

A WEEK BY WEEK GUIDE TO YOU

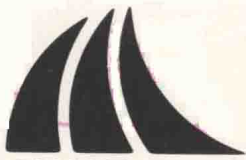


PREGNANCY

INA GRUNFELD

A WEEK BY WEEK GUIDE TO YOUR **PREGNANCY**

NINA GRUNFELD



GALLERY BOOKS

An Imprint of W. H. Smith Publishers Inc.

112 Madison Avenue
New York City 10016

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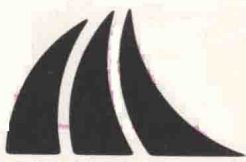
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Introduction



This book is a week-by-week guide to what is happening to you and your baby throughout your pregnancy.

On the left-hand pages, "You and Your Developing Baby" describes the physical and emotional changes you experience and the detailed development of your baby. You will find this a useful guideline although, of course, every woman – and every pregnancy – is different so you may feel that what appears under "You" in Week 7, for example, fits your Week 9 better. In the same way, the weights given for the baby – particularly in the later weeks – can only be an average guide.

You might like to use the diary space on the left-hand pages to write down important appointments and keep a note of your feelings; this will make an interesting record of your pregnancy for later on. We have given important reminders in the relevant weeks under "Don't forget": for example, your first prenatal visit, making a dental appointment or noting down when you first feel your baby kick.

The right-hand pages for each week feature particular aspects of pregnancy in some detail, from the first doctor's visit to shopping for the layette and baby equipment, as well as advice to expectant fathers and how to prepare yourselves for the birth itself. Some of these features, for example the amniocentesis test and ultrasound scan, are particularly relevant to a certain week while others may vary and many are relevant throughout your pregnancy. Cross-references are included wherever necessary

to help you find all the information you want and there is also a full index at the back of the book.

Since medically your pregnancy is dated from the first day of your last period, and not from the time of conception, you may not know you are expecting a baby until you are at least "five weeks pregnant" – which is actually about two to three weeks after conception, and around the time of your first missed period.

The first few weeks of this book will, in effect, have already happened! You will find them interesting to read before you start following the weeks of the guide. The weeks of your pregnancy may not run from Monday to Sunday as in this book. If, for example, the first day of your last period was a Wednesday, your pregnancy weeks will run from Wednesday to Tuesday. Use the week closest to your own timing.

Each week, fill in the Month and Dates at the top of the page for that particular week – for example, November 24th–30th – so that you can use the diary space for specific appointments.

Throughout the diary your baby is referred to as "he", not because of any bias but just to differentiate you, the mother, from your baby. The term "partner" has been chosen to cover the expectant father, no matter what his status.

During pregnancy you will come across lots of new words and terms, especially medical ones. There is a short glossary of the more important of these at the back of the book. Never allow yourself to be confused by

these – always ask the doctor what they mean if you do not understand the terms they are using.

There is also a list of useful addresses at the end of the book. Refer to the groups or associations if you would like more information about any particular topic. For example, if you are expecting twins you may like to know more than can be covered in this book and would find it helpful to contact the Mothers of Twins Clubs.

The forty weeks of pregnancy are conventionally divided into three terms, known medically as "trimesters". Many women find that, physically and emotionally, their pregnancy falls into three parts too. Forty weeks can seem a long time and you may find it helpful to have it broken down in some way. We have used colored bands to differentiate these three terms throughout the book and to help you relate the forty weeks to the actual months of your pregnancy.

A note about the author

When she was about fifteen weeks pregnant, Nina Grunfeld decided to write a book about what happens to mothers and their babies, week by week, during pregnancy. She was by then feeling well, happy and excited about her baby and wanted to convey the emotional ups and downs, the pleasures and concerns of pregnancy.

In Week 40 this book was finished and her first child, Michael, was born.

Nina Grunfeld is 34 years old, and this is her sixth book.

Week 1

Month: AUGUST '89 Dates: 8/14 ~ 20/89

MON

TUES

WED

THURS

FRI

SAT I DIDN'T KNOW I WAS PREGNANT YET!
(8/19/89)

SUN

Notes

PREGNANCY TESTS

The first, and most reliable, sign of your pregnancy will be a missed period. A less reliable sign will be that you just "feel pregnant". To test whether or not you are pregnant, you can buy a home testing kit from your pharmacist or you can have a pregnancy test done at your doctor's or your family planning clinic.

The most common pregnancy tests work by detecting a particular hormone in your urine. There is a more concentrated amount of this pregnancy hormone in the first urine you pass in the day, so you need to collect an early-morning sample in a clean, soap-free container. This hormone will show up about four weeks after conception, that is two weeks after the first day of your missed period. If you can't wait, a blood test can tell if you are pregnant before you have missed a period.

Follow the instructions with a kit very carefully. Positive results from a urine test are 99 per cent reliable. If your test is negative then it could be that there isn't yet enough pregnancy hormone to show up in a test. If your period doesn't start, have another test in a week's time.

This is one of several kinds of home testing kit. They all vary slightly so follow the instructions on the package.



Now you're pregnant

Congratulations on your pregnancy!

You may be one of the lucky ones who find the next forty or so weeks just fly by. Or you may feel pregnancy is a long process during which your body takes over your life. Every woman is different – and every pregnancy is too. Your feelings about pregnancy and parenthood will no doubt change constantly during the course of your pregnancy. Having a baby is rather like going on a blind date – but the build-up is forty weeks and the consequences lifelong!

The first fourteen weeks of your pregnancy may well be the hardest, so if you are feeling below par in the initial stages, take heart that things will improve. During early pregnancy, despite the excitement of expecting a baby, you may well feel exhausted and possibly sick. Even if you've been trying to get pregnant for a long time, the reality may make you scared; pregnancy in any case tends to make you over-emotional. You may also worry about the possibility of miscarriage and about whether your baby will be all right. All these fears are perfectly normal and should be discussed with your partner and, if you wish, with your doctor or midwife.

On a practical level you may wonder if you have the money, time or space for a child. If you include everything, up to and including college expenses, the cost of raising a child is staggering. But most people are able to handle it. It might be a good idea to start putting aside some money now, especially if you will be giving up work, and think about economies you can make in your living expenses.

For many women, the middle term of pregnancy is the most exhilarating time of their lives. Make the most of it: if you don't want to do certain things you have the perfect excuse for simply taking it easy. Alternatively, you may find you have enough energy for two during those weeks.

As you get more noticeably pregnant, friends will be full of advice. Listen to it all, but decide how much is relevant to you. Everyone is different and these forty weeks are a time for finding out about yourself.



You may well become introspective during pregnancy. This is a good thing. Use the opportunity to rest, relax and get to know yourself. It will be the last time you have on your own for quite a while.

During pregnancy you may feel very romantic and should enjoy these feelings. Your partner no doubt will appreciate all the attention and affection and it may be some time after your baby is born before you feel so sensual again.

Towards the end of your pregnancy it is perfectly natural to feel impatient for it to be over, especially if you feel heavy, unattractive and uncomfortable. You may be filled with conflicting emotions: on the one hand anxious about having the child and giving birth, and yet on the other hand feeling that by now you can't wait to hold your baby. These emotions are perfectly understandable: a new member of your family is about to arrive and you are bound to feel a mixture of excitement together with a reasonable degree of nervousness.

This diary is intended to keep you company during your pregnancy. Use it to write your appointments in, scribble down your feelings, draw pictures of yourself and your belly, or write lists of babies' names. Most of all, try to enjoy your pregnancy. There's nothing left to say but "Good luck".

Week 2

Month:

Dates: 8/21 ~ 8/27/89

MON

TUES

WED

THURS

FRI

SAT

SUN

Notes

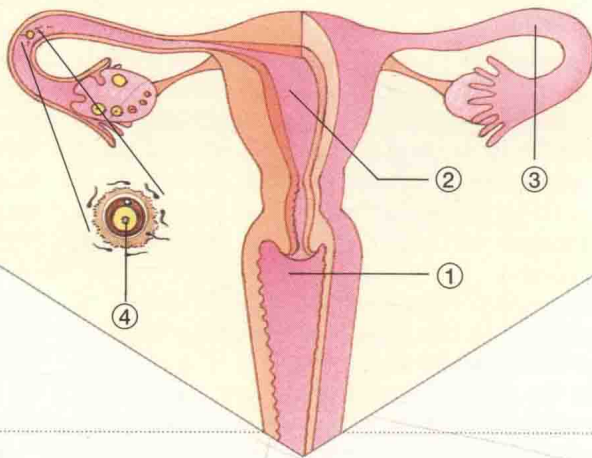
OVULATION AND FERTILIZATION

Ovulation happens each month. It is when a ripe egg, or ovum – a single cell just 0.005in (0.13mm) large – is released from one of your ovaries and travels along your Fallopian tube. At the same time the lining of your womb becomes engorged with blood ready to receive and nourish an embryo and the mucus in your cervix becomes thinner so that sperm can swim through it more easily.

Most women ovulate about fourteen days before a period, whatever the length of their menstrual cycle. If you have an average twenty-eight day cycle, you will have ovulated on about the last day of this week – fourteen days from the first day of your last period.

An egg lives for about twenty-four hours after being released from the ovary, so if you are going to conceive, the egg has to be fertilized within these twenty-four hours. For you to be pregnant, you will have had sexual intercourse shortly before or after you ovulated and your ripe egg will have been fertilized by your partner's sperm. Except in the case of twins, only one sperm will pierce the outer coat of your egg and fertilize it. Instantly the egg loses its attraction, hardens its outer shell and all the other sperm drop off.

Most of the 400 million sperm ejaculated into your vagina (1) leak out, but some swim up through your cervix, into your uterus (2) and then into your Fallopian tube (3) The sperm are attracted to the ovum (4) and stick to its surface.



Pregnancy dangers

Once you know you are pregnant, it's time to become more aware of your body and learn to trust your intuition. You must consciously avoid all risks to your unborn child, which means coming to terms with the danger inherent in smoking, drinking and taking drugs. Their possible harmful effects are greatest during the first trimester of pregnancy, when the baby's organs are forming.

Smoking

It is extremely important that you stop smoking as soon as you know you are pregnant. Ask your partner to stop smoking too, to help you give up. Some women who smoke find that they develop a dislike of cigarettes early on in pregnancy; this may even be one of the first ways they know they are pregnant. If you find it impossible to stop smoking completely, at least cut right down.

Smoking during pregnancy increases the risk of early miscarriage and the chances of possible complications at birth – or of a stillborn baby. It has been proved that women who smoke ten or more cigarettes a day during pregnancy have smaller babies. Their children are also at greater risk of having a lower intellect or of being born with mental or physical abnormalities.

Alcohol

It is sensible to cut out alcohol completely, especially for the first three months of pregnancy. If you are planning to become pregnant, it is wise to cut down or stop drinking alcohol. Research shows that drinking alcohol, even in moderation, increases the risk of miscarriage or of a low-birthweight baby. It may also make physical abnormalities, heart defects or some degree of mental retardation more likely.

It obviously helps if you stop drinking alcohol during pregnancy, but even if you don't, cut out hard liquor completely, and restrict alcohol to an occasional glass of wine or beer.

Drugs

Don't take any drugs without consulting your doctor during pregnancy. Many drugs can cross the placenta and cause severe abnormalities in the fetus; even aspirin and sleeping tablets can be harmful, and very

few antibiotics can be safely taken during the first three months of pregnancy. A few drugs do not cross the placenta and doctors are careful to prescribe only those known to be safe if you require treatment.

If you suffer from any illness or disorder for which you normally take drugs, tell your doctor if you are planning to become pregnant or immediately you suspect you may be pregnant – he or she may wish to change your course of treatment.

X-rays

Avoid X-rays if possible. If you do need to be X-rayed, it is important to stress that you are pregnant. A chest X-ray would be possible, for example, provided a lead apron was put over your stomach to prevent the rays reaching the baby.

German measles (rubella)

If you get German measles during the first three months of pregnancy your baby may be malformed, deaf, blind or born with heart disease. Rubella can also be the cause of miscarriage or stillbirth. Check whether you have been immunized against it, and keep well away from anyone who has German measles. Tell your doctor at once if you do come into contact with the disease.

How to stop smoking

- ☐ Think of your unborn baby, not just yourself.
- ☐ Tell everyone you are going to stop.
- ☐ Stop today – but keep a pack on you so you know you *could* start again.
- ☐ Put the money you would have spent on cigarettes in a glass jar so you can see how quickly it adds up.
- ☐ Change any habits related to cigarette smoking. Drink orange juice instead of tea or coffee (it's better for baby too).
- ☐ Avoid places where people are smoking.
- ☐ Keep your hands busy – start sewing or knitting baby clothes!
- ☐ If you become tense, breathe deeply and relax (see Week 29).
- ☐ Don't worry about not smoking forever, just worry about not smoking today.

Week 3

Month:

Dates: 8/28 ~ 9/3/89

MON

TUES

WED

THURS

FRI

SAT

SUN

Notes

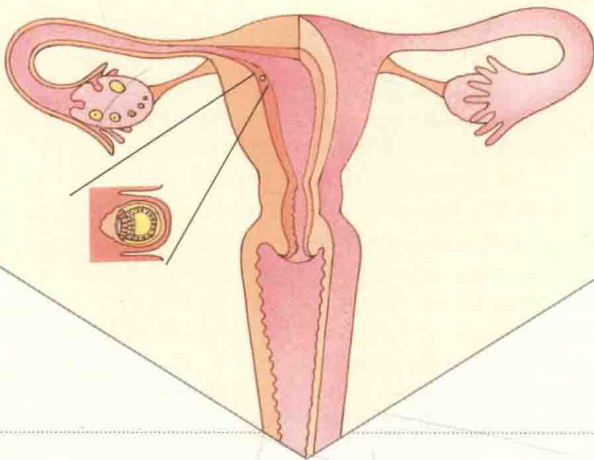
CONCEPTION

During the two weeks after fertilization, the cell that will become your baby multiplies quickly from a single-cell egg into over one hundred cells which will travel along your Fallopian tube until they reach your uterus.

Approximately thirty hours after fertilization, the fertilized cell divides into two identical cells. Roughly ten hours later these two cells divide again, making four cells in all. Within three days, the egg has divided into a total of sixteen cells, which get smaller and smaller with each division. At the same time, the cells are traveling along your Fallopian tube towards your uterus. By about the fourth day after fertilization, the egg, now a round, solid mass of over a hundred cells (and still growing), enters your uterus. It is now called a blastocyst and looks like a tiny blackberry. The blastocyst is formed of two layers: the outer one eventually becomes your placenta and the inner one, your embryo.

During the next few days the blastocyst floats free in the cavity of the uterus and is nurtured by "milk" secreted from the glands in the uterus lining. By the end of Week 3 the blastocyst will begin to attach itself firmly to your specially thickened womb lining, a process known as implantation. When this has happened, conception is said to have taken place.

Implantation usually takes place in the upper part of the uterus on either the left or right side, depending on which ovary ovulated.



Healthy eating

During pregnancy remember that you are having to provide nutrition not only for yourself but also for your developing baby. This doesn't mean you should go overboard on quantity but that you should eat a good, varied, high-protein diet rich in vitamins and minerals – so start now. Eat fresh food whenever you can and try to cut out sweets, sodas, cakes, canned fruit, packaged desserts and soups, and chocolate.

Below is a suggested meal plan which you could easily follow during pregnancy. It contains 1500 calories a day. (Your daily intake may well be more or less than this. Be guided by your own appetite and weight gain.) If you are hungry between meals eat raw vegetables or fresh fruit. If you follow a strict diet (vegetarian or macrobiotic), discuss this with your doctor: you may need to supplement it with extra minerals or vitamins (see Week 19). If you start feeling sick, follow the advice given in Week 7 and revert to this diet once the sickness is over.

What you need in your diet

Protein Pregnant women need at least 3oz of protein a day, especially if ill or tired. Eat two portions of meat or alternative (see Daily Allowances, right).

Carbohydrates These provide energy, but can make you fat. If you are overweight, eat wholewheat bread and avoid foods containing sugar, alcohol, white flour and rice.

Fibre Fibre (or roughage) will help prevent constipation. Foods with high fibre content are peas and beans; wholemeal bread and cereals; potatoes (especially their skins); fruit, vegetables and nuts.

Fats Cut down on fats. Trim fat off meat; don't fry food or drown it in rich sauces; eat low-fat yoghurt and semi-skimmed milk.

Milk and dairy products Dairy products contain calcium which is important for your baby's development. The diet below will be sufficient for most women during pregnancy, but if you need building up you will need more dairy products.

Vitamins and minerals (see Week 19)

Daily allowances

Milk: $\frac{2}{3}$ pint lowfat milk; lowfat cheese: 1oz; lowfat yogurt: 1oz; butter/margarine: $\frac{1}{2}$ oz; lowfat spread: 1oz.

Average portion of meat and alternatives

Meat: 3oz; white fish: 4oz; oily fish: 3oz; cottage cheese: 4oz; lowfat cheese: 2 eggs; cooked lentils or beans: 6oz.

Average portion of bread and alternatives

Wholewheat bread (1 slice); 1 potato; 1 tablespoon cooked rice or pasta; 1 tablespoon yam, sweet potato, plantain; 1 carton plain yogurt; 1 extra serving fruit; 3 tablespoons wholegrain cereal; 2 wholewheat crackers.

See Week 7
for advice on
Morning
Sickness

See
Week 19 for
Vitamins and
Minerals

Breakfast

Tomato juice or $\frac{1}{2}$ fresh
grapefruit
6 tablespoons wholegrain
cereal or 2 slices wholewheat
bread and butter from daily
allowance (see above)
1 egg or small slice lean
grilled bacon or fish
Milk from daily allowance

Mid-morning

Tea, coffee or low-calorie drink
1 fresh fruit or a small glass
of fruit juice

Lunch

Clear soup or tomato juice
Average portion of meat or
alternative
2 slices wholewheat bread or
alternative (see above)
Large serving of vegetables
or salad
1 fruit (as for mid-morning)

Afternoon

Tea, coffee or low-calorie
drink
1 fruit (as for mid-morning)

Evening meal

Average portion of meat or
alternative (see above)
2 slices wholewheat bread or
alternative
Large serving of vegetables
or salad
1 fruit (as for mid-morning)
1 low-fat yogurt or 1oz
lowfat cheese

Bedtime

Tea, coffee or low-calorie
drink

Week 4

Month:

Dates: 9/4 ~ 9/10/89

MON

TUES

WED

THURS

FRI

SAT

SUN

Notes

YOU AND YOUR DEVELOPING BABY

You This is the week of your first missed period. You may be aware of some slight body changes.

Baby At the beginning of Week 4 your pregnancy is just a mass of cells embedded in the lining of your uterus, nourished by the blood vessels there. During Week 4 the cells multiply rapidly and group together to make different structures. The outer cells surrounding the embryo reach out like tree roots sending projections into the lining of your uterus. Those which penetrate deepest form the basis of the placenta.

At the same time the inner cells of the embryo form themselves into two, then three layers, each of which will grow to be different parts of your baby's body.

Other cells are developing into the amniotic sac. By the end of the week the embryo is completely embedded in the womb and is just visible to the naked eye.



This mass of cells is an early stage of embryonic development. The surrounding pink ring is the debris of sperm that failed to penetrate the ovum.

Your due date

Medically your pregnancy is dated from the first day of your last period, and not from the time of conception. So, what is called "four weeks pregnant" is actually about two weeks after conception. Worked out like this, the average pregnancy lasts for forty weeks – the length of this diary. Use the chart below to work out the date your baby is due.

If your normal cycle is less than twenty-eight days, your due date or estimated date of confinement (EDC) will be a few days earlier than shown, since you ovulate earlier in a short menstrual cycle; conversely, in a cycle longer than twenty-eight days, you ovulate later and your due date will be a few days after the one shown in the chart.

Remember that this is just a rough guide – babies have a habit of arriving either early or late, hardly ever on time. Some people find it a good idea to give friends a due date about two weeks later than the actual one as it can be quite frustrating being constantly asked if the baby has arrived yet.

The trimesters

Pregnancy is divided into three trimesters (literally, thirds of pregnancy). The first is the first thirteen weeks, the second lasts from Week 14 to Week 27 and the third is from Week 28 until delivery.

The trimesters are a way of dividing up the forty weeks of pregnancy convenient to the medical profession, but you too will probably find that you naturally think of your pregnancy in three stages of roughly the same duration.

During the first trimester the fetus grows rapidly and all the different parts of the baby are formed. This is the period of greatest risk, both of miscarriage and of drugs causing congenital abnormalities. During the second and third trimesters the baby increases in size and his organs mature sufficiently for him to survive outside the womb. Many women feel at their best during the middle, or second trimester of their pregnancy.

See Week 7
for Morning
Sickness

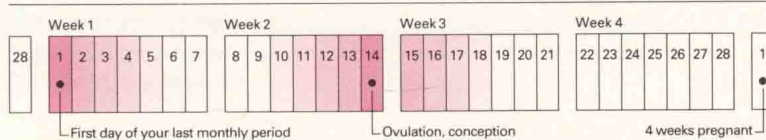
First signs

Morning sickness This is a misnomer. Many women feel sick all day or just in the evenings. Some women only feel sick, many actually are.

Tender breasts You may have already noticed your breasts becoming bigger and more sensitive as they can do before your period. They may also tingle slightly.

Exhaustion You may feel faint or dizzy or simply exhausted: try and rest.

Food and taste Some women experience a metallic taste in their mouth which affects their sense of taste. Others just stop eating some foods, commonly tea, coffee, alcohol, fatty and fried foods and fish. You may also get cravings for other foods.



JANUARY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	JANUARY
OCTOBER	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	NOVEMBER
FEBRUARY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28				FEBRUARY
NOVEMBER	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5			DECEMBER	
MARCH	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	MARCH
DECEMBER	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	JANUARY	
APRIL	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	APRIL	
JANUARY	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	FEBRUARY	
MAY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	MAY
FEBRUARY	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	1	2	3	4	5	6	7	MARCH
JUNE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	JUNE	
MARCH	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	APRIL	
JULY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	JULY
APRIL	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5	6	7	MAY
AUGUST	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	AUGUST
MAY	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	JUNE
SEPTEMBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	SEPTEMBER
OCTOBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	OCTOBER
JULY	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	AUGUST
NOVEMBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	NOVEMBER
AUGUST	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	SEPTEMBER
DECEMBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	DECEMBER
SEPTEMBER	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5	6	7	OCTOBER

Menstrual calendar (top)

This shows a regular 28-day cycle. Your pregnancy is dated from the first day of your last period, although you conceived about two weeks later.

EDC chart (above)

To find your expected date of delivery, look at the first day of your last period on the top line of figures – your due date (EDC) appears in bold type beneath.