

Foreword

This booklet is for you if you are planning to have a baby or you are already pregnant. Whether you're a first-time mum or you've been there before, you will want to look after yourself over the next few months. Tommy's aim is to give every baby the best start in life by providing information to parents about health during pregnancy. This book contains useful tips to help you through a healthy pregnancy.

If you have any more questions about your pregnancy you can speak to a Tommy's midwife by calling our **pregnancy information line** on **0870 777 30 60**. Alternatively, you can email **info@tommys.org**.

From all the team at **Tommy's**

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Tip 1 Watch what you eat!

A simple, balanced diet is one of the most important ways you can nurture a healthy pregnancy. Nutrients from a variety of fresh, natural foods give energy and nourishment to you and your baby.

You don't need a special diet when you're pregnant, but you should make sure that you eat healthily to help your baby grow and develop well.

Good enough to eat

Food type	Good sources	How many portions per day?	Why are they important?
Protein	Chicken; red meat; fish; nuts and pulses.	1 portion (around 50-75g of meat, poultry or fish).	Protein is vital for the growth of your baby as it builds new tissue for bones, muscles and organs.
Dairy products	Milk; cheese and yoghurt.	1-2 portions (one portion is around 300ml of milk, or 30g of cheese).	Dairy products provide calcium and vitamin D – essential for strong bones and teeth.
Carbohydrates	Wholegrain bread; pasta; rice; potatoes; and breakfast cereals.	Should make up the bulk of your main meal each day.	Carbohydrates are packed with energy and provide fibre and protein.
Fruit and vegetables	Eat a combination of differently coloured fruit and vegetables. Every pigment has different nutrients, each key to your baby's development.	5 portions per day (examples of a portion are three tablespoons of cooked veg or one serving of fruit).	Fruit and vegetables provide essential vitamins, minerals and fibre.
Fluids	Plain water and fruit juice.	2 litres.	Fluids keep you hydrated and help avoid constipation which is a common complaint during pregnancy.

Snacking

Your appetite may increase, especially during the last three months of pregnancy, so it is important to eat regularly and snack between meals. Snacking regularly every couple of hours can also help fight the nausea of morning sickness. Try snacking on nuts, raw vegetables or fruit, throughout the day.

Cravings

Don't be surprised if you start craving certain foods during your pregnancy. This is common, and you shouldn't worry about it. You might find that some foods taste different while you are pregnant. It's also normal to go off foods you have previously enjoyed.

Vegetarian and vegan diets

If you carefully plan a vegetarian diet there is no reason why it would be unhealthy or lacking in essential nutrients. You will need to ensure you are getting enough protein, calcium, iron and vitamin B12. Try eating some of the following foods which are high in some of these nutrients:

- grains (eg, oats, rice, wheat)
- dairy (or if vegan, enriched Soya milk and Soya products – eg yoghurt, cheese and tofu)
- fruit and vegetables
- beans and pulses (eg, chickpeas or lentils)
- nuts and seeds (eg, pine nuts or cashews).

It would be a good idea to check your diet with your doctor or midwife to make sure your protein intake is adequate for your baby's development.

Weight gain

Different women gain different amounts of weight in pregnancy. You not only gain the weight of the baby but also the weight of your additional blood volume. The size of your breasts and womb will also increase, while the placenta and the fluid around the baby all add to the weight you'll put on. You'll probably gain around 10 to 14kgs. Don't feel that you have to eat for two, though – that is a myth. Your daily calorie intake should probably increase by around 100 to 150kcal in the first and second trimester, with no calorie increase in the third trimester. Quality, rather than quantity, is the golden rule.

Pregnancy super foods!

These foods are packed with vitamins, minerals and nutrients. If you can eat some of these each day, you'll be doing very well:

- bananas, oranges and other fresh fruit
- dried apricots and prunes
- broccoli and other green vegetables
- salmon and other oily fish
- wholemeal bread
- brown rice
- lean red meat
- chicken and turkey
- yoghurt
- pulses and lentils
- breakfast cereals
- nuts and seeds (see page 4 for information about peanuts).



Foods to avoid

Vitamin A

Consuming high levels of vitamin A in pregnancy has been linked with birth defects. You should avoid taking multi-vitamins containing vitamin A, liver and liver products, fish liver oils (such as cod liver oil) and other foods fortified with vitamin A.

Some cheeses

Soft cheeses with a mould rind (such as Brie and Camembert) or blue veined cheeses (such as Stilton) should be avoided, as they may contain listeria – which can be harmful to unborn babies.

Pâté

Pâté may also contain listeria, so you should avoid all types of pâté and not only liver pâté.

Eggs

Raw or undercooked eggs should be avoided as they may cause salmonella – a type of food poisoning which can cause a serious illness to yourself and your baby. Both the egg white and yolk should be cooked until solid. Raw eggs should also be avoided in fresh mayonnaise (mayonnaise bought in non-refrigerated jars is safe) and in desserts such as mousse.

Raw or undercooked meat

Any meat that you eat whilst pregnant should be thoroughly cooked through, so there is no remaining pink or bloody meat. Undercooked or uncooked meats such as Parma ham raises a risk of toxoplasmosis (see tip 6) and can cause food poisoning. Raw meat should be stored at the bottom of your fridge, so the juices cannot drip onto other foods. You should also ensure you wash your hands and any cooking utensils after they have come into contact with raw meat.

Fish

Fish is good for you and you should aim to eat at least two portions of fish a week, including one portion of oily fish. Most fish is fine to eat in pregnancy, but a few types of fish should be avoided – shark, swordfish and marlin. Tuna should be limited to no more than two steaks a week or four small cans (drained weight of 140g), as all tuna contains levels of mercury that could damage the development of the baby's nervous system. The consumption of oily fish such as fresh (not tinned) tuna, mackerel or sardines should also be limited to two portions a week. Avoid shellfish if is uncooked, as eating this can cause food poisoning.

Nuts

It is recommended that peanuts are avoided if you or your partner have allergies such as eczema, asthma or hayfever. By doing so, it is hoped to reduce the chances of your baby suffering from a nut allergy.

Sugary or fatty foods

Foods such as fast food, fizzy drinks, sweets, biscuits and crisps are often high in calories and have very little nutritional value in our diets. Eaten regularly they can often mean you gain excess weight, so they should only be eaten occasionally and kept to a minimum. These foods can also cause you to suffer with indigestion and heartburn.

Caffeine

Caffeine should be limited to no more than 300mg a day. This is roughly the same as three mugs of instant coffee, eight cans of cola or eight plain chocolate bars (50g). If you drink a mixture of tea, coffee and cola remember that this all adds up.

Tip 2 Take a folic acid supplement

Folic acid is essential for blood formation and the formation of the central nervous system. Lack of folic acid can lead to conditions like spina bifida. Folic acid is part of the vitamin B group and can be found in nuts and green leafy vegetables, like broccoli, spinach and Brussel sprouts. But it is unlikely that you could get as much folic acid as you need in a normal diet, so it is recommended that you take a supplement. You should take a 400mcg (≅ 0.4mg) supplement per day until at least the 12th week of

pregnancy. It is a good idea to start taking folic acid supplement from the day you start trying to get pregnant. Folic acid is available free with a prescription from your GP.

There are many other vitamins and minerals required for the healthy growth of your baby, but as long as you are eating a balanced diet, you should not need any other supplements. Some women do need additional iron, but your doctor or midwife will advise you.

Tip 3 Avoid alcohol

Government guidelines recommend that pregnant women do not drink any alcohol during pregnancy. Whilst limiting alcohol to one or two units once or twice a week is not thought to be harmful, with the varying strengths of alcoholic drinks it can be hard to ensure you do not exceed the limit.

To measure the units in your usual alcoholic drinks, visit the unit calculator on www.drinkaware.co.uk.

Heavy drinking can severely damage your baby because alcohol passes quickly and easily across the placenta. Some alcohol from every drink you have will reach your baby's bloodstream.

Drinking a lot of alcohol during pregnancy puts your baby at risk of developing fetal alcohol syndrome, which can result in:

- facial abnormalities (such as cleft palate or hare lip)
- heart defects
- abnormal limb development
- lower than average intelligence.



Help and support

If you have been used to drinking a lot and find it hard to cut down now that you are pregnant, you may need extra help. You can call Drinkline which offers personal help and support on 0800 917 8282 (24 hours, daily).

Tip 4 Stop smoking

Cigarette smoke can be very harmful to your unborn baby. Smoking cigarettes reduces the oxygen level in your blood, which deprives your baby of oxygen. This can result in:

- miscarriage
- premature birth
- stillbirth
- birth defects.

Effects are reduced but breathing in someone else's smoke also poses risks.

Your baby is also at risk of low birthweight, cot death and of developing bronchitis or asthma.

The more you smoke, the greater the risk. Ideally, both you and your partner should quit smoking before trying for a baby. (Smoking can reduce fertility in both sexes, so smokers often find it difficult to conceive.) But it's never too late to stop.

Help and support

Help and support is available. Contact the NHS Pregnancy Smoking Helpline on 0800 169 9 169 (12 noon to 9pm, daily) or call the Smoking QuitLine on 0800 00 22 00 (9am to 9pm, daily).



Tip 5 Avoid drugs

Like alcohol, many drugs pass directly from the mother's bloodstream through the placenta to the baby. When pregnant, you should always consult your doctor or pharmacist before taking any medication, including over the counter drugs like cold and flu tablets.

Regular medication

If you have a condition for which you take regular medication, it's best to inform your doctor that you're intending to become pregnant. Your doctor will advise you whether or not an alternative treatment plan would be suitable. You should always check with your doctor before stopping regular medication as it may do more harm to you and your baby to stop than to continue.



Illegal drugs

All illegal drugs are harmful to you and your baby. Drugs like heroin, cannabis, cocaine, amphetamines, LSD and ecstasy can cause:

- bleeding
- birth defects
- miscarriage
- premature labour
- stillbirth
- low birth-weight.

Your baby could also suffer problems after birth such as drug withdrawals, fitting, cot death and lower than average intelligence.

Help and support

For help and support, speak to your doctor or midwife, or phone the National Drugs Helpline on 0800 77 66 00 (24 hours).

Tip 6 Avoid toxoplasmosis

Toxoplasmosis is an infection, caused by a tiny parasite, which is passed from a mother to her unborn baby. The baby is at risk when the disease is caught by the mother during pregnancy. The infection can cause the following problems with the baby:

- brain damage
- eye damage
- epilepsy
- miscarriage
- stillbirth.

Some babies born with toxoplasmosis have no obvious damage at birth but develop symptoms, usually eye damage, during childhood and sometimes adulthood.

The parasite which causes toxoplasmosis is passed to humans via contact with infected cat faeces or eating raw or undercooked infected meats. It can be passed on via:

- undercooked meats
- smoked-only or cured meats
- unwashed fruit and vegetables
- earth contaminated with cat faeces.

It is important to take the following precautions to avoid catching the toxoplasmosis infection:

- only eat meat that has been cooked through, don't eat pink or rare meat
- don't eat uncooked meat like Parma ham
- wash your hands after handling raw meat
- wash fruit and vegetables before eating

- wear gloves while gardening and wash your hands thoroughly afterwards (avoid gardening in areas soiled by cat faeces)
- if you have a cat, ensure the litter tray is changed daily but don't empty the cat tray yourself (if you must empty it, wear gloves and wash your hands thoroughly afterwards).

Occupational hazards

Some women may be at increased risk of catching the toxoplasmosis infection because of their job. If your work involves farming, gardening, catering or handling animals you must take special care. The toxoplasmosis infection is also spread during lambing, so it's important to take extreme caution if you work in this field. It is advisable to avoid involvement with lambing during pregnancy if possible.

Help and support

For further information about the toxoplasmosis infection, contact Tommy's pregnancy information line (which now covers the work of The Toxoplasmosis Trust) on 0870 777 30 60.



Tip 7 Keep fit

Carrying a growing baby around for nine months is hard work. Giving birth can be even harder. The fitter you are, the easier it will be for you and your baby. You'll feel livelier and you'll recover more quickly after the birth. Exercise is also good for reducing stress.

Benefits of exercise

- Increase your strength and stamina by working your heart and lungs. The increased oxygen flow is passed on to your baby.
- Feel good! When you exercise, the body releases hormones called endorphins. These make you feel more positive and better about yourself. Your growing baby feels the benefit of them too.
- Improve your circulation. Good circulation helps avoid uncomfortable but common pregnancy complaints such as cramp, piles, constipation and swelling. Regular exercise helps improve circulation.
- Sleep well. Disturbed sleep patterns are a common pregnancy complaint. Exercise can help you sleep better.

Gentle workouts

Gentle forms of exercise such as swimming, walking and yoga are excellent ways of improving your stamina and toning your body during pregnancy without heavy impact. If you are able, join an aqua aerobics or antenatal yoga class.

Practise caution

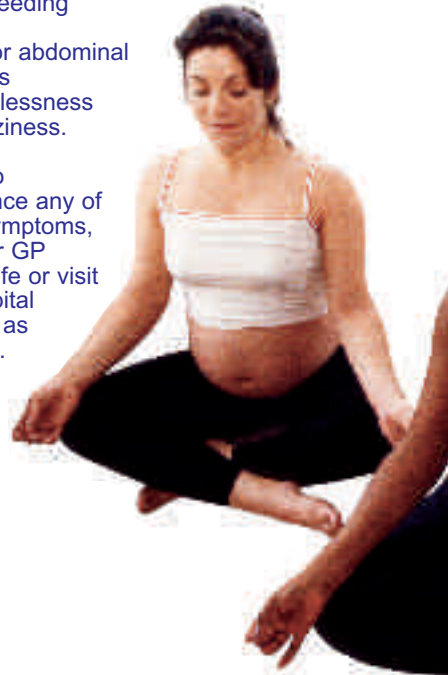
If you haven't been doing very much exercise, pregnancy can be a good reason to start a moderate course of exercise. But it is important to start off

slowly and gradually increase; talk to a personal trainer or your midwife. Pregnancy is not the time to start jogging, or a heavy exercise regime. Whatever exercise you're doing, you should be able to continue talking while doing it. If you can't, slow down.

When you are pregnant, hormones released by your body make your joints more vulnerable to injury so make sure you don't overstretch. Avoid exercise which could risk bumps to your bump, such as kickboxing, judo or squash, or exercises which may result in you losing your balance, such as horse riding or downhill skiing. Check your planned exercise routine for safety and if you are taking part in any class, make sure your instructor knows you are pregnant. Whenever you exercise, start with a gentle warm up and end with a cool down to prevent injury. Stop exercise immediately if you experience:

- any bleeding
- pain
- back or abdominal cramps
- breathlessness or dizziness.

If you do experience any of these symptoms, see your GP or midwife or visit the hospital as soon as possible.



Tip 8 Avoid stress

Pregnancy should be an exciting and rewarding time. However, for some women, it can also be a time of stress. Research suggests that stress leads to high blood pressure, which can be a cause of premature birth and miscarriage. It is important to manage the amount you take on during your pregnancy and to give yourself plenty of time to rest and relax.

A working pregnancy

Most women choose to remain at work until around weeks 34 to 36 of their pregnancy. There is no reason not to work until this late in pregnancy if you have completed a risk assessment of your workplace, and if your doctor or midwife confirms there are no medical reasons for you to stop work. However you must be realistic about what you can achieve during your pregnancy. Many people report feeling extra pressure to

complete work before their maternity leave and take on more than is sensible for a healthy pregnancy. It's a good idea to meet with your manager to discuss your workload and to plan together for the coming months, to set realistic goals for the duration of your pregnancy. If your manager is not available to discuss your situation with you, consider writing your own plan.

Tiredness

Tiredness is common during pregnancy, especially in the first three months and last few weeks. Learn to pace yourself. If you stand a lot during the day, make sure you take breaks to sit down. Rest during your break for lunch. Short breaks with your eyes closed and your feet up (don't worry if you don't actually sleep) can really help revive energy levels, so take 20 minutes out when you need to. If you can, enlist the help of your partner, family and friends with cooking, cleaning or childcare.

Relaxation

Learning to relax during pregnancy will help relieve stress and make you feel more comfortable. It will also help you to work more effectively with contractions during labour. There are a number of techniques, like controlled breathing and gentle stretching, which can help you relax. Try a few and decide which works best for you.

The most important thing is to listen to your body, make time for yourself, and enjoy your pregnancy.



Tip 9 Attend all antenatal appointments

Antenatal appointments play a vital role in the care of your pregnancy. They are important for monitoring the progress of your baby's development, and also give you an opportunity to ask questions and learn about what to expect from your pregnancy and labour.

It's important to attend all antenatal appointments. If you work full time, your employer is required to allow you time off to attend appointments. Keep your manager informed about your appointment dates so your workload can be managed effectively.

Your antenatal care will be managed either by a doctor, a midwife or a combination of both. If you need special care during pregnancy, usually because of a previous medical problem, you'll be seen by an obstetrician at your appointments. Your partner, a relative or a friend is welcome to attend some or all of your appointments with you.

Your first appointment

Your first appointment will be at around 8 to 12 weeks of pregnancy. It's usually the longest appointment, so leave plenty of time for it. You'll be asked a number of questions about your medical history, including any childhood or recent illnesses and illnesses in your family; the date of your last menstrual period; details of previous births or pregnancies; etc. This is so your carers can understand your individual situation and get an idea of any potential risks to your pregnancy.

At your first appointment, your blood pressure will be measured, and with your consent, your blood tested for:

- blood group (to ensure your blood group is known)
- rhesus status (if you're rhesus negative, to enable appropriate action to be taken)
- haemoglobin levels (if low can indicate anaemia)
- rubella antibodies (to check whether you're immune to German measles)
- HIV (if found precautions can be taken to reduce the chance of the virus passing to the baby)
- syphilis (a sexually transmitted infection which if found can be treated)
- sickle cell (to find sickle cell status, to enable appropriate action to be taken)

Your urine will also be tested for protein and glucose, and you'll probably discuss an ultrasound scan.

Ultrasound scans

Ultrasound scans measure sound waves in the womb to build up a picture of your baby. Usually two scans are offered, one at 10 to 14 weeks, and the second at 18 to 20 weeks. The first scan is to:

- estimate your baby's size and that everything is generally ok
- confirm the due date
- you may also be offered a nuchal translucency scan, which assesses the risk of Down's syndrome

The second scan is also called an anomaly scan. It again measures your baby's size and position and is a check for abnormalities in your baby's development.

Later appointments

You'll usually have an antenatal appointment every four to six weeks after your first appointment until about week 36, then every one or two weeks until the birth. These later visits are usually shorter than the first, but are just as important to check your baby's development. Your urine and blood pressure will be tested each time, and your abdomen felt to measure the size of your baby, the amount of fluid surrounding it and where it is lying. Your doctor or midwife may also listen for your baby's heartbeat. They often use a Sonicaid – a small instrument that allows you to hear the heartbeat too.

You might also be offered further tests to check for abnormalities early in pregnancy, such as amniocentesis, chorionic villus sampling. Risks are associated with some of these tests, so you'll only be offered them if you're at risk for any reason. If you're offered any of these tests, ask your doctor or midwife to explain the procedure and implications.

Your input

Antenatal appointments are not just a time for your midwife or doctor to check you and your baby, they are also your opportunity to ask any questions you may have about your pregnancy and labour. Make the most of this time, and ask as many questions as you need to – it's a good idea to write a list before your appointments. Don't be afraid to ask embarrassing questions, for example about sex during pregnancy or bowel movements. Ask your doctor or midwife for more time in your appointment if you have more questions, or if there is anything you don't understand.

If you have any concerns between antenatal visits, contact either your GP or midwife to discuss your worries or to make an earlier appointment.



Tip 10 Contact your midwife or doctor

Contact your midwife or doctor if you're worried about your health for any reason, or if you experience any of the following:

- reduced movement of your baby
- vaginal bleeding
- breaking 'waters'
- swollen face, hands or feet
- disturbed vision or flashing lights
- abdominal pain
- recurring headaches
- generally feeling unwell.

If you need urgent assistance go straight to hospital or contact your GP or midwife immediately. For less urgent help you can contact NHS Direct on 0845 4647 who'll put you in touch with relevant help in your area.

Bleeding

If you experience vaginal bleeding at any stage in your pregnancy, you should see your doctor or midwife straight away. If they are unavailable, go to the accident and emergency department of your hospital.

Bleeding early in pregnancy can be a sign of miscarriage. Bleeding later in pregnancy can be a sign that the placenta is lying too low in the womb, or that the placenta has started to separate away from the wall of the womb.

Pre-eclampsia

Pre-eclampsia is a dangerous condition which can be life-threatening to both mother and baby if allowed to continue. The presence of high blood pressure combined with protein in the urine is an indication of

pre-eclampsia, which is why these are routinely checked at every antenatal visit. Other symptoms may be present alongside high blood pressure, including headaches, blurred or altered vision, abnormal swelling (especially of the hands, face or feet) and upper abdominal pain.

