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This booklet answers to your pregnancy questions from getting pregnant, diet and nutrition during pregnancy, and breast feeding to pregnancy complications, what to expect during labor and delivery and pregnancy recovery, post partum depression, and getting back in shape.

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Disclaimer

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Pre- Pregnancy

Does age matter?

Fertility decreases with age. Women in their twenties are more fertile than women in their thirties and on an average, it gets far more difficult for a woman to conceive after the age of 35. Fertility is at its peak when a woman is in her twenties, and when she is between 30-35, fertility is down by around 15 to 20 percent. This is not very much lower, and it probably means just a few more months of trying to get pregnant. However, once a woman reaches the age of 35, it is harder for her to conceive, and if she is trying to have her first child after 35, chances of it being born with Down's Syndrome are greater. All this really means is that the mother will have to take more care during her pregnancy, and if she is careful, she can give birth to a happy, healthy baby at any age. Older pregnant women have a higher risk of pregnancy induced hypertension (preeclampsia) and diabetes (gestational diabetes). Also, the chances of a woman giving birth to twins, peak between the ages of 35 to 39!

Can diet play a part in increasing chances of getting pregnant?

Yes, what you eat can render you more fertile, or less so. If you have been trying to get pregnant without much success, try staying away from tea, coffee and other caffeinated drinks and beverages. Also, avoid alcohol and cigarettes.

How often should we have sex?

Whether you will get pregnant or not doesn't depend on how often you do it, but on when you do it. Timing of intercourse is more important than frequency. If you get the timing right, you can get pregnant at once, otherwise you may have to try a number of times before you get pregnant. A lot also depends on the sperm count of your husband. If your husband has a high to normal sperm count, you could have sex everyday during your fertile period. This is known as the ovulation period, which is usually the 14th day from your first day of your periods. Therefore to increase chances of conception, it is advisable to have intercourse between the 8th to the 18th day. However, if your husband has a low sperm count, you may want to have sex every other day during this period.



Will taking a hot shower affect my husband's sperm count?

No, taking a hot shower will not affect his sperm count, but lying down in a tub of hot water for around 10 minutes, will. Similarly if you are trying to get pregnant, your husband should avoid using the sauna or steam bath.

Remember, if he uses the steam bath now, his sperm count will be affected adversely for around three months after that. It takes sperm 10 to 11 weeks to be produced, so bear that in mind. Also, tell your husband to switch to cool and loose boxers instead of wearing tight underwear. He should also avoid wearing biker shorts for at least two months prior to when you plan to conceive.

What are the best sexual positions to get pregnant?

Avoid any woman on top position, since in such positions the sperm has very little chance of reaching the cervix. Keep a pillow under your hips for a while during or immediately after intercourse, to allow the sperm to travel to your cervix.



Why is folic acid important during pregnancy?

Folic acid, sometimes called folate, is a B vitamin (B9) found mostly in leafy green vegetables like kale and spinach, orange juice, and enriched grains. Repeated studies have shown that women who get 400 micrograms (0.4 milligrams) daily prior to conception and during early pregnancy reduce the risk that their baby will be born with a serious neural tube defect (a birth defect involving incomplete development of the brain and spinal cord) by up to 70%.

The most common neural tube defects are spina bifida (an incomplete closure of the spinal cord and spinal column), anencephaly (severe underdevelopment of the brain), and encephalocele (when brain tissue protrudes out to the skin from an abnormal opening in the skull). All of these defects occur during the first 28 days of pregnancy - usually before a woman even knows she's pregnant.

That's why it's so important for all women of childbearing age to get enough folic acid - not just those who are planning to become pregnant. Only 50% of pregnancies are planned, so any woman who could become pregnant should make sure she's getting enough folic acid.

What is the right amount of folic acid to get each day?

If you are planning to get pregnant, you are encouraged to take a daily multivitamin containing at least 400 - 600 micrograms (mcg) of folic acid.

Is it okay to just take a regular multivitamin instead of a prenatal vitamin if you can't afford it or don't tolerate it?

It is probably fine. It may be a little lower in folic acid and iron. But if you are eating healthy, your needs will be met. Use the food tracker to get an idea of your iron and folic acid intake daily, then add on the amount in your supplement. You want to be consistently reaching the goal of

- 27 milligrams of iron
- 600 micrograms of folic acid

Why should I try to return to a healthy weight after delivery?

After you deliver your baby, your health will be better if you try to return to a healthy weight. Not losing weight after your baby is born may lead to overweight or obesity later in life, which may lead to health problems. Talk to your doctor about reaching a weight that is healthy for you.

Be good to yourself



Pregnancy and the time after you deliver your baby can be wonderful, exciting, emotional, stressful, and tiring, all at once. Experiencing this whirlwind of feelings may cause you to overeat, not eat enough, or lose your drive and energy. Being good to yourself can help you to cope with your feelings and to follow eating and physical activity habits for a healthy pregnancy, a healthy baby, and a healthy family after delivery. Here are some ideas for being good to yourself:

- Try to get enough sleep.
- Rent a funny movie and laugh.
- Take pleasure in the miracles of pregnancy and birth.
- Invite people whose company you enjoy to visit your new family member.
- Explore groups that you and your newborn can join, such as "new moms" groups or make friends with other new moms.

- Rent or buy an exercise video for pregnant women. Look for videos at your video store, doctor's office, hospital, or maternity clothing store.
- At your gym, sign up for a session with a fitness trainer who knows about physical activity during pregnancy.
- Get up and move around at least once an hour if you sit in a chair most of the day; get up and move around during commercials when watching TV.

What habits should I keep up after my baby is born?

Following healthy eating and physical activity habits after your baby is born may help you return to a healthy weight more quickly, provide you with good nutrition (which you especially need if you are breastfeeding), and give you the energy you need. You can also be a good role model for your growing child. After your baby is born:

- Continue eating well. Eat a variety of foods from the five food groups. If you are not breastfeeding, you will need about 300 fewer calories per day than you did while you were pregnant.



- If you are breastfeeding, you will need to eat about 200 more calories a day than you did while you were pregnant. Breastfeeding may help you return to a healthy weight more easily because it requires a great deal of energy. Breastfeeding can also protect your baby from illnesses such as ear infections, colds, and allergies, and may help lower your risk for breast and ovarian cancer.

■ When you feel able and your doctor says it is safe, slowly get back to your routine of regular, moderate physical activity. Wait for 4 to 6 weeks after you have your baby to begin doing higher levels of physical activity. Doing physical activity that is too hard, too soon after delivery, can slow your healing process.

- Regular, moderate physical activity will not affect your milk supply if you are breastfeeding.
- Return to a healthy weight gradually. Lose no more than 1 pound per week through a sound eating plan and regular physical activity after you deliver your baby.

Pregnancy

What are the first changes that happen to a woman when she becomes pregnant, even before she realizes she's pregnant?

Even before she knows she's pregnant, she'll notice breast changes. Her breasts become tender. Her nipples become tender. Her breasts enlarge ever so slightly and increase during the entire pregnancy. Some other changes are generalized gas production, so constipation as well as gas bloating of the belly occurs. These are some of the changes that people come into the office complaining of when they don't even know they're pregnant.

Other early changes occur in the skin. There are some ever-so-slight pigment changes in the face or all over the body. Some women can get increased oil production and acne as well in early pregnancy.

What's the tip-off for a woman that she's pregnant?

Some of the tip-offs that you're pregnant could include generalized bloating or difficulty in digestion. That's a big one. Many women begin to feel like they have to urinate very often. Few others are nausea, vomiting, drowsiness and wanting to sleep for long hours.

What happens to the breasts during pregnancy?



Some of the changes in the breast that occur include increased growth of the actual cells of the breast. Initially they increase in number. This is very early. Then what happens during the rest of the pregnancy is that the glandular and ductal cells grow in number and actually expand, getting ready to fill with milk, which will happen right after delivery.

What causes morning sickness and what does it actually indicate?

The causes of morning sickness are not always clear.

There is some thought that hormone changes increases in progesterone and estrogen cause morning sickness. Usually about 70 to 80 percent of women suffer from morning sickness during early pregnancy; some even begin noticing nausea as early as four to eight weeks.

Morning sickness occurs not just in the morning but actually all through the day. It usually ends at about 14 to 16 weeks. One thing that triggers morning sickness is an empty stomach. One way to battle that would be to actually keep food in the belly every two to three hours. There have also been reports showing that vitamin B-6 and calcium can help as well. You can alleviate the symptoms by consuming small, frequent meals, low fat/non oily foods and drinking plenty of fluids.

What does morning sickness indicate?

Morning sickness is a signal that the progesterone hormones are actually increasing normally. When a woman has quite a bit of morning sickness, that's actually a very good thing. That usually shows that the progesterone hormones are increasing normally and her pregnancy is most likely very protected. However, absence of morning sickness in a pregnant woman does not necessarily indicate problems during pregnancy.



What changes occur to the uterus during pregnancy?

The uterus is made of muscle cells. Throughout pregnancy, many changes occur in the uterus. First, these muscle cells start increasing in size and number. They increase in size all the way through to the delivery.

During pregnancy, the uterus grows from about the size of my fist and even smaller in some people, to the size of a large orange or grapefruit, then to the size of a cantaloupe, and then, of course, to the size of a small watermelon at the end.

Around nine to 12 weeks the uterus actually goes from being a pelvic organ to being an abdominal organ. We can feel it in the abdominal exam after about 12 weeks or a little bit earlier.

What happens to the abdominal organs later on in pregnancy as the uterus grows higher and higher into the abdomen?

As the uterus grows, the top half of the uterus expands. As it expands or stretches, it actually pushes all the organs that used to occupy that space higher and higher into your upper abdomen. That's why your digestive system, your small and large intestines, are pretty cramped. That's why you have a lot of the indigestion, the heartburn, the feeling of fullness immediately. It's a lot of pressure.

It is said that pregnancy puts added stress on your heart. What cardiovascular changes occur during pregnancy and how is the heart able to deal with them?

During pregnancy, the blood volume increases dramatically, probably by about 40 to 50 percent. That's a large blood volume for a woman, but amazingly, the body compensates very, very well.

Follow these safety precautions while being active during your pregnancy:

- Choose moderate activities that are unlikely to injure you, such as walking, aqua aerobics, swimming, yoga, or using a stationary bike.
- Stop exercising when you start to feel tired, and never exercise until you are exhausted or overheated.
- Drink plenty of water.
- Wear comfortable clothing that fits well and supports and protects your breasts.
- Stop exercising if you feel dizzy, short of breath, pain in your back, swelling, numbness, sick to your stomach, or if your heart is beating too fast or at an uneven rate.

What physical activities should I avoid during pregnancy?

- For your health and safety, and for the health of your baby, there are certain physical activities that you should not do while you are pregnant. Some are listed below. Talk to your doctor about other physical activities that you should avoid during your pregnancy.
- Avoid being active outside during hot weather.
- Avoid steam rooms, hot tubs, and saunas.
- Avoid physical activities, such as certain yoga poses, that call for you to lie flat on your back after 20 weeks of pregnancy.
- Avoid contact sports such as football and boxing, and other activities that might injure.
- Avoid activities that make you jump or change directions quickly such as tennis or basketball. During pregnancy, your joints loosen and you are more likely to hurt yourself when doing these activities.



Tips for getting physically active

Get physically active for your health and the health of your baby by using the tips below:

- Go for a walk around the block or through a shopping mall with your spouse or a friend.
- Sign up for a prenatal yoga or fitness class. Make sure you let the instructor know that you are pregnant before beginning.

Physical Activity

Should I be physically active during my pregnancy?

Almost all women can and should be physically active during pregnancy. Talk to your doctor first, particularly if you have high blood pressure, diabetes, anemia, bleeding, or other disorders, or if you are obese or underweight.

Whether or not you were active before you were pregnant, ask your doctor about a level of exercise that is safe for you. Aim to do at least 30 minutes of a moderate activity (one that makes you breathe harder but does not overwork or overheat you) on most days of the week.

Regular, moderate physical activity during pregnancy may:

- Help you and your baby to gain the proper amounts of weight
- Reduce the discomforts of pregnancy such as backaches, leg cramps, constipation, bloating, and swelling
- Improve your mood, energy level, and feelings about the way you look
- Strengthen your muscles and improve your blood flow
- Improve your sleep
- Help you have an easier, shorter labor
- Help you to recover from delivery and return to a healthy weight faster.



During early through middle pregnancy, a woman running up a flight of stairs will notice that her heart's pumping away and she'll get a little lightheaded. Her cardiovascular system is taking some time to compensate. As the pregnancy progresses, she will have to be aware of these changes and actually slow down so that the symptoms have some time to settle down a little bit. The increased blood volume is a pretty big load on the heart and lungs. But women are made to actually compensate for that.

What is it that makes a woman's body able to compensate for that?

About 10 to 15 different hormones cause the actual increase of the blood volume and control the compensation mechanisms that the organs, including those of the cardiovascular system, use to accommodate those changes.



The lungs also go through many changes. The diaphragm actually rises. The diameter of your chest increases outwardly. Despite those adjustments, though, you often feel out of breath and you may feel that you can't take a deep breath or that you feel a little bit more out of breath. The hormones again have a big role to play in that and cause those changes and the compensating mechanisms as well.

I've read that the lungs actually work more efficiently in pregnancy. How is it that they're able to work more efficiently for that brief period in a woman's life?

It used to be thought that the actual lung volume or capacity was lower or less efficient during pregnancy. But in reality studies have shown that there's actually an increase in the volume of the lungs. The efficiency is definitely greater, although a pregnant woman is actually more prone to getting lung infections that stay a little bit longer.

What are the additional nutritional needs of pregnant women?

Even prior to pregnancy and during the very early stages of pregnancy, it's very important to have a balanced nutritional plate. The caloric requirements of the body increase to about 300 calories a day all throughout pregnancy. And breast-feeding requires an additional 500-calorie increase on top of that.

In early pregnancy, nutrition has a big impact on fetal development. Amazingly, the body compensates and takes the fats, carbohydrates and proteins from whatever you give it, but if you have a healthier, balanced diet there are fewer problems in development. There's an increased need of folic acid this has been in the media for quite a while. Studies have shown that folic acid actually decreases spinal problems and genetic problems.

Since nutrition is so critical, especially during the early stages of pregnancy, women need to actually start on prenatal vitamins even before conception, and to continue that all the way through pregnancy. But it's very vital in the very early stages of pregnancy, during the first four to eight weeks of early fetal development.

We've heard a lot about the dangers of smoking and drinking to the growing fetus. What are the dangers of those to the mother's body during pregnancy?

Tobacco is extremely dangerous to both mother and fetus. It affects their respiratory systems greatly. It puts the mother at greater risk of getting infections and pneumonia, it worsens asthma, and depending on the time of year, these can be greatly increased.

Smoking can affect the mother's cardiovascular system as well, including how efficiently the heart is pumping. It can also affect skin changes and general well-being or mood. Smoke affects the weight of the fetus as well, causing a lot of low-birth-weight babies. Even though some women may think, "OK, I don't want to gain a lot of weight during pregnancy" and keep smoking, it actually affects the fetus, not just the mother's weight.

Alcohol has been well studied. Even small amounts and regular doses can cause fetal alcohol syndrome, which is a horrible outcome for the baby. These are two drugs that are so dangerous to moms and babies.

What is normal weight gain?

Normal weight gain is calculated using your body mass index (BMI) before pregnancy. If you are underweight before you become pregnant (have a BMI of less than 19.8) your recommended weight gain is between 12.5kg and 18kg (28 to 40lb). If you have an average BMI (19.8 to 26) before pregnancy you should gain between 11.5kg and 16kg (25 to 35lb). If you are overweight before getting pregnant (have a BMI above 26) you should gain between 7kg and 11.5kg (15 to 25lb).



What foods should I avoid?

Some foods carry a greater risk of harbouring bacteria and should be avoided during pregnancy. These include unpasteurized milk, blue and mould ripened cheeses, raw fish, uncooked shellfish, anything-containing raw eggs (including homemade ice cream and mousse), and any cooked food chilled for reheating.

Are there any household products I should avoid?

Some household products contain very strong chemicals and although they have not been proven to be harmful to your child they are best avoided during pregnancy. Avoid anything with strong fumes such as oven cleaner and let someone else do any painting as some paints include lead and mercury. Also avoid insecticides or choose environmentally friendly products instead.

- Keep healthy foods on hand. A fruit bowl filled with apples, bananas, peaches, oranges, and grapes makes it easy to grab a healthy snack.
- If you have heartburn during your pregnancy, eat small meals more often, eat slowly, avoid spicy and fatty foods (such as chilies or fried chicken), drink beverages between meals instead of with meals, and do not lie down right after eating.

What foods should I avoid during pregnancy?

There are certain foods and beverages that can harm your baby if you eat or drink them while you are pregnant. Here is a general list of foods and beverages that you should avoid:

- Alcohol. Instead of wine, beer, or a mixed drink, enjoy apple cider, tomato juice, 100-percent juice mixed with sparkling water, or other non-alcoholic beverages.
- Fish that may have high levels of methylmercury (a substance that can build up in fish and harm an unborn baby). Do not eat shark, swordfish, king mackerel, and tilefish during pregnancy. Eat no more than 12 ounces of any fish per week (equal to four 3-ounce servings—each about the size of a deck of cards).
- Raw fish such as sushi, sashimi, or ceviche and raw or undercooked meat and poultry. These foods can contain harmful bacteria. Cook fish, meat, and poultry thoroughly before eating.
- Large amounts of caffeine-containing beverages. If you are a heavy coffee, tea, or soda drinker, talk to your doctor about whether you should cut back on caffeine.
- Anything that is not food. Some pregnant women may crave something that is not food, such as laundry starch or clay. Talk to your doctor if you crave something that is not food.



Ask your doctor for a complete list of foods and beverages that you should avoid.

Do I have any special nutrition needs now that I am pregnant?

Yes. During pregnancy, you and your growing baby need more of several nutrients. By eating the recommended number of daily servings from each of the five food groups, you should get most of the nutrients you need.

Be sure to include foods high in folate, such as orange juice, strawberries, spinach, broccoli, and beans (rajma, chole, dals). Or get it in a vitamin/mineral supplement.

To help prevent birth defects, you must get enough daily folate before as well as during pregnancy. Prenatal supplements contain folic acid (another form of folate). Look for a supplement that has at least 400 micrograms (0.4 milligrams) of folic acid.

Although most doctors recommend taking a multi-vitamin/mineral "prenatal" supplement before becoming pregnant, during pregnancy, and while breastfeeding, always talk to your doctor before taking any supplements.

Can I continue to follow my vegetarian diet during pregnancy?

Yes, you can continue a vegetarian-eating plan during pregnancy, but talk to your doctor first.

If you do not eat any animal foods, it may be difficult to get enough of important nutrients, including protein, iron, vitamin B12, and vitamin D.

Your doctor may ask you to meet with a dietitian who can help you to plan meals, and may also recommend that you take supplements.

Tips for healthy eating

- Meet the needs of your body and help avoid common discomforts of pregnancy by following these tips:
- Eat breakfast every day. If you feel sick to your stomach in the morning, choose dry whole-wheat toast or whole-grain biscuits when you first wake up-even before you get out of bed. Eat the rest of your breakfast (fruit, oatmeal, cereal, milk, curd, or other foods) later in the morning.
- Eat high-fiber foods. Eating whole-grain cereals, vegetables, fruits, beans, whole-wheat breads/chapattis, and brown rice, along with drinking plenty of water and getting daily physical activity, can help you prevent the constipation that many women have during pregnancy.



Can I have sex while pregnant?

Sex while pregnant is normally safe though you may have to adjust your position to allow for that bump. Women who have a history of miscarriage may be advised to avoid having intercourse during the first trimester and those with a history of early births should avoid it in the final trimester. Speak to your doctor if you have any concerns. You may want to consult your doctor if you notice bleeding in the early months.

I've got a fever, can I take any medication?

You should check with your doctor before taking any medication while pregnant. This includes over-the-counter medications such as aspirin and homeopathic medicines.

How late in my pregnancy can I fly?

Although most airlines will allow you to fly until week 36 you need to check with each one and with your doctor before booking any tickets. Most airlines require a letter from your doctor to state that you are fit to fly. Make sure to stretch your legs and walk around during the flight and drink plenty of water. It's also a good idea to ask for an aisle seat so you don't disturb your neighbour when making those frequent trips to the loo.

I'm late in my pregnancy should I wear a seatbelt in the car?

The seat belt will not hurt you or your baby even if you are involved in an accident; there is a greater risk of injury if you do not wear your seat belt. Wear the seatbelt normally across the shoulder and under, rather than over, your belly.

Why is exercise during pregnancy important?



Regular exercise during pregnancy has been linked to less overall weight gain and fat deposits that may help prevent gestational diabetes. Regular aerobic activity prior to or early in pregnancy has also been linked to a reduction in the risk of preeclampsia. A complete exercise program helps to prevent deconditioning, promotes retention of muscle, bone and connective tissue; relieves stress; prepares a mother for labor; helps to maintain posture, increase or maintain range of motion; and may relieve some discomforts induced by pregnancy.

In the absence of either medical or obstetric complications, 30 minutes or more of moderate exercise a day on most, if not all, days of the week is recommended for pregnant women"

How far into my pregnancy should I exercise?

If you begin an exercise program in the first or second trimester, you should do your best to continue it through the rest of your pregnancy, being sure to modify your activities and intensities as your body changes. Barring any complications in your pregnancy, continuing exercise through third trimester will reduce the chance of your baby gaining excessive weight in the last few months. Continuing exercise through the third trimester may also reduce your chances of excessive weight gain.

Does exercise help reduce back pain during pregnancy?

Some exercises such as the pelvic tilt have been shown to safely decrease the intensity of back pain in pregnant women. Depending on the cause of the pain, prescribed exercise and stretching can be useful in decreasing or eliminating back pain caused by the shift in center of gravity associated with pregnancy. This is one reason that supervised exercise sessions during pregnancy are suggested.

Will exercise help me prevent weight gain?



Regular moderate exercise during pregnancy has been linked to less overall weight gain and subcutaneous fat deposition (fat under the skin). It helps maintain muscle mass and increases your metabolism, which probably reduces the risk of gestational diabetes. Adequate weight gain is important for a healthy pregnancy, but exercise can help play a role in preventing excessive weight gain and the associated complications. Starting a moderate weight-bearing exercise routine early in pregnancy and continuing it throughout can help in maintaining a healthy pregnancy weight.

Why is protein important in my prenatal diet?

Dietary protein plays an important role in the growth and development of the baby, meeting the mother's daily needs, as well as in producing the extra blood necessary for carrying nutrients during the pregnancy. It is recommended an extra 10 grams of protein per day (for single baby being carried) than normal. This approximately comes up to a total of 60 grams per day. Women who are more active may call for slightly higher amounts of protein, which can be decided between you and your practitioner.

Adequate protein may also play a role in preventing pregnancy induced hypertension (PIH) or preeclampsia.

Why is drinking water important during my pregnancy?

Water is important in supporting the production of extra blood volume and plasma necessary for pregnancy. This increase in blood volume is essential for nutrient transport, placental function, and temperature regulation. Hydration is especially important before and during exercise to aid cooling and preventing cramping or Braxton Hicks contractions.

How many calories should I eat?

Eating the right number of calories lets you and your baby gain the proper amount of weight. During the first 3 months of your pregnancy, you do not need to change the number of calories you are eating.

Normal-weight women need an extra 300 calories each day during the last 6 months of pregnancy. This totals about 1,900 to 2,500 calories a day. If you were underweight, overweight, or obese before you became pregnant, or if you are pregnant with more than one baby, you may need a different number of calories. Talk to your dietitian about how much weight you should gain and how many calories you need.

Why is gaining a healthy amount of weight important?

Gaining a healthy amount of weight may help you have a more comfortable pregnancy and delivery. It also may help you have fewer pregnancy complications, such as diabetes, high blood pressure, constipation, and backaches.

Gaining too little weight during your pregnancy makes it hard for your baby to grow properly. Talk to your doctor if you feel you are not gaining enough weight.

If you gain too much weight, you are more likely to have a longer labor and more difficult delivery. Also, gaining a lot of extra body fat will make it harder for you to return to a normal weight after you have your baby. If you feel you are gaining too much weight during your pregnancy, talk with your doctor.

Do not try to lose weight if you are pregnant. If you do not eat enough calories or a variety of foods, your baby will not get the nutrients he or she needs to grow.

How much weight should I gain during my pregnancy?

Talk to your doctor about how much weight you should gain during your pregnancy. General weight-gain recommendations listed below refer to pre-pregnancy weight and are for women expecting only one baby.

If you are: underweight	You should gain: about 12 to 18 Kgs
If you are: normal weight	You should gain: about 11 to 16 Kgs
If you are: overweight	You should gain: about 7 to 11 Kgs
If you are: obese	You should gain: about 7 Kgs or less

Healthy Eating

What is a healthy eating plan for pregnancy?

A healthy eating plan contains a wide variety of foods from the five basic food groups. Every day, you should try to eat:

6 or more servings of bread, cereal, rice, or chapatti.

One serving equals one slice of bread, 1 ounce of ready-to-eat cereal (about 1 cup of most cereals), or 1/2 cup of cooked cereal, rice, or pasta, or 1 chapatti. If you are physically active, you can eat more servings (up to 11 servings if you are very active).

3 to 5 servings of vegetables.

One serving equals 1 cup of raw leafy vegetables such as spinach, or 1/2 cup of chopped vegetables, cooked or raw.

2 to 4 servings of fruit.

One serving equals one medium piece of fruit like an apple, banana, or orange; 1/2 cup of chopped fresh, cooked, or canned fruit; 1/4 cup dried fruit; or 3/4 cup of 100-percent fruit juice.

2 servings of milk, curd, or cheese.

One serving equals 1 cup of milk or curd, 1 1/2 ounces of natural cheese. If you are 18 years or younger and pregnant, you need at least 3 servings of milk, curd, and cheese. Choose low-fat or fat-free dairy products most often.

2 to 3 servings of meat, poultry, fish, dry beans, eggs, or nuts.

One serving equals 2 to 3 ounces of cooked meat, poultry, or fish—about the size of a deck of cards. Choose lean cuts and eat no more than 5 to 7 ounces of meat, poultry, or fish a day. One cup of cooked beans such as rajma, chole or 2 eggs count as a serving. 2/3 cup of nuts also equals a serving.

At least 8 glasses of water.

Drinking milk, 100-percent juice, and other non-alcoholic beverages counts toward your amount of daily water.



Pregnant women should have 0.1-0.2 liters of water before exercise and 0.05-0.1 liters every 20-30 minutes during activity. Pregnant women should consume 2 quarts of water through the day and even more if the woman is more active. If a woman experiences Braxton Hicks during exercise, she should cease activity, drink 4 glasses of water, void her bladder, and rest on her side. If the contractions do not cease, she should contact her healthcare provider.

What effect does exercise have on labor?

Regular moderate exercise during pregnancy may prepare the body for labor by increasing or maintaining her endurance for the process. Exercise participation may also increase beta-endorphin levels that can lower a woman's pain perception during labor.

Some studies have found evidence of shorter labor, improved long-term condition of the mother, lower rates of c-section, and reduced length of hospital stay for the mother.

Should I Change My Diet During Pregnancy?

Good nutrition before you're pregnant will mean a healthier you and baby. If you're already eating a well-balanced, nutritious diet now few, if any, changes will be necessary during pregnancy. The American College of Obstetrics and Gynecology, also referred to as the ACOG, recommends that pregnant women increase their pre-pregnancy servings of the four basic food groups to include the following:

- At least four servings of fruits and vegetables. This is important for making sure you consume enough vitamins and minerals through food, in addition to any prenatal vitamins your doctor has suggested during your pregnancy.
- At least four servings of whole-grain or enriched bread and cereal to ensure you have enough energy during your pregnancy.
- At least four or more serving of milk and dairy products (not including butter, ghee or margarine) for the calcium you need during pregnancy.
- You'll also need to consume at least three servings of meat, fish, chicken, eggs, nuts, dried beans, legumes or peas to ensure an adequate level of protein in your diet.
- A well-balanced diet during pregnant helps ensure that both you and your baby are healthy.
- The only necessary recommended daily allowance or RDA that is difficult to achieve through diet is iron. In most cases, your physician will prescribe an iron supplement during pregnancy. Also, be sure to follow any additional diet or vitamin supplementations recommendations that your personal physician recommends during your pregnancy.



What should I be eating?

You do not need a special diet just because you are pregnant but you should eat healthily as your body has to work especially hard during pregnancy. It is now known that what you eat can have a far-reaching effect on your baby's health. You should therefore make sure that you have a well-balanced, varied diet and that you eat regularly and often. In the last three months of your pregnancy, aim to increase your daily calorie intake by about 200 calories - the equivalent of a banana and a glass of milk.

Which foods are best?

It is a good idea to be realistic in your dietary aims and eat what you actually enjoy, because it is likely that if you restrict yourself to an artificial (and possibly unappealing) diet, you will be more tempted to go on an eating binge and put on unwanted pounds. Just make sure that you are getting the basic nutrients in your core diet.



What foods should I cut out?

Try to cut out very fatty foods such as fried foods, and cream sauces. These are likely to make you feel nauseous in the first three months as well as contribute to weight gain. Look out for the fat in convenience foods like biscuits, pastries, puffs and cakes. Avoid certain foods that carry the risk of infection and damage to your baby.

Should I drink more fluids?

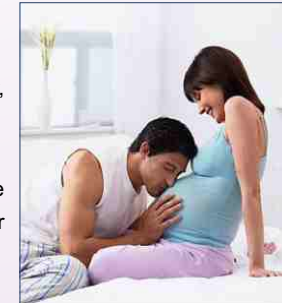
As your blood volume increases, you need to increase your fluid intake. Drink water rather than high-calorie fizzy drinks, which are full of sugar and can make nausea and heartburn worse. Even if you have fluid retention, do not cut your fluid intake; try to drink up to six glasses of water each day. Drinking fluid can also prevent constipation, a common problem in pregnancy.

Are snacks and junk food bad in pregnancy?

Snacking in itself is not a bad thing but if you can, you should try to snack on healthy foods. Fresh fruit, nuts, raisins, and raw vegetables are all much better for you than junk foods like chocolate, chips, and fried snacks etc.; these are high in calories, fats and sugars, and salt, and although they may produce a fast energy high, they do not contain many nutrients that will help your baby to grow and develop. They may also contain artificial colouring and additives. Of course, the occasional snack now and then will not do you any harm, but snacks shouldn't play a large part in your diet. This would also cause you to gain excessive weight.

Pregnancy Tips

- Talk to your doctor/dietitian about how much weight you should gain during your pregnancy.
- Eat foods rich in folate, iron, calcium, and protein, or get these nutrients through a prenatal supplement.
- Talk to your doctor/dietitian before taking any supplements.
- Eat breakfast every day.
- Eat high-fiber foods and drink plenty of water to avoid constipation.
- Avoid alcohol, raw fish, fish high in mercury, soft cheeses, and anything that is not food.
- Aim to do at least 30 minutes of moderate activity on most days of the week. Talk to your doctor before you begin.
- After you deliver your baby, continue eating well. Return to a healthy weight gradually.
- Slowly get back to your routine of regular, moderate physical activity.
- Take pleasure in the miracles of pregnancy and birth.



Pregnancy and Pica Non-Food Cravings

Pica is the practice of craving substances with little or no nutritional value. Most pica cravings involve non-food substances such as dirt or chalk. The word pica is Latin for magpie, which is a bird notorious for eating almost anything.

It is true that the majority of women will experience cravings during pregnancy; however, most of these cravings are for things like pickles and ice cream. Pica cravings are most commonly seen in children and occur in approximately 25-30% of all children; pica cravings in pregnant women are even less common.

What causes pica during pregnancy?

The reason that some women develop pica cravings during pregnancy is not known for certain. There is currently no identified cause; however, according to the Journal of American Dietetic Association there may be a connection to an iron deficiency.

Some speculate that pica cravings are the body's attempt to obtain vitamins or minerals that are missing through normal food consumption. Sometimes pica cravings may be related to an underlying physical or mental illness.

What are typical pica cravings during pregnancy?

The most common substances craved during pregnancy are dirt, clay, and laundry starch. Other pica cravings include: burnt matches, stones, charcoal, mothballs, ice, cornstarch, toothpaste, soap, sand, plaster, coffee grounds, baking soda, and cigarette ashes.

Are pica cravings harmful to the baby?

Eating non-food substances is potentially harmful to both you and your baby. Eating non-food substances may interfere with the nutrient absorption of healthy food substances and actually cause a deficiency. Pica cravings are also a concern because non-food items may contain toxic or parasitic ingredients.

What can you do if you have pica cravings?

Don't panic; it happens and is not abnormal. The most important thing is to inform your doctor to make sure you have a complete understanding of the specific risks associated with your cravings. Here are some suggestions to help you deal with pica cravings:



avoid non-food items

Inform your doctor and review your prenatal health records

Monitor your iron status along with other vitamin and mineral intake

Consider potential substitutes for the cravings such as chewing sugarless gum

Inform a friend of your craving who can help you

Can I still eat fast foods and go out to restaurants?

Although not as bad for you as junk foods, fast foods can still be high in fat and carbohydrates and, if they are kept heated for long periods of time, many of the vitamins and minerals in the food are destroyed. However, restaurant meals such as freshly made pizza can be nutritious for you, as long as you make sure that you maintain your basic core diet.

How much weight should I gain?

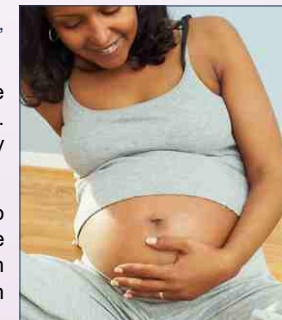
Your weight is not important during pregnancy unless you are very underweight or seriously overweight. What is more important is the growth-rate of the baby; this does not depend on your weight or how much you eat but rather on the efficiency of the placenta and the quality of the food, which supplies the appropriate nutrients. However, you will feel happier if you gain the weight steadily and don't put on large amounts.

Is it a good idea to try to slim while pregnant?

No, it is not a good idea at all, because this is a time when you should be eating a balanced and nutritious diet so that your baby can get all the nutrients he or she needs for healthy development. You will also need plenty of energy to cope with the extra physical demands of pregnancy and labour. Even though you might not want to put on any weight, you will and you should if your pregnancy is going well, and this is quite natural and essential. If you were seriously over-weight before you became pregnant, you may need to watch your diet. Your doctor or midwife will give you more information on this.

As the mother's belly gets bigger, as her baby grows, how are the abdominal muscles able to stretch?

As the uterus grows and the abdomen distends, the actual muscles of the abdominal wall increase in size. Since it's over a long period of time, the body compensates very nicely.



Women who have had more than one or two pregnancies will sometimes get a separation of the muscles that run up and down the mother's abdomen and the rectal muscles. It usually doesn't happen in first-time pregnancies, but it can.

In general, though, these muscle tissues as well as the fascia, which is a strong tissue underneath the skin and fat, are made to stretch very, very slowly and can accommodate the very large uterus.

What skin changes occur during pregnancy?

Many hormones are responsible for the accommodation of the skin. The collagens, collagenase, even the increased progesterone has some effect on the increased elasticity of the skin during pregnancy.

Some of the most noticeable skin changes during pregnancy involve pigmentation. The "mask of pregnancy" is one that is often written about. It's a darkening of the skin usually around the sides of the face and the forehead.

There can also be a change of the line down the abdomen. It's usually called a linea alba, which is a white line. During pregnancy it can become a dark line, called the linea nigra. This change sometimes occurs as early as the beginning of the second trimester, and increases and then disappears probably three to four months after delivery.

Some other common changes include little spider veins that pop up in the legs and sometimes on the arms and the abdomen. The reasons why these happen are not quite clear. We know that in many women, these spider veins disappear after delivery.

The pigment changes are probably due to the increase in the melanocyte-stimulating hormone during early pregnancy, as early as the first month, which then usually drops off after delivery. We don't know what levels are associated with women who get a lot of pigmentation.

Another common skin change during pregnancy is definitely acne. You'll notice outbreaks mostly on the face, but sometimes the shoulders and the backs of the arms. Again, there aren't any specific hormones that cause these, but increases in both estrogen and progesterone are known to cause acne throughout life.

Some pregnant women have changes in their vision and their hearing. What accounts for these changes?



During early pregnancy, a lot of women actually experience a change in their vision, and have to get their prescriptions changed if they wear glasses. So we usually ask women to go ahead and get their eyes checked. Most of the time their hearing stays in check, but there can be changes. The reasons are again very unclear. It's most likely due to the change in the multitude of hormones. Their vision will sometimes return to normal, but most of the time, vision changes remain that way.

As pregnancy progresses and women get larger, what stresses are put on circulation?

As pregnancy progresses, many women will come into the office complaining that their hands or feet are numb or that they're swelling. Again, with increases of hormones, particularly progesterone, in pregnancy, the vascular system becomes very leaky and increased tissue fluid is particularly noted in the hands, feet and legs.

How is depression treated?

There are two common types of treatment for depression.

Talk therapy This involves talking to a therapist, psychologist, or social worker to learn to change how depression makes you think, feel, and act.

Medicine Your doctor can give you an antidepressant medicine to help you. These medicines can help relieve the symptoms of depression.

Women who are pregnant or breastfeeding should talk with their doctors about the advantages and risks of taking antidepressant medicines. Some women are concerned that taking these medicines may harm the baby. A mother's depression can affect her baby's development, so getting treatment is important for both mother and baby. The risks of taking medicine have to be weighed against the risks of depression. It is a decision that women need to discuss carefully with their doctors. Women who decide to take antidepressant medicines should talk to their doctors about which antidepressant medicines are safer to take while pregnant or breastfeeding.

What effects can untreated depression have?

Depression not only hurts the mother, but also affects her family. Some researchers have found that depression during pregnancy can raise the risk of delivering an underweight baby or a premature infant. Some women with depression have difficulty caring for themselves during pregnancy. They may have trouble eating and won't gain enough weight during the pregnancy; have trouble sleeping; may miss prenatal visits; may not follow medical instructions; have a poor diet; or may use harmful substances, like tobacco, alcohol, or illegal drugs.

Postpartum depression can affect a mother's ability to parent. She may lack energy, have trouble concentrating, be irritable, and not be able to meet her child's needs for love and affection. As a result, she may feel guilty and lose confidence in herself as a mother, which can worsen the depression. Researchers believe that postpartum depression can affect the infant by causing delays in language development,



problems with emotional bonding to others, behavioral problems, lower activity levels, sleep problems, and distress. It helps if the father or another caregiver can assist in meeting the needs of the baby and other children in the family while mom is depressed.

All children deserve the chance to have a healthy mom. All moms deserve the chance to enjoy their life and their children. Don't suffer alone. If you are experiencing symptoms of depression during pregnancy or after having a baby, please tell a loved one and call your doctor or midwife right away.

Postpartum psychosis is rare. It occurs in 1 or 2 out of every 1000 births and usually begins in the first 6 weeks postpartum. Women who have bipolar disorder or another psychiatric problem called schizoaffective disorder have a higher risk for developing postpartum psychosis. Symptoms may include delusions, hallucinations, sleep disturbances, and obsessive thoughts about the baby. A woman may have rapid mood swings, from depression to irritability to euphoria.

What steps can I take if I have symptoms of depression during pregnancy or after childbirth?

Some women don't tell anyone about their symptoms because they feel embarrassed, ashamed, or guilty about feeling depressed when they are supposed to be happy. They worry that they will be viewed as unfit parents. Perinatal depression can happen to any woman. It does not mean you are a bad or "not together" mom. You and your baby don't have to suffer. There is help.

Limited research suggests that many women with perinatal depression improve when treated with anti-depressant medicine. Your doctor can help you learn more about these options and decide which approach is best for you and your baby.

Speak to your doctor or midwife if you are having symptoms of depression while you are pregnant or after you deliver your baby. Your doctor or midwife can refer you to a mental health professional who specializes in treating depression.

Here are some other helpful tips:

- Try to get as much rest as you can. Try to nap when the baby naps.
- Stop putting pressure on yourself to do everything. Do as much as you can and leave the rest!
- Ask for help with household chores and nighttime feedings. Ask your husband or partner to bring the baby to you so you can breastfeed. If you can, have a friend, family member, or professional support person help you in the home for part of the day.
- Talk to your husband, partner, family, and friends about how you are feeling.
- Do not spend a lot of time alone. Get dressed and leave the house. Run an errand or take a short walk.
- Spend time alone with your husband or partner.
- Talk with other mothers, so you can learn from their experiences.
- Don't make any major life changes during pregnancy. Major changes can cause unneeded stress. Sometimes big changes cannot be avoided. When that happens, try to arrange support and help in your new situation ahead of time.



Carpel tunnel syndrome is also very common in pregnancy because of that swelling. Sometimes women have to get wrist braces and elevate their legs or undergo hydrostatic pressure, like getting in a swimming pool or a bathtub, to feel better. Those conditions alone are not dangerous, but they are something that we do see in mid- to later-pregnancy.

Is there truth to the advice that you shouldn't lay on your back later in pregnancy?

After about 20 weeks of pregnancy, we encourage pregnant women not to lie on their back anymore. At this point, the uterus is quite a bit heavier and it actually lays on the blood vessels that run up your back, the inferior vena cava and the aorta. The vena cava is the big vessel that carries the blood to the heart, and the aorta's the big vessel that carries blood away from the heart. They both become compressed, and some people will lose consciousness when pressure's applied to these vessels. Numbness and tingling can occur in the upper and lower extremities. After about five months, we encourage women to sleep on their sides instead.

What are Braxton Hicks contractions and what is their purpose?

Braxton Hicks contractions are irregular contractions that happen even in very early pregnancy. As early as four to eight weeks, the uterus is noticed to exhibit very low-pressure, irregular contractions maybe five to 20 a day. Most of the time they're not detected. When most women reach maybe 24 to 28 weeks, they will actually feel these contractions. Again, they're not painful; they're very low in pressure. Women typically notice a tightening that quickly passes.

The cause is not well known. We know that they're there and no cervical change occurs with them, so it's not preterm labor. Braxton Hicks contractions actually increase in frequency during late pregnancy. So at around 36 to 40 weeks, most women will notice they're much more frequent, but without any specific pattern and without pain.



How does a woman know she's in labor? What are the early signs?

One of the early signs of labor would be regular contractions. We usually have women time their contractions, and tell them to call us if they're coming more than four to six times an hour and lasting at least 30 to 60 seconds. These are also stronger than Braxton Hicks contractions. They'll sometimes start with some mild cramping, then increase to about four to six times an hour.

If you notice that one hour goes by and you have six contractions, and then the next hour goes by and you have 10 contractions, and you're noticing that there is actually a pattern every 10 minutes or every five minutes that's when we have you call the doctor just to let them know what's going on.

Some other things that you can look for are mucus changes. You might notice bloody mucus or the mucus plug, which is a large amount of mucus that actually passes out some time between two weeks and a few days before actual labor starts. Sometimes the water breaks before contractions begin, either as a small trickle of fluid or a large gush. Usually when that happens, women are aware and they call us right away.

What exactly is a contraction?

A contraction is the uterus muscles tensing at the same time. The uterine muscles are smooth muscles. They're involuntary muscles, which means that we don't have control of them. The parasympathetic system or the involuntary system of the body actually causes the uterus to contract.

You mentioned water breaking. What is that water?

The water that the baby is enveloped in the amniotic fluid is actually fetal urine that's swallowed and then passed through the fetus's renal system and excreted again during pregnancy. It's sterile urine. The amniotic fluid also bathes the baby's lungs when the baby "inhales" it, which helps the lungs to mature properly.

What are the three different stages of labor?

The first stage of labor begins when the initial strong contractions start and continues until the cervix is dilated fully. The second stage of labor begins with the mother pushing and ends with the expulsion of the baby. Stage three begins at the delivery of the baby and ends at expulsion of the placenta.

What changes occur to the cervix during early pregnancy?

Many changes happen to the cervix during pregnancy. Early on, the cells on the outside of the cervix become hypertrophied or more prominent. During the first exam, very early in pregnancy, sometimes you can actually see a blue cervix, due to increased blood vessel changes.

Sometimes a little bit of bleeding can occur after normal activity or sex. Usually this is not dangerous, but it's very alarming to a newly pregnant woman. Another change that can happen due to hormonal changes is that the cervical opening can become a

little more relaxed. As labor approaches, the pelvic opening actually widens a little bit. The pelvic bones separate ever so slightly, which can cause a lot of discomfort. In late pregnancy, there can be much pressure and pulling and tugging in the pelvic region, which we call round ligament pain, and that's usually in the groin area.

What happens to the pelvic area during later pregnancy?

During the last four weeks of pregnancy, beginning at around 36 weeks and sometimes even a little bit earlier, many doctors will start checking the mother's cervix. During this time, the cervix will shorten or efface and it will start dilating, or opening. These things progress slowly until actual labor hits.



- Having feelings of loss loss of identity of who you are, or were, before having the baby, loss of control, loss of your pre-pregnancy figure, and feeling less attractive.
- Having less free time and less control over time. Having to stay home indoors for longer periods of time and having less time to spend with the your partner and loved ones.

What are symptoms of depression?

Any of these symptoms during and after pregnancy that last longer than two weeks are signs of depression:

- Feeling restless or irritable
- Feeling sad, hopeless, and overwhelmed
- Crying a lot
- Having no energy or motivation
- Eating too little or too much
- Sleeping too little or too much
- Trouble focusing, remembering, or making decisions
- Feeling worthless and guilty
- Loss of interest or pleasure in activities
- Withdrawal from friends and family
- Having headaches, chest pains, heart palpitations (the heart beating fast and feeling like it is skipping beats), or hyperventilation (fast and shallow breathing)
- After pregnancy, signs of depression may also include being afraid of hurting the baby or oneself and not having any interest in the baby.



What is the difference between "baby blues," postpartum depression, and postpartum psychosis?

The baby blues can happen in the days right after childbirth and normally go away within a few days to a week. A new mother can have sudden mood swings, sadness, crying spells, loss of appetite, sleeping problems, and feel irritable, restless, anxious, and lonely. Symptoms are not severe and treatment isn't needed. But there are things you can do to feel better. Nap when the baby does. Ask for help from your spouse, family members, and friends. Talk and spend time with other new moms.

Postpartum depression can happen anytime within the first year after childbirth. A woman may have a number of symptoms such as sadness, lack of energy, trouble concentrating, anxiety, and feelings of guilt and worthlessness. The difference between postpartum depression and the baby blues is that postpartum depression often affects a woman's well-being and keeps her from functioning well for a longer period of time. Postpartum depression needs to be treated by a doctor. Counseling, support groups, and medicines are things that can help.

During Pregnancy

During pregnancy, these factors may increase a woman's chance of depression:

- History of depression or substance abuse
- Family history of mental illness
- Little support from family and friends
- Anxiety about the fetus
- Problems with previous pregnancy or birth
- Marital or financial problems
- Young age (of mother)

After Pregnancy

Depression after pregnancy is called postpartum depression or peripartum depression. After pregnancy, hormonal changes in a woman's body may trigger symptoms of depression. During pregnancy, the amount of two female hormones, estrogen and progesterone, in a woman's body increases greatly. In the first 24 hours after childbirth, the amount of these hormones rapidly drops back down to their normal non-pregnant levels. Researchers think the fast change in hormone levels may lead to depression, just as smaller changes in hormones can affect a woman's moods before she gets her menstrual period.

Occasionally, levels of thyroid hormones may also drop after giving birth. The thyroid is a small gland in the neck that helps to regulate your metabolism (how your body uses and stores energy from food). Low thyroid levels can cause symptoms of depression including depressed mood, decreased interest in things, irritability, fatigue, difficulty concentrating, sleep problems, and weight gain. A simple blood test can tell if this condition is causing a woman's depression. If so, thyroid medicine can be prescribed by a doctor.

Other factors that may contribute to postpartum depression include:

- Feeling tired after delivery, broken sleep patterns, and not enough rest often keeps a new mother from regaining her full strength for weeks.
- Feeling overwhelmed with a new, or another, baby to take care of and doubting your ability to be a good mother.
- Feeling stress from changes in work and home routines. Sometimes, women think they have to be "super mom" or perfect, which is not realistic and can add stress.



While the cervix is effacing and dilating, what is the uterus doing to expel the baby?

The rhythmic, powerful uterine contractions cause the cervical changes. Cervical change doesn't usually happen without uterine contractions.

The contractions are a physical tightening of the entire uterus. All those uterine smooth muscles work together in concert to squeeze the infant out as well as when the mother pushes. Of course the mother has to push to actually get the baby out, but the uterus itself is expelling the baby with the uterine contractions.

What accounts for the pain with labor and delivery?

Labor pains are due to the uterus muscle squeezing and contracting. When muscles contract, it's very painful. Menstrual cramps are actually uterine contractions on a very smaller scale. There are also chemicals produced in the body, the prostaglandins, that actually cause pain, and these are released during labor.



What factors might lead to a Caesarean-section delivery?

Some of the factors that cause or contribute to a C-section would be slow progression of labor or no progression of labor. There's a certain speed to labor that is normal. We usually try to adhere to that to keep it safe for the mom and the baby.

What happens in many cases is that the pelvic bones are just not large enough to allow the passage of a certain size baby. If that's the case, the cervix may open to a certain number, say, to 4 to 5 centimeters, and just stop and stay at that number for two hours.

Usually a first-time mom who is experiencing good, strong labor contractions with no progress for several hours would be a candidate for a C-section. Another case would be if the cervix dilated to 10 centimeters and the mom was pushing for a certain amount of time without the baby appearing, we'd assume that the baby's just not going to be able to come out through the pelvic outlet. We allow a shorter amount of time for somebody without an epidural.

But there are two big reasons that C-sections happen. One big one would be where the fetal heartbeat would drop suddenly and stay down rather than recovering after a contraction. That would be an emergency and we would have to get the baby out.

The other situation would be if the fetal heart tracing just does not look normal regardless of the resuscitation that we're doing oxygen and position change or putting some fluid back up inside the uterus. If things are just not looking healthy or safe for the baby or the mother, that would necessitate a C-section.

Few other factors include: Failure to progress with good labour pains; cervix does not dilate; disproportionate size of the pelvis and the baby; big baby and foetal distress.

What Are The Symptoms Of Pregnancy

Symptoms of Pregnancy

- missed period
- breast tenderness
- nausea, vomiting or morning sickness
- headache
- bloating

Is hair coloring during pregnancy safe?

Whether using hair dye products during pregnancy is safe is a common question on the mind of pregnant women in countries where hair coloring is common among women. Do hair dye products affect the health of your developing baby?

The answer to whether it is safe to dye hair during pregnancy is not clear. The probability is that only a small amount of hair dye is absorbed into your body. This makes it unlikely that the modest amount of chemicals absorbed by your system would reach your baby. No changes to developing babies were noted in the few animal and human studies that are complete. If you are unsure about whether you should dye your hair during pregnancy, you should share your concerns with your doctor.

Are over the counter (OTC) drugs dangerous during pregnancy?

An estimated 10 to 45 percent of pregnant women in the first trimester, unaware of their condition, reach for the most common OTC drug, aspirin. Aspirin and other drugs containing salicylate are not recommended throughout pregnancy, especially during the last three months, except under a doctor's supervision. Acetylsalicylate, a common ingredient in many OTC painkillers, may prolong pregnancy and cause excessive bleeding before and after delivery.

Overall, most other OTC drugs can be used during pregnancy with the supervision of a physician. Although scientists do not know the effects on the fetus of all OTC and prescription drugs, some are known to cause birth defects and should be avoided.

Since 1984, all OTC drug products have carried the following warning: "As with any other drug, if you are pregnant or nursing, seek the advice of a health professional before using this product."

One drug that can cause severe birth defects is Accutane, or isotretinoin. Accutane, a derivative of vitamin A, is a powerful prescription drug that can clear severe cystic acne, but can cause birth defects (such as heart defects, small jaw, cleft palate, and skull and facial disfigurements) in about 1 out of every 4 exposed fetuses. Accutane can also cause miscarriages.

Avoid any self-medication and in case of emergency, you can use paracetamol for pains or fever.

Post-Pregnancy

Can I get pregnant while breast-feeding?

Yes, there are chances of you getting pregnant while breast-feeding. Breast-feeding is up to 98% effective as a natural contraceptive for up to six months after childbirth if your period has not returned. This method of birth control is called the Lactational Amenorrhea Method or LAM.

How soon can I start exercise after my baby's birth?

Every woman is different. Several factors individual to each new mother may affect her starting date, including the labor and birth experience (vaginal vs. c-section), your baby's disposition, your exercise history, and how much energy you have. Typically, if you were taking prenatal exercise classes, you can return to classes at 3-4 weeks postpartum. Be sure to speak with your physician or nurse midwife about your desire to begin exercise.



Is it ok to breastfeed if I am beginning an exercise program?

Yes, exercise has not been shown to have any adverse effects on milk production or composition in mothers who exercise at a moderate intensity. If you notice your baby has an aversion for post exercise milk, you may find it easier to feed the baby or express milk before your activity. Adequate fluid intake is also important to remain hydrated for exercise.

How common is depression during and after pregnancy?

Depression that occurs during pregnancy or within a year after delivery is called perinatal depression. The exact number of women with depression during this time is unknown. But researchers believe that depression is one of the most common complications during and after pregnancy. Often, the depression is not recognized or treated, because some normal pregnancy changes cause similar symptoms and are happening at the same time. Tiredness, problems sleeping, stronger emotional reactions, and changes in body weight may occur during pregnancy and after pregnancy. But these symptoms may also be signs of depression.

What causes depression?

There may be a number of reasons why a woman gets depressed. Hormone changes or a stressful life event, such as a death in the family, can cause chemical changes in the brain that lead to depression. Depression is also an illness that runs in some families. Other times, it's not clear what causes depression.



Everything You Wanted To Know
About Pregnancy

Frequently Asked Questions



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