



# 1 Your health in pregnancy

## FURTHER READING

The Food Standards Agency publishes some useful leaflets, including *While you are pregnant* and *Thinking of having a baby*.

Contact:  
Food Standards Agency  
PO Box 369  
Hayes UB3 1UT  
tel. 0845 606 0667  
[www.food.gov.uk](http://www.food.gov.uk)

For more information on food safety and hygiene, visit the *Eat well, be well* website at [www.eatwell.gov.uk](http://www.eatwell.gov.uk)

**T**his chapter describes some of the things you should think about to make sure you and your baby stay healthy during pregnancy.

## WHAT SHOULD YOU EAT?

A healthy diet is an important part of a healthy lifestyle at any time, but particularly if you are pregnant or are planning a pregnancy. Eating healthily during pregnancy will help your baby develop and grow and will help keep you fit and well. You don't need to go on a special diet, but make sure that you eat a variety of different foods every day in order to get the right balance of nutrients that you and your baby need. You should also avoid certain foods to be on the safe side.

There's no need to 'eat for two' when you are pregnant. It's the quality not the quantity that's important. With a few exceptions you can continue to eat all the foods you enjoy (see *Take care with some foods*, pages 11–12). Eating healthily often means just changing the amounts of different foods that you eat rather than cutting out all your favourites. *The Balance of Good Health* illustrates the mixture of different foods you need in your diet and the proportions you should eat them in. This is illustrated below.

## THE BALANCE OF GOOD HEALTH

### Fruit and vegetables

Try to eat at least five servings a day. This can include a glass of pure fruit juice. This food group includes fresh, frozen and canned fruit and vegetables, salads, dried fruit, fruit juices.

### Meat, fish and alternatives

Eat moderate amounts. Choose lean meat, remove the skin from poultry and cook using the minimum of fat. Try to eat oily fish at least once a week. This food group includes meat (except liver), fish, poultry, eggs, beans, pulses, nuts (except peanuts).



### Bread, other cereals and potatoes

Make these the main part of every meal, eat wholegrain varieties when you can. This food group includes bread, potatoes, breakfast cereals, pasta, rice, oats, noodles, maize, millet, yams, cornmeal, sweet potatoes.

### Foods containing fat, foods containing sugar

Limit the amount you eat. This food group includes all spreading fats, oils, salad dressings, cream, chocolate, crisps, biscuits, pastries, ice-cream, cake, puddings, fizzy drinks.

### Milk and dairy foods

Eat moderate amounts, using low-fat varieties whenever you can. This food group includes milk, yoghurt, fromage frais.



## PREGNANCY AND WEIGHT

*Most women gain between 10 and 12.5 kg (22–28 lb). Weight gain varies a great deal and depends on your weight before pregnancy. If you gain too much weight this can affect your health and increase your blood pressure. But equally, it's important that you don't try to diet. If you're concerned, talk to your midwife or GP. They may have special advice for you if you weigh more than 100 kg or less than 50 kg.*

- **Eat plenty of fruit and vegetables** as these provide the vitamins and minerals, as well as fibre which helps digestion and prevents constipation. Eat them lightly cooked in a little water or raw to get the most out of them. Frozen, tinned and dried fruit and vegetables are good too. Aim for at least five portions a day.
- **Starchy foods like bread, potatoes, rice, pasta, chapatis, yams and breakfast cereals** are an important part of any diet and should, with vegetables, form the main part of any meal. They are satisfying, without containing too many calories, and are an important source of vitamins and fibre. Try eating wholemeal bread and wholegrain cereals when you can.
- **Lean meat, fish, poultry, eggs, cheese, beans and pulses** are all good sources of nutrients. Eat some every day.
- **Dairy foods like milk, cheese and yoghurt** are important as they contain calcium and other nutrients needed for your baby's development. Choose low-fat varieties wherever possible, for example semi-skimmed or skimmed milk, low-fat yoghurt and half-fat hard cheese. Aim for two to three servings a day.
- **Try to cut down on sugar and sugary foods** like sweets, biscuits and cakes and sugary drinks like cola. Sugar contains calories without providing any other nutrients the body needs. It also adds to the risk of tooth decay.
- **Cut down on fat and fatty foods as well.** Most of us eat far more fat than we need. Fat is very high in calories and too much can increase the risk of heart disease, and it can contribute to being overweight. Avoid fried foods, trim the fat off meat, use spreads sparingly and go easy on foods like pastry, chocolate and chips which contain a lot of fat.



## VITAMIN SUPPLEMENTS

*It's best to get the vitamins and minerals you need from the food you eat. Some people, like those on a restricted diet, need extra.*

**Vitamin D:** *If you have dark skin or always cover your skin, you may be particularly at risk of vitamin D deficiency. Ask your doctor for vitamin D supplements.*

**Folic acid:** *This vitamin is special. You need to take a 400 microgram (0.4 milligram) tablet every day until you're 12 weeks pregnant. Even if you didn't take folic acid before conceiving, it's worth starting as soon as you find out that you're pregnant, and continue to do so until you're 12 weeks pregnant. If you have had a baby with spina bifida before, are taking medication for epilepsy, are diabetic or have coeliac disease, you will need to take a bigger dose of folic acid. Speak to your doctor about this.*

*For more information, you can read the leaflet **Folic acid – what all women should know** at [www.dh.gov.uk/publications](http://www.dh.gov.uk/publications)*



*Foods carrying this mark have added folic acid.*

**Vitamin A:** *Don't take vitamin A supplements without advice as too much could harm your baby. You should avoid eating liver while you're pregnant because it contains high levels of vitamin A.*

## VITAMINS AND MINERALS

- Lean meat, green, leafy vegetables, dried fruit and nuts (see page 12 on peanuts) contain **iron**. Many breakfast cereals are fortified with iron. If you are short of iron, you're likely to get very tired and may suffer from anaemia. If the iron level in your blood becomes low, your GP or midwife will advise you to take iron supplements.
- Citrus fruit, tomatoes, broccoli, peppers, blackcurrants and potatoes are good sources of **vitamin C**, which you need to help you to absorb iron. Some pure fruit juices are also high in vitamin C.
- Dairy products and fish with edible bones like sardines are rich in **calcium**, which is vital for making bones and teeth. Bread, almonds and green vegetables are other good sources.
- Margarine, oily fish (like sardines) and taramasalata contain **vitamin D** to keep your bones healthy and to provide your baby with vitamin D to last during the first few months of life. The best source of vitamin D is summer sunlight. Make sure that you wear 15+ factor sunscreen and never burn. Just 15 minutes in the sun, two or three times a week, during the summer months can produce enough vitamin D.



## WELFARE FOOD SCHEME AND HEALTHY START

If you receive Income Support, income-based Jobseeker's Allowance or Child Tax Credit without Working Tax Credit and have a family income of £14,155 or less (2006/07 figures), you can get help from **either** the Welfare Food Scheme **or** Healthy Start. Healthy Start is replacing the Welfare Food Scheme in phases.

- The Welfare Food Scheme provides four litres or seven pints of cow's milk per week (or 900g of infant formula for children under 1 year old).
- Healthy Start provides cow's milk, fresh fruit and vegetables, or infant formula worth £2.80 per week (£5.60 for children under 1 year old).

For further information see the Welfare Food Scheme leaflet *Free Milk for Pregnant Women* (40537), or the Healthy Start leaflet *A Healthy Start for Pregnant Women and Young Children* (267679). Leaflets are available from your local health centre or by calling 08701 555 455.

Information on Healthy Start is also available at [www.healthystart.nhs.uk](http://www.healthystart.nhs.uk)

- All women who could get pregnant are advised to take a 400 microgram **folic acid** tablet every day. These are available from pharmacies and supermarkets or your GP may be able to prescribe them for you. Ask your GP or pharmacist for advice if you are unsure. You need the extra folic acid until the 12th week of pregnancy. This can help prevent birth defects, which are known as neural tube defects, such as spina bifida. You also get folic acid from green, leafy vegetables, but don't overcook them as this destroys the vitamin. Some breakfast cereals, breads and margarines have had folic acid added to them, so look at the label.

### VEGETARIAN, VEGAN AND SPECIAL DIETS

Providing a vegetarian diet is varied and balanced, it will provide adequate nutrients for you and your baby during pregnancy. However, iron and vitamin B12 can be hard to obtain from a vegetarian diet. Talk to your doctor or midwife about ways to increase intakes of these important nutrients. If you are vegan (i.e. you cut out all animal products from your diet), or you follow another type of restricted diet, such as gluten free, because of food intolerance (e.g. coeliac disease) or for religious reasons, talk to your doctor or midwife. Ask to be referred to a dietitian for advice on how to make sure you are getting all the nutrients you need for you and your baby.

### TAKE CARE WITH SOME FOODS

Besides eating a wide variety of foods, there are certain precautions you should take in order to safeguard your baby's well-being as well as your own.

- **Cook all meat and poultry thoroughly** so that there is no trace of pink or blood and wash all surfaces and utensils after preparing raw meat. This will help to avoid infection with *Toxoplasma*, which may cause toxoplasmosis and can harm your baby (see page 18).
- **Wash fruit, vegetables and salads** to remove all traces of soil which may contain *Toxoplasma*.
- **Make sure eggs are thoroughly cooked** until the whites and yolks are solid, to prevent the risk of *Salmonella* food poisoning. Avoid foods containing raw and undercooked eggs like home-made mayonnaise, ice-cream, cheesecake or mousse.

### HEALTHY SNACKS

- Sandwiches or pitta bread filled with grated cheese, lean ham, mashed tuna, salmon or sardines and salad
- Salad vegetables washed thoroughly
- Low-fat yoghurt and fromage frais
- Hummus and bread or vegetable sticks
- Ready-to-eat apricots, figs or prunes
- Vegetable and bean soups
- Unsweetened breakfast cereals or porridge and milk
- Milky drinks or unsweetened fruit juices
- Fresh fruit
- Baked beans on toast or baked potato



## CAFFEINE

Have drinks which contain caffeine – coffee, tea and colas – in moderation. This is because high levels of caffeine can result in babies having a low birth weight, or even miscarriage. Caffeine occurs naturally in a range of foods, such as chocolate; it's also added to some soft drinks and 'energy' drinks and can also be found in certain cold and flu remedies.

It's important not to have more than 300mg a day.

Each of these contains roughly 300mg of caffeine:

- 3 mugs of instant coffee (100mg each)
- 3 cups of brewed coffee (100mg each)
- 6 cups of tea (50mg each)
- 8 cans of cola (up to 80mg each)
- 8 (50g) bars of chocolate (up to 50mg each)

Try decaffeinated tea and coffee, fruit juice or mineral water.

## FISH

Eating fish is good for your health, so aim for two portions per week, one of which should be oily fish. If you eat a lot of fish, choose a variety as part of a balanced diet, and not just a few species. Don't have more than two portions of oily fish a week. Oily fish includes fresh tuna, salmon, mackerel, sardines and trout. Choose cooked shellfish rather than raw. This is because raw shellfish might be contaminated with harmful bacteria and viruses that could cause food poisoning.

- **Avoid eating all types of paté, including vegetable patés, and mould-ripened soft cheese**, like Brie and Camembert, and similar blue-veined varieties, like Stilton or Danish blue, because of the risk of Listeria infection. You can eat hard cheeses such as cheddar and parmesan, and other cheeses made from pasteurised milk such as cottage cheese, mozzarella cheese and cheese spreads. Although Listeria is a very rare disease, it is important to take special precautions during pregnancy because even the mild form of the illness can lead to miscarriage, stillbirth or severe illness in the newborn.
- **Drink only pasteurised or UHT milk** which has had the harmful germs destroyed. If only raw or green-top milk is available, boil it first. Don't drink unpasteurised goat's or sheep's milk or eat their milk products.
- **Don't eat liver or liver products**, like liver paté or liver sausage, as they may contain a lot of vitamin A. Too much vitamin A could harm your baby. You should also avoid high-dose multivitamin supplements, fish liver oil supplements or any supplements containing vitamin A.
- **Avoid eating peanuts and foods containing peanut products** (e.g. peanut butter, peanut oil, some snacks, etc.) if you or your baby's father or any previous children have a history of hayfever, asthma, eczema or other allergies. Read food labels carefully and, if you are still in doubt about the contents, avoid these foods.
- **Avoid eating shark, marlin and swordfish and limit the amount of tuna you eat**, as these types of fish contain high levels of mercury which can damage your baby's



developing nervous system. Limit tuna to two steaks or four cans (each of 140g drained weight) per week. This also applies if you are breastfeeding.

## FOR GENERAL HYGIENE

- Wash your hands before and after handling any food.
- Thoroughly wash all fruit and vegetables, including ready-prepared salads, before eating. Peel and top carrots before eating them.
- Cook raw meat and poultry thoroughly and make sure that ready-to-eat poultry and cooked chilled meals are reheated thoroughly and are piping hot before they are eaten.
- Always wash your hands after handling raw meat or poultry and make sure that raw foods are stored separately from ready-to-eat foods. Otherwise there is a risk of contamination. This is to avoid other types of food poisoning from meat (Salmonella, Campylobacter and *E.coli* 0157). Use a separate chopping board for raw meats.
- Wear gloves and wash them and then your hands thoroughly after gardening or handling soil.



## SMOKING

When you smoke, carbon monoxide and other poisons pass into your lungs. This means that:

(a) your baby gets less oxygen and cannot grow as well as it should, and  
(b) the nicotine makes your baby's heart beat faster. Breathing in other people's smoke makes the baby more likely to suffer from asthma attacks, chest infections, coughs and colds, and to be admitted to hospital.

### IF YOU STOP SMOKING NOW:

- you'll have less morning sickness and fewer complications in pregnancy;
- you're more likely to have a healthier pregnancy and a healthier baby;
- you'll reduce the risk of stillbirth;
- you'll cope better with the birth;
- your baby will cope better with any birth complication;
- your baby is less likely to be born too early and have to face the

additional breathing, feeding and health problems which so often go with prematurity (see page 112);

- your baby is less likely to be born underweight and have extra problems in keeping warm. Babies of mothers who smoke are, on average, 200 g (about 8 oz) lighter than other babies. These babies may have problems during and after labour and are more prone to infection;
- it will be better for your baby later too. Children whose parents smoke are more likely to suffer later on from illnesses which need hospital treatment (such as asthma);
- you will reduce the risk of cot death.

The sooner you stop, the better. But stopping even in the last few weeks of pregnancy can be beneficial. If any members of your household smoke, their smoke can affect you and the baby both before and after birth. They can help you and the baby by giving up now. Perhaps you could try to stop together.

Protecting the fetus and the new baby from tobacco smoke is one of the best things you can do to give your child a healthy start in life.

You can also find useful information on the dangers of smoking during pregnancy and tips for giving up at this website: [www.givingupsmoking.co.uk](http://www.givingupsmoking.co.uk)

### SMOKING: YOUR ACTION PLAN

Stop completely – it's never too late.

- **Choose a day.** Will the first few days be easier during a working week or over a weekend? When you're busy or relaxed? Whatever you choose, stop completely on that day.
- **The day before.** Get everything ready; review your plan. Get rid of cigarettes.
- **Get help.** Ask friends for understanding and support. Consider asking your midwife, health visitor or practice nurse for advice. People who use professional support are more likely to succeed in their attempts to stop smoking.

It might help to:

- change the habits you associate with smoking;
- anticipate problems – plan to deal with difficult situations without the use of cigarettes;
- take one day at a time and reward yourself for success.
- speak to your health professional about accessing your local NHS Stop Smoking Service and nicotine and gum patches.

Phone the NHS Pregnancy Smoking Helpline for support on 0800 169 9 169 from 12 noon to 9pm every day. You can also find useful information on the dangers of smoking and tips for giving up at this website: [www.givingupsmoking.co.uk](http://www.givingupsmoking.co.uk)

## ALCOHOL

### IF YOU'RE DRINKING WITH FRIENDS:

- find a non-alcoholic drink you enjoy;
- if you drink alcohol, sip it slowly to make it last;
- if people try to pressure you into drinking, refuse politely but firmly;
- avoid getting drunk.

*If you have difficulty cutting down, talk to your doctor or midwife.*

*Confidential help and support is available from local counselling services (look in the telephone directory or contact Drinkline on 0800 917 8282).*

### HERBAL AND HOMEOPATHIC REMEDIES AND AROMATHERAPY





*Not all 'natural' remedies are safe in pregnancy. Make sure that your practitioner is qualified (contact the Institute for Complementary Medicine, see page 147) and tell him or her that you are pregnant. Tell your midwife or doctor which remedies you are using.*

Research shows that heavy or frequent drinking can seriously harm your baby's development. When you drink, alcohol reaches your baby through the placenta. But your baby cannot process it as fast as you can, and is exposed to greater amounts of alcohol for longer than you are. And too much exposure to alcohol can seriously affect your baby's development and can cause Fetal

Alcohol Syndrome. Children with this have restricted growth, heart defects, facial abnormalities and learning and behavioural disorders.

It is best to stop altogether during pregnancy. If you do drink, limit yourself to no more than one or two 'units' of alcohol once or twice a week and avoid getting drunk.

### 1 UNIT EQUALS

	or		or		or	
$\frac{1}{2}$ pint ordinary strength beer, lager or cider		a single measure of spirit (whisky, gin, bacardi, vodka, etc.)		$\frac{1}{2}$ a standard (175ml) glass of wine		$\frac{2}{3}$ a bottle of alcopop, a small glass of sherry or a measure of vermouth

*These units apply to the 25 ml spirits' measure used in most of England and Wales. In some places, pub measures are larger than this. In Northern Ireland, a pub measure is 35 ml or  $\frac{1}{2}$  units. In Scotland, it can be either 35 ml or 25 ml. Home measures are usually more generous.*

## PILLS, MEDICINES AND OTHER DRUGS

Some pills and medicines (including painkillers) can harm your baby's health so, to be on the safe side, you should:

- assume that all medicines are dangerous until a doctor or pharmacist can tell you they are safe;
- make sure your doctor or dentist knows you're pregnant before prescribing anything or giving you treatment;
- talk to your doctor at the first possible moment if you take regular medication.

But do remember that it is safer to take some medicines, for example those used to treat epilepsy and diabetes, than to leave the illness untreated.

Illegal drugs (street drugs) can harm your baby. So it's important to talk to your doctor or midwife straight away so they can provide you with advice and support to become drug free. They can also refer you to additional support if needed, for example some dependent drug users initially need drug treatment to stabilise or come off illegal drugs to keep the baby safe. For more information contact one of the organisations on page 148, or FRANK, the drugs information line, on 0800 77 66 00.

X-rays should be avoided in pregnancy if possible. Make sure your dentist knows you are pregnant.

## PHYSICAL ACTIVITY



The more active and fit you are during pregnancy, the easier it will be for you to adapt to your changing shape and weight gain. It will also help you to cope with labour and get back into shape after the birth. If you feel tense after a hard day's work, physical activity is an excellent way of relaxing, and it will help you to sleep soundly.

Keep up your normal daily physical activity or exercise (sport, or dancing, or just walking to the shops and back) for as long as you feel comfortable. Don't exhaust yourself and remember that you may need to slow down as your pregnancy progresses, or if your doctor advises you to. If in doubt, consult your doctor or midwife.

- If you were inactive before you were pregnant, don't suddenly take up strenuous exercise. Remember, exercise doesn't have to be strenuous to be beneficial.
- Try to keep active on a daily basis. Building in half an hour of activities like walking can help to keep you active. If you can't manage that, any amount is better than nothing.
- Avoid any strenuous exercise in hot weather.
- Drink plenty of fluids.
- If you go to exercise classes, make sure your teacher is properly qualified, and knows that you're pregnant and how far your pregnancy has progressed.
- You might like to try swimming because the water will support your increased weight. Some local swimming pools provide aquanatal classes with qualified instructors.

## EXERCISES FOR A FITTER PREGNANCY

Every pregnant woman should try to fit these exercises into her daily routine. They will strengthen muscles to take a bigger load, make joints stronger, improve circulation, ease backache and generally make you feel well.

### Stomach strengthening exercises

These strengthen abdominal muscles and ease backache, which can be a problem in pregnancy. As your baby gets bigger you may find that the hollow in your lower back increases. This can give you backache.

- Start in a box position (on all fours) with knees under hips, hands under shoulders with fingers facing forward and abdominals lifted to keep the back straight;
- pull in the abdominals and raise the back up towards the ceiling, curling the trunk and allowing the head to relax gently forward. Don't allow elbows to lock out;
- hold for a few seconds then slowly return to the box position;
- take care not to hollow the back. The back should always return to a straight/neutral position;
- do this slowly and rhythmically ten times, making your muscles work hard and moving your back carefully. Only move your back as far as you can comfortably.



**Pelvic floor exercises** help strengthen the muscles of the pelvic floor which come under great strain in pregnancy and childbirth. The pelvic floor consists of layers of muscles which stretch like a supportive hammock from the pubic bone (in front) to the end of the backbone. If your pelvic floor muscles are weak, you may find that you leak urine when you cough or sneeze. This is quite common and you needn't feel embarrassed. However, you can strengthen the muscles by doing the following exercise:

- close up your back passage as if trying to prevent a bowel movement;
- at the same time, draw in your vagina as if you are gripping a tampon, and your urethra as if to stop the flow of urine;
- do this exercise quickly – tightening and releasing the muscles immediately;
- then do the exercise slowly holding the contractions for as long as you can (not more than ten seconds) before you relax;
- repeat both exercises ten times, four to six times a day.

**Pelvic tilt exercises.** Stand with your shoulders and bottom against a wall. Keep your knees soft. Pull your belly button towards your spine, so that your back flattens against the wall. Hold for four seconds and release. Repeat up to ten times.

**Foot exercises** can be done sitting or standing. They improve blood circulation, reduce swelling in the ankles and prevent cramp in the calf muscles.

- Bend and stretch your foot vigorously up and down 30 times.
- Rotate your foot eight times one way and eight times the other way.



### Protect your back

- Sit up straight with your bottom against the back of your chair. Tuck a small cushion behind your waist if you wish.
- When you pick something up, bend your knees, not your back.
- Try to stand tall.



## INFECTIONS

### RUBELLA

Rubella (or German measles) can seriously affect your baby's sight and hearing and cause brain and heart defects in your baby if you catch it in the first four months of pregnancy. All children are now immunised against rubella at 12–15 months and again before they start school.

If you're not immune and you do come into contact with rubella, tell your doctor at once. Blood tests will show whether you have been infected, and you will then be better able to think about what action to take.

### SEXUALLY TRANSMITTED INFECTIONS

Sexually transmitted infections (STIs) are very common and often there are no symptoms, and so you may not know if you have one. However, many STIs can affect your baby's health during pregnancy and after birth. If you have any reason to believe that you or your partner could have an STI which was not diagnosed before pregnancy, you should go for a check-up as soon as you can. You can ask your GP or midwife, or, if you prefer, go to a hospital clinic where you will also be guaranteed strict confidentiality. You can find your nearest clinic in your phone book, listed under the name of your health authority as genito-urinary medicine (GUM) clinic, or 'special' clinic, or the old name of venereal disease (VD) clinic.

### HIV AND AIDS

Current evidence suggests that an HIV positive mother in good health and without symptoms of the infection is unlikely to be adversely affected by pregnancy. However, 1 in every 6 babies born to HIV positive mothers is likely to be infected. HIV positive mothers may also pass on the virus through breast milk. If you're HIV positive, talk to your doctor

REMEMBER THAT YOU CAN GET INFECTED BY HIV, HEPATITIS B, OR HEPATITIS C IF YOU:

- *have intercourse with someone who is infected without using a condom;*
- *use injectable drugs and share equipment with an infected person.*

IN ADDITION YOU MAY HAVE BEEN INFECTED WITH HEPATITIS B IF YOU:

- *were born or spent your childhood outside the United Kingdom in a country where hepatitis B is common. (You may have acquired the infection at birth.)*

about your own health and the options open to you, or contact the organisations listed on pages 148–9 for advice and counselling. It is possible to reduce substantially the risk of transmitting HIV to your baby during pregnancy and after birth (see box page 54).

You should be offered and recommended a named confidential HIV test as part of your routine antenatal care (see page 53). Before the test, your doctor or midwife will discuss the test with you, and counselling will be available afterwards to explain the result and the implications if it is positive. You can also go to a genito-urinary medicine clinic for an HIV test and advice.

### HEPATITIS B

Hepatitis B is a virus that infects the liver. Many people with hepatitis B, even if they show no sign of illness, can be carriers and may infect others. The virus is spread by sex with an infected person without using a condom and by direct contact with infected blood. If you are a carrier, or are infected during pregnancy, you can pass the infection to your baby at birth. All pregnant women are offered a blood test for hepatitis B as part of their antenatal care (see page 53). Babies who are at risk can be immunised at birth to prevent infection (see page 101).

### HEPATITIS C

Hepatitis C is a virus that infects the liver. The virus is transmitted by direct contact with infected blood. This can be as a result of sharing blood-contaminated needles and drug-injecting equipment; or receiving a blood transfusion in the UK prior to September 1991, or blood products prior to 1986. It can also be transmitted by receiving medical or dental treatment in countries where hepatitis C is common and infection control may be poor; or by sexual intercourse with an infected partner. Many people with hepatitis C may have no symptoms and be unaware that they have been infected.

If you have hepatitis C, you may pass the infection to your baby,

although the risk is much lower than with hepatitis B or HIV. This cannot be prevented at present. Your baby can be tested for hepatitis C and, if your baby is infected, he or she can be referred for specialist assessment.

### HERPES

Genital herpes infection can be dangerous for a newborn baby. It can be caught through genital contact with an infected person or from oral sex with someone who has oral herpes (cold sores). Initial infection causes very painful blisters or ulcers on the genitals. Less severe recurrent attacks usually occur for some years afterwards. If you, or your partner, are infected, use condoms or avoid sex during an attack. Avoid oral sex if you or your partner have cold sores or active genital herpes. Tell your doctor or midwife if either you or your partner have recurring herpes or develop the symptoms described above. If your first infection occurs in pregnancy there is a treatment available, although its use is controversial.

If the infection is active during labour, a Caesarean section may be recommended to reduce the risk of transmission to the baby.

### CHICKEN POX

Around 95% of women are immune to chicken pox. If you have never had chicken pox, or are unsure, and come into contact with a child or adult who has it, speak to your GP, midwife or obstetrician at once. A blood test will establish if you are immune. Chicken pox infection in pregnancy can be dangerous for both mother and baby so seek advice early.

### TOXOPLASMOSIS

This infection can damage your baby if you catch it during pregnancy, so take precautions (see page 19). Most women have already had the infection before pregnancy and will be immune. If you feel you may have been at risk, discuss the matter with your GP, midwife or obstetrician. If

you do catch toxoplasmosis while you are pregnant, treatment is available.

### PARVOVIRUS B19 (SLAPPED CHEEK DISEASE)

Parvovirus B19 infection is common in children and causes a characteristic red rash on the face, so is often called 'slapped cheek disease'.

Although 60% of women are immune to this infection, since parvovirus is highly infectious and can be harmful to the baby, any pregnant woman who comes into contact with someone who is infected should seek advice from the doctor.

Immunity can be checked with a blood test. In most pregnant women who are infected with parvovirus the baby is not affected.

### GROUP B STREPTOCOCCUS

Group B Streptococcus (GBS) is a bacterium carried by up to 30% of people causing no harm or symptoms. In women it is found in the intestine and vagina and causes no problem in most pregnancies. In a very small number it infects the baby, usually just before or during labour, leading to serious illness.

This is more likely if your labour is premature, your waters break early, you have a fever during labour, you currently carry GBS or if a previous baby had a GBS infection. If appropriate, antibiotics given through a vein during labour will usually prevent infection of the baby. It is possible to be tested for GBS late in pregnancy; enriched culture medium is thought most likely to detect GBS carriage. Routine testing is not recommended in the UK because there is insufficient evidence to support it. If you are concerned about GBS, discuss it with your doctor or midwife.

### INFECTIONS TRANSMITTED BY ANIMALS

**Cats' faeces** may contain an organism which causes **toxoplasmosis**, a disease which can

damage your baby. Avoid emptying cat litter trays while you're pregnant, or, if no one else can do it, use disposable rubber gloves. Trays should be cleaned daily and filled with boiling water for five minutes. Avoid close contact with sick cats and wear gloves when gardening – even if you don't have a cat – in case the soil is contaminated with faeces. Wash your hands and gloves after gardening. If you do come into contact with cat faeces, make sure you wash your hands thoroughly. Follow the general hygiene rules under **Take care with some foods** (page 11). For further information on toxoplasmosis contact Tommy's Campaign (see page 150).

**Lambs and sheep** can be a source of an organism called *Chlamydia psittaci* which is known to cause miscarriage in ewes. They also carry *Toxoplasma*. Avoid lambing or milking ewes and all contact with newborn lambs. If you experience flu-like symptoms after coming into contact with sheep, tell your doctor.

## INHERITED CONDITIONS

Some diseases or conditions, like cystic fibrosis, haemophilia, muscular dystrophy, sickle cell disorders and thalassaemia, are inherited from one or both parents. If you, the baby's father or any relative has a condition which you know or suspect is inherited, or if you already have a baby with a disability, talk to your doctor about it. You may be able to have tests early in pregnancy to check whether your baby is at risk (see pages 53–5) or whether your baby is affected (see pages 57–9). Ask your GP or midwife to refer you to a genetic counsellor for specialist advice, if necessary, preferably before you conceive or in the early weeks of pregnancy.



## WORK HAZARDS

### VDUs

*Some women are concerned about reports of the effects of VDUs (visual display units on computer terminals and word processors) in pregnancy. The most recent research shows no evidence of a risk.*

### FAILURE TO PAY

*If your employer fails to pay you during your suspension you can bring a claim in an employment tribunal (within 3 months). This would not affect your maternity pay and leave.*

If you work with chemicals, lead or X-rays, or in a job with a lot of lifting, you may be risking your health and the health of your baby. If you have any worries about this, you should talk to your doctor, midwife, occupational health nurse, union representative or personnel department.

If it is a known and recognised risk, it may be illegal for you to continue, and your employer must offer you suitable alternative work on terms and conditions that are not substantially less favourable than your original job. If no safe alternative is available, your employer should suspend you on full pay (i.e. give you paid leave) for as long as necessary to avoid the risk. (See also page 143.)



## COPING AT WORK

### SAFETY ON THE MOVE

*Road accidents are among the most common causes of injury in pregnant women. To protect both you and your unborn baby, always wear a seatbelt with the diagonal strap across your body between your breasts and the lap belt over your upper thighs. The straps should lie above and below your 'bump', not over it.*

If you're at work during pregnancy you need to know your rights to antenatal care, leave and benefits which are set out on pages 130–46. You may get extremely tired, particularly in the first and last weeks of your pregnancy. Try to use your lunch break to eat and rest, not to do the shopping. If travelling in rush hour is exhausting, ask your employer if you can work slightly different hours for a while.

Don't rush home and start another job cleaning and cooking. If possible, ask your partner to take over. If you're on your own, keep housework to a minimum, and go to bed early if you can.

