

*The following are some common complaints in pregnancy with tips to try. These are not meant to replace your physician's advice and instruction. Please keep all your physician's appointments before, during and after pregnancy.*

## A Word About Weight Gain

Most women are concerned and conscientious about their weight gain during pregnancy, and with good cause. Pregnancy should not be used as an excuse to overeat. While it is true that a pregnant woman is eating for two, it is not true she needs double her normal amount of consumption.

**Excessive weight gain** during pregnancy can lead to complications, and any sudden weight gain should be reported to your physician. If you overeat during pregnancy, causing unwanted fat stores (beside the normal amount needed for breast feeding), you should not attempt calorie restriction ("dieting") until after breast feeding stops. Weight reduction through calorie restriction can interfere with milk production, among other factors.

On the other hand, some women become overly preoccupied with what the scales say during pregnancy. Some view their pregnancy weight as they would a fat weight gain— cringing at every added pound they see and becoming sensitized to innocent or unkind comments like "You're so big!" This is not a pleasant way to spend your pregnancy! Just remember these three pieces of advice:

1ST

Resign yourself to gaining weight during pregnancy. It is normal, desirable and associated with the baby's birth weight.

2ND

Concentrate on **WHAT** you eat each day and concentrate less on the scales alone.

3RD

In single pregnancies and under normal conditions, if you are eating the minimum recommended amounts from each of the food groups daily, your weight gain will be normal for you, not excessive. Remember, you are not fat—you are pregnant! Little of your weight gain is fat. You are helping to build a baby with the foods you eat during pregnancy.  
*Weight reduction during pregnancy is not advisable.*

## CARE FOR YOURSELF DURING PREGNANCY

The best prenatal care is what you give yourself between visits to your physician. Continue regular exercise activities, if not too strenuous, but be aware you may tire faster in early and late pregnancy. Walking is a good, safe exercise. Pregnancy is not usually the time to make extreme changes in exercise habits, so make your physician aware of your activity level and any changes.

### 'Advice' from others

The advice you receive from those who have been pregnant is usually well-intended, but can be very inaccurate. There have been many changes in how pregnancy and childbirth are treated in the past 10–20 years. What our parents viewed as a healthy pregnancy differs greatly from what we know now. Don't rely on other people's advice or experience to guide you during pregnancy and after. What they were told may have been an individual matter entirely.



## Constipation

Relaxation of gastrointestinal muscles and pressure of the enlarged uterus on the intestine are primarily responsible for constipation during pregnancy. Iron supplements or the iron in a prenatal vitamin may also contribute to constipation.

A slowing down of the GI tract due to hormonal changes in pregnancy is normal and desirable, because after your foods are broken down into nutrients, they can stay in contact with the lining of the small intestine longer for efficient absorption. It is possible that increased nutrient absorption can result in less waste and therefore fewer bowel movements, which should not be confused with the constipation of the difficult type. Laxatives should only be used upon the advice of your physician.

## Heartburn

Heartburn is caused by food and gastric acids backing into the lower esophagus, producing a burning sensation near the breast bone and up into the throat. Relaxation of the cardiac sphincter (the circular muscle at the end of the esophagus which opens and closes the stomach) due to the hormone progesterone and pressure on the stomach from the enlarged uterus commonly cause reflux after a large meal.

### The following are ways to alleviate heartburn:

- Eat small, infrequent meals or snacks every two to three hours. Avoid overeating at any one time.
- Avoid bothersome foods (usually fried, fatty or highly seasoned foods, coffee, cola, tea, carbonated beverages and highly sweetened foods and beverages). Drink more water to dilute stomach contents, especially stomach acids.
- Eat two to three hours before bedtime instead of immediately before bedtime.
- Sleep in an elevated position. A mattress raised slightly by bricks and boards may be better than two pillows propping only the head—using only additional pillows may aggravate heartburn. Elevating the entire mattress is more effective.

*When you have questions or are in doubt, ask the experts: your physician, nurse practitioner, registered nurse or registered dietitian.*

### The following are ways to ease constipation:

- Get regular physical exercise as allowed by your physician.
- Increase intake of dietary fiber (fruit, vegetables and whole grain products) to produce softer, bulkier stools.
- Increase intake of fluid (water and fruit juice) to produce softer stools.

### IF SYMPTOMS PERSIST, TRY AVOIDING THE FOLLOWING FOODS:

#### High fat foods

- Fried foods
- Gravy
- Cream sauces
- Margarine
- Butter
- Salad dressing
- Rich desserts
- Mayonnaise
- Ice cream
- Oil

#### Citrus fruits/juices

- Orange
- Grapefruit
- Lemon
- Lime

#### Tomato products

- Tomato juice
- Vegetable juice
- Tomato sauce
- Tomato paste
- Tomato puree
- Stewed tomatoes
- Tomato soup

#### Other

- Carbonated/caffeinated beverages
- Herbs/spices
- Chocolate
- Peppermint
- Spearmint
- Garlic