There are many concerns a new mum will experience following the confirmation of an early pregnancy. Ensuring a safe and healthy pregnancy is a common experience shared by many women. Below is a list of some of the most commonly asked questions relating to the early stages of pregnancy. It is by no means an authoritative or exhaustive list however it may help to alleviate some of those initial concerns until you are able to visit your Doctor.

**IS IT NORMAL TO HAVE SPOTTING IN THE FIRST MONTH OF PREGNANCY?**

When an embryo implants into the uterine lining a small amount of vaginal spotting or bleeding may occur. The embryo is in touch with the mother’s blood, so oxygen passes to the developing embryo. Sometimes, as the blood bathes the embryo (about Day 26 of the conception cycle), a small amount of blood leaks out of the uterus and into the vagina. This is called an implantation bleed and is quite common. This spotting or bleeding is often mistaken for a menstrual period although it is much lighter. Spotting or bleeding during the first few weeks of a pregnancy is common however bleeding during pregnancy should always be evaluated by the IVF Doctor or General Practitioner. In most cases the pregnancy will progress onwards without further complications.

**IS IT COMMON TO FEEL SHARP CRAMPS ACROSS THE LOWER PART OF MY ABDOMEN DURING PREGNANCY?**

Most women experience cramps or mild, stabbing pains not unlike menstrual pain and cramping during pregnancy. This results from the stretching of muscles and ligaments that support the uterus, as the embryo begins to grow in the womb. Sometimes this is also associated with backache. It is common and usually subsides around 20 weeks of the pregnancy. Back pain is probably the result of softening of the supporting ligaments and disks due to the elevation of progesterone. However, it could be related to bladder or kidney infection, so be sure you do not have an underlying urinary infection.

**CAN I TAKE MEDICATIONS DURING MY PREGNANCY?**

It will depend upon the medication. Certain medications are not suitable to ingest during pregnancy as they may cause harm to the baby. If a medication has been prescribed during your pregnancy by your Doctor, it is best to discuss with your Doctor the risks and benefits of the medication in relationship to the reason the medication has been prescribed. The decision to use medication can be a difficult one. However when the potential benefits of the medication outweigh the potential risks of the medication to the mother and baby, medication may be the appropriate treatment. If you are purchasing an over the counter medication from a chemist or pharmacy, it is always advisable to check with the pharmacist if the product is safe to take during pregnancy or, read the enclosed patient information leaflets contained within the medication packaging. This will reduce a great deal of anxiety regarding the safety of medications administered during pregnancy.

**WHY DO THEY CALL IT MORNING SICKNESS IF I FEEL NAUSEATED ALL DAY? WHAT CAN I TAKE TO STOP FEELING NAUSEOUS?**

About three quarters of pregnant women have nausea (and sometimes vomiting) during their first trimester. For some, it’s worse in the morning and gets better over the course of the day, but “morning sickness” can strike at any time. The nausea usually starts around 6 weeks but can come on as early as 4 weeks and tends to worsen over the next month or so. About half of the affected women feel complete relief by about 14 weeks. For most of the rest, it takes another month or so for the nausea to ease up, though it may return later and come and go throughout pregnancy. By and large it is best if you can avoid any medications that may cause birth defects. While there are no magic cures for morning sickness there are some natural alternatives which have individual success for each woman. Vitamin B6 (also known as pyridoxine) relieves nausea for some women. Pregnant women who aren’t plagued by nausea need only 1.9 milligrams of this vitamin a day to help make antibodies, red blood cells, and neurotransmitters. The usual dose recommended for easing nausea and vomiting is much higher (10 to 25 mg, three times a day). However it is advisable to check with your healthcare provider before taking large doses (The amount of vitamin B6 in supplements varies by brand). Amounts greater than 100 milligrams per day have been associated with nerve damage.

Acupressure bracelets are also a natural alternative to medications. Acupressure therapy bracelets when applied to a specific acupuncture point around the wrist, control nausea and vomiting. Some women have found these bracelets beneficial in alleviating morning sickness but they may not work for every woman.

**CAN I FLY DURING MY PREGNANCY?**

Flying is generally safe during pregnancy. Usually the advised times to safely fly are from the 4th to 6th month of pregnancy. By then the physical and emotional adjustments within the first trimester have resolved. Airline services vary but usually allow pregnant women to fly up to 28-30 weeks of their pregnancy, so ask about flying restrictions before you book your ticket. Later than this is not advisable. Check with your Doctor if you are unsure.

**I FEEL SO TIRED. IS THIS NORMAL?**

Many women feel wiped out during pregnancy, especially in the early stages. During the early weeks of pregnancy, your body is working hard, pumping out hormones and
producing more blood to carry nutrients to your baby. To accommodate this increased blood flow, your heart pumps harder and faster. Plus, progesterone is a natural central nervous system depressant, so high levels of this hormone may make you sleepy. In addition, the possibility of pregnancy can bring about a range of feelings and concerns that may sap your energy and disturb sleep.

**I HAVE FREQUENT URINATION AND I AM CONSTIPATED. IS THIS NORMAL?**

Many pregnant women find themselves running to the bathroom more often than usual during the first trimester of pregnancy. This is caused by the enlarging uterus pushing on your bladder. Constipation is another common early indication of pregnancy. An increase in progesterone causes digestion to slow down, so food passes more slowly through the gastrointestinal tract, which can lead to constipation. Increasing your fibre and fluid intake will help to avoid constipation. Sometimes a natural remedy to help alleviate constipation can be purchased from your local pharmacy or chemist.

**WHY AM I GETTING HEADACHES?**

If you’re pregnant, you may be troubled by frequent, mild headaches. Early in pregnancy, headaches may be the result of increased blood circulation caused by hormonal changes.

**DOES EXERCISE HELP DURING PREGNANCY?**

Because exercise promotes muscle tone, strength, and endurance, it can help you carry the weight you gain during pregnancy, prepare you for the physical stress of labour, and make it easier to get back into shape after the baby is born. Being active during your pregnancy can also reduce the physical discomforts of backache, constipation, fatigue, self image and help you sleep more soundly at night. Some women need to take extra care when exercising. Check with your doctor before starting any exercise if you have a history of threatened miscarriage, had a previous premature delivery, are at risk of premature labour, have a low lying placenta, pre existing medical condition, bleeding, high blood pressure or expecting twins. Walking, swimming, stationary cycling, aqua aerobics, yoga and Pilates are all considered suitable forms of exercise in pregnant women. It may be safe for you to keep up high intensity workouts during a healthy, uncomplicated pregnancy, without compromising the baby’s health however remember to let your doctor or midwife know you plan to continue your workout routine, especially if you need to take extra care during your pregnancy.

**MOOD SWINGS**

The flood of hormones in your body in early pregnancy can make you unusually emotional and weepy. Swings in your mood, from bliss to deep gloom are also common, especially in the first trimester. Pregnancy can be a cheerful time, but not always, and not for every woman. At least 10 per cent of pregnant women suffer from bouts of depression. Fifty per cent of women suffering from severe depression during pregnancy go on to develop postnatal depression, but therapy during pregnancy can reduce that number dramatically. If you experienced many difficulties trying to get pregnant, or have had a miscarriage in the past, you may find yourself worrying about the safety of this pregnancy. Other common issues experienced by pregnant women include general anxiety, sleeping problems, relationship difficulties or other stressful life events. Remember to take it easy and talk about your concerns with your spouse, family or friends. However if you remain concerned that your mood is not lifting, talk to your Doctor, midwife or consider making a counselling appointment with one of our qualified counsellors at City Fertility Centre. A counselling appointment time can be arranged to suit you. Please ask to speak to the IVF Nurse Coordinators for more details.

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**FAINTNESS AND DIZZINESS**

It’s common for pregnant women to be lightheaded or dizzy. These sensations usually result from circulatory changes as your blood vessels dilate and your blood pressure drops. Early in pregnancy, faint feelings may also be triggered by low blood sugar.

**PRECONCEPTION CARE FACT SHEET**

Recommended advice provided within the Preconception Care Fact Sheet should also be maintained during your pregnancy.