

Pregnancy

Staying healthy and safe

Eat this. Don't eat that. Do this. Don't do that. Pregnant women are bombarded with do's and don'ts. Here is help to keep it all straight.

Eating for two

Eating healthy foods is more important now than ever! You need more protein, iron, calcium, and folic acid than you did before pregnancy. You also need more calories. But "eating for two" doesn't mean eating twice as much. Rather, it means that the foods you eat are the main source of nutrients for your baby. Sensible, balanced meals combined with regular physical fitness is still the best recipe for good health during your pregnancy.

Weight gain

The amount of weight you should gain during pregnancy depends on your body mass index (BMI) before you became pregnant. The Institute of Medicine provides these guidelines:

- If you were at a normal weight before pregnancy, you should gain about 25 to 30 pounds.
- If you were underweight before pregnancy, you should gain between 28 and 40 pounds.

- If you were overweight before pregnancy, you should gain between 15 and 25 pounds.
- If you were obese before pregnancy, you should gain between 11 and 20 pounds.

Check with your doctor to find out how much weight gain during pregnancy is healthy for you.

You should gain weight gradually during your pregnancy, with most of the weight gained in the last trimester. Generally, doctors suggest women gain weight at the following rate:

- 2 to 4 pounds *total* during the first trimester
- 3 to 4 pounds per month for the second and third trimesters

Recent research shows that women who gain more than the recommended amount during pregnancy and who fail to lose this weight within six months after giving birth are at much higher risk of being obese nearly 10 years later. Findings from another large study suggest that gaining more weight than the recommended amount during pregnancy may raise your child's odds of being overweight in the future. If you find that you are gaining weight too quickly, try to cut back on foods with added sugars and solid fats. If you are not gaining enough weight, you can eat a little more from each food group.

Where does the added weight go?

- Baby 6 to 8 pounds
- Placenta 1½ pounds
- Amniotic fluid 2 pounds
- Uterus growth 2 pounds
- Breast growth 2 pounds
- Your blood and body fluids 8 pounds

• Your body's protein and fat – 7 pounds

Calorie needs

Your calorie needs will depend on your weight gain goals. Most women need 300 calories a day more during at least the last six months of pregnancy than they do pre-pregnancy. Keep in mind that not all calories are equal. Your baby needs healthy foods that are packed with

nutrients — not "empty calories" such as those found in soft drinks, candies, and desserts.

Although you want to be careful not to eat more than you need for a healthy pregnancy, make sure



not to restrict your diet during pregnancy either. If you don't get the calories you need, your baby might not get the right amounts of protein, vitamins, and minerals. Low-calorie diets can break down a pregnant woman's stored fat. This can cause your body to make substances called ketones. Ketones can be found in the mother's blood and urine and are a sign of starvation. Constant production of ketones can result in a child with mental deficiencies.

Foods good for mom and baby

A pregnant woman needs more of many important vitamins, minerals, and nutrients than she



did before pregnancy. Making healthy food choices every day will help you give your baby what he or she needs to develop. The MyPyramid for pregnant and breastfeeding women can show you what to eat as well as how much you need to eat from each food group based on your prepregnancy BMI and activity level. Use your personal

MyPyramid plan to guide your daily food choices. Here are some foods to choose often:

- **Grains** fortified, cooked or ready-to-eat cereals; wheat germ
- Vegetables carrots, sweet potatoes, pumpkin, spinach, cooked

greens, winter squash, tomatoes, red pepper

- Fruits cantaloupe, honeydew melon, mangoes, prunes or prune juice, bananas, apricots, oranges or orange juice, grapefruit, avocado
- Dairy nonfat or low-fat yogurt; nonfat milk (skim milk); low-fat milk
 (1 percent milk)
- Meat and beans cooked beans and peas; nuts and seeds; lean beef,
 lamb, and pork; shrimp, clams, oysters, and crab; cod, salmon, polluck,
 and catfish

Talk to your doctor if you have special diet needs for these reasons:

- Diabetes Make sure you review your meal plan and insulin needs with your doctor. High blood glucose levels can be harmful to your baby.
- Lactose intolerance Find out about low-lactose or reduced-lactose products and calcium supplements to ensure you are getting the calcium you need.
- Vegetarian Ensure that you are eating enough protein, iron, vitamin B₁₂, and vitamin D.
- **PKU** Keep good control of phenylalanine (FEN-uhl-AL-uh-NEEN) levels in your diet.

Food safety

Most foods are safe for pregnant women and their babies. But you will need to use caution or avoid eating certain foods. Follow these guidelines:

Clean, handle, cook, and chill food properly to prevent foodborne illness, including listeria and toxoplasmosis.

- Wash hands with soap after touching soil or raw meat.
- Keep raw meats, poultry, and seafood from touching other foods or surfaces.
- Cook meat completely.
- Wash produce before eating.
- Wash cooking utensils with hot, soapy water.

Do not eat:

- Refrigerated smoked seafood like whitefish, salmon, and mackerel
- Hot dogs or deli meats unless steaming hot
- Refrigerated meat spreads
- Unpasteurized milk or juices
- Store-made salads, such as chicken, egg, or tuna salad
- Unpasteurized soft cheeses, such as unpasteurized feta, Brie, queso blanco, queso fresco, and blue cheeses
- Shark, swordfish, king mackerel, or tile fish (also called golden or white snapper); these fish have high levels of mercury.
- More than 6 ounces per week of white (albacore) tuna
- Herbs and plants used as medicines without your doctor's okay. The safety of herbal
 and plant therapies isn't always known. Some herbs and plants might be harmful
 during pregnancy, such as bitter melon (karela), noni juice, and unripe papaya.
- Raw sprouts of any kind (including alfalfa, clover, radish, and mung bean)

Fish facts

Fish and shellfish can be an important part of a healthy diet. They are a great source of protein and heart-healthy omega-3 fatty acids. What's more, some researchers believe low fish intake may be linked to depression in women during and after pregnancy. Research also suggests that omega-3 fatty acids consumed by pregnant women may aid in babies' brain and eye development.

Women who are or may become pregnant and nursing mothers need 12 ounces of fish per week to reap the health benefits. Unfortunately, some pregnant and nursing women do not eat any fish because they worry about mercury in seafood. Mercury is a metal that at high levels can harm the



brain of your unborn baby — even before it is conceived. Mercury mainly gets into our bodies by eating large, predatory fish. Yet many types of seafood have little or no mercury at all. So the risk of mercury exposure depends on the amount and type of seafood you eat.

Women who are nursing, pregnant, or who may become pregnant can safely eat a variety of cooked seafood, but should steer clear of fish with high levels of mercury. Keep in mind that removing all fish from your diet will rob you of important omega-3 fatty acids. To reach 12 ounces while limiting exposure to mercury, follow these tips:

• Do not eat these fish that are high in mercury:

- Swordfish
- Tilefish
- King mackerel
- Shark

Eat up to 6 ounces (about 1 serving) per week:
 Canned albacore or chunk white tuna (also sold as tuna steaks), which has more mercury than canned light tuna

• Eat up to 12 ounces (about 2 servings) per week of cooked* fish and shellfish with little or no mercury, such as:

•	Shrimp	Canned light tuna

• Crab Salmon

Clams
 Pollock

Oysters Catfish

• Scallops Cod

• Tilapia

- Check before eating fish caught in local waters. State health departments have guidelines on fish from local waters. Or get local fish advisories at the U.S. Environmental Protection Agency. If you are unsure about the safety of a fish from local waters, only eat 6 ounces per week and don't eat any other fish that week.
- Eat a variety of cooked seafood rather than just a few types.

Foods supplemented with DHA/EPA (such as "omega-3 eggs") and prenatal vitamins supplemented with DHA are other sources of the type of omega-3 fatty acids found in seafood.

^{*} Don't eat uncooked fish or shellfish (such as clams, oysters, scallops), which includes refrigerated uncooked seafood labeled nova-style, lox, kippered, smoked, or jerky.

Vitamins and minerals

In addition to making healthy food choices, ask your doctor about taking a prenatal vitamin and mineral supplement every day to be sure you are getting enough of the nutrients your baby needs. You also can check the label on the foods you buy to see how much of a certain nutrient the product contains. Women who are pregnant need more of these nutrients than women who are not pregnant:

Nutrients and pregnancy

Nutrient	How much pregnant women need each day
Folic acid	400 to 800 micrograms (mcg) (0.4 to 0.8 mg) in the early stages of pregnancy, which is why <i>all women who are capable of pregnancy</i> should take a daily multivitamin that contains 400 to 800 mcg of folic acid. Pregnant women should continue taking folic acid throughout pregnancy.
Iron	27 milligrams (mg)
Calcium	1,000 milligrams (mg); 1,300 mg if 18 or younger
Vitamin A	770 micrograms (mcg); 750 mcg if 18 or younger
Vitamin B ₁₂	2.6 micrograms (mcg)

Women who are pregnant also need to be sure to get enough vitamin D. The current recommendation for all adults younger than 71 (including pregnant and breastfeeding women) is 600 international units (IU) of vitamin D each day. Talk to your doctor about how you can be sure to get enough vitamin D and other important vitamins and nutrients.

Keep in mind that taking too much of a supplement can be harmful. For example, very high levels of vitamin A can cause birth defects. For this reason, your daily prenatal vitamin should contain no more than 5,000 IU (International Units) of vitamin A. Some supplements contain much more. Only take vitamins and mineral supplements that your doctor recommends.

Don't forget fluids

All of your body's systems need water. When you are pregnant, your body needs even more water to stay hydrated and support the life inside you. Water also helps prevent constipation, hemorrhoids, excessive swelling, and urinary tract or bladder infections. Not getting enough water can lead to premature or early labor.



Your body gets the water it needs through the fluids you drink and the foods you eat. How much fluid you need to drink each day depends on many factors, such as your activity level, the weather, and your size. Your body needs more fluids when it is hot and when you are physically active. It also needs more water if you have a fever or if you are vomiting or have diarrhea.

The Institute of Medicine recommends that pregnant women drink about 10 cups of fluids daily. Water, juices, coffee, tea, and soft drinks all count toward your fluid needs. But keep in mind that some beverages are high in sugar and "empty" calories. A good way to tell if your fluid intake is okay is if your urine is pale yellow or colorless and you rarely feel thirsty. Thirst is a sign that your body is on its way to dehydration. Don't wait until you feel thirsty to drink.

Alcohol

There is no known safe amount of alcohol a woman can drink while pregnant. When you are pregnant and you drink beer, wine, hard liquor, or other alcoholic beverages, alcohol gets into your blood. The alcohol in your blood gets into your baby's body through the umbilical cord. Alcohol can slow down the baby's growth, affect the baby's brain, and cause birth defects.

Find out more about the dangers of drinking alcohol during pregnancy in our section on Substance abuse.

Caffeine

Moderate amounts of caffeine appear to be safe during pregnancy. Moderate means less than 200 mg of caffeine per day, which is the amount in about 12 ounces of coffee. Most caffeinated teas and soft drinks have much less caffeine. Some studies have shown a link between higher amounts of caffeine and miscarriage and preterm birth. But there is no solid proof that caffeine causes these problems. The effects of too much caffeine are unclear. Ask your doctor whether drinking a limited amount of caffeine is okay for you.

Cravings

Many women have strong desires for specific foods during pregnancy. The desire for "pickles and ice cream" and other cravings might be caused by changes in nutritional needs during pregnancy. The fetus needs nourishment. And a woman's body absorbs and processes nutrients differently while pregnant. These changes help ensure normal

development of the baby and fill the demands of breastfeeding once the

baby is born.

Some women crave nonfood items such as clay, ice, laundry starch, or cornstarch. A desire to eat nonfood items is called pica (PYE-KUH).

Eating nonfood items can be harmful to your pregnancy. Talk to your doctor if you have these urges.

Keeping fit

Fitness goes hand in hand with eating right to maintain your physical health and well-being during pregnancy. Pregnant or not, physical fitness helps keep the heart, bones, and mind healthy. Healthy pregnant women should get at least 2 hours and 30 minutes of moderate-intensity aerobic activity a week. It's best to spread your workouts throughout the week. If you regularly engage in vigorous-intensity aerobic activity or

high amounts of activity, you can keep up your activity level as long as your health doesn't change and you talk to your doctor about your activity level throughout your pregnancy.

Special benefits of physical activity during pregnancy:

- Exercise can ease and prevent aches and pains of pregnancy including constipation, varicose veins, backaches, and exhaustion.
- Active women seem to be better prepared for labor and delivery and recover more quickly.
- Exercise may lower the risk of preeclampsia and gestational diabetes during pregnancy.
- Fit women have an easier time getting back to a healthy weight after delivery.
- Regular exercise may improve sleep during pregnancy.
- Staying active can protect your emotional health. Pregnant women who exercise seem to have better self-esteem and a lower risk of depression and anxiety.
- Results from a recent, large study suggest that women who are physically active during pregnancy may lower their chances of preterm delivery.

Getting started

For most healthy moms-to-be who do not have any pregnancy-related problems, exercise is a safe and valuable habit. Even so, talk to your doctor or midwife before exercising during pregnancy. She or he will be able to suggest a fitness plan that is safe for you. Getting a doctor's advice before starting a fitness routine is important for both inactive women and women who exercised before pregnancy.

If you have one of these conditions, your doctor will advise you not to exercise:

- Risk factors for preterm labor
- Vaginal bleeding
- Premature rupture of membranes (when your water breaks early, before labor)

Best activity for moms-to-be

Low-impact activities at a moderate level of effort are comfortable and enjoyable for many pregnant women. Walking, swimming, dancing, cycling, and low-impact aerobics are some examples. These sports also are easy to take up, even if you are new to physical fitness.

Some higher intensity sports are safe for some pregnant women who were already doing them before becoming pregnant. If you jog, play racquet sports, or lift weights, you may continue with your doctor's okay.

Keep these points in mind when choosing a fitness plan:

- Avoid activities in which you can get hit in the abdomen like kickboxing, soccer, basketball, or ice hockey.
- Steer clear of activities in which you can fall like horseback riding, downhill skiing, and gymnastics.

• Do not scuba dive during pregnancy. Scuba diving can create gas bubbles in your baby's blood that can cause many health problems.

Tips for safe and healthy physical activity

Follow these tips for safe and healthy fitness:

- When you exercise, start slowly, progress gradually, and cool down slowly.
- You should be able to talk while exercising. If not, you may be overdoing it.
- Take frequent breaks.
- Don't exercise on your back after the first trimester. This can put too much pressure on an important vein and limit blood flow to the baby.
- Avoid jerky, bouncing, and high-impact movements. Connective tissues stretch much more easily during pregnancy. So these types of movements put you at risk of joint injury.
- Be careful not to lose your balance. As your baby grows, your center of gravity shifts making you more prone to falls. For this reason, activities like jogging, using a bicycle, or playing racquet sports might be riskier as you near the third trimester.
- Don't exercise at high altitudes (more than 6,000 feet). It can prevent your baby from getting enough oxygen.
- Make sure you drink lots of fluids before, during, and after exercising.
- Do not workout in extreme heat or humidity.
- If you feel uncomfortable, short of breath, or tired, take a break and take it easier when you exercise again.

Stop exercising and call your doctor as soon as possible if you have any of the following:

Dizziness
 Blurred vision

• Headache Fluid leaking from the vagina

• Chest pain Vaginal bleeding

• Calf pain or swelling Less fetal movement

Abdominal pain Contractions

Work out your pelvic floor (Kegel exercises)

Your pelvic floor muscles support the rectum, vagina, and urethra in the pelvis. Toning these muscles with Kegel exercises will help you push during delivery and recover from birth. It also will help control bladder leakage and lower your chance of getting hemorrhoids.

Pelvic muscles are the same ones used to stop the flow of urine. Still, it can be hard to find the right muscles to squeeze. You can be sure you are exercising the right muscles if when you squeeze them you stop urinating. Or you can put a finger into the vagina and squeeze. If you feel pressure around the finger, you've found the pelvic floor muscles. Try not to tighten your stomach, legs, or other muscles.

Kegel exercises

- 1. Tighten the pelvic floor muscles for a count of three, then relax for a count of three.
- 2. Repeat 10 to 15 times, three times a day.
- 3. Start Kegel exercises lying down. This is the easiest position. When your muscles get stronger, you can do Kegel exercises sitting or standing as you like.

Oral health

Before you become pregnant, it is best to have dental checkups routinely to keep your teeth and gums healthy. If you are pregnant and have not had regular checkups, consider the following:

- Have a complete oral exam early in your pregnancy. Because you are pregnant, you might not receive routine x-rays. But if you must have x-rays for a dental problem needing treatment, the health risk to your unborn baby is small.
- Dental treatment during pregnancy is safe. The best time for treatment is between the 14th and 20th weeks. During the last months of pregnancy, you might be uncomfortable sitting in a dental chair.
- Do not avoid necessary dental treatments you may risk your and your baby's health.
- Use good oral hygiene to control your risk of gum diseases.

 Pregnant women may have changes in taste and develop red, swollen gums that bleed easily. This condition is called pregnancy gingivitis (jin-juh-VYT-uhss). It can be caused by both poor oral hygiene and higher hormone levels during pregnancy. Until recently, it was thought that having gum disease could raise your risk of having a low birth weight baby. Researchers have not been able to confirm this link, but some research is still under way to learn more.

After you give birth, maintain good oral hygiene to protect your baby's oral health. Bacteria that cause cavities can transfer from you to your child by:

- A kiss on the mouth
- Letting your baby put her fingers in your mouth
- Tasting food on your baby's spoon
- Testing the temperature of a baby bottle with your mouth

You also should find a dentist for your child by age 1.

Using medicine and herbs

You and your baby are connected. The medicines you use, including over-the-counter, herbal, and prescription drugs or supplements, might get into your baby's body, too. Many medicines and herbs are known to cause problems during pregnancy, including birth defects. For some medicines, we don't know that much about how they might affect pregnancy or the developing fetus. This is because medicines are rarely tested on pregnant women for fear of harming the fetus.

Mothers-to-be might wonder if it's safe to use medicines during pregnancy. There is no clear-cut answer to this question. Your doctor can help you make the choice whether to use a medicine. Labels on prescription and over-the-counter drugs have information to help you and your doctor make this choice. In the future, a new prescription drug label will make it easier for women and their doctors to weigh the benefits and risks of using prescription medicines during pregnancy.

Always speak with your doctor before you start or stop any medicine. Not using medicine that you need may be more harmful to you and your baby than using the medicine.

Weighing benefits and risks

When deciding whether to use a medicine in pregnancy, you and your doctor need to talk about the medicine's benefits and the risks.

- **Benefits** what are the good things the medicine can do for me and my growing baby?
- **Risks** what are the ways the medicine might harm me or my growing baby?

There may be times during pregnancy when using medicine is a choice. For example, if you get a cold, you may decide to "live with" your stuffy nose instead of using the "stuffy nose" medicine you use when you are not pregnant.

Other times during pregnancy, using medicine is not a choice — it is needed. For example, you might need to use medicine to control an existing health problem like asthma, diabetes, depression, or seizures. Or, you might need a medicine for a few days, such as an antibiotic to treat a bladder infection or strep throat. Also, some women have a pregnancy problem that needs medicine treatment. These problems include severe nausea and vomiting, earlier pregnancy losses, or preterm labor.

Using herbal or dietary supplements and other "natural" products

You might think herbs are safe because they are "natural." But, except for some vitamins, little is known about using herbal or dietary supplements while pregnant. Some herbal



remedy labels claim they will help with pregnancy. But, most often there are no good studies to show if these claims are true or if the herb can cause harm to you or your baby. Also, some herbs that are safe when used in small amounts as food might be harmful when used in large amounts as medicines. So, talk with your doctor before using any herbal or dietary supplement or natural product.

These products may contain things that could harm you or your growing baby.

Having sex

Unless your doctor tells you otherwise, sex is safe. You may find that your interest in sex changes during pregnancy. Talk to your partner about other positions if the way you usually have sex is awkward or no longer feels good. Call your doctor if sex causes:

- Pain
- · Vaginal bleeding
- Fluid leakage

Travel

Everyday life doesn't stop once you are pregnant. Most healthy pregnant women are able to continue with their usual routine and activity level. That means going to work, running errands, and for some, traveling away from home. To take care of yourself and help keep your baby safe, consider these points before taking a long trip or traveling far from home:

• Talk to your doctor before making any travel decisions that will take you far from home. Ask if any health conditions you might have makes travel during pregnancy unsafe. Also consider the destination. Is the food and water safe? Will you need immunizations before you go? Is there good medical care available in the event of an emergency? Will your health insurance cover medical care at your destination?



- Avoid sitting for long periods during car or air travel. Prolonged sitting can affect blood flow in your legs. Try to limit driving to no more than 5 or 6 hours each day. Take frequent breaks to stretch your legs. Stand up, and move your legs often during air travel. Wearing support pantyhose also can help blood flow.
- Occasional air travel is safe for most pregnant women, and most airlines will allow
 women to fly up to 36 weeks of pregnancy. Make sure to wear your seatbelt
 during the flight, and take steps to ease the discomforts of prolonged travel and
 sitting. Frequent air travel during pregnancy increases the risk of fetal exposure to
 cosmic radiation. If you are a pregnant pilot, aircrew member, or other frequent
 flier, check with your employer about flying restrictions.
- Bring a copy of your medical record and find out about medical care at your destination so you will be prepared in the event of an emergency.
- If you suspect a problem with your pregnancy during your trip, don't wait until you come home to see your doctor. Seek medical care right away.

Buckle up!

Wearing a seatbelt during car and air travel is safe while pregnant. The lap strap should go under your belly, across your hips. The shoulder strap should go between your breasts and to the side of your belly. Make sure it fits snugly.

Environmental risks

The environment is everything around us wherever we are — at home, at work, or outdoors. Although you don't need to worry about every little thing you breathe in or eat, it's smart to avoid exposure to substances that might put your pregnancy or unborn baby's health at risk.

During pregnancy, avoid exposure to:

- Lead found in some water and paints, mainly in homes built before 1978
- Mercury the harmful form is found mainly in large, predatory fish.
- Arsenic high levels can be found in some well water
- Pesticides both household products and agricultural pesticides
- Solvents such as degreasers and paint strippers and thinners
- Cigarette smoke

Keep in mind: We don't know how much exposure can lead to problems, such as miscarriage or birth defects. That is why it's best to avoid or limit your exposure as much as possible. Here are some simple, day-to-day precautions you can take:

- Clean in only well-ventilated spaces. Open the windows or turn on a fan.
- Check product labels for warnings for pregnant women and follow instructions for safe use.
- Do not clean the inside of an oven while pregnant.

• Leave the house if paint is being used, and don't return until the fumes are gone.

If you are exposed to chemicals in the workplace, talk to your doctor and your employer about what you can do to lower your exposure. Certain industries, such as dry cleaning, manufacturing, printing, and agriculture, involve use of toxins that could be harmful. If you are concerned about the safety of your drinking water, call your health department or water supplier to ask about the quality of your tap water or how to have your water tested. Or, call the Environmental Protection Agency's Safe Drinking Water Hotline at (800) 426-4791. Don't assume that bottled water is better or safer. Usually, bottle water offers no health benefits over tap water.

Quitting smoking

Smoking cigarettes is very harmful to your health and could also affect the health of your baby. Not only does smoking cause cancer and heart disease in people who smoke,



smoking during pregnancy increases the risk of low birth weight. low birth weight babies are at higher risk of health problems shortly after birth. Also, some studies have linked low birth weight with a higher risk of health problems later in life, such as high blood pressure and diabetes. Women who

smoke during pregnancy are more likely than other women to have a miscarriage and to have a baby born with cleft lip or palate, types of birth defects. Also, mothers who smoke during or after pregnancy put their babies at greater risk of sudden infant death syndrome (SIDS).

Mothers who smoke have many reasons to quit smoking. Take care of your health and your unborn baby's health: Ask your doctor about ways to help you quit during pregnancy. Intensive counseling has been shown to increase a pregnant woman's chances of quitting success. We don't know whether the drugs used to help people quit are safe to use during pregnancy. But we do know that continuing to smoke during pregnancy threatens your and your baby's health. Quitting smoking is hard, but you can do it with help!

Substance abuse

Using alcohol and illegal drugs during pregnancy threatens the health of your unborn baby. So does using legal drugs in an inappropriate way. When you use alcohol or drugs, the chemicals you ingest or breathe into your lungs cross the placenta and enter your baby. This puts your baby at risk for such problems as stillbirth, low birth weight, birth defects, behavioral problems, and developmental delays.

Alcohol

When you drink alcohol, so does your baby. Pregnant women should not drink alcohol to eliminate the chance of giving birth to a baby with fetal alcohol spectrum disorder (FASD). FASD involves a range of harmful effects that can occur when a fetus is exposed to alcohol.

The effects can be mild to severe. Children born with a severe form of FASD can have abnormal facial features, severe learning disabilities, behavioral problems, and other problems.

You might think a drink now and then won't hurt your baby.

But we don't know how much alcohol it takes to cause harm.

We do know that the risk of FASD, and the likely severity, goes up with the amount of alcohol consumed during pregnancy. Also, damage from alcohol can occur in the earliest stages of pregnancy — often before a woman knows she is pregnant. For this reason, women who may become pregnant also should not drink.

Illegal drugs

Many women who use illegal drugs also use tobacco and alcohol. So, it's not always easy to tell the effects of one drug from that of alcohol, tobacco, or other drugs. We do know that using illegal drugs during pregnancy is very dangerous. Babies born to women who use drugs such as cocaine, heroine, and methamphetamine are likely to be born addicted and

must go through withdrawal. Mothers who inject drugs are at higher risk of getting HIV, which can be passed to an unborn baby. Some studies suggest that the effects of drug use during pregnancy might not be seen until later in childhood.

Getting help for alcohol or drug use

If you drink alcohol or use drugs and cannot quit, talk to your doctor right away. Treatment programs can help pregnant women with addiction and abuse. To find help near you, go to the Substance abuse treatment facility locator. You can quit using and give your baby a good start to life.

Abusive relationships

It's hard to be excited about the new life growing inside of you if you're afraid of your partner. Abuse from a partner can begin or increase during pregnancy and can harm you and your unborn baby. Women who are abused often don't get the prenatal care their babies need. Abuse from a partner also can lead to preterm birth and low birth weight babies, stillbirth and newborn death, and homicide. If you are abused, you might turn to alcohol, cigarettes, or drugs to help you cope. This can be even more harmful to you and your baby.

You may think that a new baby will change your situation for the better. But the cycle of abuse is complex, and a baby introduces new stress to people and relationships. Now is a good time to think about your safety and the safety and wellbeing of your baby. About 50 percent of men who abuse their wives also abuse their children. Think about the home environment you want for your baby. Studies show that children who witness or experience violence at home may have long-term physical, emotional, and social problems. They are also more likely to experience or commit violence themselves in the future.

Prenatal exams offer a good chance to reach out for help. It's possible to take control and leave an abusive partner. But for your and your baby's safety, talk to your doctor first. Let motherhood prompt you to take action now.

If you're a victim of abuse or violence at the hands of someone you know or love, or you are recovering from an assault by a stranger, you and your baby can get immediate help and support.

The National Domestic Violence Hotline can be reached 24 hours a day, 7 days a week at 800-799-SAFE (7233) and 800-787-3224 (TTY). Spanish speakers are available. When you call, you will first hear a recording and may have to hold. Hotline staff offer crisis intervention and referrals. If requested, they connect women to shelters and can send out written information.

The National Sexual Assault Hotline can be reached 24 hours a day, 7 days a week at 800-656-4673. When you call, you will hear a menu and can choose #1 to talk to a counselor. You will then be connected to a counselor in your area who can help you. You can also visit the National Sexual Assault *Online* Hotline.

When to call the doctor

When you are pregnant, do not hesitate to call your doctor or midwife if something is bothering or worrying you. Sometimes physical changes can be signs of a problem.

Call your doctor or midwife as soon as you can if you:

- Are bleeding or leaking fluid from the vagina
- Have sudden or severe swelling in the face, hands, or fingers
- Get severe or long-lasting headaches

- Have discomfort, pain, or cramping in the lower abdomen
- Have a fever or chills
- Are vomiting or have persistent nausea
- Feel discomfort, pain, or burning with urination
- Have problems seeing or blurred vision
- Feel dizzy
- Suspect your baby is moving less than normal after 28 weeks of pregnancy (if you count less than 10 movements within 2 hours. Learn how to count your baby's movements on our Prenatal care and tests page.)
- Have thoughts of harming yourself or your baby



