perfectly normal. The best source of guidance and information during your pregnancy is your doctor and his or her trained staff of professionals.

Remember that the Women & Infants’ Center staff is just a phone call away to help you register for any classes, help find a physician or answer any health-related questions. Call our dedicated Women & Infants’ Center line at (515) 643-MOMS. This line gives you a direct connection to our labor and delivery nurses, newborn nursery, lactation consultants and our Neonatal Intensive Care Unit.

This chapter gives you some suggestions to help guide you through a successful pregnancy and offers ways to relieve some of its discomforts.

Stop Smoking Immediately

When you smoke, toxins are fed to your baby through your blood stream. According to the Centers for Disease Control (CDC), women who smoke during pregnancy are at higher risk for premature birth, pregnancy complications, low-birth weight infants, stillbirth and a higher rate of infant mortality. For pregnant women and new mothers, smoking puts the baby at risk of Sudden Infant Death Syndrome (SIDS), poor lung development, asthma and respiratory infections. In 1987, the CDC estimated that medical cost of a complicated birth for smokers was nearly twice that of non-smokers. Classes to help you quit smoking are offered through Mercy Medical Center. Please call the Mercy Nurse for a current schedule of smoking cessation classes.

Alcoholic Beverages

Just like smoking, when you drink, so does your baby. Drinking alcohol during pregnancy puts your baby at serious risk of fetal alcohol syndrome, a birth defect that causes irreversible physical, mental and/or behavioral problems for life. There is no “safe amount” of alcohol known for preventing this birth defect, but experts agree the more you drink, the greater the risk becomes.

Medications and Illegal drugs

Any illegal substance can have harmful, if not fatal, effects on you and your baby. Only take medications (both prescription and over-the-counter) approved by your physician. This includes prenatal vitamins as recommended by your physician.
Prenatal Care

Be sure to keep all appointments with your physician. Your physician will help monitor your pregnancy and the proper development of your baby. Use this book as an appointment calendar and diary during your pregnancy.

Take Folic Acid

The U.S. Public Health Service recommends that all women who are, or could become pregnant get 400 micrograms of folic acid every day. This could prevent up to 70 percent of some types of serious birth defects. Because the baby’s vital organs develop within the first trimester, it is essential that folic acid be taken before and early in the pregnancy. If women have enough of it in their bodies before pregnancy, this vitamin can prevent birth defects of the baby’s brain or spinal cord. Spina bifida, a birth defect meaning “open spine,” can cause deformities of the feet, paralysis of the lower body and learning disabilities. Some studies show that folic acid also may help to prevent cleft lip and cleft palate.

Folic acid is a B vitamin found mainly in orange juice, green leafy vegetables, beans, peas, fortified cereals and enriched grains such as pasta and breads. However, to be sure you are getting your 400 mg a day, a daily multi-vitamin containing folic acid is also recommended.

Nutrition

Eating a well balanced diet will help keep you and your baby healthy. Your baby needs many nutrients to grow and develop, and you provide them through your food choices. Some of the benefits you may expect if you eat a balanced diet before pregnancy and during pregnancy include:

• Improved health during pregnancy
• Less danger of complications
• A safer delivery
• Better health following childbirth
• A better chance to breastfeed your baby successfully

Your baby will benefit through:

• Better growth and development
• Better health at birth and during infancy

It is recommended that you avoid skipping meals to maintain a constant source of nourishment. Also, reduce your caffeine consumption and drink plenty of fluids,
especially pure water. Adequate fluids are beneficial for better health while helping to prevent urinary tract infection and pre-term labor. If you would like more information on a proper diet during pregnancy, nutritional consultants are available through Mercy. To schedule a consultation with a Mercy Registered Dietitian call (515) 247-4336.

**Weight Gain**

A weight gain during pregnancy of 25 to 35 pounds is recommended to assure a healthy baby. You should not use this time to overeat, but rather select your diet with care. Foods should have a high nutritional value with a reasonable caloric content. Intake should be increased by about 300 calories each day, but excess of sugar and fat should be avoided. *Never try to diet while pregnant, you are your baby’s only source of nutrition.*

**Protein**

You need an additional 10 grams of good quality protein for a total of about 60 grams per day. Lean meats, poultry, fish, eggs, milk, cheeses and legumes are all good sources of protein.

**Calcium**

Extra calcium is necessary in the formation of the baby’s skeleton for muscle contraction, coagulation of blood and a strong heart beat. The recommended daily allowance for calcium is 1200 mg per day. Choose foods from the dairy group such as milk and cheese. If your calcium intake is inadequate, the fetus will deplete your calcium stores, which can be detrimental to your health.

**Iron**

Iron is necessary for the baby’s blood to form new hemoglobin. The fetus will store iron for future use during the first three to six months after birth. Recommended daily intake should be 30 mg, but often this is not met by the diet. Therefore, prenatal vitamins are recommended during pregnancy and should be continued for several months after delivery.

**Salt**

If your physician recommends that you limit salt, follow his or her direction closely. Keep in mind that salt is frequently added in cooking as well as at the table. The following foods are high in salt content: bacon, ham, chips, snack crackers, popcorn, pickles and olives.
Take Care of your Body

It is important that you take care of your body and listen to its signs.

- Rest when you are tired. Your body is working extra hard during this time and occasionally needs to recharge during the day.
- Drink plenty of fluids, such as water and juices. Extra fluids will help your hard working kidneys and keep your baby hydrated. And believe it or not, proper hydration actually reduces water retention in your body. (Coffee, soda pop and other caffeinated beverages dehydrate the body.)

Protecting and Strengthening Your Back

- When bending down, bend at the knees not your waist. This will alleviate stress on your back.
- When you lift, be sure that your feet are approximately shoulder width apart. This will help you maintain your balance and give you stronger motion with your leg muscles.
- Always lift with your knees and legs, do not use your back muscles.

Fetal Kick Counts

Most moms begin to feel their baby’s kicks and movement by the 20th week of pregnancy. The movement and kicking continues to be felt up until the time of delivery. Be recording a count of the number of times your baby kicks or moves, you can help look out for the health of your baby. This is often referred to as kick counts.

The Count-to-Ten Method

Beginning at 28 weeks of pregnancy or anytime thereafter, count fetal movements each day during roughly the same time period. The method consists of timing how long it takes for your baby to move 10 times. See chart below:

<table>
<thead>
<tr>
<th>Date</th>
<th>Starting Time</th>
<th>Record of Movements</th>
<th>Time of 10th Movement</th>
<th>Total Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-24</td>
<td>6 p.m.</td>
<td>/// ///</td>
<td>6:55 p.m.</td>
<td>55 Minutes</td>
</tr>
</tbody>
</table>

What do the kick counts tell me?

If your baby clearly takes longer time to reach ten movements or there is a significant reduction in a 12 hour period, call your doctor.
Kegel Exercise

These exercises may seem awkward at first, but during pregnancy, your pelvic muscles are working very hard to support your body changes, especially the extra weight of your pregnancy. Kegel exercises, named for Dr. Arnold Kegel, identify and strengthen your pelvic floor muscles in preparation for delivery. Strong pelvic floor muscles will assist you in labor, but are also very important during your pregnancy as they protect and support the hard-working muscles of your lower pelvis, such as your uterus and bladder. Therefore, strengthening these muscles will also help with bladder incontinence (involuntary leakage of urine, often when sneezing, laughing, coughing or lifting heavy objects).

To identify your pelvic floor muscles, when urinating, try to stop and start your urine flow. These are the muscles that you need to strengthen by doing your Kegel exercises. Although stopping your urine flow is the best way to identify these muscles, do not use this technique often or for practicing your Kegels. It can cause bladder infections if done regularly.

Because doing these exercises is discreet, and you will not work up a sweat, you can do them at anytime during the day, and no one else has to know. To help you remember to do your exercises, try doing them during daily activities, such as brushing your teeth, or in the car waiting at a stoplight.

**KEGEL EXERCISE:** Tighten the pelvic floor muscles and hold for 10 seconds (if you are not able to hold it for the full 10 seconds, start with three seconds and gradually work up to 10). Relax for 10 seconds between exercises. When you are able to hold the Kegel exercise for 10 seconds, work up to holding it for 20 seconds or more.

**REPETITION:** Try to do at least ten Kegel exercises spread throughout the day. Get the exercise your doctor recommends. Mercy Medical Center offers prenatal exercise classes focusing on conditioning, strengthening and relaxation exercises. Call the Mercy Wellness Center at (515) 247-3066 for more information.

*These are intended as general guidelines. Please talk to your physician about nutrition, exercise and all other health issues during your pregnancy.*

Potential Hazards During Pregnancy

While you are pregnant it is especially important that you be aware of potential hazards around you. These may be found in your home or where you work. If you are exposed to any of these dangers, especially chemicals, you should write down their specific names and talk to your doctor as soon as possible.
X-rays
Exposure to X-rays can slow your baby’s growth and cause other problems.

Chemicals (workplace, household and garden)
Chemicals that give off any fumes, such as paint, cleaning fluids, gasoline and varnish can be dangerous. It is advisable to have someone else do any jobs that involve chemicals that can be breathed while you are pregnant.

Lead
Lead poisoning is a danger to you at any time, but it is important to be especially mindful of it while you are pregnant. Lead can be found in lead paint, lead crystal and tap water. If you are concerned with lead in your home, ask your physician about a lead test.

Soiled cat litter
Changing the litter in your cat’s box may put you at risk of disease that can cause birth defects. Although you need not avoid the cat, you should avoid any contact with cat feces. Ask someone else to handle this chore while you are pregnant. Also, if you will be working in soil that could have cat feces in it, wear gloves to protect yourself.

Sexually Transmitted Diseases
Sexually transmitted diseases, or STDs, can mean serious problems for both you and your baby. Certain STDs can be passed to your baby during pregnancy, birth and through breastfeeding. This includes HIV, the virus that causes AIDS.

Ways STDs can be spread
• Sexual intercourse with an infected person
• Sharing needles with an infected person (needles can be used to shoot drugs, make tattoos or pierce body parts)

Testing is the only way to know for sure if you have an STD. Early treatment is available, and can prevent you and your baby from getting sick, and maybe even save your lives.

The deadliest STD is AIDS. Other common STDs are syphilis, gonorrhea, chlamydia, genital herpes and genital warts.
Alleviating Discomfort During Pregnancy

Along with all of the joy and excitement during pregnancy comes discomfort. Listed below are some common discomforts and ways to help alleviate them.

**Nausea (morning sickness)**
- Eat dry toast or crackers
- Eat several smaller meals throughout the day instead of three big ones
- Avoid unpleasant smells
- Get plenty of rest
- Get out of bed slowly, sit for a few moments before standing
- Talk to your physician if nausea and vomiting are excessive

**Backaches**
- Do back strengthening exercises and pelvic tilts
- Don’t lift heavy objects
- Lift with your legs, not your back
- Wear low-heeled shoes
- Use good posture when sitting and standing
- Have your partner give you a back massage
- Exercise regularly, with your physician’s approval

**Heartburn**
- Eat several smaller meals
- Avoid spicy, fatty or acidic foods
- Don’t lie down right after eating
- Walk after meals
- Use antacids, with your physician’s approval

**Fatigue**
- Avoid caffeine
- Take a short nap in the afternoon, if possible
- Rest when you feel tired

**Constipation and Hemorrhoids**
- Drink at least eight glasses of water every day
- Eat whole grains, and fresh fruits and vegetables everyday
- Urinate when you feel the need
- Avoid over the counter laxatives, unless recommended by your physician
- Exercise regularly, with your physician’s approval
- Avoid straining during a bowel movement or sitting on the toilet for long periods
Varicose veins, swollen hands, feet and ankles

• Wear support hose and comfortable shoes
• Elevate your legs
• Avoid standing or sitting for long periods in one position
• Drink more water
• Avoid wearing high-heeled shoes

Frequent urination

• Avoid drinking within an hour of bedtime
• Do not limit your fluid intake

Breathlessness

• Stand or sit up straight
• Lie back with your head and upper back supported on pillows

Tests During Your Pregnancy

Even if your pregnancy is proceeding smoothly, your prenatal physician may ask you to take a test or two during the last three months of pregnancy, just to be sure your baby is all right.

When having any test done, make sure you understand why the test is being done and what its result may be. Don’t hesitate to ask about:

1. The cost of the test in terms of time, money and risk to the baby
2. The reliability of the results
3. The impact of the results on your pregnancy

Some of the tests you might be asked to undergo include:

HEMATOCRIT AND HEMOGLOBIN – Basic blood tests designed to make sure you have enough iron in your blood.

URINE DIPSTICK – Usually performed at every prenatal visit. A strip of chemically treated paper is dipped into a urine sample to determine if the urine contains such substances as blood, protein or sugar - any of which may be cause for concern.

NON-STRESS TEST – The non-stress test is performed to determine how well the placenta is supplying oxygen to the baby through blood circulation and how the baby is coping within the uterus. The test is done either at the doctor’s office or as an outpatient in the Maternity Triage and Treatment Unit at the hospital.
The non-stress test is ordered when conditions such as diabetes or pre-eclampsia are present. It may also be ordered if you are overdue, have had complications with this or previous pregnancies, or are experiencing decreased fetal movement.

For this procedure, you will be positioned either in a reclining chair or on a bed. An external fetal monitor will be applied to your abdomen using elastic belts. The monitor will register and record your baby’s heart rate and any uterine activity that you might be experiencing. The heart rate of a normal, healthy fetus will increase with movement or exertion. You will be asked to signal when the baby moves, so your physician can look for periodic increases in the baby’s heart rate. This demonstrates that your baby is having normal, healthy or reactive responses. Sometimes babies do not move because they are sleeping, therefore the physician may need to wake your baby up to get her to move for the test. This can be done either by touch or sound.

If no signs of a problem occur, the test is said to be reactive. A nonreactive response to this test (when there is not an increase in the heart rate when the baby moves) may simply be an error in the testing procedure. In that case, a repeat test would be needed, or it may be an indication of a problem necessitating further testing, including a contraction stress test.

If you are an outpatient, you will be able to go home following a reactive test. Your doctor may decide to order more non-stress tests for you until you deliver. Each test takes approximately one hour, but it may vary.

**CONTRACTION STRESS TEST** – A contraction stress test involves monitoring a baby’s heart rate in response to uterine contractions. The heart rate and contractions are recorded in the same manner as in the non-stress test. By observing the baby’s heart-rate response to the contractions, the doctor can get a good idea of how well the baby is doing and how well the placenta is functioning.

As the name implies, the test requires uterine contractions. This is accomplished by giving you a small amount of medication in an intravenous solution. Contractions do not start immediately, so you might expect the test to take one to two hours. In a healthy baby, the heart rate doesn’t change during contractions. Slowing of the heart rate may indicate a problem with the baby’s blood supply. If there are no signs of problems, the test is said to be negative.
ULTRASOUND EXAMINATION OR SONOGRAPHY – This test uses high-energy sound waves to produce a moving or still black-and-white picture of the baby on a screen. The ultrasound exam looks for fetal breathing movements, fetal posture, movement of fetal limbs and the amount of amniotic fluid, which may be low if the baby is in jeopardy. The ultrasound exam may be combined with a non-stress test to produce what is called a biophysical profile of the baby. A normal profile is reassuring. Abnormal results need further investigation.

AMNIOCENTESIS – An amniocentesis test requires the removal of a small amount of fluid from the amniotic sac during pregnancy. Various tests can be completed on amniotic fluid to determine:

- Genetic chromosomal abnormalities
- Infectious processes
- Fetal maturity

This procedure may be performed either at your doctor’s office or at the hospital. A local anesthetic is used to numb the insertion site on the abdomen. You might feel a slight stinging sensation. Then a thin hollow needle is inserted at that site through the abdominal wall into the uterus. A small amount of fluid is withdrawn through the needle.

Although few complications exist with amniocentesis, you should notify your doctor if you experience any of the following:

- Nausea and vomiting
- Pain or cramping in the lower abdomen
- Vaginal bleeding
- Signs of infection (headache, muscle aches, dizziness or fever)
- Changes in fetal activity

GROUP B STREP TEST – Group B streptococcus infection is a bacterial infection that is often passed on from the mother to the baby during delivery. Between 10 and 30 percent of pregnant women carry the bacterium in the vagina or rectal area, but few babies of these women actually develop an infection. Your doctor will swab the vagina and rectum at 35 to 37 weeks of pregnancy. If you test positive, you will be treated with IV antibiotics during labor and delivery. Your doctor will review the test and discuss any questions you may have during this time.
Choosing Your Baby's Doctor

While you are still pregnant, it is recommended that you find a doctor for your baby. You may choose a pediatrician, who treats only children, or a family practitioner, who treats everyone in the family. Because you and your new baby will probably get to know this physician very well, it is important that you feel comfortable with whomever you choose.

Starting the Search

Ask for physician recommendations from your family, friends or childbirth educator.

Call the Mercy Nurse for a listing of physicians currently taking new patients.

It is a good idea to meet this physician before your baby’s birth to make sure that you feel comfortable with him or her. Here are a few questions that you may want to consider when looking for your baby’s physician:

Staff and Office

- Can you schedule a same day appointment for serious health concerns?
- Is the office conveniently located close to your home, work and/or daycare?
- Do the office hours work with your schedule?
- Do you feel that the office staff is friendly and helpful?

Physician

- Is the doctor accessible after hours?
- Does this doctor accept your baby’s health insurance?
- What hospital is this doctor affiliated with, and is that your hospital of choice?
- Are there other doctors to cover while he is unavailable?
- What is the schedule of well-child visits?

Relationship

- Does the doctor answer your questions to your satisfaction? (clearly and completely)
- Do you feel comfortable with this doctor caring for your baby?