

# introduction

find everything you  
need to know in this book



In July 2012 the Minister for Health, Social Services and Public Safety for Northern Ireland launched *A Strategy for Maternity Care in Northern Ireland 2012–2018*. This strategy sets out the changes required for maternity services to ensure a safe and sustainable service into the future. Its aim is to give every baby the best start in life that his or her parents, society and maternity services can give it. Throughout the implementation of this strategy any changes to how services are provided will be reflected in *The Pregnancy Book* to ensure women who use maternity services within Northern Ireland have the best information available and experience high quality, safe maternity care. If you wish to read the strategy it can be found at:

[www.health-ni.gov.uk/articles/maternity-strategy-northern-ireland-2012-2018](http://www.health-ni.gov.uk/articles/maternity-strategy-northern-ireland-2012-2018)

Having a baby is one of the most exciting things that can happen to you. But you might be feeling nervous as well. If it's your first baby, it's hard to know what to expect.

Your mum, colleagues, friends and relations might all be giving you advice. And then there is all the information on the internet as well as in magazines and books. At times it can feel overwhelming and it's hard to know who is right when people say different things.

This book brings together everything you need to know to have a healthy and happy pregnancy, and to make sure you get the care that is right for you. The guidance about pregnancy and babies does change.

So it's important to get up-to-date, trusted advice so that you can make the right decisions and choices.

**If you have any questions or concerns – no matter how trivial they may seem – talk to your midwife or doctor. They are there to support you.**



# YOUR PREGNANCY AT A GLANCE



Before you get pregnant	5	28 weeks	8	38 weeks	9
0–8 weeks	6	31 weeks	8	40 weeks	9
8–12 weeks	6	34 weeks	8	41 weeks	9
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## BEFORE YOU GET PREGNANT

- Think about the lifestyle factors that might affect your ability to get pregnant and have a healthy pregnancy (see Chapter 3). This applies to men too. You are more likely to get pregnant if you are both in good health.

- If you smoke, get advice about stopping. You are up to four times more likely to stop smoking successfully with support. Text QUIT to 70004 for SMS support (standard network charges apply) or visit [www.want2stop.info](http://www.want2stop.info) for further information on the 650+ specialist stop smoking services that are available across Northern Ireland. These free stop smoking services provide NRT and are run by specially trained staff who can advise you on the best way to manage your cravings and become smoke free. Services are offered in many GP practices, community pharmacies HSCT premises, and community and voluntary organisations. They can be set up in workplaces.

- Eat a balanced diet.
- Maintain a healthy weight.



- You should avoid drinking alcohol if you are pregnant or trying to conceive.
- Take exercise.
- If you or your partner take any medication, talk to your doctor about whether it will affect your pregnancy.

- Take 400 micrograms of folic acid a day. You should continue to take this until you are 12 weeks pregnant (see page 32).
- If you already have a baby with spina bifida, or if you have coeliac disease, diabetes, are obese or take anti-epileptic medicines, ask your GP or midwife for more advice. You will need to take a bigger dose of folic acid that requires a prescription.
- If you have a health condition, for example mental health problems, diabetes or a family history of any inherited diseases, talk to your GP or a specialist before you try to get pregnant.
- Talk to your GP or a healthcare professional if you have any concerns or need support.





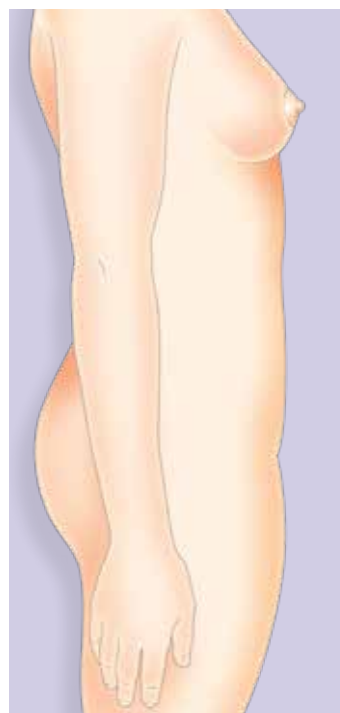
## 0–8 WEEKS

- As soon as you know you are pregnant, get in touch with a midwife or your GP to organise your antenatal care (see page 16 and **Antenatal care** on page 45). Begin to think about where you want your baby to be born (see page 18). A leaflet outlining your choices is available from your midwife and GP.
- Some pregnant women start to feel sick or tired or have other minor physical problems for a few weeks (see page 63).
- Take 10 micrograms of vitamin D per day. You should continue to take vitamin D throughout your pregnancy and while you are breastfeeding. If you qualify for Healthy Start (you are at least 10 weeks pregnant and in receipt of certain benefits) you will be entitled to Healthy Start vitamins which contain vitamin D and folic acid. If you do not qualify for Healthy Start your midwife may recommend other supplements.
- If you have type 1 or type 2 diabetes or a past history of gestational diabetes, telephone the antenatal clinic for an early appointment as soon as you realise you are pregnant.
- If you are not already taking folic acid supplements, you should start now. **If you already have a baby with spina bifida, or if you have coeliac disease, diabetes, are very obese or take antiepileptic medicines, ask your GP or midwife for more advice. You will need to take a bigger dose of folic acid that requires a prescription.**



## 8–12 WEEKS

- You will usually attend your first booking appointment by 12 weeks.
- At the booking appointment, your weight, height and body mass index will be measured. You will be asked about your health and family history as well as about your baby's father's family history. This is to find out if you or your baby are at risk of certain conditions.
- Your hand-held notes and plan of care will be completed.
- You will be offered blood tests for hepatitis B, HIV, syphilis and rubella.
- Your midwife will discuss various tests you will be offered during your pregnancy, one of which is an ultrasound scan to check for abnormalities in your baby (see page 53). You will be offered information about what to expect during pregnancy and how to have a healthy pregnancy. Ask if you are unsure about anything.
- Your midwife will also discuss the whooping cough and flu vaccine which is offered to all pregnant women.
- Your midwife or GP will be able to give your flu vaccine at any stage of pregnancy during flu season.
- You can ask your midwife about your rights at work and the benefits available (see **Rights and benefits** on page 156).
- You will usually be offered an ultrasound scan between eight and 14 weeks. This will check the baby's measurements and give an accurate due date. The scan can also detect some abnormalities and check if you are carrying more than one baby. Your partner can come along to the scan (see **Antenatal care** on page 45).



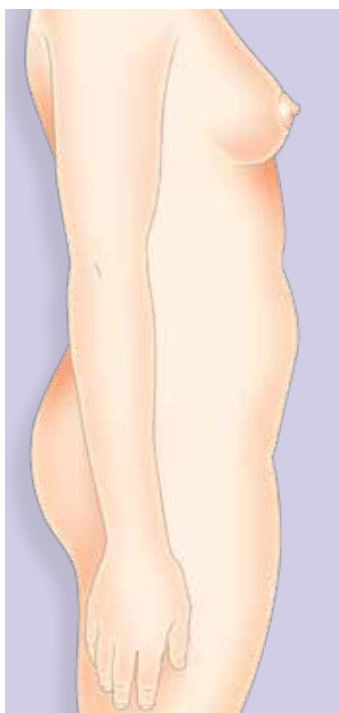
growing  
and developing





## 12–16 WEEKS

- Find out about antenatal education (see **Antenatal care** on page 45).
- Start to think about how you want to feed your baby (see **Feeding your baby** on page 102).
- Make sure you are wearing a supportive bra. Your breasts will probably increase in size during pregnancy so you need to make sure you are wearing the right sized bra.
- If you have been feeling sick and tired, you will probably start to feel better around this time.
- At 14 weeks, your baby's heartbeat is strong and should be heard using an ultrasound detector.
- Your pregnancy may just be beginning to show. This varies a lot from woman to woman.



## 16–20 WEEKS

- You may start to feel your baby move (see **How your baby develops** on page 22).
- Your tummy will begin to get bigger and you will need looser clothes.
- You may feel a surge of energy.
- Try to do your pregnancy exercises regularly (see **Your health in pregnancy** on page 29).
- Your midwife or doctor should:
  - review, discuss and record the results of any screening tests
  - measure your blood pressure and test your urine for protein
  - consider an iron supplement if you are anaemic.
- Your midwife or doctor should give you information about the anomaly scan you will be offered at 18–20 weeks and answer any questions you have.
- Your baby is now growing quickly. Their face becomes much more defined and their hair, eyebrows and eyelashes are beginning to grow.
- Ask your doctor or midwife to let you hear your baby's heartbeat.



## 20–25 WEEKS

- Your uterus will begin to get bigger more quickly and you will really begin to look pregnant.
- You may feel hungrier than before. Stick to a sensible balanced diet (see **Your health in pregnancy** on page 29).

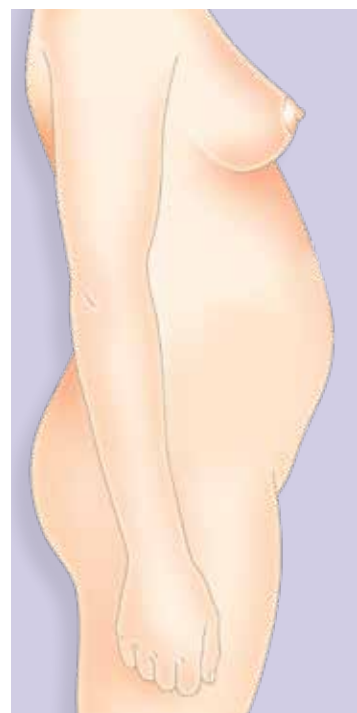


- Ask your midwife about antenatal education (see **Antenatal education/parentcraft** on page 61).
- You will begin to feel your baby move.
- Get your maternity certificate (form MAT B1) from your doctor or midwife (see **Rights and benefits** on page 156).



## 25 WEEKS

- Your baby is now moving around vigorously and responds to touch and sound.
- If this is your first baby, you will have an appointment with your midwife or doctor and they should:
  - check the size of your uterus
  - measure your blood pressure and test your urine for protein.
- If you are taking maternity leave, inform your employer in writing 15 weeks before the week your baby is due. You can claim for Statutory Maternity Pay (SMP) (see **Rights and benefits** on page 156).
- If you are entitled to Maternity Allowance, you can claim from when you are 26 weeks pregnant (see **Rights and benefits** on page 156).
- If your partner plans to take paternity leave, they will need to inform their employer.



## 28 WEEKS

- Your baby will be perfectly formed by now, but still quite small.
- You may find that you are getting more tired.
- Your midwife or doctor should:
  - use a tape to measure the size of your uterus
  - measure your blood pressure and test your urine for protein
  - offer more blood screening test.
  - Offer and give you the whooping cough vaccine between 28–32 weeks.
- If you are claiming Statutory Maternity Pay (SMP), you must inform your employer at least 28 days before you stop work (see **Rights and benefits** on page 156).
- You can claim a lump sum Sure Start Maternity Grant to help buy things for your first baby if you get one of the following:
  - Income Support
  - income-based Jobseeker's Allowance
  - income-related Employment and Support Allowance
  - Pension Credit
  - Working Tax Credit where the disability or severe disability element is included in the award
  - Child Tax Credit payable at a rate higher than the family element (see **Rights and benefits** on page 156).

- Think about what you need for the baby (see **What you need for your baby** on page 127).
- If you have young children, it's good to talk to them about the new baby.
- Make sure your shoes are comfortable. If you get tired, try to rest with your feet up.



# excitement and apprehension



## 31 WEEKS

- If this is your first baby, your midwife or doctor should:
  - review, discuss and record the results of any screening tests from the last appointment
  - measure the size of your uterus and check which way up the baby is
  - measure your blood pressure and test your urine for protein.

## 34 WEEKS

- Your midwife or doctor will give you information about preparing for labour and birth, including how to recognise active labour, ways of coping with pain in labour and developing your birth plan. They should also:
  - review, discuss and record the results of any screening tests from the last appointment
  - measure the size of your uterus
  - measure your blood pressure and test your urine for protein.
- Make arrangements for the birth. You can give birth at home, in a midwifery unit or in hospital. If you have children already, you may want to make childcare arrangements for when you go into labour.
- You may want to ask about whether tours of maternity facilities for birth are available.





## 36 WEEKS

- Think about who you would like to have with you during labour.
- Get your bag ready if you are planning to give birth in hospital or in a midwifery unit.
- You will probably be attending antenatal classes now (see **Antenatal care** on page 45).
- You may be more aware of your uterus tightening from time to time. These are mild contractions known as Braxton Hicks contractions (see **Labour and birth** on page 85).
- You may feel quite tired. Make sure you get plenty of rest.



- Make sure you have all your important telephone numbers handy in case labour starts (see **Labour and birth** on page 85).
- Your midwife or doctor should give you information about:
  - feeding your baby
  - caring for your newborn baby
  - vitamin K and screening tests for your newborn baby
  - the 'baby blues' and postnatal depression.
- Your midwife or doctor should:
  - measure the size of your uterus
  - check the position of your baby
  - measure your blood pressure and test your urine for protein.
- Sleeping may be increasingly difficult.

## 38 WEEKS

- Most women will go into labour spontaneously between 38 and 42 weeks. Your midwife or doctor should give you information about your options if your pregnancy lasts longer than 41 weeks.
- Your midwife or doctor should:
  - measure the size of your uterus
  - measure your blood pressure and test your urine for protein.
- Call your hospital or midwife at any time if you have any worries about your baby or about labour and birth.

## 40 WEEKS

(if this is your first baby)

- Your midwife or doctor should give you more information about what happens if your pregnancy lasts longer than 41 weeks.
- Your midwife or doctor should:
  - measure the size of your uterus
  - measure your blood pressure and test your urine for protein.

## 41 WEEKS

- If your pregnancy lasts longer than 41 weeks, you may be induced. Your midwife or doctor will explain what this means and what the risks are.
- Your midwife or doctor should:
  - measure the size of your uterus
  - measure your blood pressure and test your urine for protein
  - offer a membrane sweep (see page 96).
- Discuss options and choices for induction of labour and provide leaflet of explanation.
- Call your hospital or midwife if you have any worries about your baby or about labour and birth.
- See [www.nice.org.uk/Guidance/CG70](http://www.nice.org.uk/Guidance/CG70) for guidelines on induction of labour.

