



CARRYING TO TERM

Preventing Premature Birth
&
Low-birthweight Babies

Newborn Hope, Inc.



How Your Body Changes During Pregnancy

You will experience many physical changes as your baby grows in your **uterus** (womb), a muscular organ located between the bladder and the rectum.

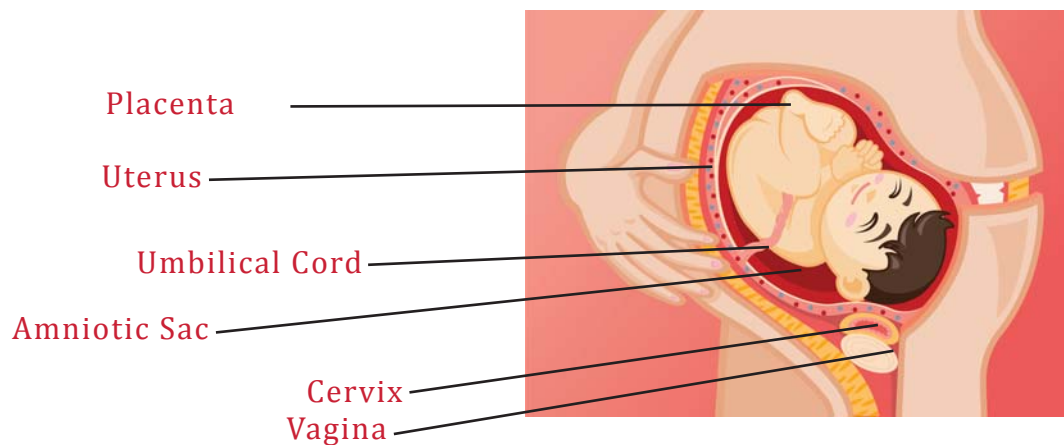
The **placenta** is an organ that delivers oxygen and nourishment to your baby and removes waste products. The placenta grows in the spot where the fertilized egg first settled in the uterus.

The **umbilical cord** connects your growing baby to the placenta. The baby floats inside the **amniotic sac** inside your uterus. This sac is filled with fluid, which cushions and protects your baby. Before your baby can be born, this sac must break. When it does, the fluid will be released through your **vagina**. You may have heard this referred to as your “water breaking.” Doctors sometimes refer to the sac breaking as “ruptured membranes.”

Your **cervix** is located at the bottom of your uterus. During labor, contractions of the uterus cause your cervix to thin (efface) and to open (dilate). This allows the baby to pass from your uterus into your vagina and then out of your body.

Where Does the Weight Gain in Pregnancy Go?

If a baby weighs 7 to 8 pounds, where does all the rest of the weight go? Breasts: 2 lbs.; Fat Stores: 7 lbs.; Placenta: 1½ lbs.; Amniotic Fluid: 2 lbs.; Uterus: 2 lbs.; Blood and Fluid: 8 lbs.



What is Premature Labor & Low Birthweight?

Premature labor is labor which occurs more than three weeks before you are expected to deliver. Uterine contractions (tightening of the womb) may cause the cervix (mouth of the womb) to open earlier than expected. This can result in the birth of a premature baby. If you know the warning signs of premature labor, discussed later, you and your health care provider may be able to prevent your baby from being born too early and too small. Babies born before 37 weeks of pregnancy and those weighing less than 5½ pounds may have problems with:

- Breathing,
- Keeping warm, and
- Breast or bottle feeding.

Babies born very early and very small are at risk for serious medical complications and future childhood learning and behavioral problems.

Babies who weigh less than 5½ pounds at birth are considered to be **low birthweight**. If a mother or a baby has medical problems, the baby may also need to be delivered prematurely and at a small size.



Premature Labor: Are You at Risk?

No one can tell who will have premature labor. It can happen to any pregnant woman. However, some women have a greater likelihood of delivering prematurely. The list below will help you determine your risk. Check the space beside each statement that applies to you.

Current Pregnancy

- I am carrying more than one baby (twins, triplets, or more).
- I am currently experiencing premature labor signs. See “Warning Signs of Premature Labor” on next page.
- I am bleeding and am 12 weeks or more pregnant.
- I am a smoker.
- I have had abdominal surgery during this pregnancy.
- I have an abnormal uterus (womb).
- I have frequent contractions. See “How to Feel and Time Contractions.”
- I am younger than 20 or over 35 years of age.
- I have cervical opening or thinning more than three weeks before my due date.
- I have uterine irritability/excessive contractions (tightening of the womb).
- I have placenta previa (the placenta partially or completely covers the cervix).
- I have used street drugs during this pregnancy.
- I have used alcohol during this pregnancy.
- I have little support and a lot of stress with this pregnancy.
- I have been abused.
- I have gained less than 10 pounds by the eighth month of my pregnancy.
- I have recently moved to a higher altitude or experienced a significant change in altitude.
- I have red, swollen and tender gums.

Medical History

- I have previously given birth to a premature baby.
- I have previously experienced premature labor.
- I have had two or more previous miscarriages or abortions.
- My mother was treated with Diethylstilbestrol (DES) while pregnant with me.
- I have had surgery or freezing on my cervix.
- I have a history of kidney infection or frequent bladder infections.
- I have an incompetent (weakened) cervix.
- I have heart or kidney disease and/or diabetes.

If you have checked any of the above statements, ask your health care provider to tell you how these factors may affect your pregnancy.



Premature Labor: Warning Signs

Every pregnancy can be different; be aware of new feelings

Uterine contractions that are 12 to 15 minutes apart or closer

Abdomen feels tight or hard 4 to 6 times an hour. Contractions may be painless.

Menstrual-like cramps

Cramps, just above the pubic bone, may be constant or come and go.

Low, dull backache

Ache may be constant or come and go and is not relieved by changing positions.

Pelvic pressure

It feels like the baby is pushing down.

Increase or change in vaginal discharge

Becomes heavier than usual, is blood-tinged, or is watery or mucus-like.

Abdominal cramping

May feel like severe gas pains, with or without diarrhea.

Feeling bad

You have a feeling that something is not right.

If you are less than 37 weeks pregnant and you experience 3 contractions within 20 minutes or less, begin the “RESPONSE MODE” steps on the next page.



Other Warning Signs to Report to Your Health Care Provider

- Unusual severe headache
- Dimmed or blurred vision, or seeing flashing bright lights or spots
- Increased swelling or puffiness in your hands, feet or face
- Chills or fever
- Pain or burning when urinating, or a decrease in urine output
- Vaginal itching, irritation or foul-smelling discharge
- Frequent vomiting for more than one day
- Cramping or sharp pain in the abdomen that does not go away
- If you fall or are in a car accident



Premature Labor: Response Mode

What to do During Premature Labor

- Go to the bathroom (empty your bladder).
- Lie on your side, drink 3 to 4 cups of water.
- While lying down, feel for contractions.
- If contractions are closer than 10 minutes apart
CALL YOUR HEALTH CARE PROVIDER RIGHT AWAY!
- If contractions are 15 minutes apart or closer after one hour of rest and fluids **CALL YOUR HEALTH CARE PROVIDER.**



When you call your health care provider, you should state:

- Your name
- Your baby's due date
- If you are having a high-risk pregnancy
- The warning signs you are having and the steps you have taken

If you go to the hospital:

- A monitor will be placed on your abdomen to check for uterine contractions.
- A cervical test for fibronectin, a marker for preterm delivery risk, may be taken.
- Your cervix may be checked for changes.
- If you are in labor, you will probably receive medication to stop contractions.
- If you are not in labor, you may be sent home.

Call Your Health Care Provider Right Away If You Have:

- A leak or gush of fluid from your vagina
- Any bleeding from your vagina
- Decreased or absent



How to: Feel and Time Contractions

What Is a Contraction?

When any muscle in your body “contracts,” it becomes tight or hard to the touch. When your uterus (which is a muscle) contracts, you will feel it get tight or hard.

It is normal for your uterus to contract at times during your pregnancy. Contractions may occur when you change position, have a full bladder, or following sexual activity.

Before 37 weeks of pregnancy, contractions that happen too often can lead to premature labor and cause your baby to be born too soon.

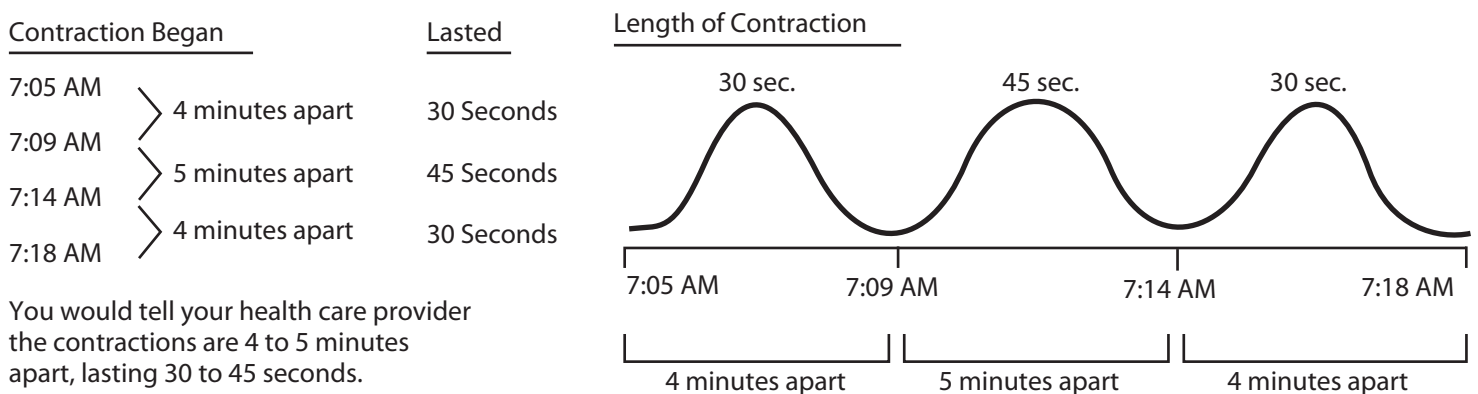
How to Feel for Contractions

Feel contractions by “bouncing” your fingers on the upper part of your uterus. If the uterus is soft and you can easily press your fingertips in, this is not a contraction. If you gradually feel the uterus tighten and get harder with each touch and then it relaxes, you are experiencing a contraction. Some contractions feel harder than others.

How to Time Contractions

Write down the time each contraction starts and how long each contraction lasts.

For example:



How to: Do Kick Counts

You can help check your baby's well being by learning to count your baby's kicks, twists or turns. Usually health care providers would like to see **10 movements in 1 hour**.

Optimum times to count movements:

- During your baby's most active time of the day
- After you eat or drink something cold containing calories
- After you have walked for 5 minutes
- While you are checking for contractions
- While lying on your side

You Know Your Baby Best!

1. Write down the time you start counting movements.
2. Put a check each time your baby kicks, twists or turns.
3. After your baby has moved 10 times, write down the time again.

Do kick counts every day or as directed by your health care provider.

Call your health care provider right away if you notice a decrease in movements.



Good Nutrition: Choosing for Two

Did You Know?

- Your baby shares everything you eat, drink and even breathe.
- Most women need to gain 25 to 35 pounds during pregnancy. Women who are underweight (<110 pounds) will need to gain more weight; women who are overweight (>180 pounds) may need to gain less. Ask your health care provider.
- Your baby could be born dangerously small if you don't gain enough weight throughout your pregnancy.
- Drink an adequate amount of water. Lack of adequate hydration may cause premature contractions and contribute to a premature birth. Caffeinated beverages do not add hydration.
- Your health care provider should be told if you have ever had an eating disorder, such as anorexia or bulimia.
- Before you need to wear maternity clothes, all of your baby's major organs have developed.

Choose a healthy lifestyle as soon as you learn you are pregnant!

Try to eat the following every day:

Plenty of high-fiber foods to avoid constipation (raisin bran, whole wheat bread, raw fruits and vegetables, etc.)

- 3 - 4** Servings of high-calcium foods (milk, yogurt, etc.)
- 3 - 5** Servings of vegetables
- 2 - 4** Servings of fruit
- 2 - 3** Servings of protein foods (lean meat, tofu, beans, etc.)



Folic Acid

Folic acid is a B vitamin found in foods such as dark-green leafy vegetables, citrus fruits, egg yolks, black beans, apricots, and fortified cereal. Folic acid can protect your unborn baby against some birth defects, such as spina bifida. The March of Dimes recommends that women between the ages of 15 and 44 who are capable of becoming pregnant, are planning pregnancy, or are in the early weeks of pregnancy consume 0.4 milligrams of folic acid each day. The average American diet provides only about half the folic acid needed. You can make up the difference by taking a multivitamin supplement at least one month prior to conception and through the early weeks of pregnancy.



What to Avoid During Pregnancy

Aerosols

Avoid aerosols, such as hair spray and room deodorizer.

Alcohol

Avoid completely! Alcohol consumption may cause Fetal Alcohol Syndrome. Even an occasional drink may cause side effects for your baby.

Caffeine

Caffeine in coffee, tea, soda and chocolate acts as a stimulant to your baby. Since the effects of caffeine are unclear, it is best avoided.

Cats

Some cats (especially outdoor cats) have a virus (toxoplasmosis) in their feces that is harmful to pregnant women. Have someone else change the litter box.

Chemicals

If you work with any chemicals and you don't know if they are safe, write down the name of the chemical and check with your health care provider.

Eggs

Raw eggs can carry harmful bacteria. Don't eat raw cookie dough and batters.

Hot Tubs/Saunas

Any activity that raises the body temperature to more than 102 degrees Fahrenheit (38.9 degrees Celsius) and keeps it there for even a short time is potentially hazardous to your developing baby. This includes taking a dip in the hot tub, an extremely hot bath, a sauna, a steam room or doing an overzealous workout in hot weather.

Medications/Herbal Supplements

Consult with your health care provider before taking any over-the-counter medicines or herbal supplements.

Smoking

Avoid completely! Smoking can increase chances of miscarriage, premature rupture of membranes and premature labor. It is linked to an increase in SIDS (Sudden Infant Death Syndrome) and low birthweight babies.

Uncooked Foods

Cook all meats, seafood and eggs completely. They may have harmful bacteria.

X-rays

If you need an X-ray, make sure the health care provider and X-ray technician know you are pregnant so you are adequately shielded.



About Stress & Pregnancy

Nearly all women experience some stress during their pregnancy. There is a connection between excessive stress and premature and low birthweight babies.

The following feelings may be part of the normal ups and downs of pregnancy. They may also be signs of stress that could affect your health and the health of your baby.

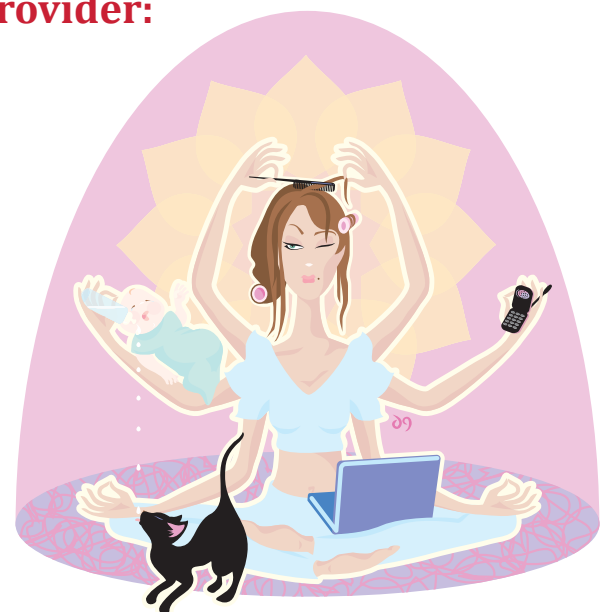
Report these symptoms to your health care provider:

- Tension and conflict in close relationships
- Irritability and anger
- Impatience
- Constant exhaustion
- Inability to sleep
- Feeling overwhelmed most of the time
- Sadness or depression
- Isolation and loneliness

Resources available to help:

- Physician
- Nurse midwife or nurse practitioner
- Nurse
- School counselor
- Social worker
- Clergy
- Your employer's Employee Assistance Program
- Community and hospital education programs

Each of these professionals can help you understand and respond to the stress you are experiencing. If necessary, they can refer you to other sources of help and support.



Dental Care & Pregnancy

Take care of your teeth and gums. Women with inflammation of the gums characterized by bleeding, swelling, redness, and sensitivity are at a 5 to 7 times increased risk of having a premature birth. See your dentist for regular teeth cleanings.



Link Between Abuse in Pregnancy and Low Birthweight

Abuse during pregnancy is an important risk factor in low-birthweight babies. Because nearly half of all American women will be abused at some time in their lives, you need to know how to read the warning signs.

The following list of warning signals will help you determine if your mate is a potential (or actual) batterer:

Jealousy & controlling behavior - controls your comings and goings and your money and insists on “helping” you make personal decisions.

Isolation - cuts you off from all supportive resources, friends and work colleagues.

Blames other for his problems, such as unemployment or family quarrels and says that everything is “your fault”

Hypersensitivity - easily upset by annoyances that are a part of daily life, such as being asked to work overtime, criticism of any kind, or being asked to help with chores or child care.

Cruelty to animals or children - insensitive to their pain and suffering.

“Playful” use of force in sex - may throw you down and hold you down during sex, start having sex with you when you are sleeping, or demand sex when you are ill or tired.

Unpredictable personality - sudden mood swings and changes in behavior; for example, one minute loving, the next minute angry.

Past history of battering - has hit others but has a list of excuses for having been “pushed over the edge.”

Threats of violence - says things like “I’ll slap you,” “I’ll kill you,” or “I’ll break your neck.”

Breaking or striking objects - breaks your possessions, beats on the table with fists, or throws objects near or at you or your children.

Uses force during arguments - holds you down or against a wall, pushes, shoves, slaps or kicks you; this type of behavior can easily escalate to choking, stabbing or shooting.

If any of these behaviors sound familiar to you, call your local law enforcement. The resources listed on the previous page can also help. Abuse is harmful to you and your baby. You don’t have to accept violent behavior from anyone.



For Medical Advice, Contact Your Health Care Provider

If you are in need of a health care provider, contact your local hospital, your health insurance company, or call the Family Healthline number listed below.

The following information is available in your community by
calling the Family Healthline:

- Help with food and housing
- Premature (early) labor prevention
- Pregnancy testing
- Substance abuse counseling
- Help with abuse

Family Healthline / 303-692-2229 / 1-800-688-7777

Se Habla Español

*The information in this booklet is intended to complement, but not substitute for, the care of a health care provider.
Newborn Hope shall not be responsible for any liability allegedly
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Newborn Hope, Inc. is a Colorado nonprofit 501(c)(3) organization with a mission to raise funds and support programs for the advancement of maternal, fetal and neonatal care and well-being. Newborn Hope is committed to making this guide available to all pregnant women and their families in Colorado.

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