

# STAYING HEALTHY IN PREGNANCY

## ➔ Pregnancy supplements

Folic acid is recommended from 3 months before you conceive until 12 weeks' gestation to help prevent your baby from being born with a neural tube defect, like spina bifida. For most women, 500 micrograms (mcg) is sufficient, plus a healthy diet.

If you have a family history of neural tube defects, take certain medications, or if you are overweight, it is advised that you take a higher dose of folate.

It is also recommended that women who are considering becoming pregnant, who are pregnant or are breastfeeding, consume 150mcg of iodine through supplementation, to help the baby's brain and nervous system develop. Examples of supplements include *I-folic*, *Elevit*, *Blackmores Pregnancy and Breastfeeding*.

If you haven't yet started a supplement, do so today.

## ➔ Nutrition in Pregnancy

Pregnancy increases your demand for nutrients. The best way to meet your and your baby's nutritional needs is to eat a wide variety of nutritious foods including fruits, vegetables, calcium & iron rich foods plus fibre.

**Iron:** your body requires more iron during pregnancy. Foods high in iron such as lean red meat, chicken, fish and legumes are recommended. To help optimise your absorption of iron, it is best eaten with a source of Vitamin C. This can include citrus foods such as oranges, mandarins and lemons as well as red capsicum. **Calcium** is essential to keep bones healthy and strong. During the third trimester of pregnancy your baby needs a large amount of calcium as they start to develop and strengthen their bones. It is recommended to have ~ 2 serves of dairy including milk, yoghurt, cheese, or calcium fortified soy milk, daily. Many women often worry they won't be able to have a coffee once pregnant. Not the case! **Caffeine** is ok to drink in pregnancy but limit your intake to 2 cups of coffee or 5 cups of tea, at a maximum, per day. Energy drinks are not recommended in pregnancy.

The amount of weight gain recommended for you during pregnancy will vary depending on your pre-pregnancy weight. Your doctor can discuss your individual recommendations and ways to ensure your weight remains optimal during pregnancy.

## You're pregnant Now what?

Great question!

Book in for an appointment with your GP to discuss how we will tailor your individual health and medical needs to optimise your pregnancy.

Your first appointment will discuss many of the issues that this guide covers, but your doctor will also review your medical history, ensure your cervical smear is up to date, examine you and arrange for initial investigations which will confirm your gestation (week of pregnancy).



## ➔ Exercise

There are many benefits to be gained from regular exercise during pregnancy including physical benefits and the prevention of excessive weight gain as well as benefits for psychological wellbeing.

- Most women should aim for 'moderate' intensity. You should feel like you are working 'somewhat hard' and be able to maintain a conversation during exercise.
- Aim for 150 to 300 minutes of moderate intensity physical activity each week.
- Remember to take time for a warm up and cool down as hormone changes that occur in pregnancy cause ligaments to be softer increasing your risk of injury.
- Avoid exercising in high temperatures and humidity. Stay well hydrated.
- Avoid risky exercises such as horse riding, skiing or which might involve trauma to the abdomen such as certain team sports or martial arts.
- Perform regular exercises to strengthen the pelvic floor.
- Weights are generally not recommended after the first trimester. It is best to discuss this type of exercise with your doctor if you wish to continue it.



## ➔ Mental Wellbeing

Pregnancy and being a new parent is a time of huge change. Finding out you are pregnant can be a very exciting time. But it can also make you feel anxious or worried and make you wonder how you are going to cope. It is normal to feel a whole range of emotions – some good and some not so good. Remember there are lots of supports and strategies that you can access. It is important to speak with your loved ones, engage in hobbies and interests that normally bring you joy & to continue regular exercise and sleep routines. Professional support is available through your GP, who may discuss referral to other support services if required. Some women may already be taking medication for mental health such as antidepressants prior to conceiving. Others may need to consider medications depending on how their mental wellbeing tracks during pregnancy. It is important to discuss your concerns about your mental health with your GP, and they can discuss the safest and most suitable options available for you. Everyone has a right to be safe in their home. If you are experiencing abuse, control, coercion or violence, please speak with your trusted GP for further support.

## ➔ Avoiding Food-Borne Infections

A number of infections can make your baby unwell in pregnancy. We specifically worry about infections caused by Listeria, Salmonella and Toxoplasma.

**Salmonella:** whilst this bacterial infection is rare it can be dangerous in pregnancy. To help prevent it, avoid foods that contain raw eggs and always cook meat, chicken and eggs thoroughly. Do not eat any type of sprout such as alfalfa or broccoli sprouts.

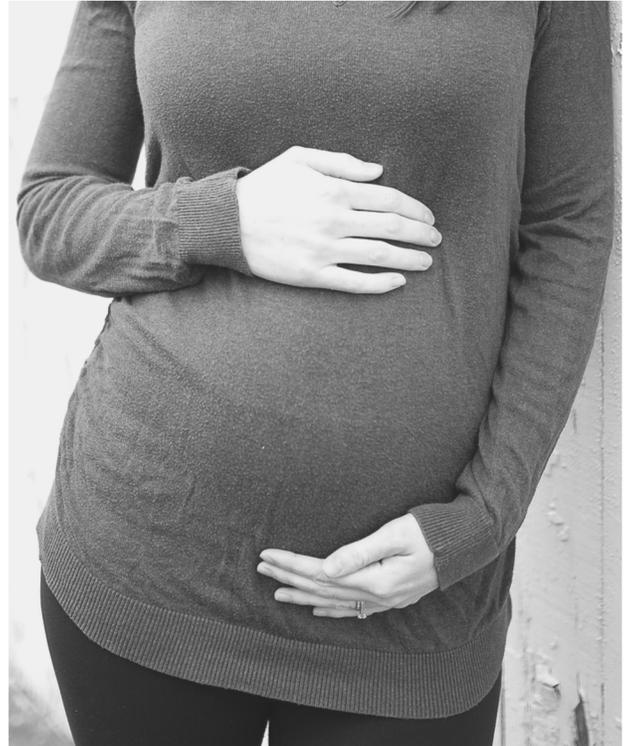
**Listeria:** this is a type of bacteria found in some foods that can cause a rare but dangerous infection called listeriosis. This can lead to miscarriage, premature labour or stillbirth.

To try to avoid listeriosis follow these guidelines;

- Try to eat only freshly cooked foods and well washed, freshly prepared fruit and vegetables. Leftovers can be eaten if they were refrigerated promptly and kept no longer than a day
- Avoid consuming rockmelon
- Avoid any foods that may have been made more than a day in advance eg pre-made and pre-packaged salads, sandwiches and wraps
- Avoid processed/ready to eat deli meats and chicken
- Avoid soft cheeses and pâté
- Avoid raw seafood including oysters and sushi
- Avoid soft serve ice cream & soft serve yoghurt

**Toxoplasmosis:** an infection from a parasite found in cat faeces and undercooked foods. Wash hands thoroughly, cook food adequately and wear gloves if changing kitty litter.

Remember to always wash your hands before preparing food, ensure cooking utensils and boards are clean prior to use and wash all fruits & vegetables thoroughly to minimise your risk of infection.



## ➔ Avoiding Harmful Substances

It is strongly recommended **NOT** to smoke, drink any alcohol or using recreational drugs during pregnancy. These carry significant risks for the baby and the pregnancy. Some women learn about a pregnancy after consuming harmful substances. Your GP can discuss this in more detail with you as harm to the baby depend on what is consumed, how much and which week(s) of gestation.

Some medications can also be harmful to your pregnancy, so always check with your doctor or pharmacist before taking pharmaceuticals, vitamins, supplements and over-the-counter natural remedies. If you need pain relief paracetamol is the safest option. Avoid anti-inflammatories like ibuprofen and aspirin. Medications can be used to help manage nausea and vomiting, if needed.

Some cosmetics such as anti-aging/wrinkle creams which contain retinoids or vitamin A supplements are considered teratogenic (can give rise to birth defects).

## ➔ Bleeding in Early Pregnancy

Many women experience light bleeding or cramping during pregnancy, especially in the first trimester. Most of these women will go on to have healthy pregnancies and deliver their baby at term. However, experiencing these symptoms can be very concerning and may also be a sign of miscarriage. If you experience these symptoms, please don't hesitate to contact your GP for assessment.

If it is out of hours, we recommend presenting to the Royal Women's Hospital Emergency Department if the bleeding becomes heavier, more painful or you are feeling unwell. If you experience heavy bleeding or severe pain, please call an ambulance on 000.



## ➔ Genetic screening

A comprehensive range of genetic screening tests for pregnancy are available in Australia. Your doctor will discuss these tests in depth with you. Most babies are born healthy however a few will have birth defects. You may choose to have testing during pregnancy to find out the likelihood of having a baby with a birth defect. Screening tests, whilst optional are recommended for pregnancies. They pose no risk of miscarriage.

At Royal Park Medical, we will counsel you about these tests in great detail and can arrange formal genetic counselling so you understand the full implications of any tests you opt to do. Outlined below is a summary of the main tests available.

## ➔ Combined First Trimester Screening

Performed between 9 and 13-weeks' gestation. This test combines the result of a blood test, the mother's age and an ultrasound scan to show whether the baby is at increased likelihood of a chromosomal condition such as Down syndrome. It will accurately predict 90% or 9 out of 10 babies affected by Down syndrome.

This test can also provide information on your risk of developing early onset pre-eclampsia, a serious complication of pregnancy.

There is a partial Medicare rebate for the first trimester screen but there will also be some out of pocket expense, ~ \$120 for the blood testing and ~\$250 for the ultrasound depending on where you have your scan.

## ➔ Non-Invasive Prenatal Test (NIPT)

Identifies pregnancies that have an increased chance of chromosome conditions such as Down's syndrome, Edwards syndrome, Patau syndrome, sex chromosome conditions, other rare trisomies and partial chromosome deletions and duplications.

It is the most accurate prenatal screening for Down's Syndrome, picking up more than 99% of cases. It has a false positive rate of <1% meaning that most positive results are true positives.

Screening can be performed any time from 10 weeks of pregnancy. It involves a blood test only. If you opt for this screening test, an ultrasound at 12-13 weeks is still recommended to assess the structural development of your baby. The NIPT blood test costs ~\$475.

## ➔ Genetic Carrier Testing

Genetic carrier testing identifies whether an individual is a carrier of particular genetic conditions. Carrier screening is available to all couples. It screens for cystic fibrosis (CF), fragile X syndrome (FXS) and spinal muscular atrophy (SMA). Being a carrier puts an individual at higher chance of having a child affected with the condition. Many people can be carriers, even if no one in their family is affected. The Victorian Clinical Genetics Service (VCGS) also offer extended carrier testing, which assesses for > 250 carrier conditions.

Your doctor will discuss these tests in details. For more information, please refer to the links at the end of this handout.

## ➔ Vaccinations in pregnancy

Pregnant women are more susceptible to influenza and COVID19 infections. They are also at increased risk of complications from these viral infections. All pregnant women are strongly recommended to have a influenza and COVID19 vaccination at any stage of their pregnancy. These are government-funded vaccines and also help protect your baby by providing some passive immunity to your baby.

From 20 weeks of gestation, women are also advised to have a pertussis (whooping cough) booster. Pertussis is a serious infection, especially in newborns. Vaccination in pregnancy is the best way to protect your baby. It is provided for free to pregnant women from 20 – 32 weeks' gestation in each pregnancy. Expectant partners are recommended to have a whooping cough booster but this is no longer government-funded. It can be given at any stage of pregnancy. Partners are also advised to consider boosters for influenza and COVID infections prior to the birth of their babies

Vaccination against RSV infection is also recommended and is provided for free for pregnant women from 28–36 weeks. This is a government-funded vaccine.

## ➔ Modes of Pregnancy Care

There are many options in how your pregnancy is managed. Your GP will discuss these with you.

**Public hospital care:** Your GP will refer you to your local public hospital and they will take over your care from approximately 18-20 weeks with all of your appointments being at the hospital. You generally get seen by a team of different doctors and midwives.

**Shared care:** Your pregnancy care is shared between the hospital and your local GP who is affiliated with the hospital. Most of your appointments will be with your GP but your baby will be born in the hospital. At Royal Park Medical, Drs Sarah Humphry and Bridget Steer are able to offer Shared Pregnancy Care.

**Private Obstetric Care:** If you have private health insurance you may choose to see a private obstetrician for your pregnancy. Your GP can refer you to the obstetrician of your choice after your initial blood tests.

**Private Midwife or Doula:** Some patients prefer to have a clinical and/or support person with them at the time of delivery, who is well known to them. This is an additional mode of care to public hospital care.

## ➔ Useful Resources

[www.thewomens.org.au/health-information/pregnancy-and-birth](http://www.thewomens.org.au/health-information/pregnancy-and-birth)  
[www.betterhealth.vic.gov.au/healthyliving/healthy-pregnancy](http://www.betterhealth.vic.gov.au/healthyliving/healthy-pregnancy)  
[www.vcgs.org.au/tests](http://www.vcgs.org.au/tests)  
[www.royalparkmedical.com.au](http://www.royalparkmedical.com.au)

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