



WHAT IS A MIDWIFE?

Certified nurse-midwives (CNMs) are licensed health care providers educated in nursing and midwifery. Certified midwives (CMs) are licensed health care providers educated in midwifery. CNMs and CMs have graduated from college; they have passed a national examination; and they have a licence to practice midwifery from the state they live in. Most of the midwives in the United States are CNMs or CMs.

What Do Midwives Do?

CNMs/CMs help over 300,000 women give birth each year in the United States. Most of these births are in hospitals. CNMs/CMs also care for women who decide to have their baby in freestanding birth centers and/or at home. CNMs/CMs provide health care to women all through life, including: prenatal care, birth, care after birth, care for the new baby, annual exams, birth control planning, menopause, and health counseling.

Why Would I Choose a Midwife for Care During My Pregnancy?

CNMs/CMs believe you need time and special attention so you can be healthy and able to take care of your baby. Midwives specialize in providing *support*, regular health care, and in helping you get any additional care needed. Midwives are experts in knowing the difference between normal changes that occur during pregnancy and symptoms that require extra attention.

What if I Have a "High-Risk" Pregnancy or Complication During Labor?

Your CNM/CM will prescribe medicine and order treatment for any common illness that you might get during pregnancy. Midwives work with doctors who specialize in illness during pregnancy. If you have a medical problem during pregnancy or complication during labor, your midwife will work with a doctor to make sure you get the best and safest care for you and your baby. Your midwife will also work with other health care providers: nurses, social workers, nutritionists, doulas, childbirth educators, physical therapists, and other specialists to help you get the care you need.

What if I Want Pain Medicine During Labor?

If you think you want pain medicine during labor, your midwife will give you information about the medicines available so you can decide what is right for you. Midwife means "with woman." If you decide you want pain medicine during labor, your midwife can prescribe it for you.

Should I See a Midwife if I am Not Pregnant?

Many women go to their CNM or CM for annual check ups, family planning, and to get care for common infections that happen to women. For example, your midwife can answer questions about all the methods of birth control, help you decide what is best and safest for you, and prescribe it for you.



QUESTIONS TO ASK WHEN CHOOSING A HEALTH CARE PROVIDER DURING PREGNANCY

Questions to Ask Any Health Care Provider

- Do you practice alone or with others? Do they share your beliefs and manner of practice?
- Who attends births for you when you are away? How can I reach you?
- What kind of childbirth preparation do you recommend?
- Do you provide labor support and stay with women throughout labor?
- How do you feel about doulas or family and friends being with me during labor?
- Do you allow moving around and eating or drinking during labor?
- Can I hold my baby right after birth, breastfeed, and not be separated?
- When do you recommend IVs, fetal heart rate monitoring, pitocin, or episiotomy?
- Do you care for women who want a vaginal birth after a previous C-section?
- How much do you charge? Is your care paid for by my insurance?

Questions to Ask Providers In Free-Standing Birth Centers

- What are your requirements for birth in this center?
- How often do women in your birth center go to a hospital during labor?
- When do you advise women to go into the hospital?
- What are your arrangements if I have a problem that requires being in a hospital?

Questions to Ask Providers Who Attend Homebirths

- How do you handle problems during labor? When would we go to the hospital?
- What drugs and equipment do you use in the home?
- Do you have a formal agreement with an obstetrician/gynecologist to provide care if problems occur?
- Which hospital will I be transported to if a problem occurs during labor?
- Would you stay with me if we transfer?
- Are you trained in newborn resuscitation?
- How many times do you visit after my baby is born?

FOR MORE INFORMATION:

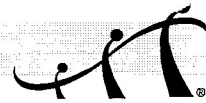
www.MyMidwife.org—A Web site with information on midwifery, maternity, women's health, and family-centered care. There is a "find a midwife" link, where you can search for a midwife by location.

www.ChildbirthConnection.org—A not-for-profit organization that has worked to improve maternity care for mothers, babies, and families since 1918. They promote safe, effective, and satisfying evidence-based maternity care.

www.ourbodiesourselves.org—Our Bodies Ourselves (OBOS), also known as the Boston Women's Health Book Collective (BWHBC), is a nonprofit, public interest women's health education, advocacy, and consulting organization.

www.jmwh.org—A link to other, free Share With Women columns.

Adapted with permission from Our Bodies, Ourselves: A New Edition for a New Era (New York: Simon & Schuster, 2005).



FOLIC ACID—WHAT'S IT ALL ABOUT?

What Is Folic Acid?

Folic acid is a B vitamin. The body uses folic acid to help make red blood cells and other new cells. The folic acid found naturally in food is sometimes called "folate."

Why Is Folic Acid Important?

People who do not get enough folic acid in their diet can get anemia—their blood does not carry oxygen well, and they feel very tired and weak. Children who do not get enough folic acid may grow poorly. Not having enough folic acid can also increase the risk of heart disease, colon cancer, and stroke.

Getting enough folic acid is *really* important in pregnancy. Taking folic acid from the very beginning of pregnancy can help prevent some neural tube defects in your baby. Neural tube defects are problems of the spine and brain, such as spina bifida. Severe neural tube defects can cause death or make it hard for your baby to walk.

How Much Folic Acid Do I Need?

Most people need to have about 400 micrograms (mcg) of folic acid in their diet every day. (Pregnant women need 600 mcg a day.) See the next page for ways to get enough folic acid in your diet.

You should take 400 mcg of **extra** folic acid every day if you:

- Are pregnant.
- Could become pregnant. This is because neural tube defects occur in the very first month of pregnancy, when most women don't even know they are pregnant.

If you are pregnant, or could become pregnant, you need more folic acid than you can normally get from your diet. You will probably need to take a vitamin pill that adds folic acid to your diet. Talk with your health care provider about how much folic acid you should be taking.

It is not a good idea to take more than 1,000 mcg of extra folic acid. Too much folic acid can be dangerous for your health.

Who Else Should Take Extra Folic Acid?

Other people who may need to take some extra folic acid are:

- Smokers
- People who take a lot of aspirin or antacids
- People who take some drugs for cancer treatment and for arthritis

Talk with your health care provider about folic acid. She can help you decide if you need some extra folic acid in your diet and how much you should take.

Reading level = 6.4.

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Folic Acid in Your Food

The word folate comes from the same root as the word “foliage,” so leafy green vegetables are very good sources of folic acid. Folic acid is also found in cooked dry beans, nuts, and seeds. Enriched grains, such as bread, pasta, and rice, and fortified breakfast cereals, are also good sources of folic acid. Check food labels to be sure that these foods have been enriched with folic acid.

Excellent Sources: Provide 100 micrograms (mcg) or more per ½ cup serving:

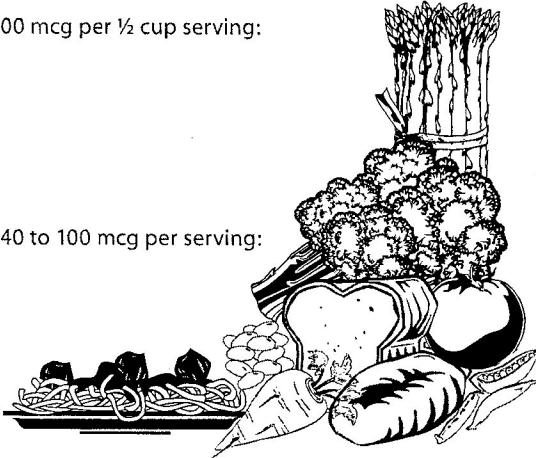
- Asparagus
- Turnip greens, mustard greens
- Okra
- Fortified breakfast cereals (see label for serving size)
- Cooked dry beans, such as pinto beans, kidney beans, lentils and black-eyed peas
- Liver (2 ounces, cooked)

Good Sources: Provide 40 to 100 mcg per ½ cup serving:

- Broccoli
- Spinach
- Green peas
- Fresh beets, cooked
- Spaghetti, pasta
- Rice
- Tofu

Other Good Sources: Provide 40 to 100 mcg per serving:

- Tomato juice (¾ cup)
- Orange (1)
- Avocado (¼)
- Sunflower seeds (1 ounce)
- Peanut butter (2 Tbsp)
- Enriched bread (1 slice)
- Flour tortilla (One 10" round)



For More Information

March of Dimes Folic Acid Net Web site: www.folicacid.net/login.asp

This Web site has a great, easy-to-use quiz for helping you learn about folic acid and getting enough in your diet.

American Dietetic Association Web site: www.eatright.org

This Web site has more in-depth information on folic acid as well as many other nutrition questions.

Spina Bifida Association Web site: www.sbaa.org

This Web site has very good information on folic acid and more in-depth information on neural tube defects.

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NAUSEA AND VOMITING DURING PREGNANCY

Does Every Woman Experience Nausea or Vomiting During Pregnancy?

A few lucky women do not have nausea or vomiting during pregnancy. About one in four pregnant women have only mild nausea. Three in every ten pregnant women have nausea severe enough to affect their daily lives. One half of all pregnant women experience both nausea and vomiting during the first months of pregnancy. Nausea and vomiting during pregnancy tends to be the worst 8 to 10 weeks after your last menstrual period. It usually goes away by 12 to 16 weeks after your last period. It is often called "morning sickness," but it can occur all day long.

What Causes Nausea and Vomiting During Pregnancy?

We do not know for sure what causes nausea and vomiting during pregnancy. Changes in hormone levels play a role. If your mother had morning sickness when she was pregnant, you may be more likely to have nausea and vomiting during pregnancy. A history of motion sickness or stomach problems before you got pregnant may be another risk factor.

Are Nausea and Vomiting During Pregnancy Dangerous?

Mild to moderate nausea and vomiting may make you feel awful, but it will not hurt you or your baby. Severe vomiting during pregnancy—that prevents you from keeping any food down—is called hyperemesis gravidarum. It is rare, but can cause health problems. You should call your health care provider if any of the following apply to you:

- You are not able to keep any liquids or foods down for 24 hours
- You are vomiting several times a day or after every meal
- You have abdominal pain, difficulty urinating, or you have a fever

How are Nausea and Vomiting Treated?

Nausea or vomiting during pregnancy is treated in three easy steps:

1. Simple diet changes may lessen nausea and help you avoid vomiting. This is all it takes for many women.
2. If diet changes are not enough, you can try taking ginger or using acupressure bands. Both have been shown to decrease nausea.
3. Finally, if the nausea and vomiting are making it hard to do your usual activities, medications can be prescribed. Please check with your health care provider before taking any medicine.

Are Antinausea Medications Dangerous for my Baby?

There are several different types of nausea medicines that work well and are safe for you and your baby. Because nausea and vomiting can be caused by different "triggers" in your body, you and your health care provider should work together to find the medicine that is right for you.



TIPS TO TREAT NAUSEA AND VOMITING DURING PREGNANCY

First Step: Lifestyle and Diet Changes

- Nausea during pregnancy is worse if you are dehydrated (if there is not enough fluid in your body) or if the levels of sugar in your blood are low from not eating often enough.
- Eat plain crackers or dry toast in the morning before getting out of bed and at any time during the day when you feel nauseous.
- Instead of three large meals, eat small meals every 2 to 3 hours.
- Avoid foods that have strong odors.
- Sucking on a lemon or lime slice may help.
- Try eating foods that are high in carbohydrates, such as potatoes, noodles, or toast.
- Do not lie down right after eating.
- Try drinking carbonated beverages between meals; wait for 30 minutes after eating to drink liquids.
- Dairy products may make nausea and vomiting worse, but some women say yogurt is helpful.
- Avoid foods that are greasy, fried, spicy, or very hot.
- Some women find that prenatal vitamins make their nausea worse. If so, check with your health care provider about stopping the vitamins until the nausea goes away. If you stop taking a prenatal multivitamin, you should take one tablet of folic acid daily (0.4 mg, which is 400 micrograms per day) during the first trimester. Folic acid tablets will not worsen nausea.

Second Step: Nonmedication Treatment

Ginger

Ginger has been used for treating nausea since ancient times. Ginger root tea, ginger gum, ginger snaps, ginger syrup added to water, and ginger ale are all safe, and can decrease the severity of your nausea. You can also buy ginger capsules at a drug store. The dose of ginger that has been tested is 1 gram (250 mg capsules powdered ginger taken four times per day). Ginger capsules come in several doses. If you want to use ginger capsules, ask your health care provider how often you should take them.

Acupressure Bands

Seabands are wristbands with a pressure point placed on the inside of your wrist. They are often used for motion sickness. Some women find them helpful for their nausea, and they are safe.

Third Step: Medication

There are over-the-counter and prescription medicines that can be used if your nausea and vomiting are very severe. Talk with your health care provider before taking any additional vitamins or medicines.

FOR MORE INFORMATION ABOUT NAUSEA AND VOMITING

Motherisk Nausea and Vomiting HelpLine

(800) 436-8477

<http://www.motherisk.org/women/morningSickness.jsp>

The Motherisk HelpLine and Web site are staffed by counselors who are specially trained in helping you with questions about nausea, vomiting, and safety of medications.

SOS Morning Sickness

<http://www.sosmorningsickness.com/>

This Web site has extensive information on nausea and vomiting.

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ENVIRONMENTAL HAZARDS DURING PREGNANCY

There are many chemicals in the air, in homes, and in businesses that could hurt you or your baby's health during pregnancy. This handout tells how to avoid pesticides, dangerous chemicals, and lead, which may be harmful to you or your baby.

How Can I Avoid Pesticides During Pregnancy?

Pesticides are chemicals used to kill bugs. They are found in water, on fruits, vegetables, in gardens and parks, and most places plants grow. Make sure to wash all fruits and vegetables before eating them. It is a good idea to peel them, too. Pregnant women should avoid pesticides, but if you have to use them:

- Have someone else apply the chemical.
- Avoid being in the area where pesticides have been used for 24 hours.
- Remove food, dishes, towels, and eating utensils from the area where pesticides are used.

If you have to use pesticides yourself, wear gloves and clothing that you can wash.

Are Cleaning Products Dangerous?

There are lots of chemicals used in cleaning products. Make sure to read the labels for warnings for pregnant women. *NEVER* use anything labeled "toxic." Do not mix ammonia and chlorine products. The mixture makes a gas that is harmful for anyone. There are many natural products, which can be safer to use during pregnancy. If you use any cleaning products, make sure to wear thick rubber gloves, and open the windows to get rid of the fumes.

What About Beauty Products During Pregnancy?

Chemicals used in nail salons are very dangerous. They let off fumes that can be very toxic, and you should avoid them while you are pregnant. If you cannot avoid them, make sure there is an open window or door for fresh air. To be on the safe side, you should not use artificial fingernails while you're pregnant. Hair products such as dyes, permanents, and straighteners are safe to use during pregnancy. You will get a very small amount of the chemical into your body from your scalp, but there are no reports that this exposure is harmful to you or your baby.

How Can I Avoid Lead Exposure?

Lead can be damaging to the nervous system. It has been illegal to use lead in making household products since 1978, but lead might be found in the paint and pipes present in older homes. Other sources of lead include drinking water from old pipes, lead crystal glassware, some ceramic dishes, wicks of scented candles, and the plastic grips on some hand tools. Lead may also be found in some arts and crafts materials, such as oil paints, ceramic glazes, and stained glass supplies.

If you think you have lead paint in your home, you can paint over it with latex paint, or there are ways to have it removed safely. You should not be in or around the house for several hours when this happens. If you think your water may have lead in it, contact your state health department to find out how to get your pipes tested. Many home water filters do not remove lead, so you should read their labels carefully.

Some pregnant women have a desire to eat clay soil or chips of clay pottery. This is called "pica" and can result in lead poisoning. Let your health care provider know if you are eating clay.

- Never use tap water to prepare infant formula.
- Only use cold tap water and let the water run for 30 to 60 seconds before drinking it.
- If you are worried about the pipes in your home, use a reverse osmosis water filter such as the "Brita" type. Many home water filters do not remove lead, so you need to read their labels carefully.



Certain craft supplies: Stained glass material, oil paints, ceramic glazes

Watercolor or acrylic paints and glazes



Tap water: Water that has not been tested or you think is unsafe. If you have any concerns about the quality of your water, call your local health department or check with your health care provider.

In the United States, in general, tap water is safe, but it is always important to know that the water you are drinking—from the tap or bottled—has been tested.

NEVER use tap water to prepare infant formula



Lead Paint: Homes built before 1978 may have lead paint. If you suspect lead paint, call a professional to remove it.

DO NOT TOUCH paint that is crumbling or peeling. Make sure to stay away when it is being removed or sanded.



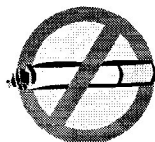
Pesticides: Found in gardens, on fruits, and on vegetables

Wash all produce thoroughly. Peel the skin from fruits and vegetables or buy organic produce if you are able.



Cleaning supplies: Anything labeled “toxic” or any products with a warning on the label

Try natural products, use baking soda, use vinegar and water to clean.



Smoking, drinking, second-hand smoke

Talk to your health care provider about ways to stop. Do not go to places where people smoke.

Are There Other Dangers for My Baby and Me?

Smoking and drinking alcohol are very dangerous for you and your baby. If you currently smoke or drink, your health care provider can talk with you about ways to stop. The smoke from other people's cigarettes or other tobacco products, second-hand smoke, is also very dangerous for both you and your baby. You should avoid any places where people smoke (bars, restaurants), and do not smoke or allow other people to smoke in your home.

FOR MORE INFORMATION

March of Dimes: <http://www.marchofdimes.com/>

Environmental Protection Agency:

About Mercury

<http://www.epa.gov/mercury/index.htm>

Lead in your Home: A Parent's Reference Guide

<http://www.epa.gov/lead/leadrev.pdf>

Environment, Health, and Safety Online: <http://www.ehso.com/ehshome/pregnancy.htm>

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TAKING MEDICINE DURING PREGNANCY

We hear so much in the news about the dangers of medicines for unborn babies. Because of these concerns, many women suffer through colds and headaches without any medicine at all. Some medicines are safe to take when pregnant, and some are not. This handout answers the most frequently asked questions about taking medicines during pregnancy.

Which Drugs Are Safe?

The US Food and Drug Administration has a safety class system for all medicines. Medicines are classified by category; they may be category A, B, C, D, or X. These categories refer to what we know about the effect a medicine has on a developing baby during pregnancy.

- **Category A**—Studies have been done with pregnant women. There is no known risk to the growing baby.
- **Category B**—Studies have been done with pregnant animals and shown no risk, but there are no studies in women; OR studies in animals showed some risk, but studies in pregnant women did not find any risk.
- **Category C**—Studies done with pregnant animals show some risk, but there are no studies in women; OR no studies have been done in animals or humans, so the risk for a pregnant woman is not known. Medicines in this category are often prescribed during pregnancy if you need the medicine. Even though studies have not been done on the medicines in this class, most of them have been used by pregnant women for years without any problem.
- **Category D**—Studies have shown this medicine can harm a developing human baby during pregnancy. However, there are benefits of these drugs for mothers who have a serious illness. This may make them worth taking in spite of the risk. If you need a medicine in this class, your health care provider will talk to you about the pros and cons for both you and your baby.
- **Category X**—Studies have shown these medicines can harm developing human babies during pregnancy. There is no benefit to the mother that makes taking these drugs worth the risk.

Unfortunately, most medicines are category C. Not many studies have been done in pregnant women. We just don't know very much for certain about medicines in pregnancy.

What Are the Category X Medicines?

There are a few medicines on the category X list. The most common are: hormones used for birth control, Isotretinoin (Accutane) which is prescribed for acne, some of the drugs used to control hyperlipidemia, warfarin (Coumadin) which is used to help prevent blood clots, misoprostol (Cytotec) which is an ulcer medication, and vaccines for measles, mumps and smallpox.

Are There Some Times in Pregnancy When it is More Dangerous to Take Medicines?

Your baby is developing most rapidly in the first 15 weeks of your pregnancy. This is the time you most want to avoid being exposed to anything that could harm your baby. To be safe, check with your health care provider before taking any medicine at any time during your pregnancy.

I've Been Taking Medicines That My Health Care Provider Gave Me Before I Got Pregnant. Can I Keep Taking Them?

If you are taking medicine and thinking about getting pregnant, talk with your health care provider. If you are taking medicine and just found out you are pregnant, tell your health care provider as soon as you know you are pregnant. Some medicines are so important to your health that you will need to keep taking them. Some medicines can be changed to a lower dose or different medicine to cut down on the risk to your baby.

Are Medicines I Can Buy Without A Prescription (Over-the-Counter) Safe to Take During Pregnancy?

Some medicines that you can get over-the-counter are safe to use during pregnancy and some are not recommended. Check with the pharmacist or your health care provider before you take anything. This handout lists the most common over-the-counter medicines that are safe to use during pregnancy.



What to Do First

If You Have a Cold

Get plenty of rest. Drink lots of fluids. Wash your hands a lot. Use a saline nasal spray during the day and rub Vicks on your chest and on your throat before you go to bed at night to clear your stuffy nose. Gargle with warm salt water and drink honey with lemon for a sore throat. Rub a little Vaseline inside your nose to keep it from chapping.

Headaches

Drink plenty of water — at least 6 big glasses a day. Eat small amounts all day long instead of 3 big meals — to avoid low blood sugar. Get someone to massage your neck and shoulders for you.

Yeast Infections

Don't douche.

Allergies

First, use the home remedies listed under "colds".

Heartburn

Eat 5-6 small meals per day and do not lie down right after eating. Avoid foods that are acidic (like tomatoes, fruit drinks, spicy foods, fried foods). Drink or eat something soothing like milk, before you lie down. Try chewing gum after eating.

Constipation

Drink more fluids — at least 6 big glasses of water a day is best. Eat lots of fruit and vegetables for bulk.

Diarrhea

Drink lots of clear liquids.

If you Need to Take Medicine

Stuffy nose: chlorpheniramine (Chlor-Trimeton) or pseudoephedrine (Sudafed).

A nasal spray may work well and little drug will get to your baby.

Use oxymetazoline (like Afrin or Vicks Sinex) or phenylephrine (like Dristan).

If you use a medicated nasal spray, stop after 3 days. Using it for a longer time may cause your stuffy nose to get worse!

Cough: Guaifenesin and dextromethorphan (like Robitussin DM). Try to choose a cough syrup with the lowest amount of alcohol.

Acetaminophen (Tylenol) is best during pregnancy.

Don't take ibuprofen (Motrin), naproxen (Aleve), or aspirin.

Use a vaginal cream like clotrimazole (Gyne-Lotrimin) or miconazole (Monistat).

Use an antihistamine like Benadryl or loratadine (Claritin). Some antihistamines have alcohol included, so check labels.

If you need an antacid, take a chewable tablet that has calcium (Tums) or magnesium (Maalox).

Don't take antacids that have aspirin (Alka-Seltzer, Pepto-Bismol) or soda bicarbonate (baking soda).

Stool softeners like (docusate sodium) Metamucil (psyllium) are safe in pregnancy.

Don't take mineral oil or Senokot.

If you have diarrhea for more than one day, call your health care provider.

Kaopectate and Imodium are safe in pregnancy.

FOR MORE INFORMATION

Organization of Teratology Information Specialists (OTIS)

Information on the effects of drugs, chemicals, and other exposures on mothers and babies during pregnancy. Fact sheets can be downloaded from the OTIS Web site (<http://www.otispregnancy.org/>) or you can call toll-free (866) 626-6947 for more information.

Motherrisk

Motherrisk offers information about the effects of medicines during pregnancy and breastfeeding. Fact sheets about many concerns during pregnancy can be downloaded from the Motherrisk Web site (<http://www.motherisk.org/index.jsp>). Each fact sheet lists which drugs are safe and which are not. You can also call Motherrisk toll-free at (877) 327-4636 (for information on alcohol and substance use) or (800) 436-8477 (for questions about morning sickness).

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EATING SAFELY DURING PREGNANCY

During pregnancy, you can eat the same things that you normally eat when you were not pregnant. But especially in the first few months of your pregnancy, your baby can be hurt by poisons (toxins) or germs (bacteria). For this reason, you need to be aware of these food dangers and learn how to choose and prepare your food safely.

What Foods Might Be Harmful to My Baby During Pregnancy?

The foods of most concern are fish, meat, milk, and cheese. Because these are important parts of most diets, you will want to learn to choose the right fish, meat, milk, or cheese.

What's the Problem With Fish?

Many fish—especially fish that are large, eat other fish, and live a long time—have mercury in them. Mercury can cause problems with the development of your baby's brain and nerves. Fish may also have dioxins and polychlorinated biphenyls (PCBs). These toxins may cause problems with the development of your baby's brain and may cause cancer.

So Should I Just Stop Eating Fish?

No. Fish is a wonderful food. It has lots of good protein and other nutrients. You can continue to eat fish, but you may wish to cut down on the amount of fish you eat and change the kind of fish you eat. Information about which fish are good to eat during pregnancy is listed on the back of this page.

What Meat Is Dangerous?

In the United States most of our meat is safe to eat. However, meat that has not been kept cold or that has not been prepared properly may have germs or parasites that could harm you or your baby. Raw meat may contain toxoplasmosis. Toxoplasmosis is a germ that can damage your growing baby's eyes, brain, and hearing. The backside has more information.

What Do I Need to Know About Milk and Cheese?

Some cheese may contain germs (bacteria) called listeria. These germs can cause a disease called listeriosis, which may cause miscarriage, stillbirth, or serious health problems for your baby. To avoid listeriosis, you may want to avoid soft cheeses like Mexican-style queso blanco fresco, feta, or Brie. The flip side will tell you which cheeses you can continue to enjoy and which types to avoid.

How Do I Prepare Food Safely?

- Wash your hands and cooking surfaces often.
- Keep raw meat away from raw fruit and vegetables and cooked meat.
- Cook your food until it is steaming hot. Keep uneaten food cold or frozen.

Eating Safely During Pregnancy: Fish, Meat, Milk, and Cheese

Food	Recommendations
Fresh Fish Shark, swordfish, king mackerel, tilefish Farmed salmon Albacore tuna ("white" tuna) Shrimp, canned light tuna, canned or wild salmon, pollock, and catfish	Do not eat Eat no more than 1 meal a month Eat no more than 1 meal a week Eat no more than 2 meals a week
Deli Meats and Smoked Fish Deli meat spread Hot dogs, lunch meat, deli meat, deli smoked fish Canned smoked fish or meat spread	Do not eat Do not eat unless you reheat to steaming hot Eat no more than 2 meals a week
Meat—Beef, Chicken, Pork Any meat that is rotten or raw	Do not eat
Milk and Cheese Unpasteurized milk, feta cheese, brie cheese, camembert cheese, blue-veined cheeses, Mexican-style queso blanco fresco Hard cheeses, semi-soft cheeses like mozzarella, processed cheese slices, cream cheese, cottage cheese, yogurt made with pasteurized milk Skim or 1% pasteurized milk	Do not eat or drink Eat all you want Drink all you want

Note: Check local advisories about the safety of fish caught by family and friends in your local waters. If you can't get advice on this, eat no more than 1 meal a week from fish caught in local waters and don't eat any other fish that week.

Cook fish by broiling, baking, steaming, or grilling. Remove skin and fat before cooking. Do not eat the fat that drains from the fish while cooking.

Cook all meats all the way through. When you eat meat, you should not see any pink inside the flesh. After cutting up raw meat, clean the cutting surface with bleach, soap, and hot water before cutting any raw fruit or vegetables.

For More Information

Centers for Disease Control and Prevention

<http://www.cdc.gov/foodsafety> or <http://www.cdc.gov/travel/pregnancy>

Excellent up-to-date information on food safety issues in the United States and abroad.

Partnership for Food Safety Education

<http://www.fightbac.org>

The Partnership for Food Safety Education has lots of good information on prevention of illness from the food supply.

Food and Drug Administration

<http://www.fda.gov/bbs/topics/news/2004/NEW01038>

The Food and Drug Administration published advisories regarding the consumption of fish in March 2004.

Reading level: 6.4

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BACK PAIN DURING PREGNANCY

Most women have back pain at some point during pregnancy. The pain can be mild or severe, but it can usually be treated. In some cases, it can be prevented.

Why Do Pregnant Women Have Back Pain?

Pregnancy hormones loosen all of your joints. Your growing abdomen changes your posture. These changes can increase the normal curves that are in your back which can cause back pain. Later in pregnancy the looser joints in the pelvis move more from the growing weight of your baby and this can cause general pain in your lower back and sometimes shooting pain in your buttock or upper legs.

What Makes the Pain Worse?

Lying on your back, sitting upright in a chair, rolling over at night or getting out of bed or out of a chair can cause back pain to be worse.

How Can I Avoid and Reduce Back Pain?

- Avoid sitting for long periods of time. Change positions and move frequently.
- Avoid bending; arching, and twisting motions, you will feel less discomfort.
- When lifting heavy things, keep your back straight and use your leg muscles instead of your back when picking things up.
- Whenever you are sitting, put your feet up on a stool or box so your hips tilt forward and the curve in your lower back flattens out.
- Many women get pain relief from using moist heat or cold packs, getting a massage, or sitting in a warm bath.
- Some women find wearing supportive, low-heeled shoes or an abdominal support binder can also help. Gentle exercise, along with walking 20 minutes most days, can relieve or lessen back pain. Exercise helps strengthen the back muscles, decrease muscle tightness and spasm, and keep the joints in good position.
- Sleeping on your side with a body pillow in your arms and between your knees may help as well.

What Strengthening Exercises Are Helpful?

The flip side of this sheet has exercises that will strengthen the back muscles. The exercises can be held for 3-5 seconds and repeated 10-30 times. Be sure not to hold your breath when you are doing them.

What Stretches Are Recommended?

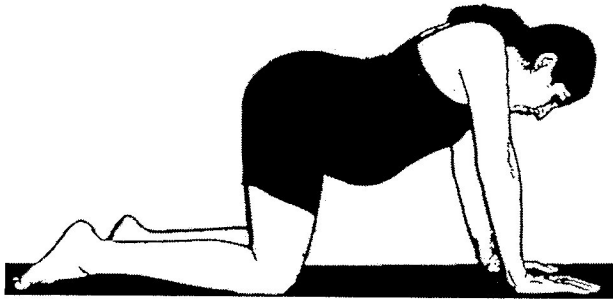
Stretching the back and hamstring muscles after a warm shower or short walk can help reduce back pain. Hold each stretch for 20 seconds, and repeat 2-3 times. See the flip side for directions.

What is Sciatica?

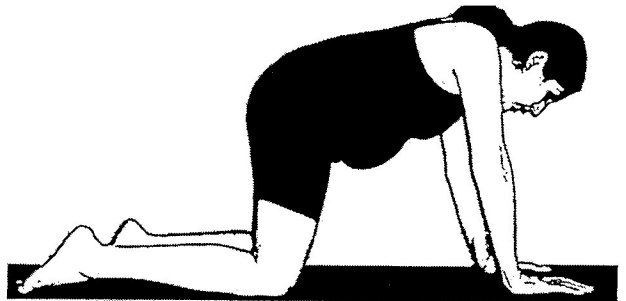
The sciatic nerve is a large nerve that runs down the back across the buttocks and down the back of your legs. Sciatica is pain in the sciatic nerve which is caused by pressure on the nerve. The symptoms of sciatica that are different from normal back pain in pregnancy are: pain down the buttock and back of your leg past your knee, tingling, numbness, or if you have trouble moving your leg. The treatment for sciatica is the same as the treatment for back pain but your health care provider may also suggest bedrest, and physical therapy. Sciatic pain usually goes away in 1 to 2 weeks.

Exercises for Back Pain During Pregnancy

Pelvic tilt start position: note arch in lower back



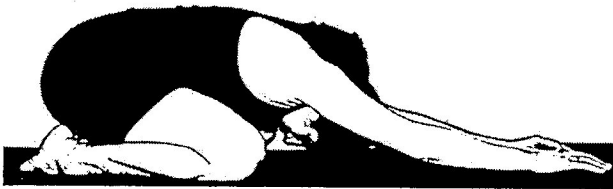
Pelvic tilt end position: note absence of arch in lower back.



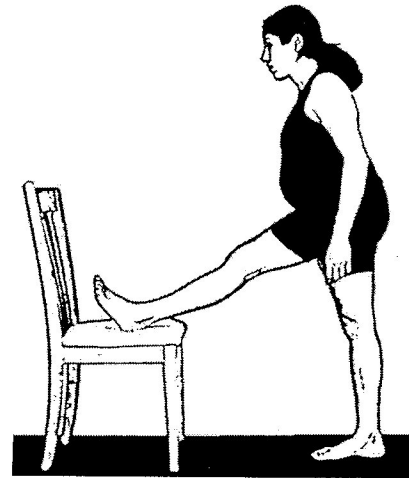
Kneel on your hands and knees, you'll notice an arch in your lower back. Tilt your pelvis backwards, so you flatten your back, keeping your buttocks relaxed.

Back stretch

Hamstring Stretch



Kneel on your hands and knees, with your legs spread apart, and a small pillow under your belly. Sit back and reach your arms forward to feel a stretch along your spine.



Face a chair and place one foot on it. Keep your back straight as you gently lean forward to stretch the back of the thigh.

FOR MORE INFORMATION:

- American Pregnancy Association (<http://www.americanpregnancy.org/>)
- The National Women's Health Information Center (<http://www.4woman.gov/Pregnancy/>)

Adapted with permission from: Silva A. Expect Fitness (www.expectfitness.com)

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SHARE WITH WOMEN

WEIGHT GAIN DURING PREGNANCY

How much weight should I gain during my pregnancy?

Most women need to gain 25 to 35 pounds during pregnancy. How much weight you should gain depends on how much you weighed before you got pregnant. If you are very slim, you need to gain more. If you are very heavy, you need to gain less. The chart on the other side of this page can help you decide how many pounds you should gain. Talk with your health care provider about the right weight gain for you. Then use the chart to track your weight during pregnancy.

I don't feel hungry. Do I have to eat if I don't feel hungry?

Many women do not feel hungry early in pregnancy. This is because of hormone changes in the body. Later in pregnancy, it may be hard to eat because your stomach has less room between your baby and your lungs. You will feel better all through your pregnancy if you try to eat something every 1 to 2 hours. Eating a big meal may make you feel sick. Eating just a slice of apple, a carrot stick, or a bit of whole wheat bread will help you feel better if your stomach is upset. It is important to remember that what you put in your mouth goes to your baby. If you don't put anything in your mouth, your baby gets nothing to eat.

People tell me I'm "eating for two." Does this mean I have to eat twice as much?

No. Most women only have to add about 200 calories every day to their diet. Many women can eat less and still be very healthy and grow a healthy baby. Your baby depends on you for all of its food, so you do have to eat well. Make healthy changes in your diet—eat lots of fruit and vegetables, eat only whole wheat bread, and cut down on fats. You don't have to eat much more than you normally do.

What happens if I don't gain enough weight?

If you do not gain enough weight, your baby may be too small. Babies that are too small can have problems right after they are born. They may have trouble breathing or eating. Some babies who are too small at birth have trouble learning when they get older and go to school. Talk with your health care provider about how many pounds you should gain to make sure your baby is not too small.

What happens if I gain too much weight?

If you gain too much, you will have more weight to lose after the baby is born. Women who gain a lot of extra weight have a higher chance of needing a cesarean birth.

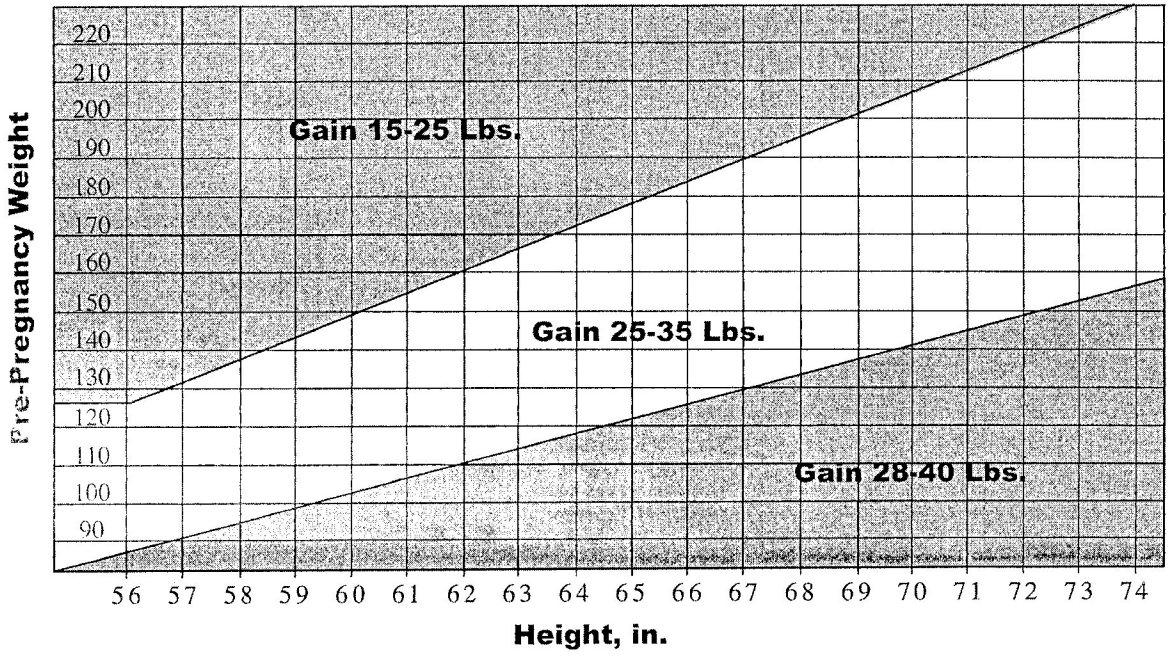
Should I gain the same amount every week?

The baby will gain most of its weight during the last 2 months of your pregnancy. You should try not to gain much weight at first. Plan to gain most of your weight in the last months of your pregnancy.

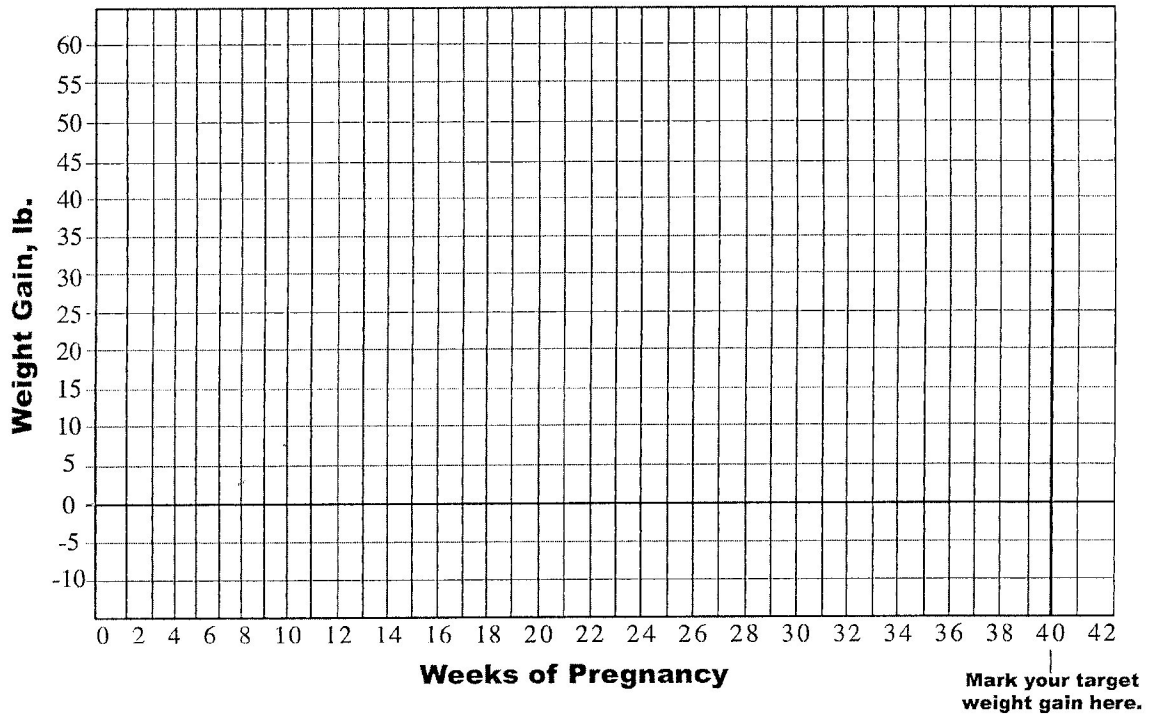
Where To Go for More Information:

The March of Dimes Pregnancy and Newborn Health Education Center: "Weight Gain During Pregnancy"
This Web site has lots of good information on pregnancy and parenting. It is very reliable and an easy-to-use Web site.

http://www.marchofdimes.com/pnhec/159_153.asp



My target weight gain is _____ lb.



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