Good nutrition is always essential for good health. It is particularly important during pregnancy. Now that you are pregnant your diet will need to contain extra nutrients to provide for:

- the growth and development of your baby and
- to maintain your own health

Be sure to choose healthy meals and snacks from the following guidelines where possible:

**Breads and Cereals: 8 ½ serves.**
- One serve is a slice of bread, ⅔ cup of breakfast cereal, ¼ cup of muesli or ½ cup cooked rice or pasta.
- Wholegrain varieties of breakfast cereal, bread, crackers, pasta and rice are best and contain more fibre, vitamins and are normally more slowly absorbed and more ‘filling’.

**Fruit and Vegetables: at least 5 serves of vegetables and 2 serves of fruit.**
- One serve is a cup of salad vegetables, ⅔ cup of cooked vegetables, 1 small potato, 1 medium piece of fruit, ½ cup fruit juice, 1½ tablespoons of sultanas or 4 dried apricots.
- Choose from fresh, canned and dried fruit and fresh or frozen vegetables. Frozen vegetables are just as nutritious as fresh and are a useful stand-by.
  - As fruit juice contains a lot of natural sugar, it is better not to drink large amounts, if consumed try diluting with water.
  - Include at least two fresh pieces of fruit per day.

**Meat, Legumes, Eggs and Nuts: 3 ½ serves.**
- One serve is 2 large eggs, 30g of nuts, 1 cup canned beans/legumes (e.g. baked beans or kidney beans) 65g of cooked lean meat, 80g cooked poultry or 100g of cooked fish.
- As well as being a rich source of protein, these foods are good sources of iron and zinc. If you do not eat animal products, be sure to include legumes and nuts as part of a well-balanced vegetarian diet and ensure an adequate vitamin B12 intake.
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Dairy Products: 2 ½ serves.

- One serve is a cup of milk or calcium-fortified soy/nut milk, 40g of cheese or a 200g carton of yoghurt. Although your calcium needs are not increased during pregnancy it is still important to have at least 2 ½ serves per day. Milk can be used on cereals, in smoothies, hot drinks, desserts, soups and white sauces. Fat reduced varieties are generally best and are higher in calcium. If you do not drink milk or a soy/nut drink which is fortified with calcium, it is wise to talk to your doctor or Dietitian about taking a calcium supplement.

Extra nutrients

- **Protein** — Protein is needed for growth, development and repair of muscles and tissue and is the basis of body tissues, blood cells, hair and nails. It is required for many different chemical reactions in the body and is used in the body’s protective system to help fight infections.
  - Best sources include: lean meat, poultry fish, eggs, legumes, soy products, nuts

- **Calcium** — Calcium is needed for the development of strong bones and teeth. If your diet is inadequate during pregnancy, the calcium in your bones will be used to supply the baby with adequate calcium leaving you more susceptible to osteoporosis.
  - Best sources include: dairy foods or calcium fortified soy products.

- **Iron** — Iron helps carry oxygen around the body, fights infections and helps provide energy. During pregnancy, additional iron is needed as a result of your blood volume increasing and to provide the developing foetus with enough iron stores to last through the first 4-6 months of life. Hence, your iron requirement is 2-3 times higher.
  - Best sources include: 1) animal sources: red meat, chicken, fish, turkey and eggs and 2) vegetable sources; baked beans, lima and kidney beans, leafy green vegetables, prunes, wholegrain breads and cereals.
  - **Note:** Vitamin C improves iron absorption
• **Folic Acid/Folate**— is needed for growth and development and is especially important at least 1 month before pregnancy and for the first three months of pregnancy to help reduce the risk of abnormalities such as spina bifida.
  - Recommended intake doubles during pregnancy and supplements may be required.
    Best sources include: asparagus, spinach, brussel sprouts, legumes, yeast extracts (e.g. vegemite, marmite) and folate-fortified breakfast cereals/breads.
• **Fibre**— Fibre helps prevent constipation, promotes satiety (feeling of fullness) and helps control blood sugar levels and cholesterol.
  - Best sources include: wholemeal/wholegrain breads and cereals, vegetables legumes and fruit.

**Do I need supplements?**

• A folic acid/ folate supplement (0.5mg/day), one month before and for the first 3 months of pregnancy is recommended. Some doctors routinely recommend iron supplementation during pregnancy. If you eat well, are only expecting one child and are in good health, supplements are generally not required.
• Unless recommended by your doctor, be aware of any supplements taken regularly or in large amounts as these can be potentially harmful. This includes ‘natural’ supplements - always consult with your doctor first.
Morning sickness (not always in the morning!)

- Morning sickness is usually caused by the hormonal changes of pregnancy and can effect you at any time of the day.
- Maintain a good fluid intake. Sips of dry ginger ale or lemonade may help.
- Eat a high-carbohydrate diet. Include foods such as dry toast, honey, banana, baked potato, muesli and other wholegrain breakfast cereals, steamed rice, tofu.
- Eat a small snack of dry biscuits, potato crisps or a small drink of juice before getting out of bed. Perhaps prepare this before going to bed in the evening.
- Try smaller meals and eat snacks more frequently so that your stomach isn’t too empty or full, even through the night if you are awake.
- Avoid fatty or fried foods, highly seasoned foods and foods with strong odours.
- Try cold food as they have less of an odour e.g. cold meat, cold custard or yoghurt.
- Do not drink alcohol or smoke and limit coffee to no more than 3 cups during the first trimester.
- Try peppermint tea to settle your stomach.
- Try relaxation techniques to help relieve nausea.
- Make sure you get lots of love and support from family and friends.
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Constipation and haemorrhoids

- During the latter part of pregnancy, this is quite common as the uterus pushes on the stomach and slows the rate of food moving through the gut. Constipation and haemorrhoids may persist for a short period post-delivery. The following hints may help digestion:
  - Drink plenty of fluids (at least 6-8 glasses per day)
  - Increase your fibre intake by choosing:
    - Wholegrain breads and cereals
    - Whole fruit and dried fruit (e.g. prunes and figs)
    - Select legumes e.g. baked beans, lentils, chickpeas
    - Psyllium husks (up to 1-2 Tbs/day) added to cereal
  - Regular exercise such as walking or swimming can help maintain and build muscle tone in the gut
  - If you are taking iron supplements but are not anaemic, discuss ceasing these with your doctor

Fatigue

To help control fatigue due to pregnancy, the following may help:

- Have plenty of rest
- Avoid skipping meals
- Plan easy to prepare meals
- Have nutritious snacks on hand e.g. dried fruit and nuts, cheese, yoghurt, baked beans, bread, muffins and milk/soy based drinks
Heartburn and indigestion
This can occur later in pregnancy due to the uterus expanding and pushing on the stomach. The following may help alleviate heartburn and indigestion problems:

- Eat smaller meals more frequently
- Sips of peppermint tea or milk may help
- Eat slowly and ensure you are sitting upright while eating
- Avoid spicy, fatty or fried foods
- Try to avoid bending or lying down within 1-2 hours after a meal
- Raise the head of your bed if possible or use extra pillows to prop yourself up in bed
- Consult your doctor before starting any antacids

Managing your weight
Weight gain is a normal sign of a healthy pregnancy. The weight you are gaining is the extra blood supply, increased breast tissue, the growing baby and placenta.

You are not eating for two! Try not to overindulge with high sugar and high fat foods as this will lead to excessive weight gain. This is extra weight you will have to lose after pregnancy.

Pattern of weight gain
The pattern of weight gain is more important than the amount of weight gained. During the first trimester (first three months), women gain an average of 1-2kg.

Weight gain is more rapid in the second trimester and slows a little in the third trimester. Women gain on average 400g per week in this period.
**Recommended weight gain during pregnancy**

<table>
<thead>
<tr>
<th>BMI</th>
<th>Recommended weight gain (kg)</th>
</tr>
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<tbody>
<tr>
<td>Underweight (BMI &lt; 19.8)</td>
<td>12.5-18</td>
</tr>
<tr>
<td>Normal weight (BMI 19.8-25)</td>
<td>11.5-16</td>
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<tr>
<td>Overweight (BMI 25-30)</td>
<td>7-11.5</td>
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<tr>
<td>Obese (BMI &gt; 29)</td>
<td>7</td>
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<tr>
<td>Twin Gestation (any BMI)</td>
<td>16-20</td>
</tr>
<tr>
<td>Triplet Gestation (any BMI)</td>
<td>23</td>
</tr>
</tbody>
</table>

Sources:


**What if I am underweight?**

Women who are underweight need to put on more weight and should aim for an average weight gain of 500g per week in the second and third trimesters.

Underweight women or those with inadequate weight gain need to supplement their diet with nutritious snacks e.g. dried fruit and nuts, milkshakes, smoothies, toasted sandwiches, cheese and biscuits.

A suitable supplement mid-meal such as Sustagen may also be helpful.
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What if I am overweight?

Weight reduction is not recommended during pregnancy. It can result in lower birth weight infants who are at risk of illness.

Overweight women or women who are experiencing excessive weight gain during pregnancy, should follow the healthy eating guide, adhering to the recommended number of serves and avoiding any extras.

Try to limit weight gain to approximately 9kg - an average weight gain of 300g per week in the second and third trimesters.

Exercise: regular daily exercise will help with appropriate weight gain.