

FACTFILE: GCSE HOME ECONOMICS: Child Development



Minor Problems Associated with Pregnancy

Learning Outcomes

Students should be able to:

- List a range of minor problems associated with pregnancy;
- Suggest how to avoid or treat these minor problems;
- Understand that the conditions should be monitored and that medical advice should be sought if they do not improve.

Many changes occur in the body during pregnancy. These changes can lead to a range of side effects and minor health problems. They can occur at different stages of pregnancy, so with time, the pregnant woman should start to feel better. Some women will have mild symptoms or none at all, whilst others could find their entire pregnancy uncomfortable, as one problem is replaced by another.

It is best that the pregnant woman speaks to her GP or midwife about these problems because:

- Some symptoms need to be monitored in case they develop into something more serious;
- Many medications are potentially harmful to the fetus in pregnancy; a doctor or midwife will tell her what is safe.

Heartburn

Heartburn and indigestion can be uncomfortable or painful. Some women find there are certain 'trigger foods' and they can learn to manage their symptoms by avoiding these foods. The main causes of heartburn in pregnancy are:

- The hormone progesterone relaxes the ring of muscle which usually closes the opening of the

stomach. Stomach acid can escape back in to the oesophagus, especially if the pregnant woman is lying down. This causes an uncomfortable burning sensation;

- Later in pregnancy, the growing uterus presses up on the stomach.



There are some lifestyle changes which could help the woman to cope with the symptoms of heartburn and indigestion:

- Eat smaller, more frequent meals;
- Avoid spicy food;
- Don't lie down flat after a meal and try to avoid bending over after eating;
- Don't eat late at night or just before bedtime. Use an extra pillow at night time to stay propped up a little;
- Keep a diary and try to identify trigger foods and drinks – common ones include fruit juice, tea, coffee, cola and chocolate.

A doctor or midwife can offer advice about what medication is safe to use if symptoms persist.

Nausea

The term **Morning Sickness** is a little misleading as pregnant women can experience nausea throughout the day or night. It is most likely to occur in the first 12 weeks of pregnancy and it should clear up by between weeks 16-20 (but for a small number of women, symptoms continue).

There is a more severe form of sickness which requires medical treatment, called hyperemesis gravidarum. If the mother-to-be cannot keep any food or liquid down, feels faint or vomits blood, she should see her doctor or midwife straight away.

In most cases, the developing baby should not come to harm, but sometimes the doctor will recommend a multi-vitamin supplement suitable for pregnancy if the mother finds it hard to keep any food down.

Ideas to Try

- Set the alarm a little earlier and take time to get up slowly;
- Eat a small amount of carbohydrate rich food before getting out of bed (e.g. a cracker or some toast);
- Some women find that ginger helps (ginger tea, biscuits);
- Drink sips of water frequently;
- Get plenty of rest;
- Wait a while before cleaning teeth;
- Try eating cold foods (they do not smell as strong).

Things to Avoid

- Alcohol and caffeine;
- Fatty foods;
- Spicy foods;
- Lying down after a meal;
- Tight clothes;
- Large meals (instead, have smaller more frequent meals);
- Eating late at night or close to bedtime;
- Strong smells can trigger nausea (perfume, food and drinks, cleaning solutions, bins).



Link your Learning

Role of Partner

- Make the meals – the smell of the food cooking might be enough to put her off eating it.
- Do the 'smelly' jobs like emptying rubbish bins.
- Bring her breakfast in bed.
- Offer sympathy and support.
- Get the family organised in the evening to avoid a rush in the morning, e.g. packing schoolbags, etc.



Tastes and Cravings

An estimated two thirds of mums-to-be experience some form of food craving¹. It is still unknown why pregnant women have cravings, but it is more common in women who suffered badly from morning sickness early in pregnancy.

It is possible that the hormonal changes in pregnancy could be responsible.

Taste sensation can change in pregnancy; in fact, a metallic taste in the mouth is often one of the first pregnancy symptoms a woman experiences.

Flavours she previously enjoyed (e.g. coffee or spicy food) could become repulsive to her.

Taste and smell are closely linked and perception can be heightened during pregnancy. Some women experience very strong aversions to tastes and smells, especially protein foods such as fish and meat. This could become an issue for her overall nutrition if the aversion is so bad that she skips meals. A supportive partner could help by cooking meals and taking care of household chores where strong smells are experienced.

Women often crave energy-dense foods high in fat and/or sugar. She can give in to her cravings

every so often, but it is important that she does not overindulge, as it could lead to overweight or gestational diabetes.

If she is craving very salty foods, the Mum-to-be should be advised that these could affect her risk of high blood pressure.



Pica

This is the desire to eat things that would not normally be considered food. It is thought that pica could be linked to a subconscious need for iron, but a blood test can identify if the woman's diet is inadequate.

Some women have reported cravings for paper, ice, freezer frost, clay, chalk, earth, coal, ash, metal (e.g. coins), polystyrene and soap²!

Many of these are dangerous – they could damage the teeth or lead to food poisoning. The Mum-to-be is advised to speak to her GP or midwife if pica cravings persist.

Constipation

The pregnancy hormone progesterone relaxes muscle tissue, which is really important in pregnancy to allow the uterus to support a developing fetus, but a side effect of this hormone is the relaxation of muscles in the digestive system. Slower transit of food through the digestive system causes constipation. Constipation can lead to the woman feeling bloated and sluggish, it can be uncomfortable or painful. Sometimes it leads to other problems such as piles (haemorrhoids) and varicose veins.

The other main cause of constipation in pregnancy is taking an iron supplement. Iron levels are checked frequently throughout the pregnancy, and if levels are low, a doctor or midwife will prescribe daily iron. However, iron supplements have been linked to constipation.

Iron can be toxic in high doses and should only be taken under medical supervision.

Piles (haemorrhoids)

Piles can be a common complication from prolonged constipation. The veins close to the anus enlarge and swell. It can be uncomfortable or painful to pass faeces and there may be a little blood.

- Prevention includes all the previous advice regarding constipation.
- Gentle daily exercise can improve circulation.
- A midwife can recommend ointments to ease discomfort and reduce inflammation.

Piles should disappear within a few weeks after the baby is born.

 A cartoon illustration of a pregnant woman with a distressed expression, sweating and holding her stomach. A yellow lightning bolt symbol is next to her. Surrounding her are five pink speech bubbles containing advice:

- Ask for an alternative type of iron supplement if it causes constipation.
- Try to get enough iron from food to avoid having to take a supplement
- Gentle exercise can help the transit of food in the gut.
- Eat fibre-rich foods such as wholegrains.
- Drink plenty of fluids.

Varicose Veins

Varicose veins are blue/purple in colour with a bulging appearance, most commonly in the legs. Veins have little valves inside them to stop the blood flowing back in the wrong direction as blood is carried against gravity from the legs back up to the heart.

It is very common to develop varicose veins during pregnancy because:

- Blood volume increases in pregnancy and this can put extra strain on veins;
- The hormone progesterone relaxes the walls of the blood vessels, causing them to stretch or sag in some women;
- The growing fetus, uterus and placenta weigh down the pelvic area, putting increased pressure on veins, which can cause them to become varicose;
- Many women find that varicose veins recover significantly after the baby is born.

Try not to stand for too long.

Try not to sit with the legs crossed.

Exercise will improve circulation.

Sleep with legs raised up on pillows.

Try to stay a healthy weight during pregnancy.



Dental Problems

These problems can occur at any time in the pregnancy. Hormonal changes make the gums more sensitive to plaque build-up.

To avoid the problem, she should follow the normal advice for healthy teeth and gums:

- Avoid sugary snacks between meals;
- Avoid fizzy drinks and sugary foods that could cause plaque build-up;
- Brush twice a day with a fluoride toothpaste for at least two minutes;
- Floss regularly.

If the woman is also suffering from morning sickness, vomiting exposes the teeth to acids. She should rinse her mouth with plain water and wait about an hour before brushing her teeth to avoid further damage to the enamel.

Dental treatment is free on the NHS when a woman is pregnant and for a year after her child is born. She can make an appointment to have her teeth professionally cleaned by a hygienist to help her to avoid bleeding gums during her pregnancy.

A woman should tell her dentist if she is pregnant:

- To access free treatment;
- X-rays can harm the unborn baby;
- Certain treatments could be harmful to the fetus.



Oedema

Oedema is the medical term for **swelling**. It is common for pregnant women to have swollen feet and ankles, but it can also affect the hands and the face.

The body holds more water than usual during pregnancy and it can accumulate over the day, especially if the woman has been standing a lot. Oedema over time is generally not seen as dangerous, but if it happens quickly, she should seek medical attention as this might indicate a much more serious condition called pre-eclampsia.

Tips for Avoiding Oedema:

Try not to stand for too long.

Drink plenty of fluids.

Keep feet moving when sitting.

Choose flat shoes with adjustable straps.

Rest with feet raised above the heart.



Backache

This problem is likely to occur later in pregnancy when the pregnant woman will be carrying more weight. Pregnancy hormones cause the ligaments to soften to prepare the body for labour, but the stretching of the ligaments can cause strain in the lower back and pelvic area, leading to backache.

To avoid or cope with backache:

If backache is severe, the woman should visit her doctor for advice. If it occurs close to her Estimated Delivery Date, it might be a sign that labour is starting.

Sit with a straight back.

Take time to rest.

Take gentle exercise.

Bend knees when lifting.

Avoid high heeled shoes.

Try to avoid lifting heavy things.



Link your Learning

Role of Partner

- Lifting – e.g. be there to help with shopping or help out if other young children in the family need to be lifted.
- Do more to help around the house, allow her to rest.
- Massage – to help ease the pain.

Emotional Changes



During pregnancy, hormonal changes can affect a woman's emotions. **Mood Swings**, or emotional highs and lows are particularly common in the first trimester³.

Additionally, there are other factors which can have an impact on a pregnant woman's emotional wellbeing:

Coming to terms with the responsibilities of parenthood, she could ask herself is she will be a good mother, or worry about how her relationship with her partner could change.

Financial considerations might cause her stress.

Changes to her body she may suffer from the ailments described in this Fact File. Some women feel uncomfortable and unattractive when they are pregnant; she might worry about regaining her figure after her baby is born.

Tiredness and stress

She may have had problems in previous pregnancies, suffered miscarriage or had problems conceiving. She might stress about staying healthy during her pregnancy.

She is likely to feel an odd mixture of emotions, e.g. worry, love, guilt, fear, surprise. It can be overwhelming, and family should try to be supportive. Pregnancy can be a time of great excitement for a mother-to-be, but at the same time, she could be fearful of labour.

Coping with Mood Swings:

- Get plenty of rest and sleep;
- Talk to other women or couples;
- Join an antenatal group for support;
- Practise mindfulness techniques;
- Join a pregnancy yoga class.

References

1. <http://www.bbcgoodfood.com/howto/guide/what-your-food-cravings-really-mean>
2. <http://www.emmasdiary.co.uk/pregnancy-and-birth/pregnancy/2nd-trimester-pregnancy/cravings>
3. <https://www.nct.org.uk/pregnancy/emotions-during-pregnancy>

Suggested Activities

Hot Seating

In pairs, take the role of a pregnant woman and her midwife. The pregnant woman should explain her minor problem associated with pregnancy; the midwife should offer her advice.

Advice for Partners

Script a podcast offering tips for how an expectant father can help his partner to cope with minor problems in pregnancy.

