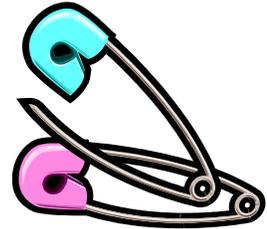


Illness, Sleep and Diapering

1. **Read the article.**
2. **Answer questions.**
3. **Sort medications onto the correct paper. Check the key to see how you did. Return the medications to the container.**
4. **Practice pinning on a cloth diaper.**



Is it okay to take medicine?

Check with your doctor before taking any medicine, including aspirin. Even medicine you can buy without a prescription can cause birth defects, especially during the first three months of pregnancy.

What can I do to feel better?

Here are the most common discomforts of pregnancy and some tips for handling them:

Morning sickness. Nausea or vomiting may strike anytime during the day (or night). Try eating frequent, small meals, and avoid greasy foods. Keep crackers by your bed to eat before getting up.

Talk to your doctor if morning sickness lasts past the first 3 months of pregnancy or causes you to lose weight. Interestingly, women with lots of morning sickness rarely miscarry.

Tiredness. Sometimes tiredness in pregnancy is caused by anemia, so tell your doctor. Get enough rest. Take a daytime nap if possible.

Leg cramps. Gently stretch the calf of your leg by curling your toes upward, toward your knee.

Constipation. Drink plenty of fluids. Eat foods with lots of fiber, such as raisins and bran cereal. Don't take laxatives without talking to your doctor first. Stool softeners may be safer than laxatives.

Hemorrhoids. Don't strain during bowel movements. Try to avoid becoming constipated. Clean yourself well after a bowel movement (wet wipes may be less irritating than toilet paper). Take several warm soaks (sitz baths) a day.

Urinating more. You may need to urinate more often as your baby grows because he or she will put pressure on your bladder. This can't be helped.

Varicose veins. Avoid clothing that fits tightly around your legs or waist. Rest and put your feet up as much as you can. Move around if you must stand for long periods. Ask your doctor about support hose.

Moodiness. Your hormones are on a roller coaster ride for nine months. Plus, your life is undergoing a big change. Don't be too hard on yourself. If you feel very sad or think about suicide, talk to your doctor.

Heartburn. Eat frequent, small meals often. Avoid spicy or greasy foods. Don't lie down right after eating. Ask your doctor about taking antacids.

Yeast infections. The amount of discharge from the vagina increases during pregnancy. But yeast infections, which can also cause discharge, are more common during pregnancy. So it's a good idea to talk with your doctor about any unusual discharge.

Bleeding gums. Brush and floss regularly, and see your dentist for cleanings. Don't put off dental visits because you're pregnant. But be sure to tell your dentist you're pregnant.

Stuffy nose. This is related to changes in the levels of the female hormone estrogen. You may also have nosebleeds.

Edema (retaining fluid). Rest with your legs up. Lie on your left side while sleeping so blood flows from your legs back to your heart better. Reduce the amount of salt you eat if salt seems to make you retain fluid. Don't use diuretics (water pills).

Warnings

"Don't do this, don't do that." You've probably heard every old wives' tale. Here are some warnings worth heeding:

- Don't smoke. Smoking raises your risk for miscarriage, premature birth, low birth weight and many other problems.
- Don't use drugs. Cocaine, heroin and marijuana increase your risk of miscarriage, premature birth and birth defects. And your baby could be born addicted to the drug you've been taking.
- Don't drink alcohol. Drinking alcohol during pregnancy is the major cause of birth defects that could be prevented, including mental slowness.
- Don't clean your cat's litter box, or eat raw or undercooked red meat. You could get toxoplasmosis, a disease that can cause birth defects.
- Don't sit in the sauna or hot tub. This raises your risk of miscarriage and birth defects.
- Don't douche with a hand-held bulb. This could force air into you, which can cause problems with pregnancy

Rest and Sleep

A pregnant woman may become tired more easily and need extra rest. Eight hours of sleep each night with a short rest during the day can help a mother-to-be handle fatigue. The first three months and the last few weeks of pregnancy are usually the most tiring.

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Use of Medication and Drugs

Around 1960, a drug called thalidomide caused many birth defects. Almost all of these cases were reported in Europe. The drug had not passed enough tests to be marketed in the United States. The drug was used in a very effective sleeping pill and tranquilizer. It was also used as a cure for flu and nausea. Thus it was often prescribed by doctors for women in the early months of pregnancy when they were experiencing morning sickness.

The effect of the thalidomide was horrible. It interfered with the development of the fetus' limbs. Babies were born with no arms or legs, or with very short ones. In some cases, babies were born with hands sprouting directly from their shoulders. Other physical defects affecting the face, ears and internal organs also occurred. Most of the children are normal in their mental development, but their physical impairments will affect their entire lives.

The thalidomide example is extreme, but it shows the effect a drug can have on a fetus. Whenever an expectant mother is feeling ill, she should consult her physician. She should never take any drugs or medications unless they are recommended by her physician. This includes aspirin, vitamins, stomach remedies, laxatives, antibiotics and sleeping pills. The total effect of drugs taken during pregnancy is unknown, but a "better safe than sorry" approach is best.

Aspirin

Of the millions of Americans who opened their medicine cabinets today and reached for a bottle of aspirin, few thought twice – or even once – about its safety. And for most people, occasional aspirin use is not only helpful but perfectly harmless. But during pregnancy, there is concern that aspirin, like many other ordinarily innocuous over-the-counter remedies, may be hazardous.

If you've unwittingly taken one or two aspirins on one, or even a few, occasions in the first two trimesters, don't worry – there is no evidence they will hurt your baby. It's estimated that 1 in every 2 pregnant women takes at least one dose of aspirin during pregnancy, with seemingly no ill effect. For the rest of your pregnancy, however, it's advisable to treat aspirin as you would any other drug, taking it only when absolutely necessary and only when recommended by a practitioner who knows you're pregnant.

Aspirin use is most risky in the third trimester, when even one dose can interfere with fetal growth and cause other problems. Because it is an anti-prostaglandin, and prostaglandins are involved in the mechanism of labor, aspirin can prolong both pregnancy and labor and lead to other complications during delivery. And since it interferes with blood-clotting, aspirin taken during the two weeks before delivery can increase the risk of hemorrhage at delivery and even bleeding problems in the newborn.

Indiscriminately popping aspirin substitutes in place of aspirin isn't the logical solution in pregnancy. Though the moderate use of acetaminophen (Tylenol, Datril, Anacin III) in pregnancy appears to pose no problem, it too should be taken only when necessary.

Caffeine

"I find it difficult to start the day without my two cups of coffee. Is it true that caffeine isn't safe during pregnancy?"

Possibly. Caffeine (found in coffee, tea, colas and other soft drinks) does cross the placenta and enter the fetal circulation. Research suggests that the equivalent of one and a half to two cups of coffee a day can double the

risk of miscarriage. Until more is known, it certainly makes sense to play it safe and to try to start your day without those two cups of coffee.

Here are some additional reasons to give up caffeinated drinks during pregnancy. First of all, caffeine has a diuretic effect, drawing fluid and calcium – both vital to maternal and fetal health – from the body. If you're having a problem with frequent urination anyway, caffeine intake will compound it. Second, coffee and tea, especially when taken with cream and sugar, are filling and satisfying without being nutritious and can spoil your appetite for the nutritious food you need. Colas are not only filling but may contain questionable chemicals in addition to unneeded sugar. Third, caffeine can exacerbate your normal pregnancy mood swings and also interfere with adequate rest. Fourth, caffeine may interfere with the absorption of the iron both you and your baby need. Fifth, research suggests excessive caffeine use could result in temporary abnormal heartbeat, rapid respiration, and tremors in the newborn and the development of diabetes later in life. Finally, the fact that many women lose their taste for coffee early in pregnancy suggests that mother nature herself considers the substance to be unsuitable for pregnant women.