PREGNANCY

Lifestyle

Pregnancy is a good time to do more of the things that will help keep you and your baby healthy.

Building Healthy Habits

Try to focus on:

- eating nutritious foods (see Eating Well for Pregnancy)
- ✓ getting regular exercise (see Taking Care of Yourself)
- ✓ finding health care providers you trust and going to prenatal care appointments (see Health Care During Pregnancy)
- brushing, flossing and seeing a dental professional
- ✓ quitting or reducing smoking
- building a support team of family, friends and community members (see Your Support Team)

DID YOU KNOW

Good dental care is especially important during pregnancy. Brush and floss regularly. See a dentist, if possible, and let them know you're pregnant when you visit.

Reducing the Risks

By making changes to your lifestyle, you can lower the risks to you and your baby. Help is available. Talk with your health care provider.

Hot baths, saunas and hot tubs

Hot baths, saunas and hot tubs can raise your body temperature. When you're pregnant and you get overheated, your baby's temperature goes up, too. This can affect her development.

Lower the risk:

- Keep the water temperature below 38.9°C (102°F).
- · Limit your time to 10 minutes.
- Have another adult with you.
- Get out right away if you feel dizzy or faint or have a fast pulse, irregular heartbeat, stomach pain or tingling in your feet or hands.
- Sit with your arms and chest above water.

TRY THIS

If sweat lodges are an important part of your culture, find other ways to take part while you're pregnant. Instead of doing a sweat, try being a firekeeper or taking care of the feast afterwards.

Caffeine

Caffeine is fine in small amounts, but too much is not good for you or your baby. By making you pee a lot, it can cause you to lose important minerals, like calcium. And it can keep both you and your baby awake.

Lower the risk:

- Limit coffee to 2 cups (500 ml) and tea to 4 cups (1,000 ml) a day.
- Remember that caffeine is found in things other than tea and coffee, like chocolate, pop and energy drinks.
- Try decaffeinated tea and coffee.





PARTNERS What You Can Do

Do your part to raise a healthy baby: make nutritious meals, exercise with your partner and plan social activities that don't involve alcohol. If you smoke, keep reading to learn how it can affect your baby and what you can do to stop or cut down.

X-rays and CT scans

X-rays and CT scans may expose your baby to radiation, which could cause birth defects or growth issues.

Lower the risk:

 Before any medical or dental work, tell your technician if you're pregnant or breastfeeding. Your health care provider will choose the safest test possible.

Pets

Pets, especially cats, can carry a parasite in their poop that can cause a serious infection ("toxoplasmosis") and lead to miscarriage or birth defects.

Lower the risk:

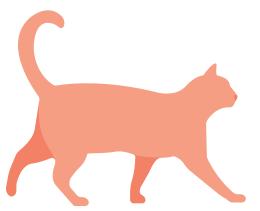
- Have someone else empty the litter box daily.
 If you do it yourself, wear disposable gloves
 and avoid breathing in the dust, then wash
 your hands well.
- If possible, keep your cat indoors.
- Wear gloves when gardening to avoid direct contact with soil that may have cat waste in it.
- Wash your hands well with soap and water after touching pets.

Violence in the home

Violence in the home puts both you and your baby at risk. If your partner abuses you physically, sexually, emotionally or verbally, your baby could also be injured. Your baby may be affected by the stress that comes along with violence in the home, too. Even if a child doesn't actually see the abuse, he will feel the tension and fear in the home. This can harm his development and lifelong health.

Lower the risk:

- Seek help. Start by talking about it, and take action at your own pace.
 - Call VictimLink BC for 24-hour support in 110 languages: 1-800-563-0808 (toll-free) or victimlinkbc.ca.
 - Talk with your health care provider or a violence worker.
 - Contact bc211 (dial 2-1-1) to find services and supports.
 - Call 9-1-1 for emergency help.



Medications

Many medications are safe to take during pregnancy and while breastfeeding. But some – including natural remedies, traditional medicines, and prescription and non-prescription medicines, like Advil (ibuprofen) – may be unsafe during pregnancy. Using opioids (like morphine, oxycodone and fentanyl) during pregnancy can increase your risk of miscarriage, preterm birth and low birth weight. Opioid use can also cause your newborn to go through withdrawal, as can using sedatives such as Xanax, Valium and Ativan (benzodiazepines) during pregnancy.

Lower the risk:

- Get advice from your health care provider or pharmacist. Tell them about all the medications you're taking, including natural ones. They can connect you to supports that can help you make changes so that you and your baby are as safe as possible.
- If you can't see your doctor right away, call HealthLink BC to talk with a nurse or pharmacist. Some medications, like those for seizures, should not be stopped suddenly.
- Never take sedatives along with opioids or alcohol.
- Talk with a naturopathic doctor about any teas, tinctures or other natural remedies you may be considering using while pregnant.
- Speak with an herbalist or traditional Elder for information on the use of traditional medicines during pregnancy.

Pregnancy • Lifestyle

Street drugs

Street drugs can put you and your baby at very serious risk. Using drugs like cocaine and crystal meth (methamphetamine) during pregnancy raises the risk of Sudden Infant Death Syndrome (SIDS) and can cause the placenta to tear away from the wall of the uterus. Inhalants – such as glue, gasoline, paint thinner, cleaning fluids, hairspray and spray paint – increase the risk of miscarriage, birth defects, and long-lasting problems similar to those of Fetal Alcohol Spectrum Disorder (FASD).

Lower the risk:

- Ask your health care provider for referrals to services that offer respectful support to people using substances during pregnancy.
- Work with your health care provider, street nurse or clinic to stop or slowly reduce your use.
- Call HealthLink BC at 8-1-1 anytime to talk with a registered nurse.
- Call the Alcohol & Drug Information Referral Service (ADIRS) for free, confidential information: 1-604-660-9382 (lower mainland) or 1-800-663-1441 (anywhere in B.C.).

Smoking, vaping and exposure to second-hand smoke

Smoking, vaping and exposure to second-hand smoke during pregnancy can increase the risk of miscarriage, stillbirth, preterm birth, low birth weight and Sudden Infant Death Syndrome (SIDS). Exposure to smoke after birth can reduce your milk supply and puts your baby at much higher risk of SIDS, ear infections, asthma and bronchitis. It can also increase the chance that your child will become a smoker.

Lower the risk:

- Try to quit. Contact Quit Now at quitnow.ca or 1-877-455-2233 (toll-free).
- If you don't feel able to quit all at once, smoke less and less.
- · Keep your car and home smoke-free.
- Ask others to smoke outside, then wash their hands. If possible, have them change clothes, too.
- Ask your pharmacist or doctor about the BC Smoking Cessation Program, which provides free and low-cost nicotine replacement products and medications to help you quit.

DID YOU KNOW

It's against the law in B.C. to smoke or vape in cars carrying children under 16 years old.

Alcohol

There is no known safe amount of alcohol during pregnancy. Alcohol during pregnancy can result in Fetal Alcohol Spectrum Disorder (FASD), which can cause your baby serious brain injury and problems with hearing, speech, vision, memory, coordination and learning.

Lower the risk:

- Stop drinking if you're pregnant or planning a pregnancy.
- If you're having trouble stopping completely, reduce the amount you drink. Never have more than 2 drinks at a time.
- See bcapop.ca for an outreach program near you.
- Call HealthLink BC at 8-1-1 anytime to talk with a registered nurse.
- Get support from a public health nurse, social worker or Elder.
- Call the Alcohol & Drug Information Referral Service (ADIRS) for free, confidential information: 1-604-660-9382 (lower mainland) or 1-800-663-1441 (anywhere in B.C.).

BE AWARE

If you're dependent on alcohol or if you go through withdrawal when you stop drinking, it may be dangerous for you to stop suddenly. Get support from your health care provider or the resources listed here.

Cannabis (marijuana)

There is no known safe amount of cannabis during pregnancy. Cannabis in any form – smoking, vaping or edibles – can cross the placenta and may affect your unborn baby. Using cannabis when pregnant may lead to low birth weight, stillbirth, preterm birth and birth defects. As your child grows, it may affect his intellectual development – including memory, focus and decision-making. It may also cause problems with sleep and hyperactivity and increase his own risk for substance abuse in the future.

Lower the risk:

- Stop using cannabis if you're pregnant or planning a pregnancy. If you have trouble stopping, talk with your health care provider.
- Use less cannabis, and use it less often.
- Don't use cannabis with tobacco or other substances, or with medications.
- Don't use cannabis to help with morning sickness. Find safer ways to cope (see Stages of Pregnancy) or talk with your health care provider.
- Choose lower-potency products that have higher levels of CBD and lower levels of THC.
 But be aware that even CBD-only products haven't been proven safe during pregnancy.

DID YOU KNOW

It's possible to become dependent on cannabis.

TRY THIS

Talk to your friends and family about any lifestyle changes you want to make while you're pregnant. Ask them to help you meet your goals for a healthy pregnancy – by not smoking cigarettes or cannabis around you, for example.



Sexually transmitted infections (STIs)

Sexually transmitted infections (STIs) can cause problems with your pregnancy, increase the risk of preterm labour and harm your baby.

Lower the risk:

- · Use condoms.
- Discuss your sexual practices with your health care provider.
- Make sure that both you and your partner get tested for STIs early in your pregnancy. Better yet, get tested before you get pregnant.
- If you have sex with a new partner, use a condom and get tested for STIs.

Testing for STIs is a regular part of prenatal care that helps make sure that you and your baby are as safe and healthy as possible.

HealthLink BC has more information about common risks during pregnancy and how to protect yourself and your baby. Visit healthlinkbc.ca or call 8-1-1 to talk with a nurse or other health care professionals.

Pregnancy • Lifestyle Baby's Best Chance

Sexually Transmitted Infections You Can Pass to Your Baby

Infection	Way Transferred to Baby	Symptoms	Treatment	Risks if Untreated	Prevention
Bacterial Vaginosis Diagnosed by testing a swab of fluids from the vagina.		Parent: Vaginal discharge, itching or burning, or no symptoms.	Parent: Antibiotics. Baby: Care for preterm birth.	Parent: Preterm labour, premature breaking of water (rupture of membranes), infection during labour or after birth, miscarriage.	Treat parent during pregnancy to reduce the risks.
Bacterial vaginosis is not considered to be a sexually transmitted infection, but your risk of getting it might go up if you have a new partner or more than one partner.					
Chlamydia Diagnosed by urine test or testing a swab of fluids from the vagina.	During birth.	Parent: Usually no symptoms. May have pain when peeing, vaginal discharge or stomach pain.	Parent and baby: Antibiotics.	Parent: Preterm labour, premature breaking of water. Baby: Pneumonia, eye infections, blindness.	Treat parent before birth to prevent infecting baby. Antibiotic eye ointment for baby at birth.
Gonorrhea Diagnosed by urine test or testing a swab of fluids from the vagina.	During pregnancy or birth.	Parent: Low stomach pain, vaginal discharge, pain when peeing, or no symptoms.	Parent and baby: Antibiotics.	Parent: Preterm labour, infertility or future pregnancy losses, pelvic inflammatory disease, reactive arthritis. Baby: Eye infections and blindness.	Treat parent before birth to prevent infecting baby. Antibiotic eye ointment for baby at birth.

Infection	Way Transferred to Baby	Symptoms	Treatment	Risks if Untreated	Prevention
Hepatitis B Diagnosed by blood test.	During birth or by contact with blood.	Parent: Loss of appetite, fever, tiredness, muscle and joint pain, stomachache, nausea, diarrhea, vomiting, dark urine, yellow skin and eyes. Baby: Usually no signs. May have fever, fatigue, vomiting, loss of appetite, yellow skin.	Parent: Ongoing antiviral drugs if necessary. Baby: Hep B immunization and hepatitis immunoglobulin.	Liver disease and liver cancer, especially for baby.	Parent: Hep B vaccine; antivirals if high virus levels during pregnancy. Baby: Hep B vaccine at birth; may also get Hep B immunoglobulin.
Herpes Diagnosed by a swab or blood test after a sore develops.	Usually during birth; sometimes before or after birth; during breastfeeding if there is a sore on or near the nipple.	Parent: Blisters/sores in genital area that appear once or return. May be no signs. Baby: Low energy, fever, low weight gain.	Parent and baby: Ongoing antiviral drugs.	Baby: Skin, eye, mouth or blood infections, seizures. May be fatal.	Avoid sex if you have a sore. Avoid oral sex if your partner has a cold sore. Condoms help, but don't guarantee protection. Caesarean birth recommended if you have an active infection. Avoid breastfeeding if you have open sores on your breast; pump or hand-express milk until healed. Pumped milk can be given to the baby if no part of the pump or your hands has come into contact with a sore; otherwise, discard the milk.

Pregnancy • Lifestyle Baby's Best Chance

Infection	Way Transferred to Baby	Symptoms	Treatment	Risks if Untreated	Prevention
HIV (Human Immunodeficiency Virus) Diagnosed by blood test.	During pregnancy, birth or breastfeeding.	Parent: At first – rash, fever, sore throat, severe headache, swollen lymph nodes, nausea, fatigue, mouth sores, vaginal infections, night sweats, vomiting, muscle and joint pain. Baby: Failure to thrive, swollen belly and lymph nodes, diarrhea, pneumonia, oral thrush. May test negative and have no symptoms. Regular testing is important.	Parent and baby: Ongoing antiviral drugs.	Parent and baby: Advanced HIV or AIDS.	Parent: Ongoing antiretroviral therapy during pregnancy and after birth. Baby: 6 weeks antiviral therapy after birth. Baby should not be breastfed.
Syphilis Diagnosed by blood test.	During pregnancy or birth.	Parent: Many have no symptoms. Some have a small, painless sore in genital area, then fever, rash, headache, swollen glands.	Parent and baby: Antibiotics (during pregnancy or to newborn).	Parent: Nervous system, eye and heart problems; preterm labour. Baby: Stillbirth or physical and mental problems.	Early treatment of parent usually prevents infection in baby. Avoid breastfeeding if you have open sores on your breast; pump or hand-express milk until healed. Pumped milk can be given to the baby if no part of the pump or your hands has come into contact with a sore; otherwise, discard the milk.
Zika Virus Diagnosed by blood or urine test.	During pregnancy.	Parent: A week of mild fever, rash, muscle and joint pain, irritated eyes, headache.	Parent: Usually cures on its own. Baby: Ongoing support and treatment to help child cope with developmental delays and other challenges.	Baby: Can affect brain development which could lead to an abnormally small head ("microcephaly") and cause developmental delays, epilepsy and hearing and vision problems.	Use condoms if partner has travelled to areas with Zika. Avoid sex with infected partners. While pregnant, avoid travel to areas where Zika is present.