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Many months, many changes
An inside look on what really goes on with your body

**MEDIA
PLANET**

PREGNANCY WELLNESS

5
TIPS

READY FOR A BABY?

Actress Kaitlin Olson shares her experiences from her first pregnancy and some tips for surviving the all-important nine months.

PHOTO: ANTHONY ELGORT



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OBSTETRICIANS AND GYNECOLOGISTS

CHALLENGES

Pregnancy is an exciting time of major change. Having a baby transforms every part of your life. Each woman is different, and each birth is a special delivery for the more than 4 million babies born in the U.S. each year.

Take care of your baby right from the start

The American Congress of Obstetricians and Gynecologists (ACOG) is the preeminent authority on women's health and provides leadership and guidance on all aspects of maternity care. Our specialty is committed to making pregnancy and childbirth as safe as possible.

A good start

The good news is that most women adjust successfully to all the changes pregnancy and new parenthood entail. The odds of having a healthy pregnancy and baby are overwhelmingly in your favor. Even though you can't control everything, there are steps you can take right from the start. Eat a balanced, nutritious diet; engage in moderate exercise on a regular basis; keep weight gain in check; abstain from alcohol; don't smoke; and check with your doctor before taking any prescription or over-the-counter medications.

The best way to approach pregnancy, labor, delivery, and the postpartum period is to be informed. And while knowledge is power, it's important to remember that not all sources of health and pregnancy information—easily found in the plethora of pregnancy books and on the Internet—are trustworthy and reliable. This is why it's now more important than ever to work hand-in-hand with your obstetrical provider, who can help sort it all out—team work is the best way to help ensure an optimal pregnancy. Check out ACOG's consumer website for information and interactive tools to help you navigate pregnancy, www.yourpregnancyandchildbirth.com.

Speak up

You have many important decisions facing you as mother-to-be. Bring your questions to each prenatal visit and be sure to discuss any special concerns you might have, such as the available types of pain relief during labor, the



Richard N. Waldman, MD
President, ACOG

BEST TIP

! Get prenatal care early and at appropriate times throughout your pregnancy. And make an effort to maintain a healthy lifestyle right from the start, even before you get pregnant. By taking good care of yourself throughout your pregnancy, you can be confident that you've done everything you can to help minimize any risks and to keep you and your baby safe.

appropriate timing and medical reasons for a cesarean delivery, the various tests used to monitor the baby's well-being, or how to recognize when you're in labor.

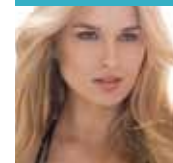
Our specialty is dedicated to helping you have a healthy and successful pregnancy and a positive birth experience. We are your partner in health.

Richard N. Waldman, MD, is also chair of the ob-gyn department at St. Joseph's Hospital Health Center in Syracuse, NY, president of the Associates for Women's Medicine, and clinical associate professor of ob-gyn at Upstate Medical Center, the State University of New York.

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WE RECOMMEND



Runway looks that will keep you feeling your best.

PAGE 14

"...a relaxed stylish look that flatters the pregnant silhouette."

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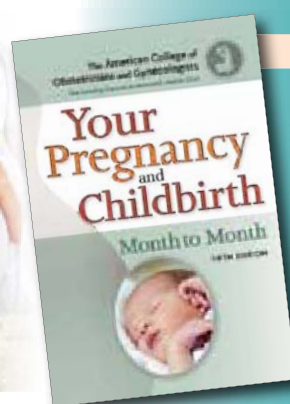
PREGNANCY WELLNESS 1ST EDITION, JUNE 2010

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Distributed within:
USA TODAY, June 2010. This section was created by Mediaplanet and did not involve the USA TODAY or its Editorial Departments.
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NEWS

Options for infertility: When you can't get pregnant

■ **Question:** What do you do if you can't conceive?

■ **Answer:** The reasons for infertility are varied, but treatments do exist and are often successful.



PHOTO: Ing Fertility

Approximately one in eight couples, or 7.3 million Americans experience infertility, a problem that becomes more common with age. According to the American Society for Reproductive Medicine, couples should seek out a fertility specialist if pregnancy hasn't occurred after a year of unprotected sex, or six months if the woman is over 35.

Why you can't conceive

Couples are infertile for many reasons, age being just one. A woman may have problems with ovulation or blocked fallopian tubes. A man may be infertile due to the amount or quality of sperm. Sometimes no reason can be found.

In some cases, infertility may be due to a lifestyle problem such as poor nutrition, smoking, a history of sexually transmitted diseases, and obesity. Studies show that even the use of everyday vaginal lubricants can affect sperm and the ability to conceive. Couples trying to conceive should use a fertility friendly lubricant.

Treating infertility

Fortunately, couples have several

options for overcoming infertility, says Alan Copperman, MD, co-director of Reproductive Medicine Associates of New York in Manhattan. "The majority of people who come in for treatment are able to go home with a healthy baby," he says.

The first step in treating infertility is to determine whether the problem is with a woman's eggs, fallopian tubes, or uterus, or whether it's the man's sperm. Women with an ovulation problem may require drugs such as clomiphene (Clomid), an oral drug that normalizes ovulation by causing the pituitary gland to make more follicle-stimulating hormone (FSH) or injectible gonadotropins like Gonal-f® (follitropin alfa for injection), a recombinant FSH.

For some couples, in vitro fertilization (IVF) may be required. With IVF, a woman's eggs are fertilized with sperm in a lab, then placed in the woman's uterus to grow. Usually medicine is first taken to stimulate the growth of eggs. The eggs are removed before ovulation, combined with the sperm, and then placed in the uterus in a procedure known as embryo transfer.

IVF may also be done with donor eggs or sperm. "There are times when a woman in her mid 40s isn't making normal eggs anymore," Copperman says. "Donor eggs may be offered and fertilized with the husband's sperm and transferred to the woman's uterus."

When the problem is his

For about half of infertile couples, the problem lies with the man, says Stan Honig, MD, a urologist in Stamford, Connecticut, who specializes in male infertility. "An early evaluation, which includes a history and physical exam, is important to identify treatable and reversible problems, such as enlarged veins," Honig says. A semen analysis can reveal whether the quality, quantity, or mobility of the sperm is a factor. Lifestyle issues such as cigarette smoking, recreational drug use (including anabolic steroids) and various medications can also impact fertility.

TIP

1

QUIT SMOKING



QUESTION & ANSWER



David Stern
Executive Vice
President
Endocrinology
EMD Serono

What kind of financial assistance does EMD Serono provide to couples struggling to conceive and considering infertility treatments?

! We recognize and understand the difficulties couples face, especially in this tough economic climate. Approximately 60-65 percent of patients under the care of a fertility specialist discontinue their treatment before completion, many due to cost. In this current economy, this percentage may rise.

At EMD Serono, we offer FertilityAssist two, a patient assistance program that will provide up to \$500 in savings on EMD Serono medication to eligible cash-paying patients during their second treatment cycle. The program is designed to help couples experiencing infertility by easing the financial burden and providing a discount to patients, which will help them stay in treatment longer. Last year, FertilityAssist two saved patients \$4 million in drug costs.

We also try to help patients through their journey with FertilityLifeLines™, a free resource available at 1-866-LETS-TRY (1-866-538-7879) and on-line at FertilityLifeLines.com. These resources provide infertility information, EMD Serono product support, and emotional support in this difficult time.

WINNIE YU

editorial@mediaplanet.com

Know the truth about fertility and pregnancy

Myths abound when it comes to fertility and pregnancy. Here's the truth behind several common ones.

■ **Myth:** Being young and healthy means no problems.

■ **Truth:** About one in eight couples struggle with infertility. "Egg-factor infertility is more common in older women, but ovulatory problems, tubal disease,

the male factor, and other causes can interfere with conception at any age," says Alan Copperman, MD, co-director of Reproductive Medicine Associates of New York.

■ **Myth:** If we keep trying long enough, we're bound to conceive.

■ **Truth:** Infertility is a condition of the reproductive system that impairs the body's ability to

reproduce. Seek medical help if you are unable to become pregnant after one year of unprotected intercourse, or after six months if the woman is over age 35.

■ **Myth:** Infertility is a woman's problem.

■ **Truth:** Men can be the cause of infertility, too, says Paul J. Turek, MD, a urologist and director of the Turek Clinic in San Francisco.

"The most common fertility issue in men is an abnormal semen analysis due to a varicocele, an anatomic problem in which excessive scrotal veins develop at puberty," he says. "The excess veins can impair sperm production by overheating the testis. It is correctable with surgery."

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INSPIRATION

Question: What can women do to make sure they have a healthy pregnancy?

Answer: Pregnant women need to pay attention to their lifestyle habits in these nine months.

Staying well in pregnancy

LEADER TO LEADER

Healthy habits always matter, but they're especially important during pregnancy. "Establishing and maintaining optimal physical health in pregnancy is important, not only so you can enjoy your pregnancy, but so you can help ensure a healthy baby," says Michele Brown, MD, an Ob-Gyn in Stamford, CT, and founder of Beaute de Maman. Here's what you need to know.

Eat well

A healthy diet is critical during pregnancy when your need for folic acid, calcium, and iron goes up. Folic acid, found in leafy greens, fortified breakfast cereals, and enriched grains, helps guard against neural tube defects in your baby. Calcium, available in milk, yogurt, and cheese, is essential for skeletal development. Iron is necessary for producing the extra blood you need and is found in lean beef and pork, dried beans, and leafy greens.

Other foods should be eaten in moderation or not at all. Limit your caffeine intake to 200 mg, or a 12-ounce cup of coffee. And steer clear

of fish high in mercury such as swordfish and mackerel and limit white albacore tuna to no more than six ounces per week.

Eye on the scale

Pregnancy requires an additional 300 calories a day to help you gain the necessary weight. "Ideally, you should be gaining about a pound a week after your first trimester," says Sarah Kilpatrick, MD, head of the department of obstetrics and gynecology at the University of Illinois.

In the end, a woman of normal weight, with a body mass index of 18.5 to 24.9 should gain 25 to 35 pounds, while an overweight woman with a BMI of 25 to 29.9 should gain 15 to 25 pounds. Underweight women should gain 28 to 40 pounds; obese women can gain 11 to 20 pounds. Gaining the right amount helps protect your health as well as your baby's.

Keep moving

Exercising 30 minutes a day most days of the week can help women prevent excess weight gain during pregnancy. Exercise can also reduce backaches, constipation, and swelling, and improve mood and sleep.

Do what you were doing before you got pregnant, then ease up gradually if needed as the weeks go by, Kilpatrick says. Sedentary women can consider taking up walking or swimming after talk-

ing to their doctor.

"The best thing to do is to try and get about three to four hours of exercise a week," Brown says.

Be alert to changes in your mood

For 10-20 percent of women, hormone changes in pregnancy can result in depression. Depression during pregnancy is a mood disorder like clinical depression and has similar symptoms such as sadness, anxiety, and feelings of worthlessness. These can be exacerbated by difficult life situations.

Untreated depression can lead to an unhealthy lifestyle, including the use of drugs, alcohol, and cigarettes, which can cause premature birth, low birth weight, and developmental problems.

"Whether experiencing depression during pregnancy or postpartum, women should seek medical attention from their health care provider," says Brad Imler, PhD, president of the American Pregnancy Association. "It is possible that the benefits of medication may outweigh any potential risk."

Imler also advises women to eat well and exercise. "Idleness and improper nutrition only exacerbate depression and make it harder to manage," he says.

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QUESTION & ANSWER

Will exposure to radiation hurt my baby?

1. Can I use a microwave oven?
2. What about a dental x-ray?

1. Emission levels of microwaves are enforced by the U.S. Food and Drug Administration and well below the risk to public health. So unless the microwave door, hinges or seals are damaged, it's perfectly safe to use.

2. As long as it's done safely. Let your dentist know you are pregnant. Your dentist will cover your abdomen, pelvis and neck area with an apron that protects you and your baby.



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NEWS

MAKE TIME TO SEE YOUR MD

■ **Question:** What can you expect at your doctor visits now that you're pregnant?

■ **Answer:** Every visit will bring new and vital information—here's what you can expect.

Among the first things you should do once you know (or suspect) you're pregnant is make an appointment with your obstetrical provider. Early visits typically involve a full health history and physical exam that includes blood and urine tests and a check for diseases such as hepatitis B, syphilis, and HIV, says Jeanne Conry, MD, PhD, an ob-gyn in Roseville, California.

In addition, your doctor will try to determine your estimated due date, which affects the timing of prenatal tests and is used as a guide for your baby's growth and your progress.

Beyond that, your doctor will

look for risks specific to you. Women who previously gave birth to a baby weighing more than 10 pounds, for instance, may undergo a diabetes screening at their first visit. A woman who has high blood pressure may undergo tests that examine kidney function.

"The tests that are needed and the approach (a doctor takes) are specific for the patient's needs," Conry says. "Her health care provider will assess those needs and will decide the timing for specific tests."

Testing, Testing

Sometime in the first or second trimester, your doctor will offer you the opportunity to do prenatal screening tests to determine if your baby has a chromosome abnormality such as Down's syndrome. The exact test you have depends on what's available in your area, where you are in your

pregnancy, and an assessment by your health care provider.

If the screening shows a potential problem, you may opt to have a diagnostic test such as chorionic villus sampling and amniocentesis. "Some people want to know every single thing about their baby's genetics," Conry says. "And some want to know nothing, saying that whatever happens, happens, and they'd rather not do testing at all."

Between weeks 24 and 29, you'll also be checked for diabetes, high blood pressure, and Rh antibodies in your blood, which indicate blood type incompatibility with your baby. The results of these tests will help determine your care for the rest of your pregnancy.

Heading to the Finish Line

Beyond week 28, the focus on your visits will be on the baby's movement, and your doctor may advise that you track the number of

kicks. "We expect babies to behave a certain way, and if they're not, we will examine that," Conry says. "We're also looking for changes in activity level."

In your final month, you'll have weekly visits. Around weeks 35-37, you will be assessed for group B streptococci, a bacterial infection which can make your baby sick. Your doctor will also check to see if your cervix is dilated in preparation for delivery, estimate your baby's weight, and assess your baby's position.

Para recursos en español sobre el embarazo y el parto vaya a: www.acog.org/publications/patient_education.

WINNIE YU

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FACTS

Exposure to some substances in pregnancy can hurt your unborn baby. Here are some precautions from Craig Strafford, MD, MPH, an ob-gyn in Gallipolis, Ohio:

- Do not drink alcohol.
- Avoid drinking unpasteurized milk and juices or soft cheeses.
- Make sure all meats, poultry, and shellfish are well-cooked.
- Avoid prepared meats, such as hot dogs or deli meats, unless they are reheated until steaming hot.
- Do not use illegal drugs.
- Check with your doctor before using over-the-counter medications, including cold or allergy remedies and laxatives.
- Wear gloves while handling unwashed vegetables or gardening. Parasites in soil can cause toxoplasmosis, which can cause

birth defects.

■ Ask someone else to clean the litter box if you have a cat that goes outdoors or may eat prey. If no one else can do it, wear disposable gloves and wash your hands thoroughly with soap and water afterwards.

■ Avoid contact with chemicals, such as pesticides, paints, and solvents.



QUESTIONNAIRE

Jeanne Conry, MD, PhD

Chair, District IX, The American College of Obstetricians and Gynecologists.

1. Why do I need to take prenatal vitamins?
2. When should I start taking a prenatal vitamin?

1. During pregnancy, your body's need for certain nutrients increases significantly, and it may be hard to get all these vitamins and minerals from food alone. A prenatal vitamin ensures that you don't miss out on any of these nutrients and fills in the gaps. For instance, you need folic acid to help prevent neural tube defects such as spina bifida. You need calcium for healthy bone development and vitamin D to ensure its absorption. You also need extra iron to meet an increased demand for hemoglobin in blood, which carries oxygen to your baby.

2. Prenatal vitamins are available without a prescription, and ideally, you should start taking one before you get pregnant. If you were, bring the bottle to your first doctor visit, so your health care provider knows what you've been taking. Take the vitamin as directed, and never take more than the dietary reference intake. High doses of some vitamins such as vitamin A can be harmful to your baby.

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NEWS

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BEST TIPS

How to baby-proof your home

You'll want to make sure your home is ready for Baby before you return from the hospital. Here are some quick and easy tips for making sure your baby's home is a safe one.

➔ Put yourself in your baby's little shoes! It might sound silly, but crawling around your living space will allow you to see things the way your bundle of joy will. You might not notice potential hazards from way up high.

➔ Make sure your crib is safe and approved by the American Society for Testing and Material (ASTM), and installed properly. Check for loose screws and bolts to prevent the crib from falling apart.

➔ Put a nice, comfy rug underneath the crib, changing table and bouncy seat, just in case your baby falls.

➔ Keep small items—anything your little one might pick up and put into his/her mouth—out of reach. This includes coins, sharp items, little toys, etc.

➔ Lock away dangerous substances, such as medicines, alcohol, and cleaning substances.

➔ Pad all sharp edges of your furniture.

➔ Why not get a baby monitor so you can keep tabs on little one even if you're not in the same room?

CHECK IT OUT

Baby's First Book:
When and why you should start reading to your child

■ **It is never too early** to start reading to your family's newest edition. Regardless of whatever potential intellectual benefits the activity could have, it's a wonderful bonding experience for you and your child.

■ **In terms of reading materials**—anything goes. Children's books are great, but if all you have on hand is a cereal box or a catalog, don't let that stop you. Your baby will love to hear the sound of your voice, and will even look forward to the sessions.

■ **Reading to your baby** has been shown to improve communication, as well as listening and vocabulary skills. As your baby gets older, he or she will become more interested in the stories, and will become more responsive.

■ **Try to read together** every day. Why not before naptime or in the evening when you're both winding down?



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INSPIRATION



IT'S ALWAYS SUNNY
Actress Kaitlin Olson is
beaming with happiness
during her first pregnancy.
PHOTO: MARC CARTWRIGHT

TIP/STEP

2

ASK MOM
FOR HELP

Basking in the glow

■ **Question:** How is actress Kaitlin Olson able to be so healthy in pregnancy?

■ **Answer:** She gets a lot of help from Mom.

Like most pregnant women who work, Kaitlin Olson is juggling the dual demands of a busy schedule and carrying a baby. But unlike many women, Olson sometimes heads to her job as early as 5 a.m., and spends an hour getting her hair done and makeup applied, depending on the day's filming schedule.

Who done Dee?

Olson, 34, stars in the cult hit comedy "It's Always Sunny in Philadelphia" with Danny DeVito and her husband Rob McElhenney. Olson plays Sweet Dee, one of the underachieving owners of Paddy's Pub. Her pregnancy will be written into the show as a fun-filled whodunit, with the mystery being who got Sweet Dee pregnant.

In real life, Olson is moving into her third trimester, and experi-



PHOTO: PATRICK MCELHENNEY

"I've been the luckiest person in the world."

Kaitlin Olson
Actress and first-time Mom

encing pure maternal bliss for the boy who is due in late August. "I'm loving it," she says. "I love feeling him moving around in there, I love seeing the ultrasound pictures, where I can see his little face. The whole thing is just so amazing."

Lucky for Olson, the pregnancy has been fairly trouble-free. With the exception of some first trimester fatigue, she has been spared the queasiness that afflicts many women. And so far, she's added only 20 pounds on her 120-pound frame.

Thanks to Mom

Olson gives a good part of the credit to her mother Melinda Olson, founder of Earth Mama Angel Baby, a company that makes organic, non-toxic personal care products for pregnant women and their babies.

"My mom is a nurse and an herbalist, and we always lived really naturally, so I grew up around that," Kaitlin Olson says. "I've been the luckiest person in the world." She's convinced that her mom's natural stretch oils have kept stretch marks at bay and a daily cup of morning wellness tea has spared her the agony of morning sickness.

Olson also gives credit to her nightly walks with her dog Oscar and a healthy diet, which includes lots of organic veggies, lean meats and whole grains. She takes care to limit the amount of refined sugar she eats. "Sugar is the one thing I've been craving," Olson says. "I have to stay far away from the food table during the day because I can't walk by a donut right now and not eat it. So yes, I do eat it. Come on, I'm only human."

A natural birth

As she heads into her third trimester, Olson is bracing herself to deliver naturally at home, just as her mom did with her. To do that, she's taking hypnobirthing classes, which involves training yourself to relax on cue with something as simple as a hand on the shoulder. "It's all about discipline and relaxing and not being afraid of pain," she says. "So far, it's making me feel empowered."



PHOTO: PATRICK MCELHENNEY

Kaitlin Olson
Actress

Newly pregnant?

Here's what Kaitlin Olson suggest you do to stay well.

■ **Take time** to pamper yourself, be it a massage, a sweet treat or a bubble bath.

■ **Get enough rest.** Go to bed early, and take short naps if you need them.

■ **Eat organic foods,** so you limit your exposure to toxins.

■ **Do a little exercise every day,** so you create a habit of activity.

■ **Focus** on the positive aspects of pregnancy, and remember that unpleasant symptoms are only temporary.

WINNIE YU

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NEWS

Your changing body



■ **Question:** What kinds of physical demands can I expect in pregnancy?

■ **Answer:** Pregnancy affects you physically from head-to-toe, but knowing what to expect can make the changes less daunting.



Congratulations! You're pregnant. Now brace yourself for the many ways your body will evolve. "Pregnancy is a different state of being, and your entire body changes," says Owen Montgomery, MD, chair of the department of obstetrics and gynecology at Drexel University in Philadelphia. Here's what you can expect:

First Trimester

Extreme fatigue, nausea, and vomiting are common now. Often a woman becomes sensitive to certain smells, which can dampen her appetite. As your baby grows, you may notice more pressure on your bladder and more visits to the bathroom. "If it's your first pregnancy, you may not notice any swelling in your abdomen just yet," Montgomery says. "But you'll show sooner with a second pregnancy," he adds.

Second Trimester

Around now, morning sickness eases up, and you'll start to feel more energetic. The surge in energy is due to an increase in blood flow, Montgomery says. During this trimester, you may start feeling some lower abdominal pain as your uterus stretches. Pregnancy

hormones may cause gums to swell and bleed.

As the trimester progresses, you may notice lower back pain. The extra blood produced by increasing hormone levels may cause nosebleeds and congestion. You may also notice that you're more forgetful. Some women experience heartburn as hormones relax the valve between your stomach and esophagus, allowing stomach acid to leak back into the esophagus.

Third Trimester

As your baby continues to grow, you'll notice significantly more discomfort. Lower back pain may worsen, and you're likely to experience constipation from the high levels of progesterone that are slowing digestion. You may also develop hemorrhoids, painful itchy varicose veins in the rectal area caused by extra blood flow in the pelvic area. Many women experience varicose veins, swollen feet, leg cramps, and shortness of breath.

And expect to be considerably more tired. "The energy you felt in the second trimester begins to be offset by the fact you really are bigger," Montgomery says. By the time you near the end of this trimester, you'll most likely have trouble sleeping and difficulty concentrating.

In spite of the discomforts,

Montgomery says there is reason to celebrate. "You've reached the home stretch. Many women get excited about their approaching due date," he says.

FACTS

Get moving....

For many pregnant women, exercise is the last thing they want to do. Exercise actually can boost your energy levels. Being active and exercising at least 30 minutes most days of the week can benefit your pregnancy in many ways:

- Reduces backaches, constipation, bloating, and swelling
- Boosts your mood
- Promotes muscle tone, strength, and endurance
- Helps you sleep better

Exercising now also will make it easier for you to get back in shape after the baby is born. Talk with your health care provider to make sure you do not have any health conditions that may limit your activity.

You should do moderate exercise for 30 minutes or more on most days, if not every day. If you have not been active, start with a few minutes each day and build up to 30 minutes or more.

WINNIE YU

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QUESTIONNAIRE



Michele Brown, MD, OB-GYN
Independent Practitioner

■ **Question:** What are the current recommendations for dental care during pregnancy?

■ **Answer:** Pregnant women may avoid seeking dental care because of fears harming their baby, but the importance of maintaining oral hygiene in pregnancy can not be overstated. Pregnant women are at an increased risk for cavities and gum disease due to acid reflux in combination with bacteria and reduced immune response.

It's safe to have dental work during pregnancy so don't cancel your regular dental visit just because you are pregnant. A dental checkup early in pregnancy helps make sure that your mouth stays healthy. Pregnant women should inform the dentist that they are pregnant before receiving X-rays and avoid lying for long periods of time in the reclining position.



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NEWS



You're having a baby, so how do you feel? We asked some New York mothers to tell us, candidly, what went through their minds when they first found out they were pregnant.

"It was a mix of laughter and tears. I knew my life was going to change, which was exciting but scary."

-Renata, NY

"It was the best I'd felt and the worst I'd felt in a long time. He is sitting here smiling at me right now, though, so it's all worth the pain and the discomfort."

-Meghan, NY

"I felt scared, to be honest. I knew a huge change was going to happen. Life as I knew it was going to be over."

-Loralee, NY

Hemorrhoids: Harmless yet horrible

Pregnant women often have hemorrhoids—painful, itchy varicose veins in the rectal area.

The main causes of hemorrhoids are the extra blood flow in the pelvic area and the pressure that the growing uterus puts on veins in the lower body. Constipation can make hemorrhoids worse because straining during bowel movements traps more blood in the veins.

Hemorrhoids often improve after the baby is born. Talk to your doctor about using over-the-counter creams and suppositories. You also can try these tips for relief (or

to avoid the problem in the first place):

- Eat a high-fiber diet and drink plenty of liquids.
- Keep your weight gain within the limits your doctor suggests.
- Sitting for a long time puts pressure on the veins in your pelvic area. Get up and move around.
- If you do get hemorrhoids, apply an ice pack or witch hazel pads to the area to relieve pain and reduce swelling.
- Try soaking in a warm (not hot) tub a few times a day.

MICHELLE BROWN, MD, OB-GYN

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BEST TIPS

Managing tough symptoms

Pregnancy can produce some unpleasant symptoms. Here's how to handle five of the toughest complaints from Jeanne Conry, MD, an ob-gyn in Rosville, California:

Nausea and vomiting

→ Eat smaller, more frequent meals. Munch on dry toast, crackers, and pretzels. Drink plenty of fluids, and avoid smells that upset your stomach.

Heartburn

→ Eat slowly and chew your food well. Wait 30 to 60 minutes before lying down. Avoid spicy or fried foods.

Swollen legs and ankles

→ Don't cross your legs. Lie on your left side. Elevate your feet a few times a day.

Hemorrhoids

→ Eat more fiber. Drink plenty of water. Avoid sitting for long periods of time. Take a warm bath or use ice packs when severe.

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INSPIRATION

Showing your style: Your fashion identity during pregnancy

TIP

4

STRUT YOUR STUFF

J

ASK THE EXPERT

Fashion is all about your individuality, self expression, and personality. Those aspects of yourself may be the only things that don't change when you're expecting. Pregnancy might feel like the little one in utero has taken over your body.

Luckily, your bundle of joy does not have to take over your sense of style too. Fight the urge for frumpy sweatpants and boxy t-shirts with these must-know tips for keeping your sense of style all throughout your pregnancy.

Tips

■ Cover your basics. Build the foundation of your maternity wardrobe with items you will need every day. Motherhood Maternity's layering tees and tanks give a feminine, slimming effect without adding bulk. Get yourself a good go-to cardigan that will see you in and out of air conditioning and through the occasional pregnancy hot flash.

■ Follow your jeans. For those of you who live in your jeans, there's no need to surrender your designer denim for Mom Jeans. All of your favorite designers have teamed up with A Pea in the

Pod to bring hot moms-to-be like you the names you need. Brands like 7 for all Mankind, Joe's, Citizens of Humanity, AG, True Religion, J Brand, and Hudson are all equipped with the Secret Fit Belly—a stretchy, breathable band that grows with you and gives you seamless support.

■ Go with the fashion flow. Embrace your bump along with new trends. Horizontal stripes might make you think twice, but embrace this nautical trend while you're supposed to have a belly. Embroidered embellishments and bling necklace details on dresses and tops highlight a pregnancy

perk—fabulous décolletage. Oversized tunics worn with leggings create a relaxed, stylish look that flatters the pregnant silhouette.

Trend alert:
The maxi dress

The maxi dress is instant glamour! Looking good and feeling good are important aspects of pregnancy wellness. Luckily, this hot summer fashion trend is maternity-friendly and will have you looking and feeling your best. Empire waists and halter styles give a long, lean look, while vibrant prints and punchy sum-

mer solids can go anywhere. The maxi dress is easy to wear and super comfortable. You'll be amazed at its effortless elegance.

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PHOTOS: A PEA IN THE POD

“Fight the urge for frumpy sweatpants and boxy t-shirts...”



■ **Question:** How do women maintain their fashion sense when they're pregnant?

■ Pregnant women need to remember who they are and what they like. Just because you're pregnant doesn't mean you should compromise your fashion sense. So if you love V-necks, stick with it. Love jackets? Stick with it. Poplin tops? Stick with it. You have to stay true to who you are.

Of course, body types are all so different. But, in general, you should look for pants that are slimming. In tops, you should choose ones that show your shape. And remember, just because you're pregnant doesn't mean you should go big. The bigger the top, the bigger you'll look. Instead, choose tops that are draping, and know which fabrics will carry which styles. Lycra for instance, adds stretch to cotton and modal blends, which is great when wearing drapey style tops.

Remember that it's just as important to be comfortable as well as fashionable. And know that you don't have to change your style. At this time in your life, you should feel your most beautiful.

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NEWS



TECHNOLOGY AT WORK
Technology gives parents-to-be an opportunity to see potential genetic disorders.
PHOTO: PRIVATE

A PEEK INTO THE FUTURE

■ **Question:** Can you know if a fetus has genetic problems before birth?

■ **Answer:** Today's technologies suggest you can.

Every expectant couple wants a healthy baby, but problems aren't always detected until delivery. Genetic testing, through a simple blood test, however, may help parents find out sooner.

The technology grew out of research in the 1990s, which found that small amounts of genetic material from the fetus leaked into the mother's blood, according to Ronald Lindsay, interim senior vice president of research and development at Sequenom, Inc., in San Diego, California. "From that

principle, we asked, 'Can we use that material in mom's blood to determine whether there are any genetic abnormalities with the fetus?'" Lindsay says.

New test

This year, the company's CLIA laboratory began offering a test that will determine whether a fetus is at risk for developing RhD disease, a condition that occurs when a mom is Rh negative and doesn't have the Rhesus D protein but carries a fetus that is Rh positive. The mismatch can result in RhD disease if the baby's blood cells enter the mother's bloodstream, causing her to produce antibodies that destroy and eliminate the baby's red blood cells. The result may be jaundice, anemia, brain damage,

heart failure, or even fetal death.

"If you know early on that the fetus is Rh negative, it relieves an enormous amount of anxiety," says Allan Bombard, MD, MBA, chief medical officer of Sequenom, Inc. If the baby is Rh positive, the pregnancy can be monitored more closely for early signs of Rh disease and be treated, if needed.

Not everyone is convinced the tests are ready for consumer use. "My concern with any new approach to genetic testing is that there is insufficient prospective data to know the accuracy of the tests," says James D. Goldberg, MD, an ob-gyn in San Francisco. "The laboratories need to provide accurate false negative and false positive rates."

Other issues to consider

There are tests available to detect other genetic disorders. Your doctor or genetic counselor will help you understand the chances that the defect could be passed on to your baby.

Helping patients to choose the sex of their offspring to avoid serious sex-linked genetic disorders is considered ethical for doctors, but participating in sex selection for personal and family reasons, such as family balancing, is not, according to The American Congress of Obstetricians and Gynecologists.

WINNIE YU

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BABY 101

Tummy time for babies

■ Your baby needs strong neck, shoulder and arm muscles to achieve milestones like sitting up, rolling over and crawling. The best way to help your newborn build her muscles is to give her some tummy time when she's awake.

Lay baby on her stomach and place a rolled-up receiving blanket underneath her chest and extended arms. Keep baby on her belly for a few seconds each day until she can work her way up to holding her head up for longer. Keep her motivated by meeting her at eye level or placing a toy in front of her. Be sure to keep a close watch on her and never leave baby unattended.

SOURCE: March of Dimes



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NEWS

Fetal surgery: Emerging, but often experimental

■ **Question:** Can birth defects be corrected before surgery?

■ **Answer:** New surgical techniques may do the job.

Not long ago, correcting a birth defect on a fetus seemed like a sci-fi fantasy. But for a few select birth defects and pregnancy complications, recent advances in fetal surgery have made it possible to intervene before birth.

An unfair share

The Center for Fetal Diagnosis

and Treatment at the Children's Hospital of Philadelphia evaluates more than 1,000 women a year and treats about 100 during pregnancy, according to N. Scott Adzick, MD, surgeon-in-chief and director of the center.

Among the most common fetal surgery operations is twin-twin transfusion syndrome. In this condition, one fetus grows at the expense of its twin due to abnormal blood vessel connections in their shared placenta. "As a result, there's a circulatory imbalance," Adzick says. "One twin gets too

much blood and has heart failure. The other doesn't get enough and has kidney failure."

A peek into the future

Surgery to correct the problem involves a small puncture in the pregnant woman's belly that allows the surgeon to see the placental wall and impaired blood vessels. "We use a laser fiber to coagulate those vessels and restore circulatory balance between the twins," Adzick says.

Another procedure is fetal transfusion, which is done on

fetuses suffering from severe anemia (a lack of red blood cells) caused by the pregnant woman and fetus having different blood types or a viral infection. During this procedure, the doctor will insert a needle into the woman's abdomen and using ultrasound will guide the needle through the abdomen and into either the umbilical cord or the fetal abdomen so that blood is transfused to the fetus.

Know the risks

It's important to know that

most fetal surgery is risky, invasive, and considered experimental, and the long-term impact on women and fetuses is unclear.

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As many as one in 115 pregnant women are carrying babies with birth defects. That's a frightening fact, but here's a reassuring one: The Children's Hospital of Philadelphia has pioneered care for congenital disorders. Even the rarest birth defects are familiar to our team.

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NEWS



ADDRESSING YOUR NEEDS
Alexandra Lacayo and Eduardo Kopper's son was born with a life-threatening birth defect. They knew they had to find the best place for their son's care.
PHOTO: THE CHILDREN'S HOSPITAL OF PHILADELPHIA



ASK THE EXPERT

Amy Hermes, RN, WHNP-BC

Following a balanced diet should be the proper prescription for making sure your baby gets all the important nutrients. There are some key supplements, however, to add to your daily routine rather than leaving to chance that your diet fulfills your needs.

■ **Question:** What must pregnant women know about prenatal vitamins?

■ **Hermes:** They must have adequate folate levels. Improper

levels of folate in pregnancy have been linked to birth defects. Iron is also important because you can become anemic very easily.

■ **Questions:** Are there options if women have issues with traditional folic acid supplements?

■ **Hermes:** It is estimated that 50 percent of the population could find that. There are active forms of folate that are available for women that need that and there is a test to determine if you are at risk. It is important to know there are options out there.

FAYE BROOKMAN

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NEWS

CARING FOR YOUR NEWBORN

■ **Question:** Bringing home a new baby can be intimidating. What do you need to know about caring for him?

■ **Answer:** Focus on your baby's basic needs.

You've waited nine months to meet your baby, and now he's here. Here's what you need to know to care for him.

Feed him right

Experts agree: breastmilk is best in the first year of life. Studies show that breastfed babies have fewer ear infections, lower respiratory infections, and urinary tract infections than children who receive formula. Breastfed babies are also less likely to become obese.

"Breastmilk has all the basic nutrients your baby needs," says Alan Fleischman, MD, medical director of the March of Dimes and a pediatrician and neonatologist. "The only supplement he'll need is vitamin D."

But some moms may be unable to breastfeed for health or other reasons. Formula is a perfectly suitable second-choice option, Fleischman says.

Feed your baby whenever he's hungry, which may be every two to four hours. Expect him to fall back to sleep after he eats. As long as your baby is gaining weight, has four wet diapers and one or two bowel movements every day, it's okay to let your baby sleep a little longer. "These are very flexible recommendations," Fleischman says. "Every baby is different."

Help baby sleep

Newborns sleep about 16 hours a day, often for three to four hours at a time. "Babies only wake up when they're hungry or uncomfortable, and they usually awaken on their own," Fleischman says. "After they're well fed or comfortable, they will fall back to sleep. That pattern makes for very tired parents, but is appropriate as baby begins to regulate sleep-wake cycle."

To make sure your baby sleeps safely, put him to sleep on his back. Use a firm mattress in the baby's crib, and avoid putting pillows, stuffed animals or comforters in the crib, which could smother a baby. And never sleep with your baby in your bed, Fleischman says.

See your pediatrician

Your baby should have his first checkup 48 hours after leaving the hospital.

"They understand there are no silly questions for new moms."



Mark Fleischman, MD
Pediatrician, Neonatologist and medical director of March of Dimes

At that time, your pediatrician will check for jaundice, measure your baby's weight and address your concerns. "You should feel comfortable talking to the nurse or doctor," Fleischman says. "They understand there are no silly questions from new moms."

At two months, your baby will begin getting immunization shots, the first being shots for diphtheria, pertussis and tetanus. Fleischman says adults who are caring for the infant also need a pertussis booster shot. Pertussis, known as whooping cough, has been on the rise in the U.S. and is potentially deadly in infants. "Mom should get (the booster) after delivery, and dad or grandma can do it before that. You should also ask your caregivers if they've been vaccinated."



NEWS IN BRIEF

What your baby sees

■ Healthy eyes are critical to baby's vision. Experts recommend getting your baby's first vision assessment at around six months. "When a condition can be identified early, the potential for long term complications is minimized," says Glen Steele, OD, chief of pediatric service at Southern College of Optometry in Memphis.

■ Even babies may have signs of nearsightedness, farsightedness and astigmatism. Optometrists also look for ocular motility, the ability to follow a target; binocular function, the ability to use both eyes together and visual acuity, which is how well a baby sees striped targets.

■ Steele says vision problems are important to detect because they affect social milestones and may cause developmental delays.

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INSPIRATION

Why I became a champion of breastfeeding

TIP

5

FIND NURSING
OPTIONS

!

BREASTFEEDING FACTS

- Provides developmental, nutritional, and immunologic benefits not duplicated by formula feeding.
- May reduce infant mortality, obesity later on, and the incidence of infectious diseases.
- Studies suggest lower rates of SIDS, diabetes, and certain cancers.
- May enhance bonding.
- Less postpartum bleeding, lose weight more rapidly, and may lower their risk for breast and ovarian cancer.
- ACOG recommends exclusive breastfeeding for the baby's first six months.

■ **Question:** How does a pediatrician become a passionate advocate of breastfeeding?

■ **Answer:** By learning the health benefits of breastmilk.

Jenny Thomas had gone through years of medical school training to become a pediatrician, but never learned a thing about breastfeeding. "Breastfeeding was just not part of the curriculum," recalls Thomas, 43, of Milwaukee, Wisconsin.

As an intern with a new baby,

Thomas did breastfeed, mostly because her own mom had nursed her. But she weaned her son when he was only six weeks old in order to attend a retreat for medical interns. "Interns were expected to attend, and no family members were allowed," she recalls.

Learning from lectures

At a conference of the American Academy of Pediatrics in 1999, Thomas sat in on lectures about breastfeeding. She learned about the importance of breastmilk for preemies and the way breast-

milk guarded babies from infectious diseases. "I was enthralled," Thomas recalls. "It was the first time I'd heard anything of the sort."

Thomas began devouring information about breastfeeding and she went on to nurse her two younger sons.

Nursing, she admits, was not always easy, and she struggled when she first started nursing her second son. "But I knew if I quit, I wasn't going to be much of a role model," she says.

A mission to educate

Educating other women about breastfeeding became a mission, one that she does routinely with her patients. Thomas has since become a lactation specialist and a member of the Academy of Breastfeeding Medicine. She has lobbied state legislators to pass bills allowing women to nurse in public. "I think my own experience has made me a better pediatrician," she says.

WINNIE YU

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