9 Months

To Get Ready . . .

You Can Make a Difference

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You Can Make a Difference

January 2005

For more information or
additional copies of this booklet:

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DOH Division of Community and Family Health:
- Maternal and Child Health
  - Maternal and Infant Health
  - Genetic Services
  - Immunization
  - CHILD Profile
- Community Wellness & Prevention
  - WIC Program
- Health Promotion
- Infectious Disease and Reproductive Health
  - Family Planning and Reproductive Health

DSHS Medical Assistance Administration:
- MAA Division of Program Support
  - Family Services Section

Other individuals and organizations offering assistance and review for this publication include:
Washington State Local WIC agencies

Everyone's help has been invaluable and is greatly appreciated.

The information in this booklet is not meant to take the place of prenatal visits with a licensed health care provider, such as your doctor, nurse, or midwife.

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Congratulations on the upcoming birth of your baby!

Pregnancy is a time of change, both physically and emotionally. You will be amazed at how your body changes. Your emotional ups and downs may also surprise you. Your partner, your friends and family, and your doctor or nurse will be important people during this time. Their support will help you through these months of change and adjustment.

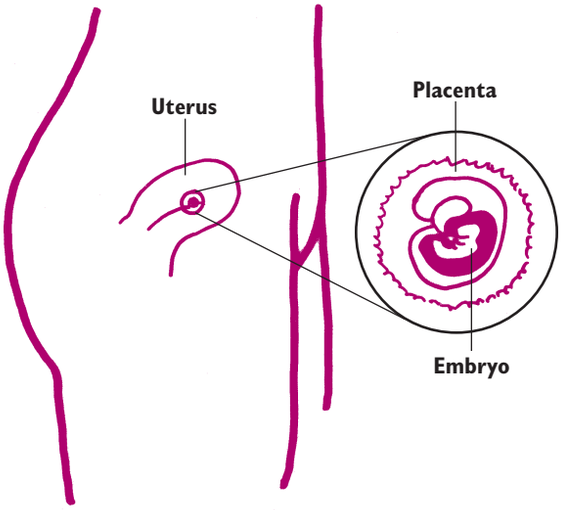
Pregnancy can be a powerful time in your life. Healthy habits and good prenatal care are important to make sure you and your baby are strong, both before and after birth.

This book is about how your body changes, how your unborn baby grows, and how to have a healthy pregnancy. Starting on page 15 the most important messages are marked with a ♥.

We hope this book helps you learn about pregnancy. Share it with the people who will experience this special time with you.

If you have questions or concerns, ask your doctor or nurse. Here is space to write down your questions:

1st Month



Your baby is growing

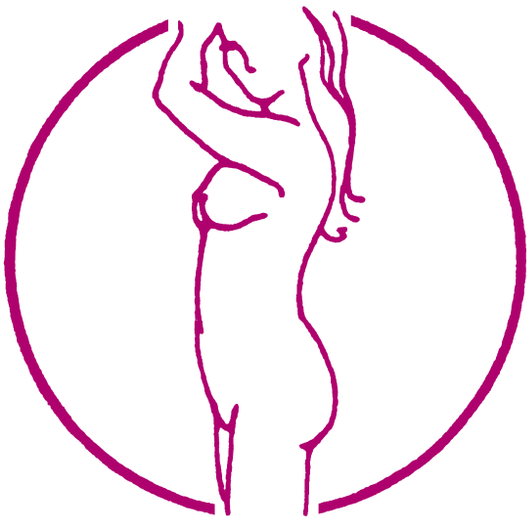
- Your baby grows to about 1 inch long.
- The father's sperm has already decided your baby's sex.
- His traits, such as the color of his hair and eyes, were set from the time your egg (ovum) and the father's sperm met.
- His brain and nervous systems are forming.
- His heart and lungs are forming.
- He has tiny spots for ears, eyes, and nose.
- His arms and legs are forming.

Your body is changing

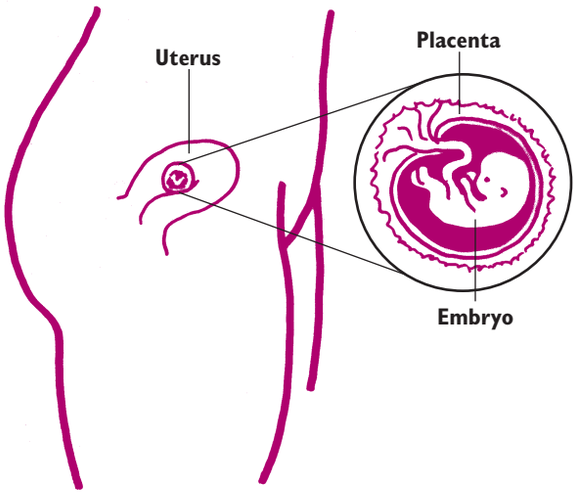
- Your period does not occur when you are pregnant.
- You may not gain weight this month.
- Your breasts may feel tender and tingly.
- You may feel sick to your stomach ("morning sickness"). It can come any time of the day.
- You may feel very tired.

What you can do this month

- Make an appointment to begin prenatal care. If you need help finding a doctor or nurse, call 1-800-322-2588 or call your nearest WIC office.
- Check before you take *any* medications. This includes off-the-shelf drugs and any medication prescribed before you were pregnant.
- Do not use tobacco, drink alcohol, or use street drugs. Get help if you cannot quit. (see pages 33–34)
- Talk with your partner or a close friend about any feelings you have about being pregnant. You are going through a major life change.
- Decide how and when you want to tell your family and friends, and maybe your boss, that you are pregnant.



2nd Month



Your baby is growing

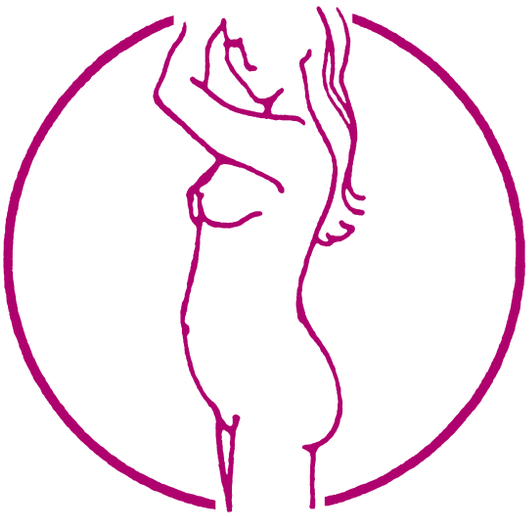
- She grows to about 2 inches long and weighs about ½ to 1 ounce.
- She has an umbilical cord.
- She has a heart beat.
- Her stomach, liver, and kidneys are forming.
- Skin and muscles are starting to shape her body.
- Her fingers and toes are forming.

Your body is changing

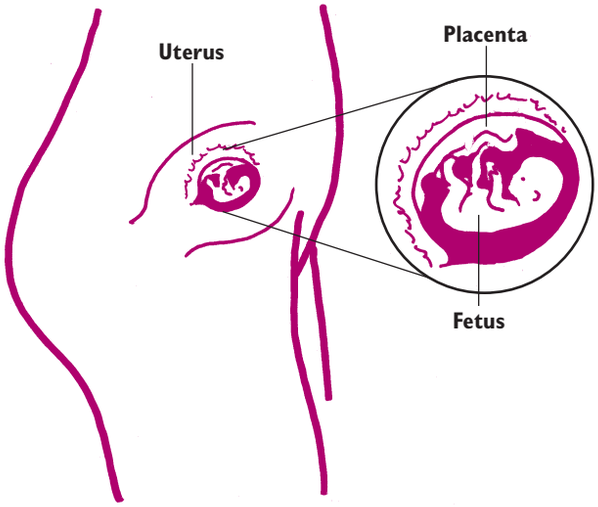
- You may gain a pound or two by the end of this month.
- Your breasts grow larger. The area around your nipples begins to darken.
- Your growing uterus crowds into the space next to your bladder and you urinate (pee) more often.
- You may feel sick to your stomach. You may feel worse in the morning.
- You still feel more tired than usual.
- Your waistline may begin to get bigger and clothes may feel tight.

What you can do this month

- Talk to your doctor or nurse about having an HIV test. All pregnant women should get tested for the virus that causes AIDS.
- Share with your partner, or those close to you, your ideas and worries about being pregnant. Most "parents-to-be" are worried about being parents.
- Think and talk about what family traditions you might wish to follow before and after you give birth.
- Rest and relax.



3rd Month



Your baby is growing

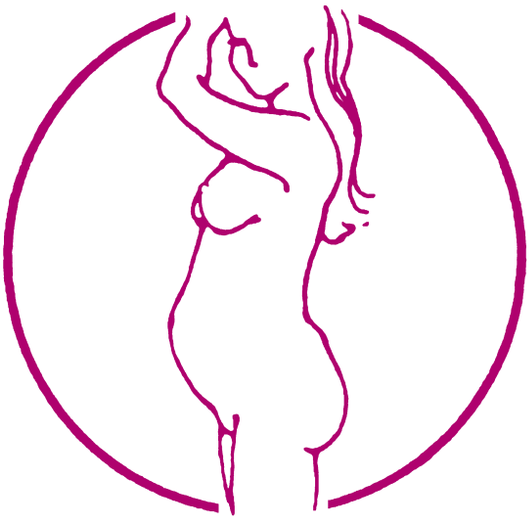
- He measures about 6 inches long and weighs about ¼ of a pound.
- His umbilical cord is well formed. Blood is moving between him and your placenta.
- He can move but he is still too tiny to be felt by you.
- His heart beats 120 to 160 beats per minute.
- His sex is easy to tell now, if you could see him inside the uterus.
- His ears, arms, hands, fingers, legs, feet, and toes will be formed by the end of this month.
- Reflex movements allow his elbows to bend, legs to kick, and fingers to form a fist.

Your body is changing

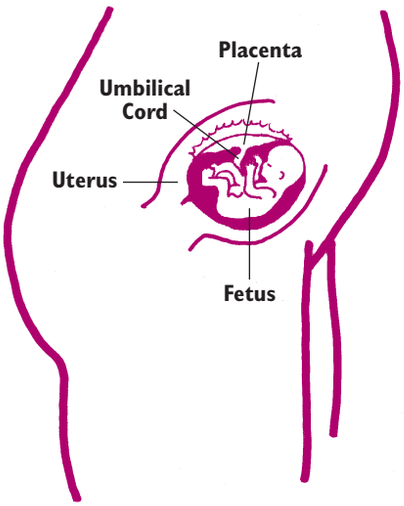
- You may gain about 2 to 4 pounds.
- You may feel more hungry.
- You may be constipated.
- You may sweat more.
- This may seem like a more stressful time. You may feel happy or sad without any good reason. This is due, in part, to hormonal changes.

What you can do this month

- Ask about any changes in your body that worry you.
- Allow yourself and your partner time to adjust to many feelings about this pregnancy.
- Talk to your doctor or nurse about the correct way to wear your seat belt.
- Share your thoughts and feelings with people you trust.
- Take good care of yourself in both body and mind.



4th Month



Your baby is growing

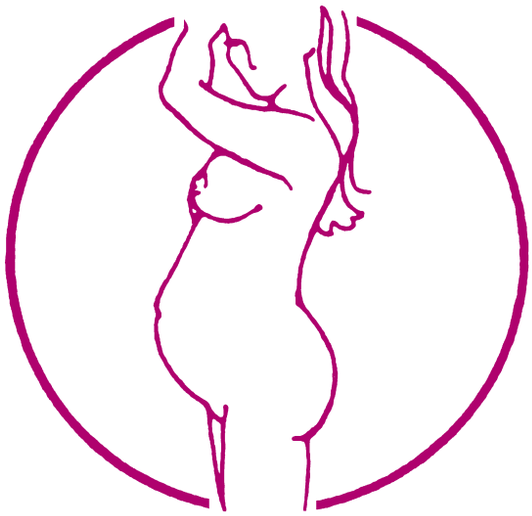
- She measures about 10 inches long and weighs about ¾ of a pound.
- Your baby moves around inside you.
- Her movements may be strong enough to be felt.
- Her hair begins to appear on her head.
- Fine downy hair (lanugo) appears all over her body.
- Her eyebrows and eyelashes begin to grow.
- Her heartbeat can be heard by the end of this month with a special stethoscope. This often marks the midpoint in pregnancy.

Your body is changing

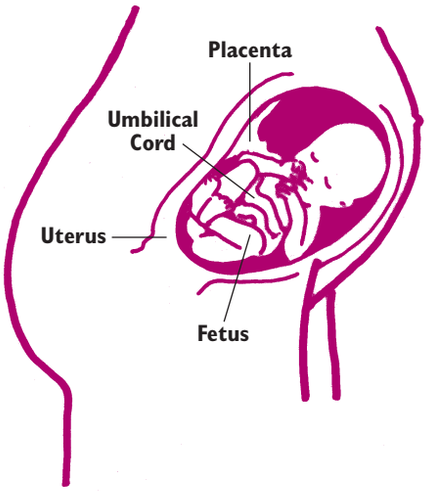
- You may gain about 3 to 4 pounds this month.
- You may be hungry more often.
- You may crave certain foods.
- You may feel less tired. You may begin to enjoy being pregnant.
- Your nipples and the skin around them become much darker in color.
- Your pregnancy is starting to show.

What you can do this month

- Visit the dentist. Untreated dental problems can cause complications during pregnancy.
- Make sure your seat belt fits low over your hips.
- Talk to your partner about any changes in your sexual feelings during this time.
- Rest when you feel tired.



5th Month



Your baby is growing

- He is about 12 inches long and weighs about 1½ pounds.
- He is covered by a white cheesy layer that protects his skin.
- His heartbeat is now easy to hear with a special stethoscope.
- He may have some hair on his head.

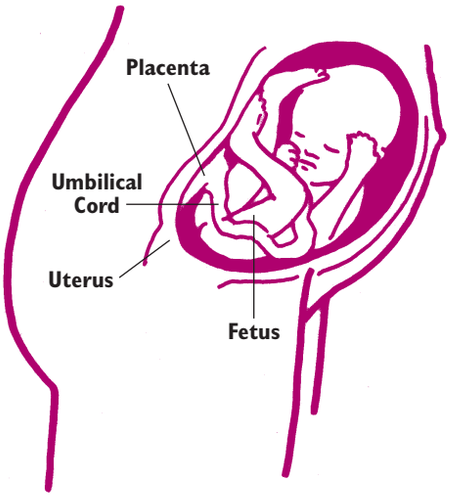
Your body is changing

- You gain almost a pound a week this month or about 3 to 4 pounds a month from now on.
- You may feel the movement of your baby's arms and legs. You will notice certain patterns in his activity.
- Your breasts grow even larger. They may get softer and veins may start to show.
- Your breasts are getting ready to feed your baby. You may see colostrum, a yellow sticky fluid, leaking from your breasts.
- Constipation may become more of a problem.
- Your hair may feel more thick and oily.
- You may have feelings of not being able to cope. This can happen almost any time.

What you can do this month

- Take time to buy one or more well fitting support bras.
- Find out about childbirth classes. Sign up to learn ways to breathe and relax during labor.
- Do Kegel and pelvic rock exercises (see pages 38–39).
- Talk about any concerns you or your partner may have about being a parent. Your life is changing. Expect more mood swings. Talk to friends and family members if you are feeling nervous or depressed.
- Rest on your left side every day (left is better for blood flow to your baby).

6th Month



Your baby is growing

- She measures about 14 to 15 inches long. She weighs about 2 to 2½ pounds.
- She reacts to noises from the outside, by moving more or getting quiet.
- She can kick, make crying movements, and hiccup.
- She can now open and close her eyelids. Her eyes are almost ready for life outside.

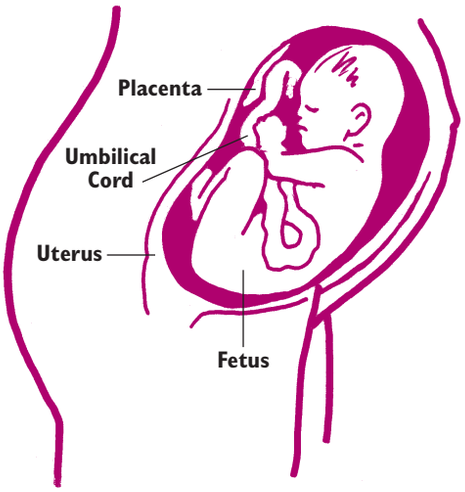
Your body is changing

- You may gain 3 to 4 pounds a month from now on.
- Your appetite is good. You most likely have little or no morning sickness.
- Sometimes you may have heartburn.
- You may notice some tightening of your belly, called Braxton-Hicks contractions. This is normal as long as it happens less than four times in an hour.
- Your sex drive may change from week to week.
- Stretch marks may show up on your belly, hips and breasts.
- You may find yourself thinking of all the things that can go wrong with your baby. Most women worry like this.
- You may find yourself thinking more often about your baby as she grows inside you.

What you can do this month

- Do Kegel and pelvic rock exercises (see pages 38–39).
- Prepare for your baby's first few weeks. Borrow or purchase an approved infant car seat, baby clothes, and a baby bed.
- If you want to, take time to talk to someone about your changing body.
- Talk to people you respect as parents. Ask them questions about caring for a baby.
- Avoid getting too tired. Lie on your left side when you relax.

7th Month



Your baby is growing

- He measures about 16 inches long and weighs about 2½ to 3 pounds.
- His body is covered with fine, soft hair called lanugo.
- His fingerprints are set.
- He has active and quiet times.
- He moves a lot, kicks, and stretches.
- He sucks his thumb.
- His brain and nervous system are almost mature.

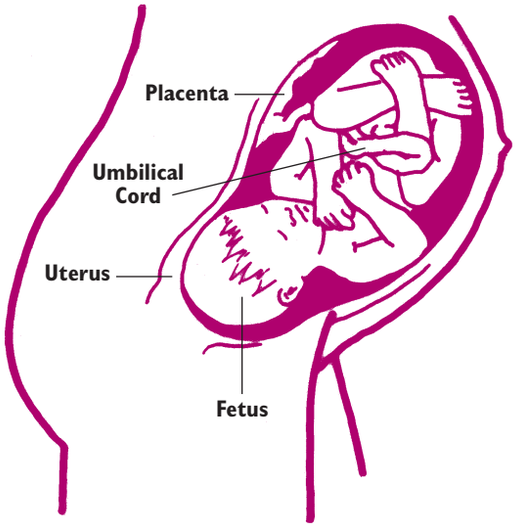
Your body is changing

- You may gain more than 3-4 pounds this month.
- Your baby's heartbeat can be heard by placing an ear on your tummy.
- If your breasts leak enough to make you feel wet, wear cotton padding in your bra.
- You may notice some swelling of your feet, ankles, and hands by the end of the day.
- You may feel more tired.
- You may feel more awkward in moving about. You may feel faint as you get up from lying down.

What you can do this month

- Take a tour of the hospital or birthing center to learn about where you will give birth.
- Keep getting ready for your baby's first few weeks. Borrow or purchase an approved infant car seat, baby clothes and diapers, and a baby bed.
- Do Kegel and pelvic rock exercises (see pages 38–39).
- Practice ways to relax and breathe during labor.
- Choose a support person to be with you during childbirth classes and at your baby's birth.
- Ask your doctor or nurse about birth control methods.
- Plan some special time with your partner.
- Take some extra time for yourself.

8th Month



Your baby is growing

- She measures about 18 inches long and weighs about 5½ pounds.
- She is still growing and getting ready to be born.
- Her eyes are open.
- She may settle down into the head-down position for birth.

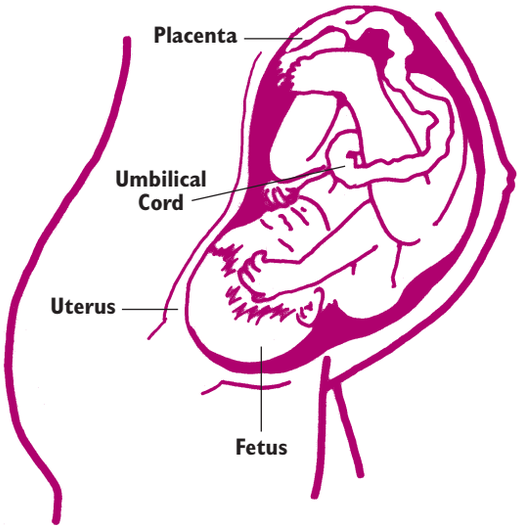
Your body is changing

- You may have trouble breathing when the baby pushes up against your lungs.
- You may have hemorrhoids (see page 22).
- You can feel the parts of the baby through your belly.
- You may tire easily.
- You may sweat more.
- You may need to urinate often because the baby's head presses on your bladder.
- You may have trouble sleeping.
- You may find this month the most difficult.

What you can do this month

- Make arrangements for baby's health care after birth.
- Do Kegel and pelvic rock exercises (see pages 38–39).
- Go to childbirth classes with someone you trust.
- Practice what you learn in your childbirth classes.
- Make a birth plan and share your wishes with your doctor or nurse.
- Pack some special things to help you during labor, such as a special picture, music, or blanket.
- Make plans for someone to help you around the house after the birth, if possible.
- Talk about names for the baby.
- Talk to your doctor or nurse about birth control methods if you have not done this yet.

9th Month



Your baby is growing

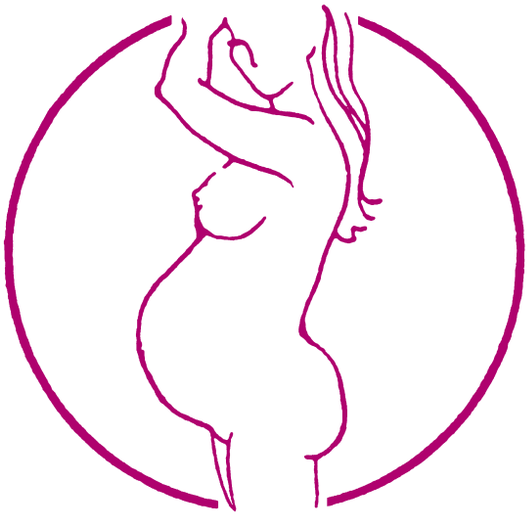
- He measures about 20 inches long and weighs about 6½ to 7½ pounds.
- He settles into a head down position.
- He may seem less active with less space to move.
- He keeps growing.

Your body is changing

- Your belly may look lopsided as the baby moves his arms and legs.
- You feel more tired.
- You may have trouble sleeping, and you may wake up because you have to urinate or turn over.
- Your feet and hands may swell.
- Your breasts are ready to feed your baby.
- You may feel pressure low in your pelvis from baby settling into position for birth.
- Braxton-Hicks contractions may happen more often.
- You may be tired of being pregnant.
- You may wonder when your baby will be born.
- You may be anxious or nervous about giving birth.

What you can do this month

- Ask your doctor or nurse about getting tested for Group B Strep, which can cause serious illness in your baby.
- Make a list of people to call when you have questions. Talk about what you're going through.
- Decide on a birth control method now. Have condoms at home as a back-up method.
- Finish packing your bag for labor.
- List people to call when labor begins.
- Do Kegel and pelvic rock exercises (see pages 38–39).
- Rest when you feel tired. Limit any long travel.
- Treat yourself and your partner to something special.



Routine Prenatal Care

Medical care should begin as soon as you think you might be pregnant. Frequent checkups are the best way to answer questions and protect your health and your baby's health! Your new baby's future depends on you from now on.

- **Start prenatal care as soon as you know you're pregnant.**
- **Get tested for HIV and other sexually transmitted infections.**
- **Visit the dentist. Untreated dental problems can cause complications during pregnancy.**
- **Make healthy food choices and plan to gain 25–35 pounds.**
- **If you use tobacco, alcohol or drugs, or feel unsafe at home, ask your doctor or nurse for help.**
- **Avoid secondhand smoke.**

Physical exam

Your prenatal care begins with a complete exam. This includes a physical examination, blood tests, and a urine test. Your doctor or nurse will also ask questions about your past health, use of tobacco, alcohol, or drugs, medications you take, safety in your relationships, and any concerns about your pregnancy.

Medical history

Your doctor or nurse needs to know about your past health. They will ask about past pregnancies, including miscarriages and abortions, about your menstrual periods, or about problems with your periods. They will ask about any illness you or your family members have had such as tuberculosis, asthma, or heart disease. Your doctor or nurse will also ask about history of birth defects in your family or in your partner's family.

Immunizations

Your doctor or nurse will make sure your "shots" are up to date. It is best to check on this before you get pregnant, but some immunizations can be given during pregnancy. Immunizations protect you and your newborn from serious illness. Your doctor or nurse will make sure that your Tetanus and Diphtheria shot is up to date. If flu season occurs during your pregnancy, you will need a flu shot. Other immunizations may be needed if you travel or have certain risk factors.

Blood tests

Certain blood tests are needed to find infections and other conditions in pregnancy. If problems are found, treatment can reduce the risk of harm to you and your unborn child. These tests include Hepatitis B, measles, blood type and Rh factor, syphilis, diabetic screen, and HIV (AIDS).

Two blood tests, a multiple marker screen and cystic fibrosis carrier testing, may be offered to predict whether your baby is at risk to have a disease or inherited conditions such as cystic fibrosis, Down syndrome, or spina bifida. Some lab tests may be done again, later in your pregnancy. Other lab work, such as those that test for diabetes and Group B Strep, are done for the first time later in your pregnancy.

Blood pressure

Your blood pressure is important and will be checked at each visit. If your blood pressure rises as the weeks go by, you may have a blood pressure disease of pregnancy. Getting plenty of rest and eating a well-balanced diet can help prevent this illness from getting serious.

Weight

You will be weighed at each visit. A steady weight gain is best during pregnancy. Gaining and losing too much weight during pregnancy can affect your baby's health. Too little weight gain means your baby isn't getting what he needs to grow. A weight gain between 25 to 35 pounds is just about right. It is normal for a woman's body to store some extra water in the tissues. Tell your doctor or nurse about any rapid weight gain or body swelling. (See pages 24–25 for more information about weight gain during pregnancy)

Urine tests

A urine test is done at every visit. Testing your urine gives facts about how well your body is working. Diabetes and early signs of other problems can often be found by testing the urine for sugar and protein. Kidney and bladder infections can also be found through urine testing.

Abdominal exams

The size of your uterus shows the growth of your baby. Your doctor or nurse will measure your belly with a tape measure at every visit. The baby's position and size are checked. Just after the 4th month, your baby's heartbeat can be heard with a special stethoscope.

Pelvic exam

You will have a pelvic exam. This means looking and feeling inside your vagina to check the size and health of your birth canal, uterus, ovaries, and pelvic bone structure.

Breast exam

Breasts come in all shapes and sizes. Your breasts change and grow as your body prepares to breastfeed your newborn. Your doctor or nurse may check your breasts for these changes and answer your questions.

Dental exam

Take good care of your teeth by brushing and flossing daily. Dental problems can cause problems in pregnancy. Keep appointments with your dentist to take care of problems and maintain a healthy mouth.

Due date

Your doctor or nurse will tell you your due date on your first visit. This date may change. The average length of pregnancy is 40 weeks. Normal, full term pregnancy can last from 37 to 42 weeks. Only 1 in 20 babies is born on the expected due date. Most women give birth between two weeks before to two weeks after the due date.

Sexually transmitted infections (STIs)

Your doctor or nurse will screen for sexually transmitted infections and talk with you about getting tested for HIV. You can have a sexually transmitted infection and not have any symptoms at all. In fact, many women at risk for HIV do not even know it. All women should get tested. If you test positive for HIV, you can take a medicine that greatly reduces your baby's risk of getting HIV.

If you might have been exposed to an STI by a new partner or your partner's other sexual partners, be sure to tell your doctor or nurse. Tests for STIs will be done again to make sure that you and your baby stay healthy.

Lifestyle questions

Your doctor or nurse will ask you to fill out a form or ask you questions about your lifestyle as part of your routine prenatal care. Alcohol, drugs, tobacco, and domestic violence can affect you and your baby's health.

Questions about smoking, drinking, drugs, sexual history, and safety at home may be asked more than once. As you get to know your doctor or nurse, you may feel more at ease talking about these very private matters. Your doctor or nurse can refer you to resources for help, such as the Alcohol/Drug Hotline at 1-800-562-1240. If you worry about talking about safety issues with your doctor or nurse, you can get private help by calling the Washington State Domestic Violence Hotline at 1-800-562-6025.

Alcohol/Drug Hotline—1-800-562-1240
Washington State Domestic Violence Hotline—1-800-562-6025

Questions & answers

If you have questions while pregnant, ask your doctor or nurse. There is no such thing as a dumb or foolish question. It might help to write down questions so that you do not forget them. Don't be shy about asking any questions you might have.

Special Tests

Sometimes, your doctor or nurse-midwife will order special tests during pregnancy. These tests give important details about the growth of your baby.

Ultrasound

An ultrasound uses sound waves to make a picture on a screen that shows the baby in the uterus and measures how well the baby is growing. An ultrasound can also spot some major birth defects.

You may hear about "ultrasound portrait studios" that offer keepsake ultrasound videos to expectant parents. This business will perform an ultrasound of your belly and sell you the video of your unborn baby for "entertainment." The FDA and the American Institute of Ultrasound in Medicine warn expectant parents about using ultrasound for reasons other than medical testing. While there is no proof that ultrasound harms an unborn baby, it is best not to expose your baby to unnecessary tests.

Nonstress test

A nonstress test shows the baby's heart rate when the baby is moving. It can tell if enough oxygen is getting to the baby. This test is done in the last 10 weeks of pregnancy (if needed).

Contraction stress test

A contraction stress test shows what happens to the baby's heart rate during a uterine contraction. It helps show if the baby is under stress. This test is done in the last 10 weeks of pregnancy (if needed).

Multiple marker screening

This simple blood test measures proteins in the mother's blood and looks for the levels of these proteins. This test could indicate an increased risk for certain chromosome problems like Down syndrome and spina bifida (an opening in the spine). Since it is a screening test, it does not prove that a baby has one of these problems. It shows only if you are at increased risk to have a baby with one of these problems. If your blood test comes back "positive", your doctor or nurse-midwife may wish to repeat the test or may offer you an ultrasound or amniocentesis to make sure the baby does not have a problem.

Amniocentesis

For this test, a small amount of fluid around the baby is removed through a very thin needle put into the mother's belly (not through her belly button). The baby's cells found in the fluid can then be tested for certain kinds of problems like Down syndrome. Sometimes special tests are ordered to detect other conditions that are passed down in families. This test can also identify spina bifida, which can cause problems with

walking and learning. The test is usually done between 15 and 18 weeks of pregnancy. Genetic counseling can help you learn more about this test.

Chorionic villus sampling

For this test, a very thin tube is put into the vagina and passed into the uterus, where a tiny sample of the placenta is taken. The baby's cells in this tissue can be tested for certain kinds of problems like Down syndrome and other conditions passed down in families. This test cannot detect spina bifida. This test is usually done between 10 and 11 weeks of pregnancy. Genetic counseling can help you learn more about this test.

Cystic fibrosis carrier screening

You or your partner may be offered this blood test to see if you are at risk to have a baby with cystic fibrosis. Cystic fibrosis is a life-long illness that causes problems with digesting food and breathing. It does not affect the brain or how a person looks. Your doctor or nurse can provide more information about cystic fibrosis to help you decide if the test is right for you. If you and your partner decide to be tested and then have a positive result, genetic counseling can explain the meaning of the results and your choices.

You can ask to speak to a genetic counselor about conditions that run in your family. A genetic counselor can also answer questions about medicines, street drugs, alcohol, infections, and diabetes. To talk to a genetic counselor, ask your doctor or nurse for a referral.

For more information, visit the Washington State Department of Health's Genetic Services Section website at:
http://www.doh.wa.gov/cfh/mch/Genetics/default.htm
or call 253-395-6741.

Warning Signs

Early in pregnancy

Call your doctor or nurse if you have:

- Cramps or severe belly pain
- Spotting that lasts for more than one day
- Bleeding that seems like a period or if you soak a sanitary pad every hour
- Clots, bright red blood, or something that looks like tissue coming from your vagina
- Heavy, smelly vaginal discharge
- Faintness or dizziness
- Painful urination
- Throwing up so much that you cannot keep anything down

Later in pregnancy

Call your doctor or nurse if you have:

- Cramps or severe belly pain with no relief
- Any vaginal bleeding
- Painful urination
- Chills or fever above 100°F
- Vaginal discharge
- Severe or constant headache
- Faintness or dizziness
- Swelling in the face or hands
- Blurred vision or spots in front of your eyes
- Pressure in your low back, or a feeling that the baby is pushing down
- Mild cramps with or without diarrhea
- Contractions or hardness of your belly, more than four times in an hour, and not always painful
- Less movement from your baby (less than 10 movements in two hours)
- Gush or trickle of water from your vagina (your "water breaks")

The Usual Discomforts

- **Check with your doctor or nurse before taking herbal remedies or high dose vitamins and minerals for pregnancy discomforts.**
- **Tell your doctor or nurse about things that worry you.**

Symptoms	What to do
Bleeding gums	See your dentist. Use a softer toothbrush. Brush gently. Floss daily. Drink more orange juice and eat foods high in Vitamin C.
Constipation	Eat more foods high in fiber such as vegetables and fruits (including dried fruit), whole grain breads, corn tortillas, brown rice, bran muffins, and bran cereals. Drink more water and other liquids such as fruit and vegetable juices. A cup of hot water three times per day may be helpful. Be active every day. Walking is especially good. Do not hold back the urge to have a bowel movement. Do not take laxatives. If constipation is severe, ask your doctor or nurse about a stool softener.
Dizziness	Move slowly when you change positions. Do not stay out in the hot sun. Drink plenty of liquids. Report ANY dizziness to your doctor or nurse.
False labor	Change your position and activity. True labor keeps up, even with a change in position. In true labor, contractions become more regular and closer together. For relief, try to relax or take a warm bath. If you feel your belly getting tight more than four times an hour and your due date is more than three weeks away, call your doctor or nurse (see Warning Signs, page 20).
Feeling tired	Walk or do some activity each day. Relax by lying down at least once a day. A healthy diet will help boost your energy.
Frequent urination	Limit liquids before going to bed and before going where bathrooms are limited. Cut down on caffeine which makes you urinate more often. Drink plenty of water at other times. Practice Kegel exercises (see page 38). Tell your doctor or nurse about burning, pain, or blood in your urine.
Heartburn	Avoid greasy, fried, or spicy foods, or drinks with caffeine. Try chamomile tea. Eat small portions, but eat more often. Do not lie down just after eating. Wear loose, comfortable clothing. Check with your doctor or nurse before using antacids.

Symptoms	What to do
Hemorrhoids	A hemorrhoid is a painful swollen vein in the anal area that can itch, feel hard, or bleed. Follow the tips for constipation. Rest a few times each day with your hips raised. Sit only on firm surfaces or sit cross-legged on the floor. Practice Kegel exercises. Avoid straining with bowel movements. If your hemorrhoids are not bleeding, take a warm or cool bath for 15 minutes, 2 to 3 times a day. Use witch hazel pads (such as Tucks). If hemorrhoids are severe, talk to your doctor or nurse.
Low backache	Rest during the day. Stand up straight. Do not stand in one position for too long. Use a footstool under your feet while sitting and keep your knees higher than your hips. Wear low-heeled shoes. Sleep on a firm mattress or on your side with a pillow between your knees. For relief, try moist heat or massage. Practice the Pelvic Rock to improve your posture (see page 39).
Lower leg cramps	Staying active and keeping good posture will help. Raise your legs a lot during the day. Stretch your legs before bed. Avoid pointing your toes when stretching or exercising.
Mood changes	Practice relaxing. Do only what is most needed each day, talk to someone for support, get plenty of rest, exercise, and eat healthy foods. Be patient with yourself. Talk to your doctor or nurse if your problems seem overwhelming.
Nausea	Feeling sick to your stomach is common while pregnant. Eat dry crackers, toast, or cereal before getting out of bed or whenever the feeling begins. Eat 5 to 6 small meals each day so your stomach does not get empty. Do not eat greasy, fried, or spicy foods. Avoid the sight, smell, and taste of foods that make you feel sick. Take your prenatal vitamin and minerals when you don't feel sick. Do not drink liquids with meals. Acupuncture works for many women and acupressure wristbands may help. Avoid off-the-shelf medications. Ask your doctor or nurse about the use of Vitamin B_6. Call your doctor or nurse if you are throwing up a lot, feel faint, or throw up blood.
Swelling hands and feet	Lie on your left side for 30 minutes 3 or 4 times a day. Be active every day unless your doctor or nurse tells you not to. Drink more liquids. Do not wear tight clothing. Use support panty hose. Raise your legs when sitting for a long time. Sleep with your legs propped up on pillows. Call your doctor or nurse if you have swelling when you wake up in the morning, or if you have sudden swelling in your face or hands.

Symptoms	What to do
Tender breasts	Wear a good support bra with wide straps. If your bra is too tight, try a bra that is at least one size larger in the cup and one size larger in width.
Trouble sleeping	Do not eat just before going to sleep. Drink milk at bedtime. Try a warm bath or shower before going to bed. Practice relaxing. Avoid caffeine in tea, coffee and some sodas. Do not use sleeping pills.
Varicose veins	Do not wear girdles or stockings with elastic bands. Prop your legs up as often as you can. Support hose may help. Lie down and raise your legs a few times each day. Do not cross your legs at the knees when you sit down. Do not sit or stand for more than one hour. Move around. Walk or exercise daily.

Weight Gain

- **Expect to gain 25–35 pounds during pregnancy. This is not the time to diet to lose weight.**
- **Make healthy food choices.**
- **Take your prenatal vitamins and minerals.**
- **Be active daily unless your doctor or nurse gives you different advice.**

Your doctor or nurse may expect you to gain about 25–35 pounds, depending on your weight before you became pregnant. You will need to gain more weight if you were underweight before pregnancy and less weight if you were overweight. You may ask your doctor or nurse or WIC staff for a weight gain graph to track your progress.

If you are:

- *Underweight, you should gain about 28–40 pounds*
- *Normal weight, you should gain about 25–35 pounds*
- *Overweight you should gain about 15–25 pounds*
- *Very overweight, you should gain about 15 pounds*
- *Carrying twins, you should gain about 35–45 pounds*

Because the unborn baby is very tiny during the first three months, only a 2–4 pound weight gain is needed during this time. After the first three months, you should gain about 1 pound per week. A steady weight gain is best during pregnancy.

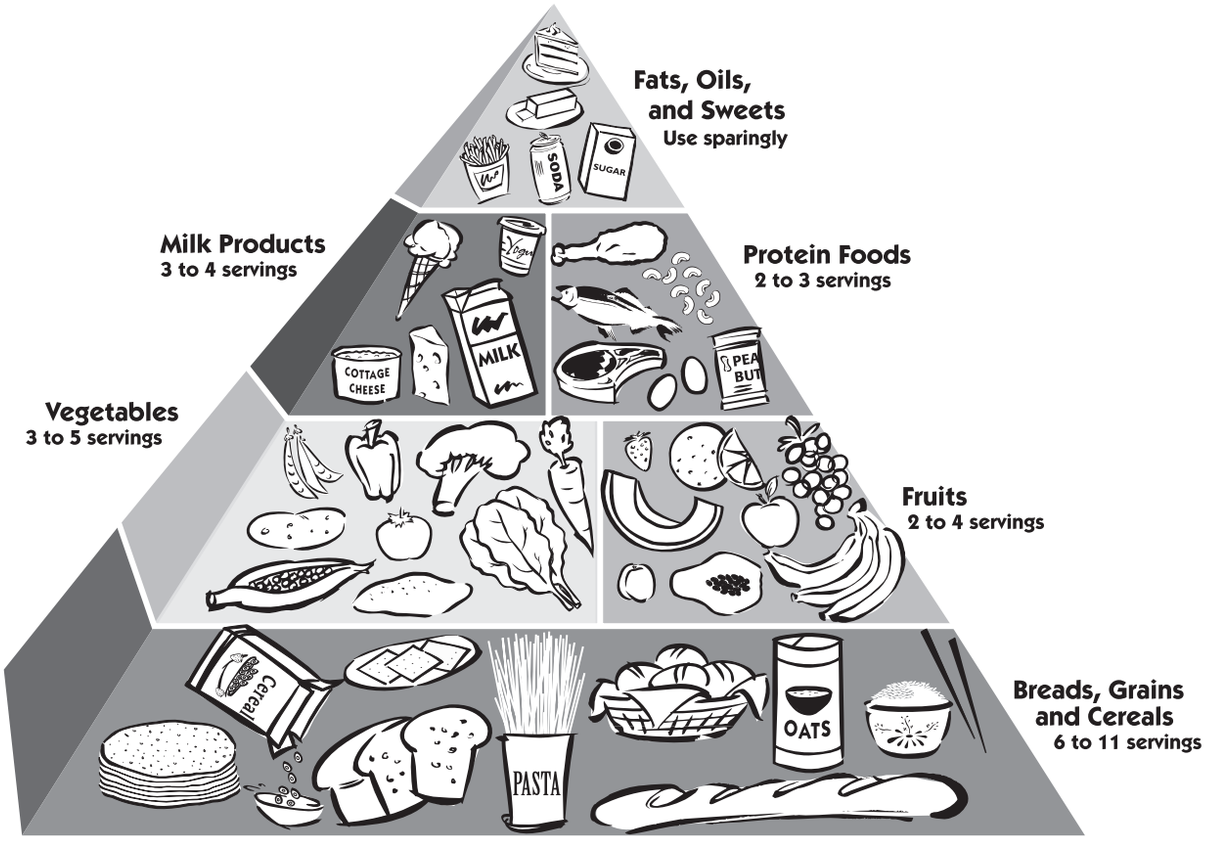
The weight you gain needs to come from healthy foods that have many vitamins and minerals. Food choices are very important during pregnancy. The Food Guide Pyramid will give you ideas on what foods are good choices and how much to eat (see page 26). Your doctor or nurse-midwife may also suggest taking vitamins or minerals. The food choices you make now affect your health and the health of your baby for the rest of your lives.

Activities, such as walking and swimming, can help to maintain your weight and keep your body strong for a healthy birth. Always check with your doctor or nurse before starting a new activity.

Your baby may weigh only 7–8 pounds at birth, but about 25–35 pounds are needed for a healthy pregnancy. Look at the chart below to see where the weight goes.

Weight gain breakdown	
Baby	*7–8 pounds*
Mom's breasts/hips	*7–11 pounds*
Uterus	*2 pounds*
Placenta	*1–2 pounds*
Increased fluids	*8–12 pounds*
Total weight gain	***25–35 pounds***

Food Guide Pyramid



Food Guide Pyramid

What counts as a serving?

	One serving is	*About the same size as*
Milk group	1 cup yogurt	A small container of yogurt (8 oz)
(3 to 4 servings daily)	1½ ounces of cheese	Three dominoes
Meat and bean group	2 to 3 ounces meat	A deck of cards
(2 to 3 servings daily)	1 cup cooked beans	A baseball
Vegetable group	1 cup raw, leafy vegetables	A baseball
(3 to 5 servings daily)	½ cup vegetables	A standard lightbulb
Fruit group	1 medium apple, orange, pear	A baseball
(2 to 4 servings daily)	½ cup chopped or canned fruit	A standard lightbulb
Grain group	1 cup ready to eat cereal	A baseball
(6 to 11 servings daily)	½ cup cooked rice, pasta or cereal	A standard lightbulb

Make Every Bite Count

You have the chance to improve the health of your baby with every bite of food you take. You only have nine months to make every meal and snack count towards growing a healthy baby. Some foods have lots of calories but very few vitamins and minerals, for example, potato chips. Your baby will benefit a lot more when you choose a baked potato that has lots of vitamins and minerals instead of a handful of potato chips that have mostly empty calories.

Grain group

B vitamins
Iron
Minerals
Fiber

Everyday choose 6–11 servings:

Breads and crackers—whole grain and whole wheat

Cereals—whole grain and bran

Rice—brown and mixed grain

Tortillas—whole wheat, flour, and corn

Pastas—whole wheat and enriched

Benefits for baby's growing body:

- Iron is important for healthy blood.
- B vitamins and other minerals are important for bone and tissue growth and a healthy nervous system.

Benefits for moms:

- Starchy grains can help with morning sickness in early pregnancy.
- Fiber found in these foods helps with constipation.

Fruit and vegetable group

Vitamin A
Vitamin E
Vitamin C
Riboflavin
Folic acid
Minerals
Fiber

Everyday choose:

Green leafy and yellow vegetables and fruits—have 2–3 servings per day of these Vitamin A rich foods

Vitamin C foods—have at least two servings per day

Other fruits and vegetables—have at least one other fruit or vegetable for added vitamins, minerals, and fiber

Benefits for baby's growing body:

- Vitamin A is important for healthy cell growth, healthy skin, and eyes.
- Vitamin C is important for tissues, growth and development of strong bones and teeth.

Fruit and vegetable group

(continued)

Benefits for moms:

- Vitamins and minerals from this food group are needed for building your placenta.
- Fiber in these foods helps with constipation.
- Raw, juicy, and crunchy fruits and vegetables may help with nausea.

Dairy group

Calcium
Protein
B Vitamins
Vitamins A & D

Everyday choose at least 3–4 servings.

Benefits for baby's growing body:

- Calcium and Vitamin D are needed for strong bones and teeth.
- Calcium, protein, vitamins, and minerals are needed for the heart, muscles, and nerves.

Benefits for moms:

- Nutrients from this group are needed for strong bones and teeth, healthy muscles, and nerves.
- Dairy foods provide nutrients for healthy uterus, placenta, and baby.

If you don't like milk or cannot drink it:

- Hide it in soups, casseroles, breads or cereal.
- Substitute other calcium choices, like yogurt, cheese, or cottage cheese.
- Good non-dairy sources of calcium include soybeans, collard greens, salmon, sardines, calcium fortified juice, baked beans, and refried beans. Fair sources of calcium include clams, oysters, mustard greens, turnip greens, almonds, and oranges.

Meat, fish, dry beans, eggs and nuts group

Protein
Iron
Folic acid
Zinc
Vitamin B_{12}
Thiamin
Fatty acids

Everyday choose at least 2–3 servings.

Benefits for baby's growing body:

- Protein is needed for almost all parts of your growing baby.
- Iron, B vitamins, and zinc are needed for muscle, heart, and nerve development.
- Important fatty acids or omega-3 fatty acids are needed for healthy brain and nerve development.

Meat, fish, dry beans, eggs and nuts group

(continued)

Benefits for moms:

- Nutrients from this group are needed for healthy growth of the uterus and placenta.
- These nutrients are needed for healthy blood and good digestion.

Liquids

Everyday choose at least 8 glasses of liquid.

Be sure to count milk, fruit or vegetable juices, soups, carbonated water and plain water.

Benefits for baby's growing body:

- Your baby also needs liquids, because like your body, his body is mostly composed of water.

Benefits for moms:

- Helps keep skin soft
- Helps rid the body of waste products, prevents urinary tract infections
- Helps with the movement of blood and body fluids
- Helps with constipation

Is caffeine safe?

Caffeine is a stimulant that passes through the placenta into the baby. Many studies have been done to see if caffeine can harm an unborn baby. There is no proof that small amounts of caffeine (1–2 cups of coffee) cause problems during pregnancy. Caffeine is found in tea, coffee, chocolate, and many soft drinks (such as Coca Cola, Pepsi, Mountain Dew, Dr. Pepper) and off-the-shelf drugs.

It is best to have drinks without caffeine. Instead of coffee or soda try:

- Water
- Milk
- Juice
- Tea or coffee without caffeine
- Ice water or hot water with lemon slice
- Sodas without caffeine

However, if you choose beverages with caffeine, it is better to limit caffeine to less than 200 milligrams per day. One 12-ounce can of cola, for example, has 40–60 milligrams of caffeine.

Healthier food choices

Choose foods that are full of vitamins and minerals and are low in sugar, fat, and salt. Try choosing these:

Instead of candy

- Frozen, unsweetened fruit; all types of berries, cherries, melons, grapes—for best taste, eat them before they have completely thawed
- Ice-cold fresh fruit or fruit juice
- Low-fat frozen yogurt or frozen juice bars
- Flavored rice cakes—apple, cinnamon, caramel, etc.
- Fruit—apples, bananas, peaches, plums, etc.
- Dried fruits; raisins, dates, apricots, apples (these are higher in sugar; brush your teeth well after this choice)

Instead of chips

- Whole grain crackers
- Popcorn—unbuttered
- Dry cereals—no sugar added
- Rice cakes
- Pretzels
- Soy nuts
- Fresh vegetables—carrot sticks, green pepper, cherry tomatoes, celery, radishes, green beans
- Baked corn chips

Instead of soda

- Fruit juice mixed with sparkling water
- Vegetable juices
- Herbal iced-tea
- Cold water with lemon slices

Instead of cakes, pies, cookies, donuts, sweet breads

- Graham crackers or other whole grain crackers
- Trail mix (raisins, pretzels, Chex cereal, nuts)
- Cinnamon raisin toast
- Whole-grain English muffin
- Homemade cookies made with nutritious ingredients like whole-wheat flour, oatmeal, raisins, nuts, or dried fruit
- Homemade muffins with reduced fat and sugar. Use two tablespoons less fat and sugar than the recipe suggests.
- Fruit juices that have been frozen to the slushy stage
- Low-fat yogurt or fresh fruit with low-fat yogurt
- String cheese

Instead of fast foods

- Choose hamburgers that have less meat, bacon, cheese, mayonnaise, guacamole, and have more tomatoes and lettuce
- Choose a veggie burger, chili, or grilled chicken sandwich
- Avoid ordering fries, or share one small order between two people
- Choose a green salad or baked potato instead of fries
- Choose pizza with more vegetables and less sausage, pepperoni, extra cheese, and other high fat toppings
- Choose water, low-fat milk or fruit juice instead of soda
- Bring fruit to add to your meal
- Avoid pies and cookies

When you choose fish. . .

Fish is a good source of important fatty acids and other nutrients. Some kinds of fish have too much mercury in them. Mercury can get into your body and into your baby's body and hurt your baby's ability to learn. You can still eat fish—just choose fish that is low in mercury such as salmon, flounder, cod, catfish, trout, and pollock. Do not eat fish that are often high in mercury such as swordfish, shark, tilefish, king mackerel, and tuna steaks. If you eat canned tuna, choose "light" tuna. It has less mercury in it than "white" or "albacore" canned tuna. Talk to a nutritionist about how much tuna to eat—the amount of tuna you can safely eat depends on how much you weigh. Always check with your local and state health departments for updates regarding healthy ways to eat fish. For more information, visit **www.doh.wa.gov/fish** or call **1-877-485-7316**.

Many women qualify for WIC, a supplemental food and nutrition program that helps provide you with healthy foods. To find the WIC Clinic nearest to you, call 1-800-841-1410.

Effects of Tobacco, Alcohol, and Drugs on Your Baby

- **When you quit smoking, you have less chance of miscarriage, preterm birth, and stillbirth.**
- **Your baby starts getting more oxygen after just one day of not smoking.**

Smoking

Smoking is harmful to you and your baby. Each time you smoke a cigarette, harmful chemicals such as tar, nicotine, and carbon monoxide reach your baby. These chemicals harm your baby by cutting off oxygen and nutrition needed for growth.

If you quit smoking during pregnancy, you have less chance of:

- Vaginal bleeding
- Miscarriage or stillbirth (baby born dead)
- Problems with the way the placenta attaches to the uterus

If you quit smoking during pregnancy, your new baby:

- Has a better chance of being born at a healthy weight
- Has a better chance of being born on time instead of being born premature. Babies born too soon have breathing and other health problems.
- Has a better chance of coming home with you instead of staying longer in the hospital
- Has less chance of dying from SIDS (Sudden Infant Death Syndrome)
- Has less chance of having learning and health problems later in life

The sooner you quit, the healthier you and your baby will be. If you can't quit, cutting back the number of cigarettes you smoke is helpful.

Quit Smoking Tips

- *Call the Washington Tobacco Quitline: 1-877-270-STOP*
- *Write down all your good reasons to stop smoking.*
- *Choose a "quit day." Throw away all your cigarettes, ash trays, and matches on your "quit day."*
- *Ask your friends and family to help you quit or cut down.*
- *Ask your doctor or nurse for help to stop smoking. Ask about stop smoking classes and stop smoking books.*
- *If you are a heavy smoker and have not been able to quit or cut down, ask your doctor or nurse for additional help. Ask about a nicotine patch or chewing gum, or a prescription for Zyban.*

If you feel like smoking:

- *Go for a walk.*
- *Drink water or juice.*
- *Chew sugarless gum or eat carrot sticks, celery, or apples.*
- *Keep your hands busy with activities such as knitting, crocheting, or doing a puzzle.*
- *Talk to a friend.*
- *Take deep breaths and count to five.*
- *Take a bubble bath.*
- *Think about how strong and healthy your baby is growing.*
- *Spend the money you would have spent on cigarettes on something special for you.*

Quit Smoking tips from the March of Dimes Birth Defects Foundation and the Arizona Tobacco Education and Prevention Program.

Alcohol

Alcohol can hurt your baby. These are good reasons not to drink while you are pregnant:

- Alcohol can cause mental retardation and heart defects.
- Alcohol can cause a baby to be born too early. A premature baby may not weigh enough to have a healthy start, can have breathing problems, infections, and may suffer problems for a lifetime.
- Alcohol can cause Fetal Alcohol Spectrum Disorder. Babies born with this problem may be mentally retarded, have heart problems, have faces that don't look normal, and have health, learning, and behavior problems all their lives.

- **Drinking any amount of alcohol while pregnant is unsafe.**
- **Drinking alcohol while pregnant can cause birth defects and mental retardation.**
- **Call the Alcohol/Drug Hotline at 1-800-562-1240 for help or information.**

Remember, doctors don't know how much alcohol is safe, so the best advice is not to drink any alcohol while you are pregnant or breastfeeding.

Instead of drinking alcohol:

- Ask for fruit juice, lemonade, or soda water with lime or a twist of lemon.
- Tell people you are not drinking at all while you are pregnant because you are growing the world's smartest, healthiest baby.

Do you have a drinking problem?

Do you use alcohol or abuse it? Sometimes it's hard to tell. If you're not sure, asking a few simple questions can help you figure out if your drinking is a problem.

- *How many drinks does it take to make you feel high?*
- *Have people annoyed you by criticizing your drinking?*
- *Have you felt you ought to cut down on your drinking?*
- *Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover?*

If your answer to the first question is more than two drinks, give yourself 2 points. Give yourself 1 point for every "yes" response to the other questions. If your total score is 2 or more, you may have an alcohol problem.

Talk to your doctor about your drinking habits. He or she can help you decide if you have a problem. The doctor will refer you for counseling or treatment if needed. You also may want to think about contacting a substance abuse program. These groups can help you find someone to talk to about your problem and give you needed support when you are trying to quit. Check your local yellow page listings.

Drinking any amount of alcohol during pregnancy is unsafe.

Modified from Sokol RJ, Martier SS, Ager JW. The T-ACE questions: practical prenatal detection of risk drinking. Am J Obstet Gynecol 1989; 160-865.

Drugs

Some medicines are safe and needed during pregnancy. Your doctor or nurse or dentist will choose the safest medicines for you. Ask your doctor or nurse about any herbs or medicines you wish to take while you are pregnant or breastfeeding your baby.

Some medicines or prescriptions are not safe to take while pregnant. Street drugs are harmful to both you and your baby any time.

- **Your unborn baby is exposed to any drug you take.**
- **Ask your doctor or nurse before taking ANY medicine.**

When you use a drug during pregnancy, it is carried through your blood to your baby. No one knows how much of a drug will harm a baby but the more you use, the higher the risk. The best way to protect your unborn baby is not to use drugs.

Street drugs such as cocaine, meth or heroin, can cause a baby to:

- Be born too soon. Premature babies have trouble breathing, eating, and growing.
- Have bleeding in the brain before birth, which causes brain damage.
- Have withdrawal symptoms.
- Be very fussy or have tremors.
- Have trouble learning.

It is difficult to be a good parent if you use drugs or alcohol. Ask for help if you can't quit. You will be healthier, and your baby will grow up smarter and stronger.

If you would like help to stop taking drugs or drinking, talk to:

- Your doctor or nurse
- WIC staff or First Steps staff
- The Alcohol/Drug hotline: 1-800-562-1240

Exercise & Physical Activity

- **Be active every day. Exercise can help you look and feel better.**
- **Check with your doctor or nurse before starting a new exercise.**
- **Drink liquids before, during, and after exercise.**

Physical activity can be an easy part of your daily life. You do not need to go to the gym to be active. Walking is a great activity. Park your car a little farther from the door. Use the stairs instead of the elevator. Take a walk through the mall or your neighborhood. Household chores such as vacuuming and gardening are also good ways to be active.

Almost any type of exercise is safe, if you proceed carefully and don't overdo it. If you have questions, talk to your doctor or nurse. Women with some medical problems may be advised not to exercise while pregnant. Do not exercise if you have a fever.

Warning signs during exercise

Stop and call your doctor or nurse if you have:

- *Dizzy spells or faintness*
- *Shortness of breath (unable to talk even after slowing down)*
- *An uneven or very fast heart rate*
- *Chest pain*
- *Pain that does not go away*
- *Trouble walking*
- *Vaginal bleeding*
- *Contractions that continue after rest*
- *Fluid gushing or leaking from your vagina*

Suggested activities

- Walking is a good way to start being active. Walk briskly for 20–30 minutes every day or at least three times a week.
- Bicycling can be fun. When your belly gets large, use an exercise bike.
- Swimming or water aerobics are good exercises, because the water supports your body weight. Swimming uses many muscles, and is easy on your joints.
- Jogging can be done carefully. Do not become overheated. Run on smooth ground. Stop if you feel sore or tired.

Exercises to help prepare for labor and birth

Kegel exercise

Purpose

To strengthen the muscles around the vagina, stop urine leaks, and lower the chance of episiotomy (a surgical cut used to widen the vaginal opening during childbirth).

Practice

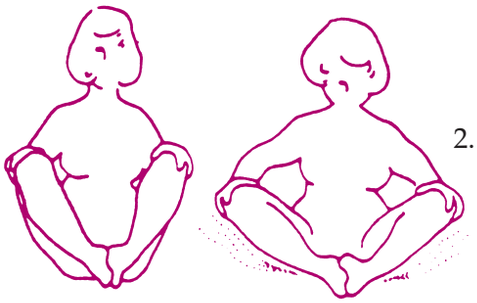
1. To get the feel of the muscles, start and stop urinating while using the toilet. Practice this tightening and releasing action while sitting, standing, walking, driving, and watching TV.
2. Try to tighten the muscles a small amount at a time, "like an elevator going up to the tenth floor." Then, slowly release one "floor" at a time.
3. Do your Kegels every morning, afternoon and evening (3 times a day). Start with 5 each time and work up to 20–30 each time.

Knee press

Purpose

To strengthen your inner thighs, stretch your lower back muscles, and improve circulation.

Practice



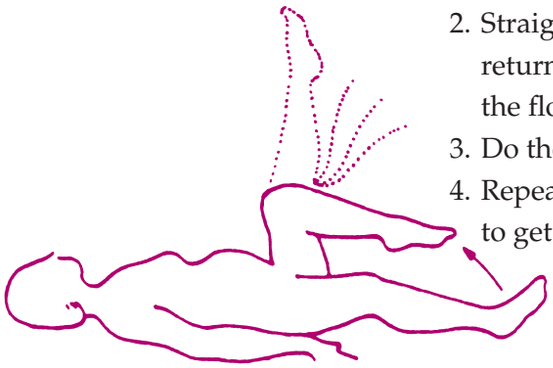
1. Sit on the floor and put your feet (with soles touching) as near your body as you can. Keeping your back straight, press your knees slowly and gently to the floor. Hold to a count of 3. Gradually work up to about 10 times each day.
2. As often as possible, sit on the floor cross-legged with your back rounded and relaxed. During TV ads or as a break, practice knee presses.

Tummy builders

Purpose

To build and stretch your tummy muscles and to improve your overall blood flow.

Practice



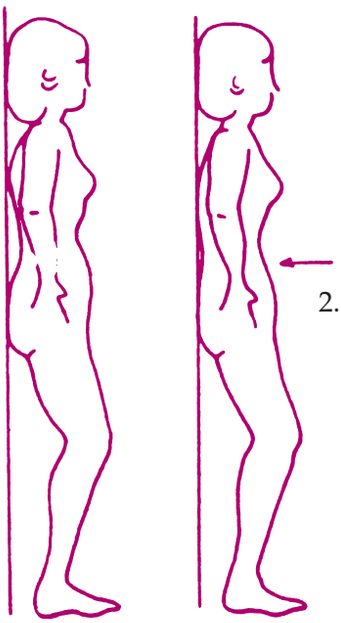
1. Lie on your back with feet flat on the floor, knees bent. Bring one knee up to your chest, as close as you can.
2. Straighten your leg toward the ceiling. Bend your knee and return your foot to the floor. Press the small of your back to the floor while doing this.
3. Do the same with the other leg.
4. Repeat 10 times a day. Roll onto your side and use your arms to get up.

Pelvic rock

Purpose To build tummy muscles, relieve backache and improve blood flow.

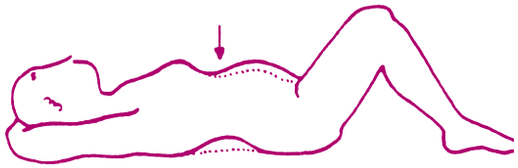
Practices There are three different ways to do the Pelvic Rock.

1. Get down on your hands and knees. Keep your arms straight. Balance your weight evenly on both knees. Tighten your tummy muscles and tuck your hips under. This action will hunch your back a little. Relax. Repeat 10 times slowly.



2. Start by standing with your back against the wall and your knees slightly bent. Tighten your tummy muscles, tuck in your buttocks, and flatten the small of your back against the wall. Hold and then relax. If you put your hands on your hip bones, you should feel them rock back and forth with this exercise.

3. Lie on your back. Bend your knees, keeping your feet flat on the floor. Tighten your lower tummy muscles and the muscles in your buttocks to press the small of your back into the floor. Relax. While you relax, slip your hands under the small of your back. Repeat slowly 10 times. Roll onto your side and use your arms to get up.



Sex During Pregnancy

- **Unless your doctor or nurse advises against it, sex is safe while pregnant.**
- **Pregnancy may change your desire and usual response to sex. This is different for every woman and her partner.**
- **Use a condom if you or your partner have sex with other partners. You can still get a sexually transmitted infection when you are pregnant.**

Do not be afraid to have sex while you're pregnant. Unless your doctor or nurse feels there are reasons to avoid sex, you can enjoy sex throughout pregnancy. Making love, including all the ways you share pleasure and feel close to your partner with or without intercourse, is very important to your relationship.

Talking about sex during pregnancy is helpful. Share your feelings with your partner, no matter how silly you might think it is.

A common fear is that having sex will harm your unborn baby. Luckily, in almost every case, sex during pregnancy is safe. Nature has given the baby an excellent cushion. It is almost impossible to hurt your baby by having sex.

Changes in sexuality

Many women feel changes in their sexual desire due to physical and hormonal changes. These feelings are different for every woman.

Early in pregnancy, you may not have much desire for sex. Desire for sex may increase in mid-pregnancy. You may feel even higher levels of desire than before you were pregnant. Due to increased blood flow to pelvic areas, some pregnant women may become aroused more quickly and intensely. But for some women, orgasm does not completely take care of their sexual desires.

During the later months of pregnancy, your belly may get hard during sex and stay that way for about a minute, especially after orgasm. This is normal and your belly soon gets soft again. The baby may also get very active. This is all right. Sex does not bother the baby.

Toward the end of pregnancy, you may lose your desire for sex. You may feel big and awkward. It's hard to feel sexy if you're tired, sick to your stomach, or feeling sad and grumpy. Most partners find their pregnant mates attractive, but sometimes they have less desire because they are thinking a lot about the future. They may also feel left out. Set aside time to be together and talk about your feelings and plans for the future.

Safe sex while you're pregnant

- **Never blow air into the vagina.** This could be very harmful. If you have questions, ask your doctor or nurse.
- No objects other than the penis should be placed in the vagina.
- If you have anal sex, wash the man's penis or use a condom before his penis enters your vagina. Or use a condom for anal sex and remove it before vaginal sex.
- If you or your partner has had sex with other partners, use a condom every time you have sex. Sexually transmitted infections are a serious threat to you and your baby's health. You do not have to worry about birth control now, but you need to protect yourself from sexually transmitted infections.

Discomfort during sex

If sex is painful or awkward, try changing positions. Positions for lovemaking can be changed to suit your pregnant body. Avoid belly to belly contact. Try side to side, woman on top, woman in semi-sitting position on edge of the bed, and others that allow the woman to control the direction and depth of penis penetration.

Warnings about sex during pregnancy

Do not have sex until you check with your doctor or nurse if you have:

- ***Vaginal or belly pain***
- ***Vaginal bleeding, itching, or a change in your discharge***
- ***A rush or trickle of fluids out of the vagina (your "water breaks")***
- ***Concerns that sex might cause a miscarriage***

When sex should be avoided

Your doctor or nurse may advise against sex if you have:

- Premature labor
- Miscarriages
- Placenta previa (placenta covers the cervical opening)
- Infection
- Bleeding
- Fluid rushing or leaking from your vagina (your "bag of water" breaks)

In this case try other forms of sex. Activities include massage, masturbation, hugging, kissing, and oral sex. Orgasm, because it causes the uterus to tighten, may be what your doctor or nurse wants you to avoid. Don't be shy about asking about what is alright and what should be avoided.

Babies Were Born to Be Breastfed

- **There is no equal substitute for breastfeeding. Breastmilk is the best food for your baby.**
- **Breastmilk is the only food your baby needs for the first six months.**
- **Breastfeeding offers lifelong health benefits for you and your baby.**

Now is the time to think about how you will feed your baby. It is important to make an informed choice. The choice you make will have lifelong and profound health effects on you and your baby.

Breastfeeding is a natural act. It is also something you learn to do. Virtually all mothers can breastfeed provided they have good information and support from family, friends, doctors, and nurses.

Your body gets ready, naturally.

Before you meet your new baby, your body gets ready to provide all the comforts your baby has known for nine whole months. Nature is amazing and so are mothers.

- Your breasts started getting ready to care for your baby the moment you got pregnant.
- As you get closer to delivery, your breasts may leak milk that will be your baby's first food. Colostrum is a thick, yellowish milk that has all the nutrients your baby needs. It also protects your baby from illness.
- Nature provides nine months of comfort for your baby. Your body continues to provide comfort through breastfeeding. At your breast and in your arms, your baby will have warmth, security, and perfect food designed just for her and only by you. . .her Mom. No one else, ever, in the whole world will be able to have this connection with your baby.
- When your baby looks at you she is naturally drawn to your eyes and your breasts. We know that babies like to look at dark circles on a lighter background, just like your eyes and breasts. Your baby sees your face best when she is breastfeeding.

Breastmilk is the only food your baby needs for the first six months.

- Breastmilk changes to meet your baby's needs.
- Your body knows how to change your milk as your baby grows. The balance of vitamins, fats, and proteins adjusts to meet the needs of your growing baby. This is true even for mothers who give birth to premature babies.
- Breastmilk contains over 100 important nutrients for growing babies. Formula has only about 40.

Breastfeeding has important health benefits for your baby throughout her lifetime.

Research tells us that breastfed babies have:

- Fewer ear infections
- Fewer respiratory infections
- Fewer tummy aches
- Less diarrhea
- Fewer allergies
- Less chance of asthma
- Fewer trips to the doctor for illness
- Less chance of SIDS
- A stronger immune system
- A higher IQ for life

  Studies show that breastfed babies have better brain development that continues on through childhood. Children who have been breastfed tend to do better on tests.

Studies show when breastfed babies grow up they have less risk for:

- Allergies
- Asthma
- Type 1 diabetes
- Celiac disease
- Inflammatory bowel disease
- Some childhood cancers
- Obesity
- Cardiovascular disease

Breastfeeding has many benefits for you, too.

- You get back in shape faster by breastfeeding.
- Your uterus returns to its normal size faster when you breastfeed.
- You burn calories to make milk and lose weight all at the same time.
- Your period can be delayed. This is a favorite benefit for many women.
- You have less risk of some breast and ovarian cancers.
- You can feel a sense of pride and accomplishment to know you are providing perfect, one of a kind special food that only you can give your baby.

Breastfeeding saves money and helps our environment.

- You will take your baby to the doctor less often for illness. Government reports state that health care costs are about 20% lower for fully breastfed infants than for infants who were never breastfed.
- Breastmilk doesn't stain your baby's clothes. This means fewer loads of laundry and less money spent on new clothes.
- You don't need to buy extra supplies like bottles, nipples, bottlebrushes, and bottle liners.
- You will miss fewer days of work because your baby will be sick less.
- Breastfeeding doesn't have any waste, leftovers, or cans to throw away.
- You save gas money on trips to the store and less driving helps save our natural resources.
- Breastmilk is always ready to meet your baby's needs. It is the right temperature. No need to use the stove or microwave.

Breastfeeding is important for you and your baby.

Here are some tips for getting breastfeeding off to a good start.

- Breastfeeding should begin as soon as possible after your baby is born. Tell your nurse or doctor you plan to breastfeed your baby and that you would like to begin as soon as possible. A healthy baby is awake and alert right after birth. It is a good time to start to learn to breastfeed.
- Your newborn needs to breastfeed often. Signs of hunger are being awake, putting her hands toward her mouth, or turning her head toward you with her mouth open. Don't wait until your baby cries to feed her.
- Tell your doctor or nurse you do not want your baby to get any other food except breastmilk, unless it is medically needed.
- If you go home early from the hospital (less than 48 hours after birth), it is a good idea to see your doctor or nurse within 2 days for a check-up.

Remember it is normal to breastfeed your newborn baby 8–12 times every 24 hours. The more your baby breastfeeds the more milk you will make. Newborns have small stomachs and need to eat often. If you have questions or concerns ask for support and help from WIC staff or your nurse.

You may have questions about breastfeeding.

New moms have lots of questions and concerns. You may have some too.

- **Enough breastmilk.** All mothers worry about making sure their baby has enough to eat. The great thing about breastfeeding is that the more your baby breastfeeds the more milk you will make. If you are thinking of taking something to increase your milk supply, such as herbs or medication, check with your doctor, nurse-midwife, or WIC staff. For any questions, ask for support and help.

- **Embarrassment.** When you first come home with your new baby you will probably want some privacy while you both learn about breastfeeding and being together. Give yourself a little time before you have company. When friends do come over to visit have a comfortable chair or place to breastfeed. This will help you feel more relaxed. Try these easy tips from other moms:
  - Wear a top that can be pulled up from the bottom.
  - Cover yourself and your baby with a light blanket or cover.
  - Wear a nursing bra, a bra that opens in the front, or one that easily pulls up without being too tight.

- **Pain.** Isn't it interesting that when you are pregnant everyone has a story for you? People like to tell stories about their painful labors and some go on to say how hard it was to breastfeed. It is true that after delivery some parts of your body hurt. Your breasts and nipples may feel tender as they get used to feeding your new baby. Having someone show you how to get your baby into the right position will help keep you from getting sore nipples. It is important to ask for help if you feel very sore and breastfeeding hurts.

- **Returning to work while breastfeeding.** Moms who work and breastfeed tell us they love the connection they have with their baby after being away at work. There are many ways to work and breastfeed.
  - Some moms pump and store their milk so baby drinks breastmilk while mom is away.

- Some moms work close enough to breastfeed at breaks.
- Some moms use formula while they are working and breastfeed nights and weekends.

Breastfeeding moms miss fewer workdays because they have healthier babies. Talk to your employer and make a plan before your baby is born.

For more information contact Healthy Mothers, Healthy Babies at 1-800-322-2588 or www.hmhbwa.org. Healthy Mothers, Healthy Babies will send free packets of information about working and breastfeeding to you, to your employer and your daycare provider.

- **Family involvement.** Your partner and other family members can share time with your new baby in many ways. Feeding time is only one part of caring for your baby. Bath time, cuddle time, story time, and rocking time are also special for your baby. You have the best food for your baby, so enjoy breastfeeding and let other family members rock the baby to sleep while you take a little break.

Where to go for breastfeeding help

Both you and your baby will be learning about each other as you learn to breastfeed. Be sure you get the answers to your questions.

Healthy Mothers, Healthy Babies 1-800-322-2588

The National Women's Health Information Center
Breastfeeding Helpline 1-800-994-WOMAN (9662)

Your WIC staff _____

Your Doctor _____

Your First Steps staff _____

Other _____

You can feel a sense of pride and accomplishment by breastfeeding your baby. Mothers who breastfeed tell us they feel happy and proud to share this special relationship with their baby as well as having an overall feeling of self-confidence.

Sometimes it's not safe to breastfeed.

If you have certain health conditions or take certain drugs you should choose formula feeding instead of breastfeeding. Your doctor or nurse will help you decide how to feed your baby. You should not breastfeed if you:

- Are taking certain medications (check with your doctor or nurse)
- Are HIV positive
- Use street drugs
- Have active, untreated tuberculosis
- Are being treated for breast cancer
- Get herpes lesions on your breasts

Labor and Vaginal Birth

- **Ask your doctor or nurse who and when to call when labor starts.**
- **Make plans before labor begins for how you will get to the hospital and who will care for your other children at home.**
- **Call your doctor or nurse right away if you think you are in labor before 37 weeks (your due date is more than 3 weeks away).**
- **Call your doctor or nurse if you are leaking water from your vagina (your "water breaks") even if you do not feel like you are in labor.**

No one knows exactly what starts labor. Most babies are born between 37 and 42 weeks of pregnancy. Very few babies are born on their due date. Most labor begins with mild contractions (labor pains) every 15 or 20 minutes.

If you think labor has begun, you may feel relieved and happy. You may have the urge to do last-minute errands and cleaning. Try to rest and relax. Use this time to take an easy walk or a warm shower. You will need lots of energy for the hard work that lies ahead.

Are you in labor?

You may not even be sure that you are in labor at first. "False labor" means that you are having "practice" contractions, but these are not the real work of labor.

Walk around and change positions. If it is false labor, contractions may get weaker or stop. True labor will continue no matter what you do.

If you are having contractions, time them with a watch and write down how often they happen and how long they last. True labor contractions come at regular intervals and get closer together. They last 30–70 seconds. At first, labor contractions may be 15–20 minutes apart. When birth is near, they may be less than 5 minutes apart.

If you think you are in labor, follow the directions from your doctor or nurse about who to call. The doctor, midwife, or nurse will ask you questions about your contractions, if your water has broken, and how far away you live from the hospital. You may be told to rest at home and call again later. You may be told to go to the hospital or clinic to be checked.

Stages of labor

It is rare for a woman's labor to begin with strong contractions and then give birth a short time later. While this is how it happens on television, labor is most often a long process that takes many hours.

First stage of labor

The first stage of labor is divided into two parts: early labor and active labor.

Early Labor—may last 6 to 12 hours. Early labor usually begins with mild contractions 15-20 minutes apart. You may notice some bloody discharge from your vagina. This phase of labor dilates (opens) your cervix (opening of the uterus) from zero to 4 centimeters. Your cervix needs to open to 10 centimeters to give birth.

Active Labor—may last 4 to 8 hours. During active labor, your contractions get stronger and may come every three minutes. Your water may break, which makes contractions stronger. If you were not sure that you were in labor before, you will be more sure of it now. You may see more bleeding from the vagina. You may have a backache, and as labor goes on, you may feel tired and anxious. Your legs may tremble and you may feel queasy. As the baby's head moves down and presses on the cervix, you may feel the urge to push. This phase of labor opens your cervix all the way to 10 centimeters.

Second stage of labor

May last 20 minutes to 3 hours or more. The second stage of labor is when your baby is born. You may feel the urge to bear down and push the baby out. You may feel pressure and burning as the baby's head emerges. After the baby's head is out, the shoulders and body usually slip out easily.

Third stage of labor

Usually lasts a few minutes to half an hour. Contractions will continue, but they are less painful than before. The placenta comes out of your vagina during this time. You may shake and shiver, which is normal. Ask for a warm blanket if you feel cold. Cuddle your new baby and try breastfeeding for the first time.

Cesarean Birth (C-Section)

Sometimes it is not possible or safe for a baby to be born through the mother's vagina (birth canal). If this is true for you, your doctor or nurse-midwife will suggest you have a cesarean section, usually called a C-section. A C-section is an operation where a doctor cuts the mother's belly and the wall of the uterus. The uterus is opened and the baby is gently lifted out.

Discuss the possibility of cesarean birth with your doctor or nurse-midwife before you are in labor. You should feel comfortable with your doctor or nurse's knowledge about C-sections. If he or she suggests a C-section you may wish to get a second opinion. Remember that a second opinion is not possible in an emergency.

Reasons for a cesarean birth

- Your baby is too big to pass safely through the birth canal.
- Your baby's heart beat shows a lack of oxygen or other signs of distress.
- The umbilical cord is coming out before the baby.
- The placenta is blocking the opening of the cervix. The placenta connects the baby to the mother inside the uterus.
- The placenta peels away from the uterus before the baby is born.
- Your baby is overdue and having health problems.
- Your baby is in an unusual position, such as sideways or bottom down, instead of head down.
- You have a health problem such as high blood pressure.
- You have a very long labor with no progress toward delivery.

You might know weeks before your delivery that you will need a C-section. Many times the need for a C-section arises during labor. The most important thing is a healthy birth.

After cesarean birth

Most women stay in the hospital 2 to 5 days after a C-section. During this time you will probably need pain medication. Although most women are walking around very soon after surgery, there are gentle movements you can do while still in bed. This will help reduce gas pains and speed up recovery. Your incision (line of stitches) may be very sore for the first few days or even for a few weeks. Your doctor can give you medication to ease the pain. It is also safe to take off-the-shelf pain relievers, such as Advil. Avoid heavy lifting and driving for a few weeks. This keeps the pressure off the incision while it heals.

Rest is very important for healing. This is hard to do when you have a new baby and perhaps other children to care for. This is a good time to ask for help from your partner, relatives, and friends. They can help with shopping, cooking, and household chores. Try to rest several times during the day. A good time to rest is when your baby is napping. You might want to limit the number of visitors for the first two or three weeks until you are feeling stronger.

A C-section does not stop you from breastfeeding. If you choose to breastfeed, you can get help from the hospital's lactation counselor on how to breastfeed comfortably.

Vaginal birth after cesarean birth (VBAC)

In the past, a woman who had a C-section had her next baby that way as well. Now some women who have had a cesarean birth give birth through the vagina in a later pregnancy. Because a C-section may be needed right away, it is safest to try a VBAC in a larger community hospital or medical center.

Advantages of VBAC over cesarean birth

- No major surgery
- Shorter hospital stay
- Lower risk of infection
- Less need for blood transfusion
- Faster recovery

The type of incision used in your uterus is a key factor in deciding whether or not to try a VBAC. Certain types of incisions have a higher risk of rupture or tearing during the next labor. You can't tell what type of uterine incision you had by looking at your scar. Your medical records have this information. Discuss your chances for a VBAC with your doctor or nurse-midwife during pregnancy. If problems arise for the baby or you during labor, a repeat cesarean may be needed.

You and Your Baby

After giving birth, you are a non-pregnant woman again—and a mother. This is a big change and an adjustment in your life. You will have many new feelings. These may feel either positive or negative, but most likely will be a little bit of both.

In addition to the emotional changes, your body needs time to recover from pregnancy and adjust to breastfeeding. Don't worry! Trust your body to make these normal and healthy changes during this time of your life.

- **Keep your medical checkup appointments for you and your baby.**
- **Call a doctor or nurse if you have concerns about yourself or your baby (see Danger Signs for mother and baby on page 55).**
- **"Baby blues" are normal, but if you are depressed for longer than two weeks, call your doctor or nurse.**
- **This is a time of tremendous change for your body and mind. Be patient with yourself. Take time to relax and adjust to parenthood.**
- **If you are not safe at home or in your relationships, ask you doctor or nurse for help.**

Your body changes after childbirth

It can take from 6 weeks to as long as 3 months for your body to return to its pre-pregnancy state.

- You will weigh about 12 pounds less right after giving birth. It may take 6 weeks or longer to get back to your pre-pregnancy weight.
- Your belly may be tender for a few weeks after a C-section.
- Your belly will be large and flabby until your muscles have time to tighten up.
- You will have a vaginal discharge (lochia) of blood, mucus, and tissue from the uterus that may last 1 to 5 weeks. This discharge changes in color from bright red blood (2 to 3 days) to paler pink (7 to 8 days) and then to a yellowish color.
- You will probably sweat a lot. This is the body's normal way of getting rid of extra fluid.

- You may have trouble urinating in the first few days after birth or have trouble controlling the flow of urine. In time, the bladder's muscle tone will return to normal.
- If you had stitches, you may be swollen and sore at first. Stitches heal in 2 to 3 weeks.
- Hemorrhoids may be very large and painful after birth and may take 2 to 3 weeks to shrink (see page 22).
- You may have "afterbirth pains" (cramps) caused by the uterus contracting as it shrinks back to its normal state. These are mild after your first baby but stronger if you have had babies before or if you are nursing. These pains should last only a few days.
- Your breasts will get large and full on day 2 or 3 and remain that way for 24 to 48 hours. Breastfeed often to relieve this fullness.
- Your first milk is called colostrum. This yellow sticky fluid protects your baby against many illnesses.
- After a few days, your milk will change from colostrum (yellow fluid) to a thin blue color. From birth, your breast milk contains everything your baby needs.
- Your breasts may leak until your body learns to make just the right amount of breast milk for your baby.
- If you have other children, it may take a while for them to accept a new baby. Try to make a special time every day for your other children and let them know they are still loved. Read a book, take a walk, or prepare a snack together.
- It is normal to feel tired and depressed after the excitement of having a baby. This sadness, called "baby blues" may last for a week or two. If you are depressed or upset for longer than two weeks, talk to your doctor or nurse.

Danger signs for a new mother

Call your doctor or nurse right away if you have any of these signs:

- *Fever over 100.4°F*
- *Vomiting*
- *Feeling like you have the flu*
- *Pain or burning when you urinate*
- *Bleeding that is heavier than a normal menstrual period*
- *Pain, swelling, or tenderness in your legs*
- *Chest pain and cough*
- *Red streaks or hot, tender lumps in your breasts*
- *Increasing pain, redness, or discharge from the vagina or from any place with stitches*
- *Smelly vaginal discharge*
- *Pain in your lower tummy and back*
- *"Baby blues" that do not go away after 2 weeks*
- *Sadness and anger that begin a month or two after giving birth*
- *Feeling so bad that you have trouble with your daily life*
- *Fearing that you will harm your baby or yourself*

Danger signs for a new baby

Call your baby's doctor or nurse if your baby has any of these signs:

- *Trouble breathing (works hard to breathe, makes grunting noises)*
- *Blue, gray, or very pale skin or lips*
- *Yellow skin (head to toe), or yellow eyes*
- *Seizures (shaking arms or legs that do not stop when you hold them)*
- *Fever (higher than 100°F)*
- *Sleeps through feedings; will not wake up enough to feed*
- *Diarrhea or blood in a diaper*
- *Fewer than 6 wet diapers in 24 hours*
- *No dirty diaper for 2 days*
- *Diaper rash that will not go away*
- *Bleeding or discharge from any place, including eyes, belly button, or penis (pink discharge from the baby's vagina is normal)*
- *Vomit that shoots out of the baby's mouth (different than spitting up with a burp)*
- *White patches in the mouth that will not wipe away*
- *Baby simply does not "seem right" to you*

Basic baby safety

- Put your baby down to sleep on his back. Let him play on his tummy when he is awake and you are with him.
- Do not let anyone smoke around your baby or in places where your baby goes (such as in the house or car).
- Use a car seat every time your baby is in the car.
- Never leave your baby alone at home or in a car.
- Never shake your baby. This can cause brain damage or death. Make sure that everyone who cares for your baby knows this.

Help lower the risk of SIDS

Place your baby on his back to sleep. Share this advice with everyone who cares for your baby.

Use a firm mattress in a safety approved crib. Take out all pillows, quilts, bumper pads, wedges, toys, and other soft items.

Keep your baby's head and face uncovered during sleep. Instead of a blanket, use only a sleeper or pajama.

Never smoke before or after the birth of your baby. Do not let anyone smoke around your baby.

Do not let your baby get too hot during sleep. The baby's room should be at a temperature that is comfortable for an adult (65–71°F). Do not use too many layers of clothing or blankets.

Bed sharing can be dangerous. Placing the baby in a separate, safe sleep area next to your bed is safer.

Helpful hints

The first few weeks after birth are not a glamorous time for most women. Along with feeling excited about having a new baby, you probably feel very tired. You may feel happy one minute, and sad the next. You have vaginal discharge, leaking breasts, and you sweat a lot. It helps to know that things get better quickly.

Caring for yourself

- Do not ignore feeling tired. Get plenty of rest. Slowly increase your daily activity.
- Eat a healthy diet. Drink 6 to 8 glasses of fluid each day.
- If you were taking prenatal vitamins and iron, keep taking them.
- Try to limit visitors the first few weeks.
- If people offer help, accept it.
- Avoid lifting objects heavier than your baby.
- Listen to well-meaning advice and then do what seems sensible to you. Do what fits your life style and ideas about parenting.
- Ask your doctor or nurse about exercises for strengthening your tummy.
- Be prepared to use your chosen birth control method the first time and every time you have sex after giving birth.
- Share your thoughts and feelings with your partner.
- Find answers to your breastfeeding questions.
- Keep your sense of humor.

Coping with your baby's crying

The first few weeks with your baby may be the most difficult. You may feel helpless if your baby won't stop crying. Remember, new babies cry a lot. Try these helpful hints for surviving:

- Find someone to talk to and share your feelings and concerns.
- Hold, rock and sing to your baby often. New babies cannot be spoiled by love and attention.
- Follow your baby's cues for eating and sleeping. Don't expect your baby to be on a schedule for the first few months.

Sometimes you will not be able to calm your baby. Have a plan for what to do when you are too tired or stressed to cope. If you feel yourself losing control when you can't calm your baby, take a moment to pull yourself together. **Never shake your baby, which can cause brain damage or death.** Put the baby in a safe place, such as in his crib, and walk away. Come back in a few minutes, when you feel more calm.

Taking care of yourself

You worked hard during your pregnancy to be healthy and give your new baby a good start. After your baby is born, please keep taking care of your mind and your body. A healthy mother is better able to raise a healthy child.

- Have a check-up 4–6 weeks after birth. Your doctor or nurse-midwife may want to see you sooner if you had a cesarean birth.
- Eat a healthy diet and stay active.
- Get routine women's health check-ups.
- Keep taking folic acid to prevent birth defects in future babies and to reduce your risk of heart disease.
- Don't use tobacco, alcohol, or street drugs. Get help if you cannot quit.
- Avoid secondhand smoke.

Birth Control

- **You can get pregnant right away, before you have a period.**
- **You can get pregnant even if you are breastfeeding.**
- **Choose your birth control method before you have your baby and be ready to use it the first time you have sex.**
- **Try to wait two years before you get pregnant again.**

Free birth control

You and your partner may be able to get free birth control.

Call 1-800-770-4334 and ask about the Take Charge Program.

You can get pregnant right away, even if you are breastfeeding.

You can be fertile right after you have your baby. You can get pregnant even if you are breastfeeding. Even if you don't have your period—and you might not, when you are breastfeeding—you can still get pregnant. Be sure to choose a birth control method that seems to fit your needs and be ready to use it after your baby is born.

Choose a method before your baby is born.

Talk to your doctor or nurse before you have your baby about the best method of birth control for you. The pill, the patch, the vaginal ring, and the shot can't be started for two to three weeks after delivery, and some methods need time to start working. You can use a condom and foam in the meantime. Before you start having sex again, you and your partner need to have your birth control method ready to use.

What are your plans for your family?

You and your partner can talk about how many children you want, and how much time you want between them. It is best to wait two years before you get pregnant again, both for your health and your baby's. Waiting to get pregnant gives you more time to focus on your new child.

If you decide you do not want more children and choose to get a tubal ligation ("getting your tubes tied") you can have it done right after delivery, while you are still in the hospital. This involves surgery and must be planned with your doctor or nurse-midwife many weeks before birth.

Birth control methods

Birth control pills

The patch

The diaphragm or cervical cap

Condoms

The shot

The vaginal ring

The IUD or the hormone-releasing IUD

Natural family planning

Abstinence (no sex)

Vasectomy—sterilization for men

Tubal ligation—sterilization for women

Questions to ask when choosing a birth control method

How does this method work?

How good is this method at preventing pregnancy?

Are there any side effects?

How easy would it be for me to use?

Would I feel comfortable using it?

Would my partner like this method and help me use it?

How much will it cost?

Emergency contraception

Emergency contraceptive pills (ECPs) are sometimes called the "morning after pill." They are a way to prevent pregnancy after sex happens without birth control or if a condom breaks. They will not harm a pregnancy that has already begun. They work by stopping your body from releasing an egg. If you don't ovulate (release an egg), you can't get pregnant. ECPs contain a hormone, progesterone, which is also found in birth control pills. ECPs must be taken soon (the sooner the better) after unprotected sex. They can be taken up to five days after sex. ECPs are very safe, but should not be used as a form of birth control. You can get ECPs without a prescription at a local pharmacy or clinic.

How to get birth control methods and emergency contraception

- Talk to your doctor or nurse.
- Call your local family planning clinic. To find the clinic closest to you, and to learn about services if you don't have insurance, call Healthy Mothers, Healthy Babies at 1-800-322-2588, or the Family Planning Hotline at 1-800-770-4334. You can also get free information about different methods of birth control from Healthy Mothers, Healthy Babies.
- For information about Emergency Contraception and where to get it, call 1-888-NOT-2-LATE. You will get a free referral to a doctor or nurse or a pharmacist who will help you get ECPs.

Sex After Your Baby Is Born

- **Have sex again when you feel ready. This is different for everyone.**
- **Take it slowly and be ready to make changes at first.**
- **Be prepared with birth control. Protect yourself from getting pregnant.**
- **Use a condom if you or your partner have sex with other partners. Protect yourself from sexually transmitted infections.**
- **Be patient. Changes and discomforts usually go away in a couple of months.**

When to begin having sex again is different for each woman. It is a personal choice based on how you feel after giving birth. Most doctors and nurses advise waiting at least one to two weeks after your baby is born before having sex. Bleeding should be over before you have sex. If you have stitches, allow at least two to three weeks for them to heal.

Finding time and privacy for sex may be a challenge as you and your partner get used to taking care of the baby. Try to find a time when you are rested and not rushed. Try to spend some time at home with your partner away from the baby at least once a week. Keep talking about your feelings and needs. Be open and honest with each other.

Changes and discomforts during sex

Many changes are normal after you have your baby. You may not respond to sex the same way as before, or things may feel different. Most of this is due to the changing hormones in your body. When you are ready for sex, take it slowly and gently.

This advice may be helpful:

Coping with discomfort

- Do Kegel exercises to improve muscle tone and help tissues heal faster (see page 38).
- If sex is painful, have your partner insert two fingers to gently ease the vagina open before having sex. Have your partner thrust less deeply and slowly at first if your opening is sore. Guide your partner's penis or fingers inside to control the depth and speed of thrust. If you are dry, allow a longer time for sexual arousal. Use a lubricant such as saliva, K-Y jelly, contraceptive cream, or foam. Do not use Vaseline or massage oil because it will destroy a condom.

- If you are tender or sore, try positions such as side to side, woman on top, or woman sitting or kneeling on top. If you had a C-section, avoid being under your partner.
- If sex is still not comfortable, try some other methods of pleasure such as mutual masturbation or oral sex.

Changes in responses

- Your vagina may be tender and you may not get wet quickly with sexual arousal. You may notice this more until your periods return.
- You may be tired and not want sex. Orgasm may take longer. Try having sex in the morning or afternoon when you are less tired. Try to find a time when you will not be rushed.
- You can be close and sexually intimate with your partner without having sex. You can have orgasms without sex. Sometimes couples just want to hold each other and snuggle.

Sex and breastfeeding

- Around the clock nursing lessens the desire for sex for some women, while others say their desire increases.
- There is no need to limit sex while you are breastfeeding.
- If milk leaks from your breasts during sex, use a towel and apply gentle pressure with your hand. You can also wear a bra.
- You may feel something like arousal or orgasm while nursing. If you do, this is due to changes in your hormones and does not mean you are having sexual feelings about your baby.

Be patient. Most of the changes and discomforts will go away within a couple of months. If you keep having problems, talk to your doctor or nurse.

Happy Birth Day!

Your baby's very first birthday present will be from you. By caring for yourself, you have given your newborn the gift of a healthy mind and body. Your willingness to take care of yourself and your growing baby during this very special time is the beginning of your lifelong relationship.

Resources

WIC: 1-800-841-1410 or http://www.doh.wa.gov/cfh/wic

Fish Facts for Healthy Nutrition:
http://www.doh.wa.gov/fish/Default.htm

National Breastfeeding Hotline: 1-800-994-WOMAN (9662) or
http://www.4woman.gov/Breastfeeding/bf.cfm?page=ask

First Steps: http://fortress.wa.gov/dshs/maa/firststeps

Healthy Mothers, Healthy Babies: 1-800-322-2588 or
http://www.hmhbwa.org

March of Dimes: 1-800-291-3463 or http://www.modimes.org

Group B Strep: http://www.cdc.gov/groupbstrep

SIDS: http://www.sidsofwa.org

Alcohol and Drug Hotline: 1-800-562-1240

Washington State Tobacco Quit Line: 1-877-270-STOP

Domestic Violence Hotline: 1-800-562-6025

Take Charge Hotline (free family planning services): 1-800-770-4334 or
http://fortress.wa.gov/dshs/maa/familyplan/index.html

Family Planning: http://fortress.wa.gov/dshs/maa/familyplan/

Emergency Contraception Hotline: 1-888-NOT-2-LATE

Women's Health Information: http://www.4woman.gov

Health Education Resource Exchange: http://www3.doh.wa.gov/here/

If you are pregnant and do not want to keep this baby, there is help for you.

- *Get prenatal care as soon as possible. To find a doctor or nurse, call 1-800-322-2588.*
- *If your problems seem too much, call your local Crisis Line. Find the phone number in the front cover of your phone book.*
- *Try to make a plan before your baby is born. Your doctor, nurse or local Crisis Line can help.*

If you have no plan and cannot cope with a new baby, don't panic.

You can leave your unharmed baby, 3 days old or younger, at any hospital emergency room or fire station. Hand the baby to someone who works there.

- *This is PRIVATE. No one will ask your name.*
- *This is SAFE. Your baby will be given medical care and adopted by a loving family.*
- *This is SUPPORTIVE. You will be offered medical care and counseling.*
- *This is LEGAL. You are protected under Washington State law.*

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Washington State Department of Health

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Sincerely,
Health Education Resource Exchange Web Team

PRINTING SPECIFICATIONS

Title:	**9 Months to Get Ready. . .You Can Make a Difference**
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First Trimester

Months 1-3 of Pregnancy

Things to keep in mind

- Get your prenatal check-ups as planned.
- Do not use tobacco, alcohol, or street drugs. Get help if you cannot quit.
- Avoid secondhand smoke.
- Avoid medications unless your doctor or nurse-midwife prescribes them.
- Prevent an illness called toxoplasmosis, which could affect your unborn baby. If you have a cat, avoid touching the litter box. Wash your hands with soap and warm water after touching soil, cats, or uncooked meats or vegetables.
- Avoid bug spray and other chemicals in spray cans.
- Avoid having any X-rays now that you are pregnant. Dental X-rays are usually safe.
- Limit caffeine drinks like colas, teas, and coffee.

Eat a variety of healthy foods. Choose:

- ***Whole grains****—breads, tortillas, rice, and cereals*
- ***Fruits and vegetables****—apples, oranges, bananas, broccoli, leafy lettuce, and other colorful produce*
- ***Dairy foods****—milk, cheese, yogurt*
- ***Protein foods****—chicken, turkey, fish, meats, eggs, nuts, dry beans, and peanut butter*

- If you feel sick to your stomach, try eating dry crackers, toast, or cereal.
- If you have heartburn, avoid greasy, fried, or spicy foods. Eat small meals more often.
- Take prenatal vitamins and minerals if prescribed.
- Take folic acid every day to help prevent birth defects.
- Learn why breastfeeding is so healthy for both you and your baby.
- If your partner is not supportive of your pregnancy, or if you are not safe at home or in your relationships, ask your doctor or nurse for help.
- Be active every day. Try walking at least 20 minutes each day.
- Rest when you feel tired.

Second Trimester

Months 4-6 of Pregnancy

Things to keep in mind

- Get your prenatal check-ups as planned.
- Do not use tobacco, alcohol, or street drugs. Get help if you cannot quit.
- Avoid secondhand smoke.
- Avoid medications unless your doctor or nurse-midwife prescribes them.
- Prevent an illness called toxoplasmosis, which could affect your unborn baby. If you have a cat, avoid touching the litter box. Wash your hands with soap and warm water after touching soil, cats, or uncooked meats or vegetables.
- Avoid bug spray and other chemicals in spray cans.
- Avoid having any X-rays now that you are pregnant. Dental X-rays are usually safe.
- Limit caffeine drinks like colas, teas, and coffee.

Eat a variety of healthy foods. Choose:

- ***Whole grains****—breads, tortillas, rice, and cereals*
- ***Fruits and vegetables****—apples, oranges, bananas, broccoli, leafy lettuce, and other colorful produce*
- ***Dairy foods****—milk, cheese, yogurt*
- ***Protein foods****—chicken, turkey, fish, meats, eggs, nuts, dry beans, and peanut butter*

- If you feel sick to your stomach, try eating dry crackers, toast, or cereal.
- If you have heartburn, avoid greasy, fried, or spicy foods. Eat small meals more often.
- Drink at least 6 to 8 glasses of liquids each day, such as water, milk, and juice.
- Take prenatal vitamins and minerals if prescribed.
- Learn why breastfeeding is so healthy for both you and your baby.
- If your partner is not supportive of your pregnancy, or if you are not safe at home or in your relationships, ask your doctor or nurse for help.
- Be active every day. Try walking at least 20 minutes each day.
- Rest when you feel tired.

Third Trimester

Months 7-9 of Pregnancy

Things to keep in mind

- Get your prenatal check-ups as planned.
- Do not use tobacco, alcohol, or street drugs. Get help if you cannot quit.
- Avoid secondhand smoke.
- Avoid medications unless your doctor or nurse-midwife prescribes them.
- Prevent an illness called toxoplasmosis, which could affect your unborn baby. If you have a cat, avoid touching the litter box. Wash your hands with soap and warm water after touching soil, cats, or uncooked meats or vegetables.
- Avoid bug spray and other chemicals in spray cans.
- Avoid having any X-rays now that you are pregnant. Dental X-rays are usually safe.
- Limit caffeine drinks like colas, teas and coffee.

Eat a variety of healthy foods. Choose:

- ***Whole grains****—breads, tortillas, rice, and cereals*
- ***Fruits and vegetables****—apples, oranges, bananas, broccoli, leafy lettuce, and other colorful produce*
- ***Dairy foods****—milk, cheese, yogurt*
- ***Protein foods****—chicken, turkey, fish, meats, eggs, nuts, dry beans, and peanut butter*

- If you feel sick to your stomach, try eating dry crackers, toast, or cereal.
- If you have heartburn, avoid greasy, fried, or spicy foods. Eat small meals more often.
- Drink at least 6 to 8 glasses of liquids each day, such as water, milk, and juice.
- Take prenatal vitamins and minerals if prescribed.
- Find out where to get breastfeeding help after your baby is born.
- Have WIC staff, your doctor, or nurse answer any questions you have about breastfeeding.
- If you plan to return to work or school, start looking for daycare.
- If your partner is not supportive of your pregnancy, or if you are not safe at home or in your relationships, ask your doctor or nurse for help.
- Be active every day. Try walking at least 20 minutes each day.

Before Your Baby Is Born

Before Your Baby Is Born

After Your Baby Is Born

After Your Baby Is Born

PRINTING SPECIFICATIONS

Title:	**9 Months to Get Ready. . .You Can Make a Difference [Tabbed divider sheets]**
Size:	8.5 x 11 + tab
Paper stock:	110# index white
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