Before you decide to get pregnant take the opportunity to visit your GP.

Your GP can:
» talk with you about any health problems you or your partner may have
» take your medical history to learn about medical problems in your families
» discuss your immunisation history and organise any pre-pregnancy immunisations
» discuss lifestyle issues such as drug and alcohol use and your diet.

Your weight
Women who are underweight are at risk of pre-term delivery, whereas women who are overweight or obese may be at risk of pregnancy complications, such as miscarriage, fetal abnormalities, high blood pressure and pre-eclampsia. Women with obesity also risk complications during labour and birth and are more likely to have caesarean section. Weight can also impact on your ability to conceive.

Weight is not always easy to manage. Our body image and relationship with food are often psychologically and emotionally complex and it can be very difficult for women to simply lose weight, no matter what the reason. A women’s health nutritionist who understands the broader issues that impact on women’s weight will provide the best support for women wishing to prepare for pregnancy. Often small achievable changes can have a big impact.

The importance of folate
Folate is a B vitamin that is found in some foods. Folic acid is a synthetic version of the vitamin that you can take as a supplement, usually as a tablet or a powder.

Folate is especially important in your diet leading up to pregnancy and for the first three months of pregnancy. This is because folate reduces the baby’s risk of neural tube defects (spina bifida).

Folate-rich foods include green leafy vegetables, cereals with added folate, fruit, dried beans and peas. It is recommended that women intending to become pregnant take 0.5mg of folic acid a day for one month before pregnancy and for the first three months after becoming pregnant. If you have a family history of spina bifida or cleft palate, or are on anti-epilepsy medication, it is important to talk to your doctor about this before you become pregnant as higher doses of folic acid may be recommended.

Pre-pregnancy health checks
» Pap test: Women are generally advised to have a Pap test every two years. You may prefer to have this done before you are pregnant, but it is safe to have a test in early pregnancy.
» Breast check: It is recommended that all women examine their breasts for lumps monthly. An annual breast examination with a GP is also a good idea.
» Sexually transmitted infections (STIs): Ideally STIs should be treated before pregnancy. If you have any concerns about STIs you should discuss them with your doctor.
» Dental check: A dental check before pregnancy is a good idea as X-rays are not recommended for pregnant women. If possible, it is a good idea to get any dental work you need done before you get pregnant.
» Medical conditions: Any existing medical conditions that you have should be discussed with your doctor before pregnancy. Conditions that may affect pregnancy are high blood pressure, asthma, diabetes, epilepsy, anaemia, kidney problems, heart or liver disease. You may wish to consider physiotherapy, seeing a chiropractor or osteopath if you have a back injury or condition that may affect your pregnancy or the birth of the baby.
» Gynaecological conditions such as fibroids, polycystic ovarian syndrome, pelvic inflammatory disease and endometriosis may affect conception or cause concern during pregnancy. You doctor will also need to know if you have had cervical or uterine surgery or more than three previous miscarriages.
» Medicines: Discuss all medication you are taking with your GP before you get pregnant. This includes any medicines prescribed by a doctor or natural therapist or that you have purchased from a chemist, health food shop or supermarket. It is very important to know about the possible impacts of any medicines ‘natural’ or otherwise on your pregnancy.
» Mental health: If you have a diagnosed mental illness you will need to talk to your medical team or psychiatrist about how to manage your illness during pregnancy, your birth and afterwards. If you are currently taking medication, this may need to be managed differently during pregnancy.
Lifestyle considerations

» **Stress:** Pregnancy and childbirth can be a very stressful time. Concerns about work, housing and financial security are also common areas of stress at this life stage. Past experiences, a history of family violence or sexual assault can contribute to feelings of anxiety around becoming a parent or getting pregnant. If you are feeling overwhelmed, anxious or in need of assistance talking with your doctor, midwife, or a counsellor or psychiatrist may be helpful.

» **Alcohol:** It is strongly advised you limit your alcohol intake if you are planning to become pregnant. Large amounts of alcohol, particularly in the first few months of pregnancy, can lead to physical or mental abnormalities in babies as well as growth retardation. Alcohol intake can also affect sperm counts in men.

» **Cigarettes:** Smoking cigarettes has been proven to be harmful to the unborn baby. Smoking is associated with infertility in both men and women and increased chances of miscarriage. Smoking in pregnancy also affects the size and the long-term health of babies. If you or your partner smoke, giving up before attempting to become pregnant is a good idea.

» **Recreational and illegal drugs:** If you are planning to get pregnant you should avoid recreational drugs, as they can be harmful to you and the baby. Drugs such as marijuana and anabolic steroids may also affect men’s sex drive and sperm counts.

Vaccinations

» **German measles:** German measles (Rubella) is normally a mild viral disease; however, infection during the first 20 weeks of pregnancy can result in severe abnormalities in an unborn baby. These conditions include developmental delay, congenital cataracts (blindness), enlarged liver or spleen, or death.

» If you are diagnosed with congenital rubella within the first 16 weeks of pregnancy, your doctor may offer you the option to terminate the pregnancy. The most dangerous time to get German measles is within the first 11 weeks when you may not yet know you are pregnant. This is why it’s very important to get vaccinated before you get pregnant. Even if you have been vaccinated previously, immunity to German measles doesn’t always last a lifetime. You’re immunity can be tested using a blood sample. If you need another vaccination, it’s a good idea to wait for 28 days before you try to get pregnant or to have a follow-up blood test to make sure you are immune.

» **Chicken pox:** Chicken pox in very early pregnancy or close to the baby’s due date can cause infection in the baby, miscarriage or possible abnormalities. Infection is common in childhood. You may know that you had chicken pox or your parents or health records may be able to confirm if you have already had it. If you have, you will be immune. A blood test can also check your immunity. A vaccination is now available, but pregnancy should be avoided for 28 days after the immunisation.

» **Flu vaccination:** Pregnant women can become quite sick with flu and are also at risk of complications. As the flu virus changes frequently, the vaccine has to be updated every year. Flu vaccination during pregnancy is also highly effective in protecting babies against flu in the first six months of life. Flu vaccination is recommended for pregnant women and can be given at any stage of your pregnancy. The flu vaccine is free for pregnant women and is available from your GP. You cannot catch the flu from the vaccine; however, some people may experience mild side effects, which can be treated with paracetamol.

» **Whooping cough:** Whooping cough (pertussis) vaccination does not last a lifetime. Most adults are not adequately vaccinated because their last immunisation for whooping cough was more than ten years ago. Adults need a booster shot to make sure they are adequately vaccinated. This booster shot is available from your local doctor (GP). You will be charged a fee for this vaccination.

For more information

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