It's Never too Early to Plan.

Signing up for classes now is a reassuring first step to understanding the process of labor and delivery. Informed patients report better birth experiences, which is what every parent and baby deserves. At these classes, all questions are important because everyone wants to know the same things. Talking with other parents who also feel just like you do about pregnancy, birth and babies will be helpful.

The Family Care Birthing Center at Memorial offers a wide variety of classes that can help with many of the questions that new parents have. It is a good idea to begin those classes during the seventh month of pregnancy, just in case labor starts early. Whether evening hours or weekend day classes work best for you, the flexibility of Memorial’s classes can fit most parent’s needs.

Classes at the Family Care Birthing Center at Memorial are taught by experienced, caring professionals with a personal touch. Classes may be limited in size, so call 618-257-4826 to register today.

If this not your first time being a parent, refresher information and classes are available during a Special Delivery pre-admission visit. Call 618-257-6800 Extension 5853 and leave a message for the Special Delivery Nurse to schedule your visit.

You can also register online by visiting www.memhosp.com/services/familycarebirthingcenter and clicking on Childbirth Education Classes.

Two Months to Go.

Those Second Three Months!

Pregnancy in the second trimester, or second three months can be a terrific time! Most women begin to feel and look their best during these months and especially welcome change if the first trimester was not so easy!

The Good News.

During the fourth month, many women experience less of the nausea and fatigue that sometimes occurs with early pregnancy. As those discomforts begin to disappear, expectant parents can really enjoy the anticipation of the new baby.

Mom’s physical changes include a blossoming figure and shinier hair. Other developments will occur with this stage of pregnancy. Here are a few and the reasons why:

- **Larger Breasts.**  Mom’s breasts become larger due to the milk-producing hormones and glands being stimulated by estrogen and progesterone.
- **Growing Belly.**  As your uterus becomes heavier and expands to make room for the baby, your abdomen expands-usually more rapidly for Mom’s who’ve had previous pregnancies.
- **Braxton Hicks Contractions.**  Your uterus may start contracting occasionally to build strength for the big job ahead. At this stage, Braxton Hicks contractions should be weak, usually feeling them in the lower abdomen and groin. Contact your health care provider if the contractions become painful and regular. This could be a sign of preterm labor.
- **Skin Changes.**  As blood circulation to your skin increases, certain areas of your skin may become darker, such as the skin around the nipples, parts of your face and the line that runs from your belly button to your pubic bone. Your skin may also become sensitive to the sun. Always use sunscreen.
- **Stretch Marks.**  You may notice pink, red or purple streaks along your abdomen, breasts, buttocks, upper arms and thighs. Your skin is stretching and may become itchy, so keep it moisturized. Although stretch marks cannot be prevented, eventually they fade in intensity.
- **Nasal and gum problems.**  As pregnancy increases your circulation, more blood flows through your body’s mucous membranes. This causes the lining of your nose and airway to swell, which can lead to snoring, congestion, nose and gum bleeding.
- **Dizziness.**  Hormones cause your blood vessels to dilate and your blood volume expands to fill them. Your blood pressure may fall and cause occasional dizziness. If you are experiencing this feeling, remember to raise slowly, drink lots of fluids and lie on your left side to restore your blood pressure.
- **Emotional changes.**  Pregnancy is a psychological journey as well as a biological one. During the second trimester, you will notice the changes in your body’s shape and function. These changes may affect your moods. Some women feel heightened sexuality, others feel unattractive-especially as their bellies grow. Share these concerns with your partner.

Remember that you cannot plan or control everything about your pregnancy. Instead, learn as much as you can, make healthy lifestyle changes and focus on preparing a loving home for your baby.

For more than 50 years, Memorial’s approach to maternity care has made us one of this area’s leading maternity service providers. You, your baby and your family members are very important to us, and The Family Care Birthing Center at Memorial is proud to be an integral part of over 1,500 births annually.
Gestational Diabetes

Gestational diabetes is a form of diabetes that first becomes evident during pregnancy. The hormones made by the placenta can alter the way the body produces insulin. Insulin is a hormone produced by the pancreas that allows the body to turn sugar into energy that can be used by the body’s cells. Some women do not produce enough insulin during pregnancy. This can cause the mothers’ blood sugars to be elevated, resulting in larger babies and, at times, blood sugar problems at birth.

A woman’s age, weight, family history and ethnic background can all be contributing factors to developing gestational diabetes. This is why all pregnant women will be tested for gestational diabetes during their pregnancy. While it is considered a complication of pregnancy, gestational diabetes need not adversely affect the mother or fetus. It is a very treatable condition and can be well controlled through diet and exercise. Successful care is the result of a partnership between the patient, her physician and diabetic educator. At Memorial Hospital, we offer gestational diabetes education with an order from your physician. For more information about gestational diabetes education, contact the Center for Diabetes Education at 618-257-4800.

Weight Gain During Pregnancy.

Keeping a healthy weight during pregnancy is good for you and your baby. Good eating habits are crucial for weight control during pregnancy. Being overweight has become a major epidemic for many people in the United States, especially for women. When you become pregnant your physician will tell you how much weight you should gain during your pregnancy, based on your BMI. Calculate your BMI using the chart below. After you have determined that number, look to see how much weight you should be gaining, based on your current BMI.

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Weight in Pounds

Baby Care, or “What's a Mother to Do?”

Planning your baby’s personal care is very much in your thoughts right now. It helps to read about bathing and feeding and to ask questions about baby care, and it may also be helpful to babysit for a friend with a baby. You may be preparing a special room, or an area of your own bedroom, for the baby’s space. You may buy new items or you may borrow from your friends or relatives. Make sure everything, especially cribs and car seats meet today’s tougher standards on safety.

Choosing your baby’s healthcare provider is another important decision. You may wish to schedule a prenatal visit with the pediatrician or family practice physician to discuss your ideas on parenting and views on topics like breast feeding, circumcision and the future healthcare needs of your baby.

Sudden Infant Death Syndrome (SIDS)

There are no fool-proof ways to predict which babies will die from SIDS (Sudden Infant Death Syndrome). SIDS occurs in all socio-economic, racial and ethnic groups. Approximately 95 percent of SIDS deaths occur before six months of age, with the peak incidence at two to four months.

- Babies should never be exposed to any type of smoke.
- Babies should sleep on a firm, flat surface with no soft bedding present.
- Babies should not be overheated.
- Babies should never share a bed with anyone.

The American Association of Pediatrics no longer recognizes side sleeping as a reasonable alternative to sleeping on backs. Studies have shown that babies who sleep on their back swallow more often, have fewer ear infections at three and six months and experience less stuffy noses at six months.

At about five months of age, many babies begin to roll from their backs to their tummies. This is normal growth and development. Parents should be taught to always place babies on their backs to sleep, if they roll to their tummies they do not need to keep flipping them back.

Bed sharing is not recommended during sleep. Infants may be brought to bed for feeding or comfort, but should be returned to their own crib when the parent is ready to return to sleep. It is recommended to have infants sleep in the same room as adults, rather than bed sharing.

Several studies have reported a protective effect when pacifiers are used during nap and nighttime sleep. The effect is still unclear, but it is thought that pacifier use may lower arousal threshold. Pacifiers should not be introduced until breastfeeding is firmly established, usually around one month of age.

The MOST IMPORTANT point to remember is when they roll, they should be doing so in a safe sleep environment, free from soft bedding, pillows, stuffed toys, bumper pads and other objects.

The components of a safe sleep environment are:
- The CRIB...
- The firm MATTRESS...
- The tightly fitted SHEET...
- And... the BABY.

(AMERICAN ACADEMY OF PEDIATRICS (2005))

REMEMBER: Do not waste money on comforter and bumper pad sets. These items are not considered safe in an infant’s sleeping environment.
Tests... 4, 5, 6
A few more tests can be done after the first trimester to help your health care provider assess your health, or your baby’s. Some tests that may be suggested and performed could be:
• AFP - Alpha-fetoprotein is a blood test sometimes done in mid-pregnancy to help diagnose neural tube defects, abnormal development in the baby’s spinal cord. This test sometimes has false positive reports and alarms parents unnecessarily. For that reason, some parents may choose not to have the test.
• Glucose Tolerance Test - This test is used to help your health care provider diagnose diabetes in pregnancy. It is a safe and simple test in which you drink a sugar mixture and then have a blood sample drawn one hour later. If your one hour blood sugar is level is elevated, you may need to have a more complete one hour test done.
• Amniocentesis - This is a procedure in which amniotic fluid is removed from the uterus for testing or treatment. This fluid contains fetal cells and various chemicals produced by the baby. A genetic amnio may test for abnormalities such as Down’s syndrome, spina bifida and other neural tube defects. A genetic amnio may be recommended for moms aged 35 years or older. An amnio may also be performed near the end of the third trimester to test the baby’s lung maturity before scheduling an induction of labor or repeat cesarean section.

All In A Day’s Work
Expectant mothers who work outside the home usually continue to do so until close to the “due” date unless complications occur.
• Discuss your plans and needs with your health care provider. He or she can help decide whether your work is safe in your pregnancy.
• You may need to adjust the hours or workload to maximize your health, keeping in mind that long periods of standing or sitting can seem harder during late pregnancy.
• Whether the work is homemaking, office or factory work, taking breaks to stretch and then prop your feet will help you feel better.

What’s Going On? A Peek Inside!
Your baby is really growing now and you can probably tell. During the second trimester, the uterus has grown to reach your umbilicus, or belly button. You may no longer be able to wear those favorite jeans. By five to six months you can feel the baby move with your hand. Other family members may feel those kicks, too.

During this trimester your baby’s organs, nerves, and muscles that are developed will begin to function, too. Here are a few developments that you may not be aware:

• Urine forms. Your baby’s urinary tract is beginning to form urine and discharging it into the amniotic fluid.
• Baby’s sex becomes apparent. Your baby’s sex organs will continue to develop. Girl’s uterus, ovaries and a lifetime supply of eggs are in place. Boy’s testes descend from the abdomen.
• Facial expressions, hearing and sucking will become possible. More developed facial muscles may lead to squinting, frowned, sucking and eventually swallowing. Nerve endings from your baby’s brain “hook up to the ears” for them to hear your heart beat, stomach rumblings and blood moving through the umbilical cord.
• Fat and hair accumulates. Fat stores begin to develop under baby’s skin, providing energy and keeping them warm. Your baby’s body is completely covered in fine, down-like hair called lanugo which holds the cheese-like protectant on the skin. Towards the end of this trimester, eyebrows are visible, fingernails are developing and hair is growing on their heads.

A Bit More on Pre-Term Labor.
What you need to know:
Preterm labor is labor that occurs before your 37th week of pregnancy. (Most pregnancies last 38-42 weeks; your due date is 40 weeks after the first day of your last menstrual period.)

Preterm labor can happen to any woman: Only about half the women who have preterm labor fall into any known risk group. About 12 percent of births (one in eight) in the United States are preterm. Babies who are born preterm are at higher risk of needing hospitalization, having long-term health problems and of dying than babies born at the right time.

Three groups of women are at greatest risk of preterm labor and birth:
• Women who have had a previous preterm birth
• Women who are pregnant with twins, triplets or more
• Women with certain uterine or cervical abnormalities

Preterm labor may sometimes be stopped with a combination of medication and rest. More often, birth can be delayed just long enough to transport the woman to a hospital with a neonatal intensive care unit (NICU) and to give her a drug to help speed up her baby’s lung development.

Treatment with a form of the hormone progesterone may help prevent premature birth in some women who have already had a premature baby.

What you can do:
Call your health care provider or go to the hospital right away if you think you are having preterm labor. The signs of preterm labor include:
• Contractions (your abdomen tightens like a fist) every 10 minutes or more often
• Change in vaginal discharge (leaking fluid or bleeding from your vagina)
• Pelvic pressure—the feeling that your baby is pushing down
• Low, dull backache
• Cramps that feel like your period
• Abdominal cramps with or without diarrhea

Your provider may tell you to:
• Come into the office or go to the hospital
• Stop what you’re doing or rest on your left side for one hour
• Drink two to three glasses of water or juice (not coffee or soda)

If the symptoms get worse or do not go away after one hour, call your health care provider again or go to the hospital. If the symptoms go away, relax for the rest of the day. If the symptoms stop but come back, call your health care provider again or go to the hospital.

Been There, Done That.
Experienced moms know that no two pregnancies are the same. Some women notice fetal movements sooner and wear maternity clothing earlier with the second pregnancy. Even if this isn’t your first, go ahead and ask about any concerns.