

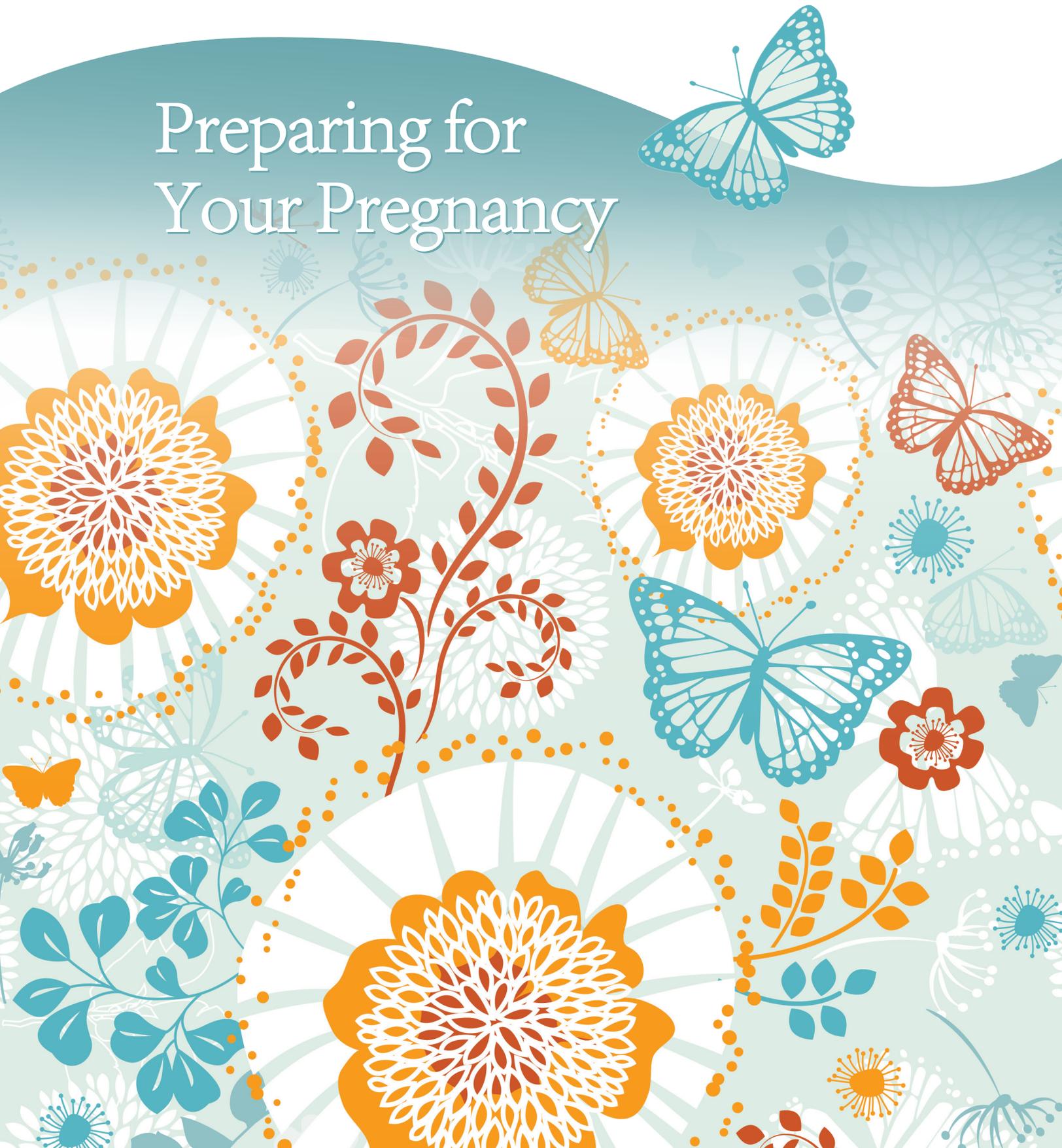


Beth Israel Deaconess
Medical Center



A teaching hospital of
Harvard Medical School

Preparing for Your Pregnancy





Whether you are hoping to start a family now or in a few years, it is important to prepare your body to be as healthy as possible for both you and your baby. Even in the very early stages of pregnancy, a great deal of embryonic development has already occurred. The baby's organs are beginning to form by the time you find out that you are pregnant.

We have created this brochure to help prepare you for a healthy pregnancy. In it, you will find information about your menstrual cycle and how to determine your time of ovulation, how vitamins and nutrition play a role in keeping you healthy and what types of medications you can and cannot take when you become pregnant.

After reading this brochure, we encourage you to schedule an appointment to meet with your obstetric care provider if you have any questions about conceiving or maintaining a healthy pregnancy.



nutrition

It is always important to have a well-balanced diet but it is especially important during pregnancy. Being underweight or overweight is not ideal for your baby's health.

nutrition tips:

- ♥ Eat plenty of fruits, vegetables and whole grains.
- ♥ If you can tolerate dairy foods, skim milk, low-fat cheese and yogurt are great ways to get your calcium.
- ♥ Protein-rich foods like lean meat, poultry, fish, eggs, beans and tofu will give you the energy you and your baby need.
- ♥ Try to avoid eating too many high-fat and high-calorie foods.

An easy way to determine if you're at a healthy weight is to calculate your body mass index (BMI). BMI is a measure of body fat based on height and weight and applies to both adult men and women. To calculate your BMI: weight in pounds / (height in inches x height in inches) x 703.

vitamins

For most women, taking a daily multivitamin will help provide your body with the necessary minerals and nutrients. However, when you're planning to get pregnant, it is important to also take 400 micrograms (mcg) of folic acid every day for at least one month before getting pregnant, as well as during your pregnancy. Folic acid helps to prevent certain birth defects of the baby's brain and spine.

exercise

Unless otherwise instructed by your physician, regular exercise is safe during pregnancy and will help you get in shape prior to pregnancy.

When exercising during pregnancy, however, don't get overheated. Avoid saunas and hot tubs which can raise your temperature and can harm a developing embryo. For a fever greater than 100.4 degrees Fahrenheit, you may take acetaminophen (Tylenol).

tobacco

If you smoke, now is the perfect time to stop. Smoking may increase the risk of certain complications associated with pregnancy, such as having a baby with low birth weight. It also reduces the risk for infertility among women during their reproductive years.

Secondhand smoke (breathing in smoke from others smoking around you) can be just as harmful to you and your baby and can cause sudden infant death syndrome (SIDS).

If babies and children are exposed to secondhand smoke from cigarettes, they may suffer from bronchitis, pneumonia, and ear infections. Exposure may make them wheeze and cough more often. If they have asthma, breathing in secondhand smoke from cigarettes can trigger an attack that may be severe enough to send them to the hospital.

There is no safe amount of secondhand exposure. Breathing even a little secondhand smoke can be dangerous. Quitting smoking will improve your health and protect others from exposure to secondhand smoke. Ask your clinician about ways to quit. There are also many resources in the community that can help you quit smoking.

alcohol

Experts aren't sure if it is safe to drink any alcohol during pregnancy, but physicians will always advise against drinking during pregnancy. Too much alcohol can cause birth defects, learning problems and mental retardation. So, it is safest for you and your baby that you stop drinking before trying to get pregnant.

dental work

Most dental procedures are safe during pregnancy. However, if you think you need an x-ray or special dental work on your teeth, schedule those appointments before you try to get pregnant.

trying to get pregnant

If you're hoping to conceive, don't leave it to chance. Start keeping track of your periods. Mark down on a calendar the first day of your period each month. Also, track the number of days each period lasts. Ovulation is most likely to occur around the midpoint of your cycle. One way to determine ovulation is to subtract 14 days from the length of your average cycle. For example, if you have a consistent 28-day cycle, ovulation is likely to occur 14 days after the start of your last period ($28-14=14$). If you have a longer cycle, such as 34 days, ovulation is likely to begin about 20 days after your last period began ($34-14=20$). Fertilization will occur in the few days surrounding ovulation.

You can also watch for changes in your cervical mucus. Just before ovulation, you might notice an increase in clear, slippery vaginal secretions. After ovulation, when the odds of becoming pregnant are lower, the discharge will become cloudy and sticky or disappear entirely.

fertilization

Each month during ovulation, an egg is released and moves into one of the fallopian tubes. If a woman tries to conceive around this time, and if the egg and sperm meet in the fallopian tube, the two may join. If they join, the fertilized egg begins dividing as it moves through the fallopian tube into the uterus, where it becomes attached to the uterine lining.

infertility

Women under age 35 should be evaluated only after one year of trying, unless they have irregular cycles or other conditions which might indicate decreased fertility.

Women who are age 35 and above are usually evaluated after six months of not being able to conceive. Women who are age 40 and above are usually evaluated as soon as the decision is made to conceive.

birth defects & genetic disorders

Age during pregnancy, family health history and racial or ethnic background can affect the risk of birth defects or genetic disorders.

If your obstetric care provider thinks you may be at risk for birth defects or genetic disorders, you will be asked to complete a personal and genetic history. Since some testing is recommended PRIOR to pregnancy, please review this with your clinician.

recommended immunizations

At least three months before trying to get pregnant, ask your clinician if all of your vaccinations are up to date. Some infections such as rubella (German measles) can be serious for the developing pregnancy.

You should have received the following vaccinations before trying to get pregnant:

- ♥ MMR: Measles, Mumps, Rubella (German measles)
- ♥ Varicella (Chicken pox)
- ♥ TDAP: Tetanus, diphtheria, and pertussis (whooping cough) *may be given to pregnant women at the health care provider's discretion.*
- ♥ Influenza (flu) vaccine (safe to give during pregnancy)

For advice on other vaccinations, please consult your health care provider.

sexually transmitted infections, including HIV

Sexually transmitted infections can cause health problems in pregnancy, and may not cause symptoms prior to pregnancy. It is important to ask your clinician if you should be tested. Some sexually transmitted infections can be treated or controlled to prevent complications.

medications

During pregnancy, it is common to experience heartburn, constipation, colds and other types of infections (yeast, urinary tract, gingivitis) as well as day-to-day symptoms like hay fever or seasonal allergies.

Listed are some common medications approved for use in pregnancy, mostly over-the-counter drugs. This list is only a start. There are many other medications that are safe to use that are not listed here. Always consult your health care providers if you're unsure which medications are safe to use when pregnant.

There is no need to buy brand name medications. Look for the store brand and save money! The following over-the-counter medications are safe to use when you're pregnant:

ALLERGY: Benadryl, Claritin, Zyrtec, Allegra

SLEEP: Benadryl, Tylenol PM

VITAMINS: Any prenatal vitamin with folic acid, 400 MCG; multivitamin (NO megadoses), DHA supplements

COLD/SORE THROATS: Robitussin, Robitussin DM, Sudafed, Tylenol Cold, Cloraseptic spray

COUGH DROPS: All brands ok

DIARRHEA: Immodium (limited use)

NASAL SPRAY: Saline nasal spray/rinse, Flonase (or other nasal steroid sprays)

ANTACIDS: Tums/Roloids, Mylanta II/Maalox, Riopan, Zantac, Pepcid AC, Nexium, Prilosec

NAUSEA & VOMITING: Vitamin B-6: 25 mg; Unisom (doxylamine): 25 mg; Dramamine (dimenhydrinate), Antevvert (medizine)

ANTIBIOTICS: Amoxicillin, Ampicillin, Cephalexin, Penicillin, Erythromycin, Azithromycin (Z pack), Nitrofurantoin (not in 3rd trimester)

YEAST TREATMENT: Monistat (miconazole), Gyne-Iotrimin (Clotrimazol), Terazol (Terconazole)

CONSTIPATION/HEMORRHOIDS: Colace (Docusate sodium): 50-100 mg; Metamucil/Fibercon, Mira-Lax, Milk of Magnesia, Preparation H, Tucks pads

PAIN RELIEVER: Acetaminophen (Tylenol)

NOTE: Unless otherwise instructed above or by your physician, please follow regular dosage instructions for these medications.

Medications you should **not** take during pregnancy:

- Retin-A (for acne)
- Pepto-Bismol
- Aspirin (Bayer, Bufferin, etc)
- Ibuprofen (Advil, Motrin, etc)
- Naproxyn (Aleve)
- Midrin (for migraines)
- Bactrim (antibiotics)
- Narcotics (without checking with provider)

NOTE: If you are on any medications for a chronic condition, such as high blood pressure, thyroid, asthma, diabetes, etc, speak with your doctor before getting pregnant or changing your medication.

In addition, avoid contact with toxic substances and chemicals at work and at home, as well as cat and rodent feces. If you think you've been exposed to any of these, call the Pregnancy Exposure InfoLine (Toll Free in MA) at 800-322-5014, or 781-466-8474, or the OTIS hotline at 866-626-6847.



Making the decision to get pregnant is a personal one between you and your partner. There are many things to consider before starting a family. As you begin to think about getting pregnant, we hope that this brochure helped answer some of the questions you may have had.

Choose a Beth Israel Deaconess Medical Center obstetrician from one of our convenient locations:

Boston

SHAPIRO CLINICAL CENTER

330 Brookline Avenue
Boston, MA 02215
617-667-4600

BOWDOIN STREET HEALTH CENTER

230 Bowdoin Street
Dorchester, MA 02122
617-754-0100

THE DIMOCK CENTER

55 Dimock Street
Roxbury, MA 02119
617-442-8800

SOUTH COVE COMMUNITY HEALTH CENTER

885 Washington Street
Boston, MA 02111
617-482-7555

Brookline

One Brookline Place
Brookline, MA 02445
617-754-5580

Chelsea

1000 Broadway
Chelsea, MA 02150
617-660-6904

Chestnut Hill

25 Boylston Street
Chestnut Hill, MA 02467
617-754-0440

Lexington

482 Bedford Street
Lexington, MA 02420
781-528-2500

Needham

392 Chestnut Street
Needham, MA 02492
617-754-1800

bidmc.org



ADDITIONAL RESOURCES

For further information about conceiving and maintaining a healthy pregnancy, nutrition, vaccines, and other information within this brochure, please visit the following web sites:

The American Congress of Obstetricians and Gynecologists
www.acog.org

Centers for Disease Control and Prevention
www.cdc.gov

Academy of Nutrition and Dietetics
www.eatright.org

Massachusetts Dental Society
www.massdental.org

U.S. Food and Drug Administration
www.fda.gov

Pregnancy Exposure Info Line
www.thepeil.org

REFERENCES

Planning Your Pregnancy,
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Pregnancy and Birth,
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The American College of Obstetricians
and Gynecologists, Washington, DC
www.acog.com

Planning Pregnancy Atrius Document re-
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www.fda.gov
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Notes:



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