

# **CONGRATULATIONS ON YOUR PREGNANCY!**



Pregnancy can be an overwhelming time for you with a number of things to think about. We have devised this sheet to help you with what happens next, the choices you have, dietary advice and vaccination advice.

Firstly, you have a choice of hospital for your delivery. The three most popular choices for our patients are:

- 1) Queen Elizabeth in Woolwich
- 2) University College Hospital Lewisham - The Birth Centre – Lewisham
- 3) St Thomas Hospital

(You also have the choice of private Midwifery Care, private Consultant Care and Home Birth. see 2<sup>nd</sup> page)

Did you know you can refer yourself to any of the above hospitals for an appointment with one of our midwives without speaking to one of our GP first?

For Lewisham and Greenwich hospital you can self-refer by calling the midwife hotline on 07787 841 986 or fill an online self-referral form for Maternity Services (<https://www.lewishamandgreenwich.nhs.uk/maternity>)

For St Thomas' Hospital you can self-refer by filling in an online referral on the following website: <http://www.guysandstthomas.nhs.uk/our-services/maternity/overview.aspx>

You should receive an appointment for an Ultrasound scan between 11 and 13 weeks and also an appointment to see the Midwives for a booking visit.

The booking appointment involves asking a lot of questions about your health and gives you information on various aspects of your care and about further appointments. You will be given a folder for you to carry with you when you attend for future appointments.

Emma's diary and other maternity publications that may be of interest to you, together with form FW8 to apply for free prescriptions and dental care – available to everyone, will be available from reception as you leave. Please ask the receptionist on duty. (Emma's diary can also be downloaded online on the following link: <http://www.emmasdiary.co.uk/>)

Blood Tests will be taken at your first visit to the hospital.

## **FREQUENCY OF ANTE-NATAL VISITS**

The following number of appointments is generally recommended in uncomplicated pregnancies:

- First pregnancy - 10
- Subsequent pregnancies - 7

From around 24 weeks your antenatal appointments will usually become more frequent. However, if your pregnancy is uncomplicated and you are in good health, you may not be seen as often as someone who needs to be more closely monitored.

Later visits are usually quite short. Your midwife or doctor will:

- check your urine and blood pressure
- feel your abdomen (tummy) to check the baby's position
- measure your uterus (womb) to check your baby's growth
- listen to your baby's heartbeat if you want them to

You will see your community Midwife but you may be asked to see your own GP on some occasions

### **SECOND SCAN**

The second scan is performed between 20 and 22 weeks. This is called an anomaly scan and is a detailed physical check of your baby. The appointment is made at the hospital after your first scan is done.

### **WHAT TO BRING TO AN ANTENATAL VISIT**

- Urine sample (a mid stream specimen if possible)
- Your hospital notes (community midwife will give you these around 10-12 weeks)
- A list of any questions you want to ask us.

**The Maternity Certificate (Mat B1)** can be obtained via reception. No appointment is needed, but the doctor may want to speak with you. This is given at or after 24 weeks.

### **TYPES OF CARE AVAILABLE**

#### **Antenatal care with the Community Midwives/ Hospital (called shared care)**

- During your care you will meet all or most of the Community Midwife Team.
- One of these midwives will be present at the birth of your baby, but there are no guarantees that this will happen.
- Set appointments.
- The Cutty Sark Team will visit postnatal. This team is based in this area and care for all post natal women regardless of where they delivered.
- Clinics are held in the Community.

#### **Antenatal/Delivery and all postnatal care from an Independent Midwife**

- Details can be found at <http://www.independentmidwives.org.uk/>

#### **Antenatal care at NHS hospital or private hospital**

- The care is shared with the GP midwife at the hospital of your choice.

#### **Private care**

Care is given by your own private consultant at St Thomas's, The Portland Hospital or a hospital of your choice

## **PARENCRAFT / ANTENATAL CLASSES**

### **Hospital Classes**

These commence around 32 weeks and the hospital of your choice will discuss these with you and arrange. There are usually a maximum of 3/ 4 classes.

### **National Childbirth Trust Classes**

These commence at approx 29/30 weeks. Most classes are held in the evenings or at weekends locally and are in smaller groups (max 8 couples). There is a cost for these classes. £120+ BOOK EARLY to ensure a place on the course – 08704 448707 (Enquiry Line) Leave your details on their answer phone or log on to [www.nct.org](http://www.nct.org)

## **DIET**

During pregnancy it is important to continue to eat a healthy balanced diet. You may have an increased appetite but it is not necessary to 'eat for two', even if you are having twins or triplets. Too much weight gain increases your risk of developing problems later in the pregnancy. Also, extra weight is difficult to lose after the birth. According to the World Health Organization, for women with a normal pre-pregnancy weight, a weight gain of 10-14 kg over the pregnancy is associated with the lowest risk of pregnancy complications.

### **Foods and drinks to avoid**

You should not eat the following if you are pregnant:

- **Anything with a lot of vitamin A.** You need a small amount of vitamin A to keep healthy. However, large amounts can harm an unborn baby. So, avoid:
  - Liver and liver products such as liver pâté and cod liver oil supplements.
  - Vitamin tablets or supplements which contain vitamin A
- **Food which may have high levels of Listeria.** This bacterium (germ) does not usually cause problems in people who are not pregnant. However, pregnant women are more likely to become infected with Listeria, and it sometimes causes miscarriage, stillbirth, or infections in the baby after birth. Foods which are most at risk of carrying Listeria are:
  - Undercooked meats and eggs. This may occur in some pre-cooked meats and pre-prepared meals. Make sure all meat foods are cooked until piping hot. Eggs should be cooked until the white and yolk are solid. Avoid foods that may contain raw eggs, such as some types of mayonnaise and mousse.
  - Mould-ripened and soft cheeses such as Brie, Camembert and blue-veined cheeses. (Hard cheeses and processed cottage cheese are safe.)
  - Pâtés - including vegetable pâtés.
  - Raw shellfish and raw fish.
  - Unpasteurised milk. **Note:** goat's milk is often unpasteurised, and goat's milk products such as cheeses are often made from unpasteurised milk.
- **Certain fish (as described earlier).**
- **Limit the amount of caffeine** to no more than 200 mg per day.

## Vitamins and supplements

**Folic acid:** you should take folic acid tablets (supplements). Ideally, do this from at least one month before you get pregnant, and continue taking them until at least the end of the 12th week of pregnancy - even if you are healthy and have a good diet. Folic acid is a naturally occurring vitamin found in spinach, sprouts, broccoli, green beans, and potatoes. Some bread and breakfast cereals are fortified with folic acid. However, you need a good supply of folic acid when you are pregnant to help with the development of the baby. If you take folic acid tablets in early pregnancy you reduce the risk of having a baby born with a spinal cord problem such as spina bifida. There is evidence that folic acid also reduces the risk of having a baby born with a cleft lip and palate, a heart defect (congenital heart disease), and the risk of a premature (preterm, 'prem' or early) labour.

**Vitamin D supplements:** Vitamin D is needed for growth and supplements are recommended for all pregnant women, breast-feeding women and breast-fed babies. The dose if you are pregnant or breast-feeding is 400 units (10 micrograms) daily. Some experts think that women who get little or no sunshine on their skin need a higher dose, such as 800 units (20 micrograms) daily. This is because most of the vitamin D that we get is made in the skin with the help of sunlight. Your doctor will advise. Pregnant women can get free prescriptions and vitamins.

For further information on a healthy and diet, see web link below:

<http://www.patient.co.uk/health/diet-and-lifestyle-during-pregnancy>

## **RECOMMENDED VACCINATIONS**

### **Pertussis (whooping cough) vaccination programme for pregnant women**

Pregnant women are to be offered the whooping cough vaccination to help protect their newborn babies.

The purpose of this programme is to protect infants by boosting Pertussis immunity in pregnant women. As most women will have been vaccinated or exposed to natural whooping cough in childhood, if they are given pertussis vaccine during late pregnancy this will temporarily boost the woman's antibody levels. This enables the mother to transfer a high level of Pertussis antibodies across the placenta to her unborn child, to passively protect her infant against Pertussis until he/she is due the first dose of primary immunisations at 8 weeks of age.

The vaccine is offered to women from **16 weeks** of their pregnancy. We advise generally to arrange this after **20 weeks** of pregnancy when you have had your anomaly scan. It is most effective given before **32 weeks**.

The vaccine can be offered to pregnant women until they go into labour. However this is not the optimal time for immunisation.

## **Influenza**

You are advised to have the injectable flu vaccine, regardless of the stage of pregnancy you've reached.

That's because there's strong evidence to suggest that pregnant women have an increased risk of developing complications if they get flu. Benefits include:

- reduces your chance of getting serious complications of flu, such as pneumonia, particularly in the later stages of pregnancy
- reduces your risk of having a [miscarriage](#) or your baby being born prematurely or with a low birth weight, due to flu
- will help protect your baby because they will continue to have some immunity to flu for the first few months of their life

It's safe to have the flu vaccine at any stage of pregnancy, from conception onwards. The vaccine doesn't carry any risks for you or your baby.

Refer to following web link for more information on the vaccination programme:

[http://www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb\\_C/1317136400742](http://www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb_C/1317136400742)

## **BLEEDING IN EARLY PREGNANCY**

If you show signs of bleeding during the early stages of pregnancy you should consult your doctor or midwife.

If the bleeding is lighter than a normal period, call the next working day and we will arrange an Early Pregnancy assessment. If the bleeding is heavier than a normal period or if you are experiencing pain, call the surgery or call out of hour's service on 111.

## **TRAVELLING WHILST PREGNANT**

It is okay to fly if your pregnancy is uncomplicated up to 32 weeks. The airline or travel insurance company may request a 'Fit to Fly' letter from your GP. There is a £15.00 charge for this.

## **MATERNITY BENEFITS**

Please refer to [www.gov.uk](http://www.gov.uk) for more information on the benefits you may be entitled to during your pregnancy.