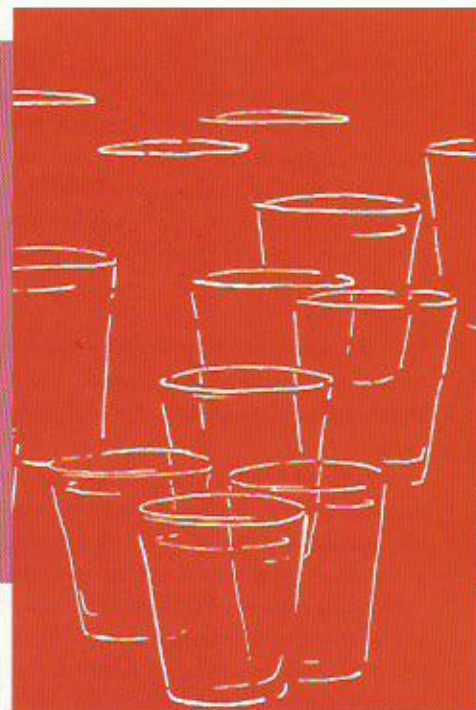


Conditions & Discomforts



How to Cope With Pregnant Life's Little Discomforts. By Diana Tonnessen

Illustrations by Jin Cho

Just about the time you start feeling comfortable with the thought of a new life forming inside you, the little discomforts associated with pregnancy begin to make themselves known: frequent trips to the bathroom; a queasy, uneasy feeling in your stomach that lasts throughout the day; a sense that you could sleep the entire day away.

Most of pregnant life's little aches and pains are driven either by higher levels of pregnancy hormones (particularly progesterone) or by the physical changes your body undergoes as it makes room for baby. Sometimes it's a combination of things. Consider this: In the coming months, your blood levels of the hormone progesterone will rise to at least 10 times the levels of a woman who is not pregnant. Blood volume will increase by a third. Your uterus will expand to about 1,000 times its normal size.

Although you may be tempted to reach for a quick over-the-counter fix for some of the minor aches and pains of pregnancy, don't. "It's important to avoid most medications during pregnancy because they cross the placenta," says Iffath Hoskins, MD, executive director of the Women's Health Institute at the Memorial Health University Medical Center in Savannah, Ga. "The baby's liver and kidneys are not as well-developed as the



mother's, and the dosages going to the baby are higher than those going to the mother, which could harm the baby."

Instead, try the safe, soothing ways outlined here to increase your comfort level.

Fatigue

How can you find your way through the fog of fatigue that's a hallmark of the early weeks of pregnancy and that often hits again in the weeks just before your due date?

- Rest whenever you can. If you don't get enough sleep at night to feel rested, take naps during the day. If you can't nap, at least sit down and rest periodically throughout the day. Prop your feet up and listen to music or read for 10 to 15 minutes.
- Avoid sugar and caffeinated beverages, which provide only a temporary jolt of energy and cause dehydration. Instead, stick with nutritious, well-balanced foods, and drink plenty of fluids.
- Exercise. Brisk walks can energize you by relieving tension and helping you feel refreshed. Walking increases blood flow throughout your body, including your brain.

Many women feel more energetic in the second trimester. If fatigue persists into the second trimester, see your doctor. It could be a sign of anemia due to an iron deficiency. Your doctor will check your hemoglobin level with a

finger-prick blood test. If you're anemic, eat plenty of iron-rich foods: liver, eggs, dried fruits (prunes), whole grains, beef, lentils, black-eyed peas and beans. Your doctor may recommend an iron supplement in addition to your prenatal supplement.

Insomnia

If you've been dragging your tired old self around during the early part of your pregnancy, it may be hard to imagine not being able to sleep. But for some women, nighttime wakefulness can be a problem. Contributing factors include a need to go to the bathroom more often as the enlarging uterus presses on the bladder; difficulty getting comfortable in bed; an active baby; excitement about the birth; dreams about labor and the baby; and a feeling that you can't breathe because the baby is pressing on your lungs. What to do?

- Exercise regularly during the day to help release tension. If you must nap, do so early in the day so as not to interfere with sleep.
- Have a warm, nonalcoholic, noncaffeinated beverage before going to bed.
- Take a warm (not hot) bath at bedtime to help relax. (Be careful getting into and out of the tub; changes in your body may make it more difficult to keep your balance.)
- Practice the deep-breathing and muscle-relaxing techniques taught in your childbirth classes.

- To get more comfortable in bed, try lying on your side with one pillow supporting your abdomen and another between your legs. Why not flat on your back? As your pregnancy progresses, the growing baby might compress and restrict blood flowing through the two major blood vessels that run along the back of the abdominal cavity, just behind the uterus, leading to a drop in blood pressure that makes you feel nauseous, sweaty and dizzy.
- Whatever you do, don't take any over-the-counter or prescription sleep medications without asking your doctor first.

Headaches

Simple tension headaches brought on by stress, sleep disturbances, hormonal changes, or even the excitement of being pregnant often can be tamed with such medication-free measures as deep-breathing exercises and relaxation techniques. Or try one or more of the following:

- Close your eyes and rest in a quiet place.
- Apply an ice pack to the back of your neck or a cold washcloth on your forehead.
- Gently massage your temples.
- Get enough sleep.
- Eat at regular intervals and drink plenty of fluids throughout the day, since hunger and dehydration can trigger headaches.



If none of these works, ask your doctor which pain medications are safe to take during pregnancy. Notify your doctor if you have chronic, persistent or severe headaches, or headaches accompanied by blurred vision, spots in front of your eyes, or nausea and vomiting.

Congestion and Nose Bleeds

Rising hormone levels combined with increased blood volume may contribute to sinus problems—a dry, stuffy or runny nose and occasional nosebleeds. To ease congestion and moisten nasal passages:

- Use saline drops or sprays.
- Use a humidifier to moisten the air you breathe.
- Drink plenty of fluids to help keep mucus membranes moist.
- Dab a bit of petroleum jelly on the skin around your nostrils to prevent chapping.
- Do not use over-the-counter vasoconstrictors.

If these measures fail to do the trick, talk to your doctor.

Teeth and Gum Changes

Although pregnancy hormones can cause gums to swell and bleed, which could lead to periodontal, or gum, disease and its attending tooth loss, regular brushing along with flossing prevents gum disease. Here's another reason to brush and floss diligently: Recent studies have found there may be an association between periodontal disease and preterm birth.

- Brush your teeth at least twice a day and floss at least once a day.
- If you can't brush after every meal, rinse your mouth with water to help dislodge food particles from teeth.
- Schedule a dental checkup early in your pregnancy to ensure good dental health.
- Don't put off needed X-rays or dental work just because you're pregnant. Always tell your dentist if you're pregnant or think you might be, and he or she can take measures to protect you and your baby.

Shortness of Breath

In the early part of your pregnancy, higher levels of progesterone may cause you to feel short of breath. This should resolve as you become accustomed to the change. The sensation may return later in your pregnancy, when the growing baby presses on the diaphragm. Shortness of breath usually doesn't affect the baby's oxygen supply, so you can relax. To ease discomfort:

- Slow down so that your heart and lungs don't have to work so hard.
- Sit or stand up straight, which relieves pressure on the diaphragm.
- Prop up your body with pillows while sleeping.

Nausea and Vomiting

When the first blush of pregnancy is replaced by that green-around-the-gills feeling, it's likely to be morning sickness

(which, by the way, can happen at any time of day or last all day). From 70 to 85 percent of pregnant women have some morning sickness, which usually is mild and generally clears up by the 12th week of pregnancy. Most women find it can be managed with dietary and other measures, such as the following:

- Try eating a small snack, such as soda crackers or rice cakes, before getting out of bed in the morning.
- When you do get out of bed, take it slowly. Sit on the side of the bed for a few minutes before moving about.
- Eat small portions of nutritious foods throughout the day instead of three big meals.
- Drink plenty of fluids, such as water and juice. Fluids are easier on the stomach and help prevent dehydration. (Avoid caffeinated beverages, which act as diuretics.)
- Vitamin B6 supplements or vitamin B6 along with doxylamine (an anti-histamine) are safe and effective.
- Try adding fresh ginger to foods, drinking fresh ginger tea or taking a ginger supplement (350 milligrams) three times a day. Ginger may help settle the stomach.
- Avoid strong odors, sudden movements or even loud noises, which may trigger stomach upsets.
- Get plenty of rest. Fatigue and stress can sometimes cascade into nausea and vomiting.

If nausea and vomiting are debilitating



enough to interfere with the normal activities of your life, talk to your doctor about other options. Studies have found that taking a multivitamin at the time of conception appears to decrease the severity of symptoms. Vitamin B6 supplements (10 to 25 milligrams), alone or in combination with doxylamine, an antihistamine, are safe and effective as a first line treatment. Although the combination is no longer commercially available in this country, it is available at specialized compounding pharmacies. For more severe cases, a variety of antihistamines is available.

If you can't even hold down fluids, notify your doctor immediately. Some women suffer from a condition known as hyperemesis gravidarum that could potentially harm both mother and baby. Severe, persistent nausea and vomiting sometimes requires treatment in the hospital until the condition is under control or subsides. You should discuss these options with your doctor.

Heartburn and Indigestion

Heartburn, a burning sensation in the throat and chest, is fairly common during pregnancy, when hormonal changes relax the valve between the stomach and esophagus. As a result, stomach acids may ascend into the esophagus, causing a burning sensation. As your uterus expands and pushes up against your stomach, it may aggravate the problem.

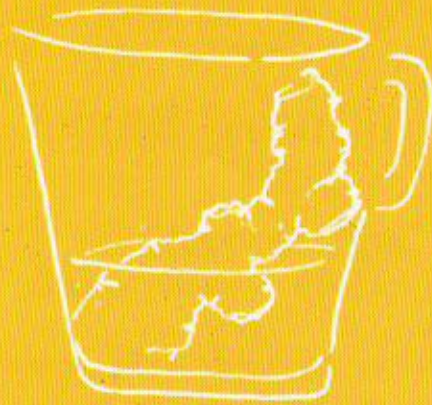
When to Call the Doctor

Call your doctor immediately:

- If you have a small amount of urine and it is dark in color.
- If you can't keep down liquids.
- If you are dizzy or faint when standing up.
- If you have a racing or pounding heart.
- If you vomit blood.

Notify your doctor:

- If you have chronic headaches, one that doesn't go away, is severe, causes blurred vision or spots in front of your eyes, or is accompanied by nausea and vomiting.
- If you develop sudden or excessive swelling of the hands, face or feet.
- If you have pain during urination, a sudden urge to urinate, blood in the urine, or fever.
- If you have a watery or bloody vaginal discharge.
- If you develop a vaginal discharge with a bad odor.
- If you notice pain, soreness or itching in the vaginal area.
- If you have persistent abdominal pressure or back pain that lasts more than a day and/or worsens over a few hours' time and that doesn't respond to self-help measures.



Indigestion is another problem. It occurs when the stomach takes its time digesting food, leaving you with a full, bloated, gassy feeling. Both heartburn and indigestion can be relieved and even prevented with the following measures:

- Eat six small meals during the day instead of three large ones.
- Eat slowly and chew your food well.
- Drink fluids between meals instead of with them.
- Avoid foods that aggravate heartburn and indigestion, such as fried, fatty or greasy foods; fizzy drinks; citrus fruits or juices; and spicy foods.
- Don't eat a big meal within a few hours of bedtime, and try not to lie down immediately after eating.
- Before using antacids, consult with your physician.

Lower Abdominal Pain

Your expanding uterus pulls and stretches the ligaments that support it, which may result in a dull ache or sharp pain on one side of your belly. It's most common between 18 and 24 weeks of pregnancy. How to cope?

- Avoid quick changes of position.
- Don't turn sharply at the waist.
- If pain develops, bend toward it to help relieve it.
- Rest or change your position.
- If you are more than four months pregnant and abdominal pain doesn't go away after taking these measures, or if it persists for a day or two, call

your doctor. It could be a sign of a more serious problem.

Backaches

Up to 50 percent of pregnant women experience back pain during pregnancy, usually in the third trimester. The reasons are many. The hormone relaxin, which allows the uterus to expand as the baby grows, also relaxes the joints and ligaments in the rest of your body, which are no longer able to give as much support as usual. Plus, the added weight of your pregnancy, combined with a shift in your center of gravity, puts added stress on the muscles in your back, pelvis and legs. Sometimes the growing uterus presses on sciatic nerves in the spine. What can you do?

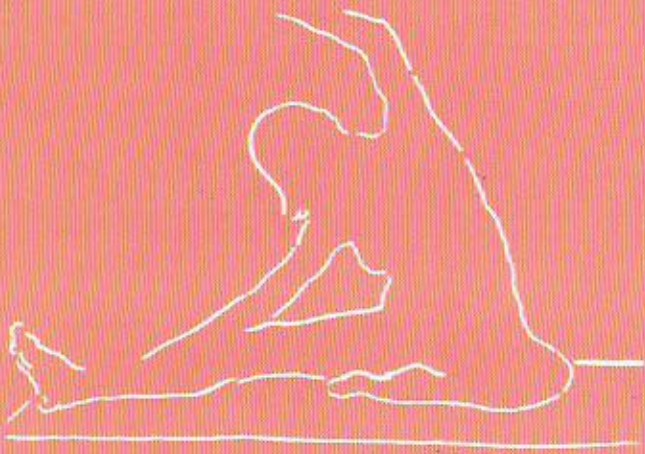
- Wear low-heeled (but not flat) shoes with good arch support. If you must stand for long periods, take breaks in which you sit down and put your feet up. If you can't take breaks, place one foot on a low stool, which helps reduce the stress on your back and pelvis.
- When bending to pick up something (such as a bag of groceries or a small child), use your knees and keep your back straight. Don't bend from the waist.
- When sitting, use a chair with good back support, or place a small pillow in the lower part of your back.
- Avoid excessive weight gain during pregnancy. A weight gain of 25 to 35

pounds is appropriate for the average woman, according to ACOG.

- Exercise. Regular moderate exercise helps keep pelvic and back muscles strong. If you were physically active before pregnancy, you may remain active in the absence of other medical or obstetrical complications. If not, you can still begin an exercise program during the early part of your pregnancy, in the absence of other medical or obstetric complications, so long as you talk to your doctor first.
- Sleep on a firm mattress. If your bed is too soft, have someone place a board between the mattress and box spring for added support.
- At night, lie on your side with pillows tucked between your thighs and under your uterus.

As always, before using pain medication to relieve an aching back, check with your doctor first. Back pain during pregnancy can be caused by other conditions, and it is also one of the main symptoms of preterm labor, especially if associated with discharge. Call your doctor if back pain persists for more than a day or worsens over a few hours' time, especially after you have tried other comfort measures. Notify your doctor right away if you have back pain combined with fever, burning during urination or vaginal bleeding.

Constipation and Gas
Progesterone produced by the placenta



slows digestion, and as your pregnancy progresses, the growing baby presses on the bowels, leading to infrequent passage of stools, difficulty passing stools, or passing of hard stools. For relief:

- Drink plenty of fluids—at least eight to 10 glasses a day—and eat plenty of fiber-rich foods, both of which keep bowel movements soft and regular. Best bets: fruits, vegetables, and whole-grain foods such as oatmeal, oat bran or wheat bran.
- Do not strain during bowel movements.
- Exercise. Moderate aerobic exercise, such as brisk walking, helps keep bowels active.
- Try using a fiber supplement, such as psyllium powder (brand name Metamucil, Konsyl, Fiberall or Citrucel).
- Don't take laxatives without first consulting your doctor.

Frequent Urination

Increased fluid volume in the body during pregnancy, along with harder-working kidneys, means extra trips to the bathroom throughout your pregnancy. As your uterus expands, it puts added pressure on the bladder. So in early pregnancy, and again during the last few weeks of pregnancy, it may feel full even when it isn't.

Whatever you do, don't cut back on your fluid intake to curtail bathroom visits. But do cut back on caffeinated beverages, such as coffee, tea and cola,

which have a diuretic effect. If you leak urine when you sneeze or cough, try using a sanitary pad or panty liner to keep your panties dry. Kegel exercises may help improve bladder control.

Frequent urination may also be a sign of urinary tract infection, especially if associated with fever. Call the doctor if you develop any of the following warning signs of a UTI: pain during urination, a sudden urge to urinate, blood in the urine or fever.

Hemorrhoids

These painful, itchy varicose veins in the rectal area are caused by increased blood volume in the pelvis, along with pressure of the growing uterus on the veins in the lower body. Constipation aggravates hemorrhoids. Straining during bowel movement traps more blood in the veins and can even cause them to bulge out of the rectum. Hemorrhoids usually disappear after the baby's born. In the meantime,

- Avoid constipation by eating high-fiber foods and drinking plenty of fluids.
- Keep your weight gain in check. Gaining too much weight during pregnancy can aggravate hemorrhoids.
- Keep active. Moving around helps shift the weight of the uterus off of these veins.
- To relieve pain and reduce swelling, apply ice packs or witch hazel pads to the area.

- Soak in a sitz bath a few times a day if possible.
- Use over-the-counter hemorrhoid creams and suppositories only after consulting with your doctor. Tell your doctor if you have blood in the stools.

Swelling

The extra fluid circulating in your body during pregnancy may cause your hands, face, legs and ankles to swell, especially during late pregnancy. Swelling, or edema, may also worsen during the summer. To reduce swelling:

- Put your feet up when you sit down.
- Sleep with your feet propped up on pillows.
- Don't take diuretics to reduce swelling without your doctor's approval.
- Notify your doctor if you experience excessive swelling or sudden swelling of your hands and face, which may be a sign of high blood pressure.

Vaginal Discharge

Throughout your pregnancy, you may notice a heavier-than-usual vaginal discharge that's sticky, clear or white. This is perfectly normal and nothing to worry about. If the discharge has blood in it, is watery, has a bad odor, or changes in any way, or if you develop pain, soreness or itching in the vaginal area, notify your doctor. Never douche while you're pregnant. **p**