

## Healthy eating and weight gain during pregnancy

### **Healthy eating for pregnancy**

Healthy eating is important at all stages of life, especially during pregnancy. Your choices of what to eat and drink at this time can affect your health and the health of your baby for many years to come.

There is only a *small* increase in the *amount of food* you need to eat while you are pregnant. However, you do need more of certain nutrients, so it is very important that you make good choices for a *nutritious diet*. This is important so you and your baby get all you need for healthy growth and a healthy pregnancy.

Your daily food group requirements during pregnancy are outlined in the table overleaf. Use the numbers in the middle column to guide how many serves to eat from each food group per day. One serve is equal to each of the foods in the column on the right. For example, one serve of fruit is equal to 2 small plums, one serve of grain (cereal) foods is equal to ½ cup of cooked pasta.

### Folate or Folic acid during pregnancy

Folate (or folic acid) is needed for the growth and development of your baby. It is especially important in the month before you fall pregnant and the first trimester (three months) of pregnancy. A good intake of folate reduces the risks of your baby being born with some abnormalities such as spina bifida (a disorder where the baby's spinal cord does not form properly). Dietary sources folate include green high in vegetables such as broccoli, spinach, bok choy, and salad greens, some fruits and cereals and breads with added folic acid.

All women planning a pregnancy and in the early stages of pregnancy should eat a variety of folate-containing foods (listed above) You should also take a folic acid supplement of 400 micrograms per day at least one month before and three months after you become pregnant.

#### What's in this handout?

- Healthy eating for pregnancy –essential nutrients I need and how I get them?
- A sample meal plan to show you how this all fits together
- Managing healthy weight gain in pregnancy
- Food safety, including listeria
- Managing food related side effects, like constipation, heartburn, and morning sickness
- Being active during pregnancy
- Breastfeeding



	Normali a ii a f	
Food Group	Number of Serves per day (19-50 years)	1 serve equals
Vegetables and legumes/ beans	5	1/2 cup cooked green or orange vegetables (e.g. broccoli, carrot, pumpkin or spinach) 1/2 cup cooked, dried or canned beans, chickpeas or lentils (no added salt) 1 cup raw leafy green vegetables 1/2 medium potato, or other starchy vegetable (sweet potato, taro, or cassava) 1/2 cup sweet corn 75 g other vegetables e.g. 1 small-medium tomato
Fruit	2	1 piece medium sized fruit (e.g. apple, banana, orange, pear) 2 pieces smaller fruit (e.g. apricot, kiwi fruit, plums) 1 cup diced, cooked or canned fruit ½ cup 100% juice 30 g dried fruit (e.g. 1½ tbsp sultanas, 4 dried apricot halves)
Grain (cereal) foods, mostly wholegrain,	8½	1 slice of bread  ½ medium bread roll or flat bread  ½ cup cooked rice, pasta, noodles, polenta, quinoa, barley, porridge, buckwheat, semolina, cornmeal  ¾ cup breakfast cereal flakes  ¼ cup muesli  3 crisp breads  1 crumpet or 1 small English muffin or scone
Lean meat and poultry, fish, eggs, nuts and seeds, and legumes/beans	3½	65 g cooked lean red meats (e.g. beef, lamb, pork, venison or kangaroo) or ½ cup lean mince, 2 small chops, 2 slices roast meat 80 g cooked poultry (e.g. chicken, turkey) 100 g cooked fish fillet or 1 small can fish, no added salt, not in brine 2 large eggs (120 g) 1 cup (170 g) cooked dried beans, lentils, chickpeas, split peas, canned beans 170 g tofu ⅓cup (30 g) unsalted nuts, seeds or paste, no added salt
Milk, yogurt, cheese and/or alternatives (mostly reduced fat)	2½	1 cup (250 ml) milk 40 g (2 slices) hard cheese (e.g. cheddar) 120 g ricotta cheese 200 g yoghurt
Additional serves for taller or more active women	0–2½	Additional serves from the five food groups or 3–4 sweet biscuits 30 g potato crisps 2 scoops ice cream 1 Tbsp (20 g) oil



lodine

Adequate iodine in pregnancy is essential for baby's growth and brain your development. lodine is needed in higher amounts during pregnancy. It is now recommended that all pregnant women should take a supplement containing 150 micrograms of iodine. You still need to consume good food sources of iodine in addition to this supplement.

These food sources include:

- Vegetables,
- Bread with added iodine,
- Seafood, and
- Eggs.

Iron during pregnancy

Iron is needed to form the red blood cells for you and your baby. It helps carry oxygen in your blood and is needed for your baby to grow. During pregnancy you need a lot more iron than when you are not pregnant. It is best to get the iron you need from your diet. Iron from animal food sources is absorbed more easily than iron from plant foods. The best sources of iron are lean meats (especially red meat), some vegetables (especially green leafy ones), legumes, and fortified cereals.

What you eat or drink may stop your body using iron from your diet. You should limit your intake of these. They include:

- Drinking tea or coffee with meals
- Taking your iron supplement with a meal that includes milk, cheese or yoghurt
- Eating more than 2 tablespoons of unprocessed bran.

You can help your body get iron from the food you eat or drink by:

- Including vitamin C with meals (e.g. citrus foods, tomato, capsicum)
- Including animal protein with green leafy vegetables at a meal
- Using antacids sparingly

### Multivitamin supplements

A multivitamin during pregnancy is not necessary unless you do not have a balanced diet - compare what you are eating with the food group table in this handout.

Remember, a folic acid supplement is important during the first trimester of pregnancy, and iodine is essential during pregnancy (and breastfeeding). You may also need to take an iron supplement if your iron levels are low. You may choose to get these nutrients from individual tablets or



from a multivitamin. If you DO take a vitamin or mineral supplement during pregnancy, choose one that is specifically designed for pregnancy. Always check with your doctor before taking any supplements as an excessive intake of these can be harmful and reduce the absorption of other nutrients.

#### Herbal supplements and preparations

Many herbal preparations have a drug-like effect. These should be used with the same caution as with other drugs. Please call the NPS (National Prescribing Service) Medicines line for any information regarding alternative treatments in pregnancy, phone 1300 633 424.

### Eating fish during pregnancy

Fish is a safe and an important part of healthy eating. It is an excellent source of protein, is low in saturated fat, high in omega 3 fish oils and a good source of iodine. Omega 3 oils are important for

growth of your baby's brain and eye development.

It is important to eat fish when you are pregnant but you need to be careful about the fish you choose. Some fish may accumulate mercury, which may be harmful to your baby's developing nervous system. Food Standards Australia New Zealand has set the following safe guidelines for fish intake.

# Pregnant women and women planning pregnancy (1 serve = 150 g)

1 serve per *fortnight* of shark (flake) or billfish (swordfish/broadbill and marlin) and NO other fish that fortnight

#### OR

1serve per *week* of Orange Roughy (Deep Sea Perch) or catfish and NO other fish that week

#### OR

2–3serves per week of any other fish and seafood not listed above

Things I can do to improve my diet for a healthy pregnancy:
1.
2.
3.
4.
For further information contact your Dietitian or Nutritionist:



This meal plan provides a general guide to eat all the foods you may need during pregnancy. A Dietitian can change this guide to suit your individual needs.

BREAKFAST	
	2 slices of toasted multi grain/wholemeal bread 1 large poached egg Mushrooms & tomato
MORNING TEA	
	200g low fat yoghurt ½ cup muesli
LUNCH	
	90g tuna & salad on multi grain roll  1 medium piece fresh fruit
AFTERNOON TEA	
	2 slices of cheese on 3 crisp-breads 1 cup fresh fruit salad
DINNER	
	130g roast lamb 1 ½ cups cooked mixed vegetables 1 medium potato
SUPPER	
	1 cup reduced fat milk 1 slice raisin toast

## Healthy weight gain

It is important for your and your baby's health to eat well during pregnancy. Keeping track of your weight is also important. You should balance your nutritional needs with healthy weight gain and eating to appetite.

Not enough weight gain can increase the risk of preterm birth and cause problems later in life. Women who are overweight or gain too much weight during pregnancy have a higher risk of:

- High blood pressure
- Gestational diabetes

- A large baby (macrosomia)
- Caesarean sections
- Birth defects
- Difficulty losing weight after their baby is born.

This can also increase your long-term risk of diabetes, heart disease and some cancers.

### How much weight should I gain?

The weight you should aim to gain depends on what your weight (and body mass index - BMI) was *before* you became pregnant. BMI is the number used to work out the recommended amount for you. If you were given a



handheld record from antenatal clinic you may find your BMI in here. If not, you can work it out using the steps in the box below.

Use this table as a general guide to what you should gain during pregnancy.

If your <i>pre-pregnancy BMI</i> was	You should gain	
Less than 18.5 kg/m²	12½ to 18kg	
18.5 to 24.9 kg/m²	11½ to 16kg	
25 to 29.9 kg/m²	7 to 11½ kg	
Above 30 kg/m²	5 to 9kg	

As well as having an overall weight gain goal for your pregnancy, there is a trimester-by-trimester guideline to follow:

How much should I gain in my first trimester? All women can expect to gain one or two kilograms in the first three months of pregnancy.

How much should I gain in my second and third trimesters? This depends on your *pre-pregnancy BMI*. Refer to the table below to see your goal.

If your pre-pregnancy	You should gain	
BMI was		
Less than 18.5 kg/m <sup>2</sup>	½ kg/week	
18.5 to 24.9 kg/m <sup>2</sup>	400g/week	
Above 25kg/m²	Less than 300g/	
	week	

# Do I have a different weight gain goal if I am having twins or triplets?

Yes — If you are going to have more than one baby you will need to gain more weight than outlined above. Use these recommendations instead:

If your <i>pre-pregnancy BMI</i> was	You should gain
Less than 18.5	Talk with your
kg/m²	dietitian/obstetrician
18.5 to 24.9 kg/m <sup>2</sup>	16 to 24kg
25 to 29.9 kg/m²	14 to 23 kg
Above 30 kg/m²	11 to 19kg

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170.0 -					
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90.0 -		—— BMI 18.5			
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70.0 -					
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40.0 -					
30.0 -					
140cm 150cm 160cm 170cm 180cm 190cm 200cm					
Height in centimetres					



# What should I do if I am not gaining enough weight?

Not gaining enough weight means you and/or your baby may miss out on important nutrients. It is important to have three meals a day, and also have between-meal snacks, such as morning tea, afternoon tea and supper.

Good snacks include:

- Fruit toast
- · Dried fruit, nuts, and seeds
- Yoghurt
- Muesli bars
- Cheese & crackers
- Milk drinks

Sometimes women who have morning sickness early in pregnancy find it difficult to gain enough weight. Sometimes they even lose a small amount of weight. If this happens to you, you do not need to be concerned as long as you start to gain weight in the second trimester of your pregnancy.

# What should I do if I am gaining weight too quickly?

Gaining too much weight when you are pregnant can increase your blood pressure and increase your risk of gestational diabetes.

To control your weight gain, limit foods that are high in fat and sugar. Make sure

you are not 'eating for two'. It is also important to include regular physical activity on most days (see next page).

See the lists below for foods that you might like to swap or stop!

## Limit the amount of fat you eat by:

- Limiting biscuits, cakes, chips, and crisps
- · Reducing the amount of fat in cooking
- Choosing low fat dairy products (e.g. milk, yoghurt)
- · Avoiding cream and sour cream
- Trimming fat from meat before cooking
- Using healthy cooking methods like grilling, steaming, baking
- Removing skin from chicken
- Limiting high fat takeaway foods.

## Limit high sugar foods by:

- Drinking water, not soft drink or cordial
- Using 'diet' or low joule products
- Limiting fruit juices to one glass per day as these are high in sugar (even 100% juice)
- Limiting chocolates, Iollies, sweets and desserts.

Listen to your hunger cues and only have a snack if you are actually\_hungry.

Watch your serve sizes, especially of foods like rice, pasta, potato, bread and meat.



# Returning to your pre-pregnancy weight

The greatest amount of weight loss occurs in the first 3 months after birth and then continues at a slow and steady until 6 months after birth. rate Breastfeeding helps you return to your pre-pregnancy weight as some of the weight you gain during pregnancy is used as fuel to make breast milk. Healthy eating and regular physical activity in the postnatal period will also help you to lose the weight gained during pregnancy.

### **Future pregnancies**

If you are planning another pregnancy, it is a good idea to return to your prepregnancy weight first, or close to this. Starting your pregnancy at a BMI above the healthy weight range puts you and your baby at greater health risks during pregnancy. Retaining excess weight over subsequent pregnancies increases your risk of lifestyle diseases. Speak to your dietitian for more advice.

## Being active during pregnancy

#### 1. How much is enough?

To get the most health benefits, a good goal is at least half an hour of moderate-intensity physical activity on most, preferably, all days. You do not have to do it all at once. Your exercise can be

spread over the day, in ten-minute blocks. Try three ten minute walks, or two fifteen-minute periods of activity.

# 2. What does moderate-intensity activity mean?

Moderate-intensity means you are exercising at a comfortable pace. A good guideline is the 'talk test' — you should be able to easily hold a conversation without being short of breath.

#### 3. Benefits of being active include:

- Less lower back pain
- Less nausea
- Less heartburn
- · Lower stress levels
- More energy
- Better bowel habits better sleep
- Being more relaxed
- Less anxiety

# 4. What are some activities that I can do?

Many activities are safe during pregnancy including:

- Swimming
- Walking
- Cycling on an exercise bike
- Yoga or pilates
- Low-impact aerobics, like water aerobics
- Light resistance gym program



Classes that specially cater to pregnant women may be more suited to your needs and body changes during your pregnancy. They can adapt exercises for you, such as having you lie on your side as you exercise rather than on your back, which is not advised throughout your pregnancy.

Remember that incidental activity counts too! This is physical activity that builds up as part of everyday activities. Try to:

- Use the stairs instead of the lift
- Park your car further away from the shops
- Get off the train or bus one stop early and walk home
- Be active around the house or garden

Most activities are safe, as long as you:

- Take things easy Do not become
- Stop when you overheated
  - are tired Stop the activity
- Drink plenty of if you water experience any
   Wear suitable pain that doesn't
- clothing settle quickly.

#### 5. Avoid:

 Excessive stretching — Your ligaments can be softened by the hormonal changes during pregnancy. Be careful with side kicks in aquaaerobics and swimming breaststroke.

- High impact activities or contact sports
   These include running, surfing, water skiing, trampolining, gymnastics, netball, touch football or squash.
- Activities that may limit your oxygen supply— two examples are scuba diving and mountain climbing.

#### 6. How can I keep motivated?

- Plan to do an exercise class each week or to walk with a friend.
- Do exercises that you enjoy.
- Remind yourself of how good you feel when you do and after you are active.
- Remember the benefits of being active during pregnancy.

### 7. When to stop physical activity

If you experience any of the following symptoms during or after physical activity stop and talk to your doctor:

- Contractions
- Vaginal bleeding
- Dizziness or unusual shortness of breath
- A headache
- Decreased foetal movements
- Sudden swelling of ankles, hands and face.



## **Food Safety**

Hormonal changes during pregnancy may make your immune system weaker. This can make it harder to fight infections. Foods are sometimes a source of infections so protecting yourself from food poisoning is important.

#### Listeria

Listeria is a bacteria found in some foods, which can cause an infection called listeriosis. If passed on to your unborn baby it can cause premature birth, miscarriage or damage. It is important to avoid foods that are a high risk of containing listeria throughout your pregnancy.

Always keep your food 'safe' by:

- Choosing freshly cooked and freshly prepared food.
- Thawing food in the fridge or defrosting food in the microwave.
- Cooling left over food in the fridge rather than the bench.
- Wash your hands, chopping boards and knives after handling raw foods.
- Make sure hot foods are hot (above 60 degrees Celsius) and cold foods are cold (below 5 degrees Celsius), both at home and when eating out.
- Make sure all food is fresh, used within the use-by date.

- Wash fruits and vegetables thoroughly before use
- Eat leftovers within 24 hours and reheat foods to steaming hot.
- Heat leftovers to above 74 degrees for over 2 minutes.
- Cook all meat, chicken, fish, and eggs thoroughly.
- Never re-freeze food once it has been thawed.

Foods that might contain Listeria and should be avoided include:

- Unpasteurised dairy products
- Soft cheeses such as brie, camembert, ricotta, and fresh fetta, unless they are cooked (yellow, hard cheese, and processed packaged cheese are safe)
- Soft serve ice cream and thick shakes
- All paté and ready to eat cold meats, including deli and packaged meats (e.g. ham, salami, cooked chicken)
- Ready-to-eat salads (from salad bars, buffets, supermarkets etc.)
- Raw or smoked seafood (including oysters, salmon, sashimi, sushi)
- Home prepared meats are normally free of Listeria, if used within 24 hours or if they have been frozen.

Some other bacteria and parasites can be harmful to your unborn baby.



In addition to the precautions above:

- Do not eat raw or undercooked eggs: eggs must be well cooked so that both the white and yolk are hard.
- Wear gloves when gardening and wash hands afterwards.
- Avoid contact with cats and use gloves when handling cat litter (cats can be a source of Toxoplasmosis— a serious infection that can cause defects or death in your baby).

## Managing food-related side effects

#### 1. Nausea and Vomiting

Many women suffer from sickness, usually in early pregnancy. Morning sickness is usually caused by the hormonal changes of pregnancy, and can affect you at any time of the day. By the end of the 4<sup>th</sup> month of pregnancy, symptoms usually disappear or become much milder.

Some tips to help morning sickness:

- Eat small amounts every two hours an empty stomach can cause nausea.
- Avoid smells and foods that make your sickness worse.
- Eat more nutritious carbohydrate foods: try dry toasts or crackers, breakfast cereals and fruit.
- Eat less fatty and sugary foods.

#### 2. Heartburn

Heartburn, or reflux, is a burning feeling in the middle of the chest that can also affect the back of the throat. It is caused when acid moves from the stomach, back up the oesophagus. This happens because hormonal changes during pregnancy relax stomach muscles, and also because as the baby grows, more pressure is put on your stomach.

Some tips to reduce heartburn:

- Eat small regular meals more often
- Avoid fatty, fried or spicy foods
- Avoid tea, coffee, carbonated drinks, chocolate drinks and alcohol
- Sit up straight while eating
- Do not bend or lie down after meals or wear tight clothes
- Sleep propped up on a couple of pillows.
- Eat in a calm, relaxed place
- Avoid peppermint and spearmint containing gums and herbal teas
- Avoid drinking at the same time as eating

### 3. Constipation

Constipation is common during pregnancy. Hormone changes may relax the muscles in your bowel, which together with pressure from the growing baby can



slow down your bowel movements. It is important to have enough fibre, fluid and physical activity to avoid constipation. Good sources of dietary fibre include; vegetables, fruit, wholegrain and high fibre breakfast cereals, wholegrain bread, nuts, seeds and legumes. Water is the best drink.

#### **Breastfeeding**

Now that you are up to date on healthy eating for yourself you need to start thinking about nutrition for your baby when he or she arrives.

# Mothers & Babies are designed for breastfeeding

Breastfeeding is the natural way to feed your baby.

Breastmilk is a complex food. It changes to meet the particular needs of each child from the very premature baby to the older toddler.

#### Food for health

Breastfeeding has an amazingly positive effect on the health of both mothers and babies. For this reason, the World Health Organisation (WHO) and the Australian Department of Health recommend that all babies are breastfed *exclusively* (i.e. no other food or drinks) for around the *first 6 months* and then continue to receive

breastmilk (along with complementary food and drink) into the child's 2nd year and beyond.

Research shows that the longer the breastfeeding relationship continues, the greater the positive health effects.

#### Breastmilk provides:

- Protection for baby from infections such as ear, stomach, chest and urinary tract; diabetes, obesity, heart disease, some cancers, some allergies and asthma.
- Protection for mother from breast and ovarian cancers, osteoporosis and other illnesses.
- Healthier communities & environment.

#### Preparing to succeed

Research shows that nearly all of women are able to meet the breastmilk needs of their babies. Ask the midwife to put your baby skin to skin on your chest as soon as possible after birth. Take the midwife up on her offer to help your baby lead attachment to your breast. Talk to your family, friends and workplace about your decision to breastfeed so they are ready to support you once your baby has arrived.



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Callaway, L.K., et al. (2006), The prevalence and impact of overweight and obesity in an Australian obstetric population, Medical Journal of Australia. 184(2): p. 56-59.

Eat for Health Australian Dietary Guidelines. 2013. Commonwealth of Australia.

Foods Standards Australia and New Zealand, Listeria and food fact sheet, 2005.

Food Standards Australia and New Zealand, Mercury in Fish fact sheet, 2004.

The Growing Years Project, Brochure 2: Nutrition and physical activity when you're pregnant, (2005-2009), University of the Sunshine Coast.

Institute of Medicine (2009). Weight Gain During Pregnancy: Re-examining the Guidelines, National Academies Press.

National Health and Medical Research Council (2010), Public Statement, *Iodine Supplementation for pregnant and breastfeeding women*.

National Health and Medical Research Council (2006). Nutrient Reference Values for Australia and New Zealand Executive Summary. Dept. Health and Ageing. Canberra, Commonwealth of Australia.

Sports Medicine Australia Exercise in Pregnancy Factsheet, (2009).

World Health Organisation. Global Strategy for Infant and Young Child Feeding. World Health Organisation, 2003.

World Health Organisation. Infant Feeding: The Physiological Basis. 1996. James Akre (ed), WHO, Geneva.

Zimmermann M, Delange F. lodine supplementation of pregnant women in Europe: a review and recommendations. Eur JClin Nutr 2004;58:979-984.

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