



Coping with common discomforts of pregnancy

Morning sickness

Although nausea is more common in the morning and early stages of pregnancy, it can happen at any time of the day, or any stage of the pregnancy. It usually starts at about the sixth week and settles by about 14 to 16 weeks. The cause is unknown, though it has been linked to the changes in hormone levels during pregnancy.

Suggestions that may help:

- eat small meals and snacks frequently; feeling empty or hungry can make the nausea worse
- drink plenty of fluids to avoid dehydration; try cordial, juices, soups, icy poles or jelly, lemonade, dry ginger ale, soda or mineral waters
- avoid anything that may trigger your nausea such as: rich, spicy or fatty foods and strong food smells, coffee, tea, alcohol or tobacco smoke
- sudden movements such as jumping out of bed or racing to the shower can make you feel sick too
- get plenty of rest as nausea is often worse when you are tired.

If nothing works, you feel exhausted, or you are vomiting and losing weight, see your doctor or midwife. There are medications available for controlling morning sickness that are safe in pregnancy.

Constipation

Pregnancy hormones can slow down the muscles in the bowel causing constipation in some women.

It will help to:

- make sure you include plenty of fibre in your diet e.g. fresh fruit and vegetables, wholemeal breads and breakfast cereals, dried fruit, nuts and legumes
- take a fibre supplement such as psyllium
- drink plenty of water and fluids
- exercise regularly.

Laxatives should be avoided until discussed with your doctor or midwife.

Constipation can sometimes be caused by taking iron tablets - ask your doctor if you can change to a different type.

Food cravings

Some women experience food cravings during pregnancy. We don't really understand the reason for this but, interestingly, the cravings are often for foods that we seem to need, such as milk (we need more calcium during pregnancy), or tomatoes and oranges (vitamin C requirements double during pregnancy). Some women may crave non-food items such as chalk or clay.

Taste changes and food aversions

Women sometimes find that foods taste different or they 'go off' certain foods such as tea, coffee and meat. This usually settles down as the pregnancy progresses so if you have found it difficult to eat particular foods that are important for your diet, you may like to try them again later in the pregnancy.

Heartburn

Heartburn is partly caused by hormonal changes and then later by the growing baby pressing on your stomach. Heartburn is a burning feeling in your chest, accompanied by a bitter taste of fluid in the mouth. It will help to:

- eat small meals more frequently and slowly
- avoid fatty, fried or spicy food
- sleep semi-upright, well supported by plenty of pillows
- drink a glass of milk sometime before you eat
- avoid drinking with meals.

If these measures don't help your doctor may prescribe an antacid.

Tiredness and difficulty sleeping

Most pregnant women experience difficulty sleeping in late pregnancy. At this stage, sleep is easily disturbed by visits to the toilet, heartburn, a kick from the baby or a feeling of discomfort lying down. Some women may experience disturbing dreams or nightmares in the last couple of months, which can be due to anxiety about approaching childbirth and parenthood.

Good sleep tips to try:

- lie on one side with a pillow under your tummy and another between your knees
- rest during the day



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- avoid stimulants such as tea, coffee and alcohol before bedtime
- only get into your bed when you are tired
- exercise, such as walking, in the late afternoon or early evening
- do relaxing things before bed like soak in a bath, listen to music, massage or meditation.

Haemorrhoids (Piles)

These are swollen veins around the rectum and anus (back passage) that may itch, ache or feel sore. Piles may bleed a little and make going to the toilet uncomfortable. They can be triggered by constipation and or pressure from the baby's head.

It may help to:

- include plenty of fibre in the diet e.g. fruit and vegetables, wholemeal breads and breakfast cereals
- avoid standing for long periods
- avoid straining when sitting on the toilet
- talk to your midwife or doctor about a suitable ointment or suppository if bleeding and pain persist.

Vaginal thrush

Almost all women have increased vaginal discharge during pregnancy. If the discharge smells unpleasant, causes soreness, itching or is discoloured, you may have a vaginal infection. The most common infection is thrush. It is important to see your doctor so treatment can be commenced.

Frequent urination (needing to pass urine often)

In early pregnancy, frequent urination is caused by hormonal changes, but in later pregnancy it can be related to the increasing size of the baby pressing on your bladder. You may find it more difficult to empty your bladder completely in late pregnancy.

In the last few weeks of pregnancy you may 'leak' some urine when you cough, sneeze or lift something. You can discuss pelvic floor exercises with your midwife or doctor.

Any pain or stinging when you pass urine may mean you have an infection, so see your doctor.

Cramps

Muscle cramps in the foot, leg or thigh are very common during pregnancy, especially at night. The cause of cramps is unclear. Results of studies have shown that calcium supplements fail to show improvement or relief of cramps.

To help relieve muscle spasm/cramp:

- massage and stretch the affected limb or muscle during the cramp often gives relief.

Swollen ankles, feet and fingers

Eighty percent of pregnant women will experience swelling of this kind. There is extra fluid in the tissues of your body during pregnancy and some of it collects in your legs, particularly at the end of the pregnancy. If you stand for long periods of time, especially in hot weather, this fluid can cause swelling in the ankles and feet. It is more noticeable towards the end of the day and usually goes down at night while you sleep.

Tell your doctor or midwife if:

- the swelling is more than slight
- it's not relieved by rest
- you notice swelling in other parts of your body.

To relieve swelling:

- avoid prolonged standing
- rest frequently with feet elevated
- wear comfortable/loose shoes.

Swelling may be a symptom of high blood pressure or pre-eclampsia.



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Backache

Most women experience backache at some stage during their pregnancy. The causes include altered posture as the baby grows and hormonal changes leading to loosening of ligaments and greater water retention in the tissues. Backache is often worse at night contributing to sleeping difficulties, especially during the later stages of pregnancy.

To prevent and relieve back pain:

- avoid heavy lifting and housework
- avoid prolonged standing
- rest frequently with legs elevated
- be aware of your posture
- use chairs with good back support for sitting.

Contact the Physiotherapy Department on (03) 8345 2000 for exercises to prevent and relieve backache.

Fainting

Some pregnant women will experience feeling faint. You're most likely to feel faint if you get up quickly from a chair or hot bath or if you stand for too long. Lie or sit down at the first sign of faintness. In late pregnancy, lying on your back can make you feel faint; you will feel better to turn onto your side. Contact your doctor or midwife if you have frequent dizziness or fainting.

Itching

As your baby grows, the skin of your abdomen gets tighter and may cause mild itching. This is common in pregnancy. However, contact your doctor or midwife for persistent itching as this can be a sign of a more serious problem. Medication and further tests may be ordered.

Skin

Pregnancy can change the tone and colour of your skin, this is due to pregnancy hormones. The extra blood circulating around your body can cause your skin to 'glow' but for some women it may cause red patches, acne may get worse and areas of your skin may become dry and scaly and you may notice deeper pigmentation across your face.

Changes in pigmented skin affects nearly every woman, especially the areas of the body that are pigmented such as moles, freckles and the areola (nipples) of the breasts. Genitalia, inner sides of thighs, underneath your eyes and in your armpits may also become darker. Some women develop a dark line running down the centre of your stomach. This is called the linea nigra. Sunlight intensifies areas of skin that are already pigmented and many women find that they tan more easily during pregnancy. Even after birth, the deeper pigmented skin will remain darker for some time but will gradually fade and disappear.

Choloasma

Choloasma is a special form of pigmentation also called the mask of pregnancy, which appears as brown patches on the bridge of the nose, cheeks and neck. Some dark skinned women develop patches of paler skin on their face and necks. These patches will begin to fade after the baby is born. You may use make-up to cover up these patches.

Stretch Marks

About 90 percent of women get stretch marks. These usually appear across the abdomen, although they can affect the thighs, hips, breasts and upper arms. Gradual weight gain allows the skin to stretch without tearing. While the red streaks look prominent during pregnancy, after the birth, they fade and become pale silvery streaks. Nothing you apply to the skin will prevent them.



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Where to get more information

Royal Women's Hospital

Cnr Grattan St and Flemington Rd
Parkville VIC 3052
Tel: (03) 8345 2000

Women's Health Information Centre

Tel: (03) 8345 3045
1800 442 007 (rural callers)

Related fact sheets: Exercising your pelvic floor More pregnancy information and fact sheets are available from the Women's website at: www.thewomens.org.au

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