

Southcoast Woman's Care

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Common OB Questions

The following questions deal with topics that are common to many women's experiences throughout their pregnancies. This information can be used as a resource to guide you through the more common health concerns that may arise. The staff at Southcoast Woman's Care, Dr. Michelle Hughes, Connie Gillett, NP, and Kathleen Larson, LPN, are always available to answer any questions that you may have beyond what is presented in this format.

Any questions you may have can be phoned in to our office during our regular business hours, 9 AM – 5 PM. We will answer your questions as expediently as possible.

Q. What is considered “normal” in regard to morning sickness?

A. Different women have different experiences with nausea and vomiting; even from one pregnancy to another. Some basic rules to keep in mind:

- Even though you may not feel like eating, especially with nausea, it is crucial to keep your caloric and fluid intake up during the first trimester.
- Try eating small amounts of food on a frequent basis.
- Avoid solid foods if nausea and vomiting persist; maintain high fluid intake (fruit juices, beverages, water, non-dairy) to guard against dehydration from vomiting.
- Avoid vitamins until nausea has passed.
- If you are unable to tolerate fluids for more than 24 hours or if you are experiencing a high fever (greater than 101) and/or severe abdominal pains with the nausea and vomiting, contact your doctor.

Q. What can be done about an increase in the feeling of indigestion, and how should I treat bouts with diarrhea?

A. Indigestion is a common occurrence during pregnancy. Try to stay away from rich (sauces/sugar), spicy, or greasy foods; cut down on coffee, carbonated beverages, alcohol, and general overeating. Sleeping with your head somewhat elevated (extra pillows) will help as well. You may use an antacid if you are in discomfort; make sure it is low sodium or sodium free.

As for diarrhea, decrease your intake of foods that are high in roughage (whole grain products, salads, etc.). Increase the amount of rice and bananas in your diet. Stop milk

products and vitamins until the diarrhea has subsided for a few days. You may use over-the-counter remedies such as Kaopectate. If you are unable to maintain fluid intake because of associated vomiting or if you experience a temperature greater than 101 and/or severe abdominal pain, contact your doctor.

Q. What kinds of exercise are safe to continue during pregnancy?

A. Let your doctor know during your first visit how active you are and which sports you currently participate in. Your doctor will comment on your particular situation. Do not newly start and exercise routine at this time without your doctor's O.K. Here are some basic guidelines:

- Weight training should be avoided unless physician-directed.
- Avoid situps after 12 weeks gestation
- Limit your exercise routine to 20-minute intervals with 30-minute recovery periods.
- Avoid a pulse rate greater than 140 beats per minute during your workouts.
- Don't exercise in hot, humid weather.
- Replenish your liquids generously during exercise.
- Any sport/exercise that may cause physical trauma is off-limits! (i.e., skiing, intense biking/cycling, mountain climbing, etc.)
- If you experience any severe shortness of breath, chest pain, uterine cramping or bleeding during exercise, stop immediately. If the symptoms persist, notify your doctor immediately.
- Do not use saunas when you are pregnant. Hot tubs/Jacuzzis are OK as long as the water temperature is less than 98.6 degrees.
- Cardiovascular exercise, in moderation, is encouraged during pregnancy; don't exercise above your limit.
- low-impact activity (i.e., swimming (no diving), walking, low-impact aerobics, stationary bikes, treadmill, stairmaster) is recommended in place of high-impact activity (jogging, running, high impact aerobics), especially after the 18th week of gestation.

Q. What does groin pain indicate?

A. Groin pain is associated with the round ligaments and is a routine condition of pregnancy due to the new and developing weight on that muscle group. It does not indicate a problem and is quite a normal occurrence during the second trimester. The pain can be sharp and persistent. It is aggravated by exercise, standing too quickly, heavy coughing or sneezing, or fetal movement. The pain can be alleviated with Tylenol, heating pad, and decreased activity.

Q. Is swelling normal during pregnancy? What can be done about it?

A. Swelling is a normal complication of pregnancy. Watch your sodium intake; it will help reduce the amount of water your body retains. Resting on your left side with your

legs elevated will also help. If severe headaches develop along with disturbed vision, contact your doctor.

Q. What about sex during pregnancy? How long can I continue to have it and will it be harmful to the baby?

A. Foreplay, intercourse, and orgasm are perfectly safe throughout your pregnancy. You may experience some uterine cramping (similar to menstrual cramps) during intercourse. Semen may often be the cause of the cramping; the use of condoms will help to reduce the severity of the cramps. If vaginal bleeding develops, abstain from further intercourse. If the bleeding becomes heavy notify your doctor. Breast stimulation is acceptable as long as there is no discomfort from cramping. Discharge from your nipples is common, especially after the 28th week of pregnancy.

Q. What about constipation?

A. Add more roughage to your diet (bran cereals, fresh fruits, whole grain bread/crackers, raw vegetables, etc.) Drink 8 glasses of water daily. If these measures are not successful, Metamucil and stool softeners (Colace = 2 pills/day or Senokot = 1-2 pills/6 hours) can be used. If your discomfort lasts contact your physician.

Q. How can hemorrhoids be most effectively treated?

A. Try to avoid being constipated or having diarrhea (see above). Over-the-counter products such as Preparation H and Anusol creams can relieve discomfort.

Q. What can I do to manage a cold or flu during pregnancy?

A. For both cold and flu symptoms, keep your fluid intake high and get extra rest. Do not take aspirin products unless you first consult with your doctor.

For colds: Tylenol, Sudafed, Cepacol, Robitussin DM can be used for symptomatic relief. Use a vaporizer for heated moisturized air. If you have a persistent sore throat, a throat culture may be necessary. If you develop a temperature greater than 101, contact your doctor.

For flu: Take Tylenol as directed for elevated temperatures. If your temperature persists at greater than 101 or if you cannot keep fluids down for more than 24 hours contact your doctor.

Q. What will happen if I come in contact with a contagious disease like measles, mumps, chicken pox?

A. If you've already had these diseases in the past, you are in no danger of contracting them again. If you've been exposed in the past but have no history of symptoms, avoid further exposure until you've spoken with your physician.

Q. What is fifth's disease, and should I be worried during my pregnancy?

A. Fifth's disease is a viral rash most common in school age children. Pregnant women are susceptible to the disease and it could cause fetal complications, in some cases, if contracted. If you work in a school or community setting with children you should have a blood test to determine your system's immunity to the strain. If there is an outbreak in your work setting, there is a 21-day incubation period from the last reported case; consult with your doctor.

Q. How will a history of herpes affect my pregnancy?

A. If you do have a history of herpes you should inform your doctor at your first prenatal visit. If you develop an active herpes outbreak near the end of your pregnancy, it may be necessary to deliver by cesarean section to reduce the risk of fetal exposure. If your water "breaks" during an active outbreak immediately call your doctor.

Q. Are tetanus shots safe during pregnancy?

A. If you are cut and risking infection (as in from a rusty nail) a tetanus shot is safe to prevent any infection that may prove harmful to both mother's and baby's health.

Q. What is normal for fetal movements during the progression of pregnancy?

A. Fetal movement is first noted during the 18th-22nd week of gestation. The movements should increase and become more noticeable thereafter. Movements will become even more apparent right after a big meal has been consumed. If you should notice a decrease of movement after the 23rd week, notify your doctor.

Q. Should airline travel be restricted during pregnancy?

A. It is safe to fly on a commercial airline (pressurized cabins) up until the 35th week of pregnancy. Flying in helicopters or on small private planes (non-pressurized cabins) is not recommended. All other forms of travel are acceptable as long as there is an opportunity to stop hourly, stretch, and use the bathroom.

Q. How safe are dental visits if Novocain is used and x-rays are taken?

A. Local anesthetics, such as Novocain, are safe during pregnancy. If general anesthesia or antibiotics are necessary your dentist must contact your obstetrician. If x-rays are necessary, a lead apron must be used.

Q. Is there any effect from exposure to chemical smells (such as perms, hair coloring, painting, fumigating, etc.) during my pregnancy?

A. There is no conclusive evidence as to the effect of hair treatment during pregnancy. As for other chemicals/fumes such as paint, sprays, etc., the area should be well ventilated and all directions from the manufacturer should be strictly followed.