



ADVANCED
WOMEN'S HEALTHCARE
OF WAXAHACHIE

There are many aches, pains and discomforts that you will experience while you are pregnant. Most of these symptoms are common and are not a problem. In certain instances, however, the symptoms may have significance. Hopefully the guidelines below will help alleviate some of your concerns and anxieties. If you are ever unsure, there is always someone available 24 hours a day to handle any emergencies.

FIRST TRIMESTER

Fatigue: It is normal to feel tired during the early part of the pregnancy. During the middle of the pregnancy you will regain some of your energy, only to have it disappear again in the third trimester. Much of this fatigue is related to high levels of progesterone and also changes that are required for blood volume to expand to compensate for the pregnancy. Do not drink extra caffeine or take extra vitamins, supplements or herbs to alleviate the fatigue. Instead, try to get adequate sleep at night and attempt to rest or nap when possible, and continue with your prenatal vitamins.

Nausea and vomiting is common during pregnancy, mainly during the first trimester, but can occur at any time during the pregnancy. Although you may feel miserable, it is usually not harmful to the developing baby. If the vomiting is associated with stomach flu you should avoid solid food and focus on maintaining hydration with liquids for 24 hours. Usually the symptoms will subside by that time. If you have persistent vomiting and are unable to keep down fluids for 24 hours or more, you should contact us. It is always best to keep a little food in your stomach at all times to avoid nausea. Keep some crackers on your bedside table for the middle of the night awakenings and eat first thing in the morning. Try to sip on water or juice and nibble on crackers or snacks throughout the day if you are unable to keep down full meals.

Spotting: Some women have spotting during the first few weeks of pregnancy. This can follow intercourse or a recent pap smear. If you have some spotting, notify the office during business hours and avoid tampons and further intercourse until being evaluated. Some women feel better if they rest, although studies have not shown that rest will prevent a miscarriage.

Miscarriage: It is most common to miscarry during the first trimester. At least one in six recognized pregnancies, and likely 1 in 3 unrecognized pregnancies, end in miscarriage, which can be devastating to a family. The reason for miscarriage can stem from many factors. Most research indicates that up to 60% of miscarriages are the body's way of naturally expelling a fetus that is not developing the way it should. Cramps and heavy bleeding or passing of tissue can be an indicator that the baby will miscarry. If this happens to you during office hours, call us and let us know you are experiencing a threatened miscarriage. If the bleeding is heavy, if you are soaking more than a pad an hour or if you are passing a lot of tissue, please go to the emergency room. If you are experiencing spotting, avoid intercourse and do not wear tampons. If you are unsure what to do, there is always a physician available 24 hours a day for emergencies over the telephone by calling our office number.

Toxoplasmosis: Pregnant women should not change cat litter or eat raw or undercooked meat during pregnancy. It can contain harmful toxoplasmosis that an adult's immune system can ward off, but a developing baby has no defense.

Fish: Avoid eating shark, swordfish, king mackerel, or tilefish because they may contain a high level of mercury. No more than 12 ounces a week of lower mercury fish and shellfish, i.e. shrimp, canned light tuna, salmon, Pollock, and catfish. Albacore tuna should be limited to 6 ounces (one average meal) of the total.

Listeriosis: Listeriosis is a bacterial infection that can cause miscarriage, fever, or stillbirth. It can be found in raw meat, lunch meat, and unpasteurized milk products such as blue cheese, feta cheese and Mexican white cheese. Please consume these products in moderation. Heating your lunch meat may help to reduce risks of infection.

Folic Acid: You need at least 0.4 mg of folic acid a day, especially in the first few months of pregnancy to prevent birth defects associated with the developing spine and brain. Most people do not get enough in their diet, so a supplement is necessary. If you are taking a prenatal vitamin, you will be receiving at least this amount of folic acid.

Toxic Substances: Paint fumes, poisons, chemical fumes, and cigarette smoke can all have harmful effects on a developing baby. If you work in an area where these are prevalent, please discuss this with your provider. Be sure to maintain good ventilation with an open window or a circulating fan.

Lightheadedness/Dizziness or Shortness of Breath: Some lightheadedness or dizziness is normal in pregnancy, especially if you get up from a sitting or reclined position too quickly. If lightheadedness/dizziness is associated with severe headache, unusual pain, or if you faint or lose consciousness, you should contact us or be evaluated in the ER or Labor & Delivery. Try to stay well hydrated, and eat small snacks throughout the day. Also, pregnancy causes you to feel like you need to take deeper, longer breaths. This is caused by the uterus growing and taking up space in your stomach and also a hormone called progesterone. It is normal in pregnancy. If you have shortness of breath associated with leg swelling, fever, wheezing or chest pain, you need to be evaluated.

Caffeine: Studies have shown that high amounts of caffeine can increase your risk for miscarriage in the first trimester and affect development of the baby throughout the pregnancy. Research has not shown caffeine in minimal/moderate amounts has any harmful effects on your baby. However, no caffeine is best. If you must, you should limit your intake to 200-300 mg/day. Here are some examples of averages of caffeine.

1 espresso	200mg	12 oz soft drink	45mg
6oz American coffee	100mg	4 oz chocolate bar	80mg
1 cup instant coffee	75mg		

Smoking: Smoking can cause you to have unwanted pregnancy complications such as preterm birth, problems with your placenta and poor growth of the baby. You should not smoke while you are pregnant. Also, using nicotine substitutes (nicotine gum, for example) has not been proven to be safe during pregnancy. You should cut down and try to stop smoking while pregnant.

Exercise: There are studies that show that women who are in good shape have shorter labors and return to pre-pregnancy size quicker. You can usually maintain the kind of exercise regimen you had before you got pregnant without any complications. Water exercise is always a good activity. You should remember your balance will change as you get further along in your pregnancy. You should not do exercise on your back for extended periods of time. Also, you should always avoid water-skiing, snow-skiing, scuba diving and dangerous activities during pregnancy. You should also avoid any activity where you could fall on your abdomen. When you are exercising and you get short of breath or feel that your heart is racing then slow down. Avoid overheating.

Medications: Any prescription medications should be discussed with your doctor immediately. Some prescription medications as well as herbal products can be very harmful to the baby. Avoiding all medications when possible is best, but these are a list of medications, if needed, that are shown in studies to be safe in pregnancy. See the Medication list link for safe medications during pregnancy.

Alcohol: Consistent alcohol consumption has been shown to be associated with Fetal Alcohol Syndrome, and it is the number one cause of mental retardation in this country. It is best to avoid alcohol altogether. There is not a minimal amount of drinks you can have which has proven to be completely safe. An occasional glass of wine with dinner is likely OK, but drinking is not a necessity and should probably be avoided during pregnancy.

Vaginal Discharge: An increase in vaginal discharge is common in pregnancy and also a result of increased hormones. As long as there is not persistent itching or odor, it is likely just the normal increased secretions in pregnancy. A thick, cheesy-like discharge that is associated with itching or burning is more suggestive of a vaginal yeast infection and can be treated with over the counter Monistat. Late in your pregnancy, you may expel your mucous plug. This carries very little significance and does not indicate that labor is nearing.

Bladder Infections: The increase in hormones and the pressure of the uterus on the bladder will cause some increase in urinary frequency, especially after 14 weeks. This is normal in pregnancy and can be a nuisance, especially at night. Do not stop drinking fluids to try to decrease the amount of urine you make. If you develop burning or pain when you urinate or fever you should call our office to be evaluated. Bladder infections can be common and serious in pregnancy if not treated. You should call during business hours so we can get a sample of your urine and call in a prescription if needed.

SECOND TRIMESTER

Heartburn: This can unfortunately be a real nuisance in pregnancy. Some tips: avoid greasy foods and spicy foods, especially late at night. Avoid coffee, teas, peppermints, and of course smoking. Try not to eat late in the evening. Elevating the head of your bed may help. See safe medications to use.

Breast Changes: You may experience some breast pain, swelling, and yellowish discharge from time to time. This is because your breasts are getting ready to feed the baby. Also, your nipples will get darker from pregnancy hormones.

Swelling: When sitting or prop your legs up on an ottoman or chair. When sleeping, prop your legs up on pillows. Varicose veins can develop at this time or wearing support hose (knee or thigh high) can help prevent these and leg swelling. It may also help to reduce your sodium/salt intake, avoid hot environments and drink water over other beverages. Swelling is especially common during the last weeks of pregnancy. It is almost abnormal not to have swelling, especially if you have been on your feet all day. If you have sudden increase in swelling associated with severe headache, nausea, abdominal pain, bleeding or blurred vision, you should go to Labor and Delivery to be evaluated.

Fetal Movement: The amount of fetal movement may vary greatly among each individual. Generally speaking, fetal movement is first felt around 18 or 20 weeks. Your baby may move frequently and at other times be relatively quiet. Babies also sleep in utero, so they will be quiet and still for extended times. This is nothing to be alarmed about, especially between 18 and 28 weeks. If you are in your last 2 months and you notice a marked decrease in the amount of movement you should contact us or go to labor and delivery to be evaluated. If unsure, do kick counts: Lie on your bed in a quiet hour during the time your baby is most active (for most people this is after dinner) and count every individual movement your baby makes. Your baby should move more than 10 times in 2 hours. Once your baby moves ten times, you can stop counting and feel reassured. If your baby moves less, call or go to Labor and Delivery.

Abdominal Pain: Lower abdominal discomfort is not unusual during the middle and third trimesters. This is especially common around 20 weeks. This is usually referred to as round ligament pain. There are ligaments attached to the top of the uterus that are stretched and pulled with sudden movements, baby movements, etc. Sometimes this pain is also located in the groin or radiates into the vagina. Tylenol and/or a warm bath can help with this pain. These types of minor discomforts are common, but you should call if the pain is associated with bleeding, painful urination, or regular tightening of the womb (contractions).

THIRD TRIMESTER

“Breaking of Water”: When your water breaks it is usually a large gush of fluid that usually runs down your legs and continues to leak. You should go to Labor and Delivery if this happens. Occasionally a weak bladder can cause a false alarm, but usually with urine leakage it does not continue. If you are unsure, you should contact us or go to Labor and Delivery to be evaluated.

Braxton-Hicks: This is also known as false labor. Braxton Hicks contractions are irregular in time and intensity and will usually subside with time or activity. They are most likely to occur when you are tired (at night) or dehydrated. If you should experience painful contractions of approximately 45 seconds in duration and at regular intervals (like every 4-5 minutes) you should go to Labor and Delivery to be evaluated. If you are less than 34 weeks pregnant and are experiencing regular contractions of 5-6 per hour, you should go to Labor and Delivery.