NORMAL DISCOMFORTS OF PREGNANCY

The following is a list of normal discomforts of pregnancy, their causes, and some methods you can use to help relieve them. If any of the problems persists, or if you have any questions, please call the MIT OB Service at 617-253-1315.

Fatigue

Causes: During pregnancy, your body is very busy meeting the growing needs of your baby. Common especially in the beginning and end of pregnancy.

What to do:
1. Take your prenatal vitamin every day.
2. Eat three balanced meals a day.
3. Be sure to get a good night’s sleep.
4. Try to rest or take a nap during the day.

Nausea and Vomiting (“Morning sickness” can happen anytime during the day.)

Causes: Actual cause unknown. One theory is that hormones of pregnancy slow down your stomach’s ability to empty itself of food. They also affect your sense of smell and appetite. This may cause you to have nausea and vomiting.

What to do:
1. If you are sick in the morning, try a piece of dry toast or a cracker before getting up. Then get up slowly.
2. Avoid foods that are spicy, greasy, or that have strong odors. Also, be aware of what makes you sick and avoid these foods.
3. Eat slowly
4. Eat 4-5 small meals a day instead of 3 large meals.
5. If the problem continues notify the Ob Service. We can have you see the dietician, or may suggest vitamin B6 in moderate doses. If you are unable to keep anything down, we may need to check your hydration status as well.
**Frequent Urination**

**Causes:** Having to go to the bathroom more often may be caused by pressure on your bladder from the growing baby. Common especially in the beginning and end of pregnancy.

**What to do:**
1. If it keeps you up at night, try not drinking fluids for two hours before bedtime.
2. If you have burning, stinging or back pain with urination, call the OB Service at 617-253-1315.

**Heartburn**

**Causes:** Apparently due to the general relaxation of the gastrointestinal muscles and esophageal sphincter during pregnancy, which may cause reflux.

**What to do:**
1. Do the same as for nausea and vomiting.
2. If this does not help try Tums, Maalox or Mylanta, available at the drugstore. Keep tablets in your purse and liquid in the refrigerator. A dose 30 minutes before eating or at bedtime may help prevent problems with heartburn.
3. Avoid medications that contain sodium.

**Constipation**

**Causes:** Mechanical obstruction from the uterus and decreased mobility of the bowel due to smooth muscle relaxation. Iron supplementation may also increase this effect.

**What to do:**
1. Drink 6-8 glasses of water every day.
2. Eat plenty of vegetables and raw or dried fruits.
4. If there is no reduction of symptoms with the above recommendations, then try Metamucil or Colace.
5. If the constipation persists do not take any laxatives or enemas. Please notify the OB Service staff at 617-253-1315.
**Varicose Veins & Labial Varicosities**

**Causes:** In pregnancy, there is more blood to meet the needs for the growing baby. This and the pressure of the womb and baby on the blood vessels going to your legs or vulva may cause the vessels to protrude and sometimes ache.

**What to do:**
1. Do not wear tight clothing, especially thigh-high or knee high stockings.
2. Do not sit with your legs crossed.
3. Rest several times a day on your left side. If you work, try to elevate your legs during break time.
4. Wear support stockings if advised to do so.
5. Don’t stand in one position for a long time, try to shift weight.

**Hemorrhoids** (enlarged veins around the rectum)

**Causes:** Cause is the same as for varicose veins. Also, hard stools or bowel movements push these veins outside. They can hurt and bleed easily.

**What to do:**
1. Follow instructions for constipation.
2. Apply an ice bag or compress of clean gauze or fabric soaked in witch hazel or Epson salt solution. Also may use “Tucks” available at pharmacy.
3. Avoid prolonged sitting.
4. Report any bleeding or severe pain to your doctor.

**Backaches**

**Causes:** In order to maintain your center of gravity over the legs during pregnancy, the body compensates with a gradual lordosis (ie, a progressive increase in the anterior convexity for the lumbar spine). Unfortunately, this often leads to low back pain.

**What to do:**
1. Maintain good posture. Stand up straight.
2. Avoid excessive weight gain.
3. Wear low-heeled shoes.
4. Lift things by bending at your knees first, keep back straight.
5. Try a hot bath and have someone give you a back massage.
6. Try pelvic rock exercises and other back exercises. (These are posted in many of the exam rooms.)
**Vaginal Discharge**

**Causes:** The hormones of pregnancy normally cause the vagina and cervix to produce more discharge.

**What to do:**
1. Keep your entire vulva clean and dry by washing daily.
2. Wear cotton underwear.
3. Always wipe yourself from front to back after going to the bathroom and bathing.
4. Do not douche, do not attempt to wash inside the vagina.
5. Report to the Ob Service any discharge that has a bad odor, itching or burning, yellow or green in color, or one that is bloody.

**Sore Breasts**

**Causes:** The hormones of pregnancy cause an increase in size of the breasts to prepare for breast feeding. Breasts may even leak small amounts of milk towards the end of the pregnancy.

**What to do:**
1. Wear a good bra. If you plan to breast feed you could even buy a nursing bra.
2. Try a bra pad or a piece of gauze to absorb the milk. Wash off dried milk with plain water.
3. Do not use a plastic shield in the bra. Plastic retains moisture and can increase soreness.

**Headaches**

**Causes:** Headaches have many causes. Sinus congestion caused by increased vascularity of the nasal membranes, may cause some headaches. Headaches are most common during the first 3 months of pregnancy.

**What to do:**
1. Try to take a nap in a quiet, dark room.
2. Be sure that you’re getting enough sleep, and that you’re eating properly and taking your vitamins.
3. Too much tension causes headaches. Perhaps you need to speak to a counselor or your doctor.
4. Try taking some Tylenol – 2 tablets every 4 hours, but call the OB Service if the headaches persists.
**Intercourse** (Sex)

Under normal circumstances, there is no reason not to continue sexual intercourse during pregnancy although your partner’s needs may change.

**What to do:**
1. Talk with your partner about any feelings you are having. It may be normal throughout pregnancy for either partner not to feel the need for regular intercourse.
2. If intercourse becomes a persistent difficulty speak to your obstetrician.
3. Report any pain or prolonged bleeding after intercourse.

**Leg Cramps**

**Causes:** Pressure of the baby can cause a decrease in the flow of blood to your legs when standing, and to your head when lying down on your back. Possible calcium imbalance may also cause leg cramps.

**What to do:**
1. Balance rest and activity during the day.
2. Drink no more or less than 3-5 portions of milk or milk products a day. Calcium supplements may be helpful if milk is intolerable-check with your doctor.
3. Hold on to the back of chair, stand about six inches away and slide the foot of the cramped leg as far back as possible, keeping the heel on the floor. This exercise stretches the calf muscles and helps to relieve the leg cramp.

**Dizziness**

**Causes:** Pressure of the baby can cause a decrease in the flow of blood to your legs when standing and to your head when lying down on your back.

**What to do:**
1. Change positions slowly.
2. Rest on your left side.
3. Eat well balanced meals regularly – do not skip breakfast.
4. Don’t stand for long periods of time without resting or changing positions.
5. Increase your fluid intake.
Shortness of Breath

Causes: As the baby grows larger, it takes up more room and makes it harder for your lungs to expand. This may make it difficult to take normal breaths.

What to do:

1. Move slowly, take short rests when needed.
2. Sleep on your side, using extra pillows if needed.
3. Try to get some fresh air at least once a day.
4. Eat smaller meals 3 times a day and use 3 snacks to assure adequate total calories. Control rate of weight gain.
5. If severe or if symptoms persist, call the Ob Service.