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Welcome to Western Health

We look forward to caring for you and your baby throughout your pregnancy journey.

The Western Health Maternity team provides maternity care across two of our campuses;

- Joan Kirner Women's & Children's Hospital
- Bacchus Marsh Hospital.

Watch our <u>video</u> on Maternity Services at Western Health.

For general information about pregnancy and birth services in Victoria you can watch this <u>video</u>.

Care Options

Both Joan Kirner Women's and Children's and Bacchus Marsh campuses offer a number of options for pregnancy care if you choose to birth with Western Health.

Options for pregnancy care include:

- Midwifery Care
- Shared Maternity Care with your GP

Midwifery Group Practice (Caseload) is another option for pregnancy care at Joan Kirner Women's and Children's, and provides an option for homebirth and the Galinjera Maternity Program.

MIDWIFERY CARE

In this model of care you are seen by our team midwives and obstetricians throughout your pregnancy, labour, birth and postnatal care.

Midwifery care is offered at both campuses for women with uncomplicated pregnancies.

Appointments are offered at both Sunshine Hospital and Bacchus Marsh Hospital or Melton Health.

SHARED MATERNITY CARE WITH YOUR GP

This model allows you to continue to see a shared care approved GP, Obstetrician or Midwife in the community alongside your hospital pregnancy care. You will see a midwife at the hospital at 12-16, 22, 36 and 41 weeks. Your labour, birth and postnatal care will be through Western Health Maternity Services – either at Bacchus Marsh Hospital or Joan Kirner Women's and Children's at Sunshine Hospital.

MIDWIFERY GROUP PRACTICE (MGP)

Midwifery Group Practice (MGP) is offered at Joan Kirner Women's and Children's, and is sometimes referred to **Caseload Midwifery.** In this model of care you have a primary midwife providing continuity of care throughout pregnancy, labour and birth and the postnatal period.

Midwives work in a partnership with another midwife and within a small team of midwives. We meet with you on a regular basis throughout your pregnancy providing all your antenatal care.

What does the Midwifery Group Practice/ Caseload offer?

- · We offer homebirth or water birth options
- We offer appointments in community clinics near where you live
- We may attend other antenatal appointments with you as necessary - such as those with an obstetrician, social worker or physiotherapist.
- You will have 24/7 phone access to a known midwife
- Your midwife and the midwives in the group are on call to provide care for you during your labour & birth
- We come to your home providing postnatal care for you and your baby for up to 2 weeks

Will I always get to see my midwife?

Usually yes, however as your midwife works on call, they may occasionally be attending a birth or off duty. In which case you'll have the opportunity to meet other midwives in the group.

How do I get into the Midwifery Group Practice/ Caseload Program?

Ask your GP to refer you to the Midwifery Group Practice or speak to the midwife when you have your first appointment.



Schedule of Visits

Below is an outline of the appointments you can expect if your pregnancy is uncomplicated. If risks are identified, you may have more appointments offered to you.



Appointment

What to expect at this appointment

12-16 weeks

Midwife appointment —
This is your first appointment at
Western Health and is also called
your booking appointment.

Your first appointment will be held via Telehealth unless you are beyond 20 weeks at the time of booking. The remainder of your appointments will be mostly face to face in the hospital.

It is a 45 minute long appointment where we will ask about:

- Past medical history tell us....
 - If you've ever been to hospital before
 - If you've ever required surgery
 - If you have any allergies
 - If you've ever had a blood transfusions
 - If you've got significant family medical history
 - If you've ever experienced female genital cutting
 - If you're taking any medications or multivitamins
- · Pregnancy history
 - Did you require IVF or ovulation assistance to get pregnant?
 - Do you know when your last known period was?
 - Tell us about any past pregnancies, terminations or miscarriages
 - If you've given birth before, were there any issues during or after the birth with yourself or baby?
 - If you've birthed at another hospital, have any notes handy (discharge summary etc. - check back of baby's green book!)
- Psvchosocial Health
 - How is your mental health?
 - What's your social situation like, who do you live with?

At this appointment we will review any of your early pregnancy tests. We will also arrange any referrals to other disciplines such as mental health, physio or endocrinology etc.

Other tests that may be offered to you based on risk factors include:

Early diabetes screen, gonorrhoea and chlamydia

Appointment	What to expect at this appointment
22 weeks Midwife appointment — This includes a pregnancy assessment, including listening to your baby's heartbeat, blood pressure monitoring, and answering any questions or concerns you may have.	The following tests are to be done before your 28 week appointment: Diabetes screening test. Blood group and antibodies, Full blood count. Other tests that will be offered to you based on risk factors include: Ferritin Vaccines offered to you after 20 weeks: Influenza and Whooping Cough.
28 weeks Midwife appointment	1st Anti D injection for women with a negative blood group
31 weeks Midwife appointment	
34 weeks Midwife appointment	2nd Anti D injection for women with a negative blood group
36 weeks Midwife appointment	 Group B streptococcus (GBS) screen - low vaginal swab Full blood count and ferritin (if indicated)
38 weeks Midwife appointment	
40 weeks Midwife appointment	Induction of labour planning
41 weeks Maternity Assessment Centre	 Postdates monitoring, including: Ultrasound to measure the fluid around your baby and to check the blood flow to your baby CTG - performing a trace of your baby's heartbeat



Routine blood tests in your pregnancy

At the beginning of your pregnancy, your GP should arrange for you to have the following blood tests:

- Group and antibody screen
- Mid Stream Urine sample (MSU)
- Full Blood Count
- Thalassemia Screen
- Vitamin D
- Hepatitis C
- Hepatitis B
- HIV
- Syphilis
- Rubella

Genetic Screening

Your GP should discuss your options with you for genetic screening in pregnancy. Screening looks at the probability of your pregnancy being effected by a chromosomal abnormality.

Not all tests have the same sensitivity. It is best to discuss your personal circumstances with your doctor.

Test type	Timing	Cost
Common Name Combined first trimester screening (CFTS) Test Type	Blood test Between 9 weeks and 13+6 weeks of pregnancy.	Medicare rebate available
Blood test and ultrasound vcgs.org.au/tests/maternal-serum-screening	Ultrasound Between 11 weeks and 13+6 weeks	
Common Name Cell Free DNA (Percept, NIPT, Harmony)	Any time after 10 weeks	Out of pocket cost
Test Type Blood test only, however additional ultrasound is recommended		
vcgs.org.au/tests/perceptnipt		
Common Name Maternal serum screening test (MSST).	Between 15-20 weeks	No out of pocket cost (covered by Medicare)
Also called second trimester screening. Test Type Blood test only		
vcgs.org.au/tests/maternal-serum-screening		



Ultrasounds

You are recommended to have scheduled ultrasounds throughout your pregnancy.

- To detect structural abnormalities in the baby (however not all abnormalities can be detected on the scan)
- · To check the position of the placenta
- To check the baby's size in relation to your due date

If your GP has not already arranged the scan for you, your midwife is able to refer you at your booking appointment. You will need to book your scan in the community, unless otherwise recommended by your midwife. Below is a list of ultrasound providers.

Some of the cost of the scan will be met by Medicare, however there will be a gap payment required.

Once the scan is complete, it is important that you visit your GP to get the results. You need to bring a copy of the report with you when you next visit the hospital.

Please request the ultrasound provider to fax a copy of the report to Women's Clinic on 9055 2145.

If you have any questions or concerns regarding the result of the morphology scan, please contact your team midwife co-ordinator on 8345 1727.

Ultrasound type	Reasoning for scan	Timing
Viability Scan (via GP)	Confirms the location of pregnancy and may give an estimated due date.	Between 5 -8 weeks
Dating Scan (via GP)	The most accurate time to "date" the pregnancy and give the most appropriate due date.	Between 8 - 12 weeks
20 week ultrasound	Your GP may have given you a request slip already for this ultrasound. It should be done between 19 -22 weeks. It will assess the following;	
	Overall development of baby (heart, brain, organs, growth)	
	Position of placenta	
	Length of cervix	
Further ultrasounds	Further ultrasounds may be recommended if any risk factors are identified in your pregnancy.	As required.

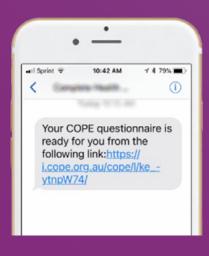
Perinatal Wellbeing

Many women need extra emotional support during pregnancy. We have complied a list of resources for you to consider if you recognise that this is you. Please don't hesitate to also speak to your treating maternity team or GP.

EDINBURGH DEPRESSION SCORE (EPDS)

Prior to your first appointment you will receive a text message that will ask you to complete a mental health screen. The message will appear like the below picture.

Once completed, please keep note of your score and let your midwife know your score at your first appointment.



RESOURCES

ONLINE RESOURCES	
Centre of Perinatal Excellence (COPE)	cope.org.au
Support for Fathers	supportforfathers.com.au
TELEPHONE SUPPORT	
PANDA	1300 726 306
Lifeline	13 11 14
Parentline Victoria	13 22 89
SERVICES	
Mums Matter Psychology	(03) 9079 6930 mumsmatterpsychology.com
Drummond Street	(03) 9663 6733

PHONE APPS
Smiling Mind
What Were We Thinking!
MindMum

ds.org.au

ONLINE SUPPORT	
Mum 2B Mood Booster	mum2bmoodbooster.com
Mum Space	mumspace.com.au
Mood Gym	moodgym.com.au
This Way Up	thiswayup.org.au

How to find us

Western Health has Maternity Services located at both Bacchus Marsh Hospital and the Joan Kirner Women's and Children's at Sunshine Hospital.

BACCHUS MARSH HOSPITAL

29-35 Grant Street, Bacchus Marsh, 3340 Phone: (03) 5367 2000

Parking

The hospital has free parking within the hospital grounds on the corner of Clarinda and Turner Street for patients and visitors.

The Urgent Care Department entrance on Clarinda Street offers a 5 minute only zone for patient drop-off and pick-up.

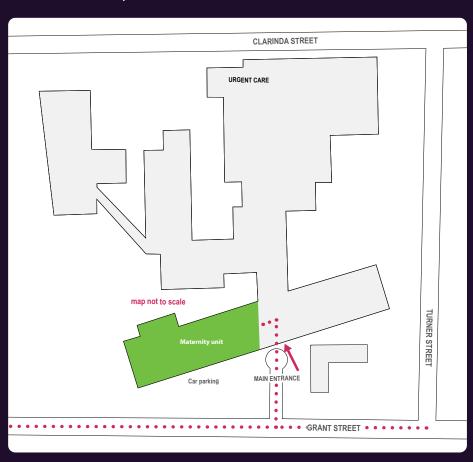
Designated disability parking is located at the front entrance of the hospital and also at the Emergency Department entrance.

Clarinda Street has on-street parking but please read parking signs in case restrictions are in place.

Public Transport

Bus: Bus stop on Grant Street Bus 433, 434 & 435.

Bacchus Marsh Hospital



JOAN KIRNER WOMEN'S AND CHILDREN'S AT SUNSHINE HOSPITAL

176 Furlong Rd, St Albans 3021 Phone: 8345 1333

It is the light green building on the site map below. You can access a bigger version of this map <u>here.</u>

Hospital Tours

Tours are currently unavailable due to COVID 19. You can see the hospital virtually <u>here.</u>

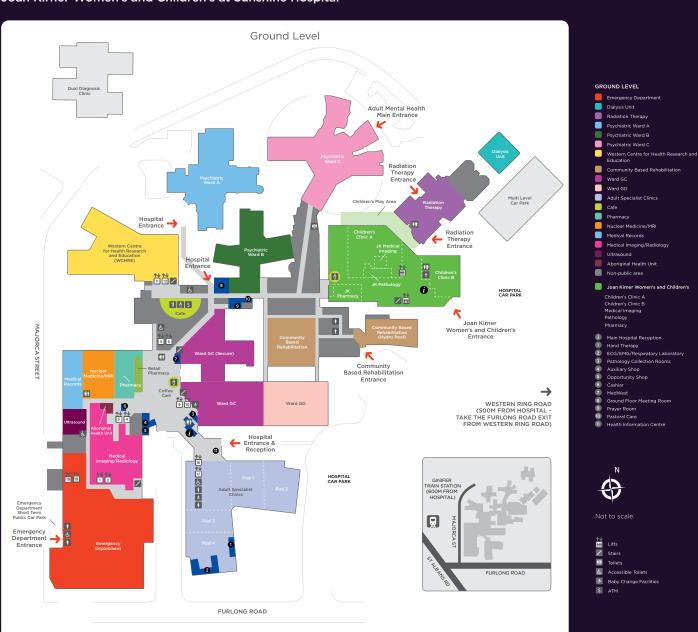
Parking

You can park at the Sunshine Hospital Main Car Park which is accessed via Furlong Rd. This car park can get very busy between 8am and 4pm. Alternative private car parks are available adjacent to the hospital on Furlong Rd. Please click here for more information on location and fees for car parking.

Public Transport

Train: The closest station is Ginifer which is 600m from Sunshine Hospital. Bus: 408 bus stops are located near to the main entrance on Furlong Rd.

Joan Kirner Women's and Children's at Sunshine Hospital



Location Information

JOAN KIRNER WOMEN'S AND CHILDREN'S (JKWC) AT SUNSHINE HOSPITAL

Women's Clinic is located on Level 1 of JKWC building. Level 1 has its own lifts, located to the right of the main lifts. As you exit the lifts turn left. Women's Clinic is where you will go for all your antenatal appointments.

Maternity Assessment Centre (MAC) is located on Level 3 of the JKWC building. Turn left as you exit the lift and present to reception. The MAC is where you present for all pregnancy related enquiries and concerns after 16 weeks pregnant.

Birthing is located on Level 3 of the JKWC building. Turn left as you exit the lift and present to reception.

Women's Inpatient Wards Level 7 and 8 is the location for the inpatient Women's wards for both antenatal and postnatal women.

Integrated Ultrasound Service is located in Clinic C on Level 1 of JKWC. Please attend the reception desk to be checked in for your ultrasound.

Emergency Department (ED) Access to the Sunshine Hospital ED is via Majorca Street. Please present to ED for all non-pregnancy related emergency concerns or if you are less than 16 weeks pregnant.

Pathology is located on the ground floor of the JKWC building. Open 08:30am - 4:00pm, Monday to Friday.

Sunshine Hospital pathology collection centre is located on the on the ground floor beside the information desk. Open 08:30am - 7:00pm.

BACCHUS MARSH HOSPITAL

Maternity Services at Bacchus Marsh is located at the Grant Street main entrance, and includes a Maternity Assessment Centre (MAC), Birthing, and Women's Inpatient Wards.

Ultrasound is located on-site at Bacchus Marsh and is accessed through the Turner Street entrance.

Antenatal Appointments

Pregnancy appointments are available at:

10 Turner Street Consulting Rooms 10 Turner St, Bacchus Marsh VIC 3340

Melton Health and Community Services 195-209 Barries Road, Melton West VIC 3337



Visiting Hours

Visiting hours: 8:00am – 8:00pm*

Outside of these hours (8:30pm - 6:30am), entry to both JKWC and Bacchus Marsh Hospital is via the front door of the building using the intercom on the right hand side of the entry doors.

Newborn Services at JKWC and Special Care Nursery at Bacchus Marsh welcomes parents visiting their baby at any time.*

*Visiting is subject to change at any time due to COVID restrictions. The most up to date information can be found <u>here</u> on the Western Health website.



Breastfeeding

The World Health Organization recommends exclusive breastfeeding for up to six months of age, with continued breastfeeding along alongside appropriate complementary foods up to two years of age or beyond.

Joan Kirner Women's and Children's at Sunshine Hospital is a 'Baby Friendly Health Initiative' accredited facility. This means that we are committed to promoting, protecting and supporting breastfeeding and we follow the World Health Organization's 10 steps to Successful Breastfeeding. You can access the Western Health breastfeeding policy, among other resources here.

At each of our Maternity Services, we have a team of Lactation Consultants and a Breastfeeding Support Enrolled Nurse. The service is available across all areas of the hospital including Newborn Services and Special Care Nursery.

Electric hospital grade breast pumps are available for you to use while in hospital.

Click <u>here</u> for a copy of the Australian Breastfeeding Association's Breastfeeding Confidence Guide.

BENEFITS FOR BABY

Studies show that babies who are breastfed are healthier throughout life.

Breastmilk is made up of unique elements that support your baby's individual needs including:

- Antibodies passed to your baby through your milk when you come in to contact with bacteria and viruses
- Stem cells help the body to create and repair
- Human milk oligosaccharides (HMOs) contribute to healthy gut flora which helps the immune system and promotes healthy digestion
- Immune cells, cytokines and antimicrobial factors help to keep baby healthy whilst they are developing their immune system
- Oxytocin reduces stress
- Alpha-lactalbumin containing pain relieving properties.

BENEFITS FOR MUM

- Reduces risk of breast, ovarian and endometrial cancer, high blood pressure, diabetes, cardiovascular disease, endometriosis, osteoporosis, stroke, and autoimmune diseases such as rheumatoid arthritis
- · Delayed return of your period
- Helps the uterus to contract back down to a normal size
- Helps to lower your blood pressure and relax
- Free and instant.

SKIN TO SKIN

Wherever possible skin to skin is recommended immediately after birth (within 5 minutes of a vaginal delivery or within 10 minutes after a caesarean section) and for at least the first feed and first hour of life. This is because skin to skin offers many benefits including:

- · Stabilising baby's breathing and oxygen levels
- Increasing baby's glucose levels
- · Keeping your baby warm
- · Regulating blood pressure
- Promoting initiation of baby's first breastfeed.

ROOMING IN

Rooming in, or sleeping in the same room with your baby is recommended for the first 6-12 months of your baby's life. This enables you to recognise when your baby is ready for a feed. It also reduces the risk of Sudden Infant Death Syndrome (SIDs). You can learn more about SIDS via the Red Nose website.

While you are in hospital, a cot will be provided for your baby to sleep next to you.

Benefits of Rooming in

- · Enables unrestricted breastfeeding
- Helps mother learn about her baby's feeding and behavioural cues
- Promotes increased mother/baby contact and bonding
- Promotes closer contact and bonding with other family members.

BOTTLE TEATS AND DUMMIES

Bottle teats and dummies are not recommended while you are trying to establish breastfeeding as this can be confusing for your baby and mask early feeding cues. Bottles and teats may also lead to less time breastfeeding and decrease milk supply.

BREASTFEEDING EDUCATION

You can access our online breastfeeding information via the Western Health website <u>here.</u>

The Australian Breastfeeding Association delivers both face-to-face and online 'preparing for breastfeeding' classes – click here.

Breastfeeding classes are offered at Bacchus Marsh Hospital. Ask your midwife at your next appointment.

Please discuss any of your breastfeeding questions with your midwife. You can also ask to be referred to our Lactation Services team.

Breastfeeding support and online information

COMMUNITY BREASTFEEDING SUPPORT GROUPS

- National Breastfeeding Helpline: 1800 686 268 24 hours a day,
 7 days a week. This is a free service you can contact anytime during pregnancy and after your baby is born.
- The Australian Breastfeeding Association delivers both faceto-face and online 'preparing for breastfeeding' classes
- Australian Breastfeeding Association's <u>local support groups</u>
- Most local councils offer lactation support see below.

Brimbank City Council

Breastfeeding clinic by appointment. Speak with your Maternal & Child Health Nurse or call (03) 9249 4433.

City of Melbourne

Breastfeeding clinic by appointment. Speak with your Maternal & Child Health Nurse or call (03) 9340 1444.

Hobsons Bay Council

Breastfeeding clinic by appointment. Speak with you Maternal & Child Health Nurse or call (03) 9932 1300. Mondays 1.30 – 4pm (school term only), Altona Early Years Hub.

Hume Council

Breastfeeding clinic by appointment. Speak with your Maternal & Child Health Nurse or call (03) 9205 2844. Various locations and times.

Macedon Ranges

Breastfeeding Support Service phone and video consultations. Speak with your Maternal & Child Health Nurse or call (03) 5422 0281.

Maribyrnong Council

Breastfeeding Support Service – phone and video consultations. Speak with your Maternal & Child Health Nurse or call (03) 9688 0501.

City of Melton

Breastfeeding support service by appointment. Speak with your Maternal & Child Health Nurse or call (03) 9747 5462.

City of Moonee Valley

Breastfeeding support clinic by appointment. Speak with your Maternal & Child Health Nurse or call (03) 9243 1895.

Moorabool Shire

Breastfeeding clinic or home consultations by appointment.
Speak with your Maternal & Child Health Nurse or call (03) 5366 7100.

Moreland Council

Breastfeeding clinic by appointment. Wednesdays 9.00am-3.30pm in Coburg. Call (03) 9240 1111.

Wyndham Council

Breastfeeding phone consultations by appointment. Speak with your Maternal & Child Health Nurse or call (03) 9742 8148.

BREASTFEEDING INFORMATION ONLINE

- Australian Breastfeeding Association's <u>Breastfeeding</u> Confidence booklet
- Australian Breastfeeding Association's <u>Breastfeeding</u> Basics video
- Australian Breastfeeding Association website articles
 - Engorgement
 - Sore/cracked nipples
 - Blocked ducts
 - Mastitis
- Raising Children's Network website
- Global Health Media's breastfeeding videos
 - Positions for Breastfeeding
 - Attaching your baby at the breast
 - Is your baby getting enough milk?
 - What to do about nipple pain.

Your Baby's Movements

You will start to feel your baby moving usually between 16-22 weeks. From 24 weeks, you will start to get to know the pattern of your baby's movements.

Regular movements is a good sign that your baby is healthy. If the movements become less frequent, this could be a sign your baby is unwell and trying to conserve energy. You should call MAC immediately if this happens on:

MAC at Joan Kirner Women's and Children's at Sunshine Hospital - 9055 2300

MAC at Bacchus Marsh Hospital - 5367 9615

MAC is a 24-hour service. Please call at any time if your baby's movements become less frequent.

Please watch <u>this important video</u> about your baby's movements from Tommy's.

REDUCING RISK OF STILLBIRTH

<u>Safer Baby</u> provides lots of useful and important information on how to reduce your risk of Stillbirth.

Safer Baby's 5 main messages for reducing stillbirth are as below:



#Quit4Baby

Smoking is one of the main causes of stillbirth. Quitting at any time during your pregnancy reduces the risk of harm to your baby. However, quitting as early as you can means a better start in life for your baby. Free help with quitting is available.



#GrowingMatters

Your baby's growth will be regularly measured during pregnancy to check they are growing at a healthy rate. If your baby shows signs of not growing well enough, your maternity health care professional will monitor the growth of your baby closely and discuss with you how to manage this.



#MovementsMatter

It is important to get to know the pattern of your baby's movements. If you are concerned about your baby's movements, particularly from 28 weeks, contact your midwife or doctor immediately. Do not wait for your next checkup.



#SleepOnSide

Going-to-sleep on your side from 28 weeks of pregnancy can reduce your risk of stillbirth, compared with going-tosleep on your back. Either left or right side is equally safe.



#LetsTalkTiming

The aim is to make every pregnancy and birth as safe as possible for you and your baby. It is important to speak with your maternity healthcare professional about your individual risk of stillbirth and how this may influence the timing of birth.

Nausea and Vomiting

Morning sickness affects many women during their pregnancy, particularly in the first trimester. While nausea and vomiting during pregnancy is usually termed 'morning sickness' it can actually happen at any time of the day.

For some women, this feeling of nausea (with or without vomiting), can even carry on through to the second and third trimester.

While nausea and vomiting during pregnancy usually does not affect your baby, it can become an issue if your symptoms are severe and continue for a prolonged period.

Below are some ideas to help you cope with your nausea and vomiting during pregnancy.

DRINK PLENTY OF FLUIDS

- Drinking plenty of fluids can help as dehydration can make nausea and vomiting worse.
- Sip on cold drinks such as weak cordial, flat dry ginger ale or flat lemonade, diluted fruit juice, or icy poles.
- Limit fluids to about half a cup each time you drink as this will reduce the amount of fluid sitting in your stomach.
- Avoid drinking during meals wait at least 30 minutes after meals.

EAT SMALL AMOUNTS REGULARLY

- Avoid having an empty stomach try to eat something small every 1-2 hours.
- · Eat small amounts, often and eat slowly.
- Try 6-8 small meals each day as it may be easier than 3 large meals.
- Snack on dry biscuits, pretzels, dry breakfast cereal and crackers between meals.
- Try "cold" foods as they often don't smell or taste as strong as hot food, e.g. sandwiches (ensure fillings are properly prepared to prevent the risk of Listeria), jelly, ice cream, yoghurt, tinned fruit and milkshakes.
- Try bland foods such as plain jacket potato, boiled eggs, plain rice, plain fruit or vegetables, toast with margarine, lean grilled meats.
- Avoid fatty, rich or spicy foods if they make nausea worst for you e.g. avoid deep fried foods such as fish and chips, creamy sauces, fatty meats and meat pies.
- Suck on mints between meals to keep your mouth feeling fresh.
- Sucking on boiled sweets such as barley sugars can also help to reduce your nausea.

OTHER IDEAS

- Avoid lying down for at least 1-2 hours after meals.
- If the smell of food is triggering nausea, avoid being in the kitchen during cooking time. Sit away from cooking smells.
- Do not try to force food down take it slowly, take small bites.
- Get plenty of rest as nausea if often worst when you are tired.

When dealing with nausea and vomiting, each woman is different, so stick with the strategies that work best for you. If you are concerned with ongoing nausea and vomiting, speak with yourdoctor or midwife who can help you further.

Other Common Pregnancy Symptoms

HEARTBURN

Eating small amounts of food frequently may help to reduce the symptoms of heartburn. You should avoid foods that aggravate indigestion such as coffee, spicy foods, fatty and acidic foods. Try to avoid eating close to bedtime. Antacids can be used if heartburn does not improve.

TIREDNESS AND/OR DIFFICULTY SLEEPING

Feeling tired is normal in pregnancy. Regular exercise may help to improve your energy levels and ability to fall asleep. Try to avoid caffeinated drinks including tea, coffee and cola. You may need to take naps during the day.

CONSTIPATION

Staying hydrated, exercising regularly and eating fibre rich foods such as fruit and vegetable, lentils, beans, wholemeal bread and cereals may help to relieve constipation. You should speak to a medical professional before commencing medication to relieve constipation.

FOOD CRAVINGS

Commonly women develop cravings for food such as dairy products as they provide you with energy and calcium. Sometimes you may develop a strong dislike for foods that you used to enjoy. Occasionally, women develop a craving for non-food products such as cardboard, if this happens you should talk to your GP or midwife.

HAEMORRHOIDS OR 'PILES'

These can occur as result of pressure from your baby's head or from constipation. Usually these resolve fairly quickly after birth. Sometimes haemorrhoids can become itchy or painful and sometimes can bleed. If you are concerned that they are not being relieved with usual measures such as increasing fibre and water and/or applying haemorrhoid cream, speak to your GP or midwife.

VARICOSE VEINS

You should let your midwife or doctor know if you have varicose veins. To reduce swelling and discomfort that is often associated with varicose veins you should do the following:

- Wear support or compression stockings
- Elevate your feet when you are resting
- Massage your legs
- Take regular gentle exercise
- · Avoid standing for long periods

BACK PAIN

Your growing baby may put more pressure on your lower back as well as your organs and pelvic bones. To relieve back pain you may find placing a heat pack on the local area and gentle regular exercise helps. Ensuring you maintain good posture and avoiding high heels can also help to reduce back pain. As your baby grows you may find a pregnancy support belt beneficial.

INCREASED FREQUENCY TO PASS URINE

Due to the pressure your growing baby may put on your bladder this is very normal. Urine infections are more common in pregnancy and it is important to drink plenty of fluids. Signs of a urine infection including: burning or stinging when you pass urine, feeling like your bladder is not fully emptied, and/or offensive smelling, cloudy coloured urine.

VAGINAL DISCHARGE

It is normal to experience an increased amount of discharge, especially later in pregnancy. Thrush is common in pregnancy, if the discharge is associated with an itch, smell or discolouration then you should speak to a doctor or midwife about treatment.



Listeria and Nutrition in Pregnancy

WHAT IS LISTERIA INFECTION?

Listeria infection or listeriosis, is an illness usually caused by eating food contaminated with bacteria known as Listeria monocytogenes.

WHAT ARE THE SYMPTOMS?

Pregnant women are 10 times more likely to get listeriosis. Listeria infection is usually a mild illness causing vomiting, diarrhoea and a high temperature. Symptoms can take up to 2 months to appear. However, even a mild form of the illness can affect the unborn baby (foetus) and can lead to miscarriage, stillbirth, premature birth or a very ill baby at birth.

HOW CAN IT AFFECT MY BABY?

Babies born with listeriosis may have serious infections of the blood or brain. Listeriosis can cause lifelong health problems for your baby, including intellectual disability, paralysis, seizures, blindness, or problems with the brain, kidneys, or heart. Listeriosis can cause death in newborns.

CAN LISTERIA INFECTION BE TREATED?

Your health care professional may give you a blood test to see if you have listeriosis. You may need to take antibiotics to treat the infection and prevent your fetus from becoming infected.

HOW CAN I PREVENT LISTERIA INFECTION?

- · saying no to high risk foods
- · always handling food safely
- avoiding contact with placentas from animals and with any dead animals (listeria infection has been known to cause illness and miscarriage in animals).

The following high risk foods should be avoided:

- ready-to-eat seafood such as smoked fish and smoked mussels, oysters or raw seafood such as sashimi or sushi
- pre-prepared or pre-packaged fruit and vegetable salads including those available from buffets, salad bars and sandwich bars
- drinks made from fresh fruit and/or vegetables where washing procedures are unknown (excluding pasteurised or canned juices)
- deli meats which are eaten without further cooking or heating, such as paté, ham, strass and salami, and cooked diced chicken (as used in sandwich shops)
- any unpasteurised milk or foods made from unpasteurised milk
- · soft serve ice-creams
- soft cheeses, such as brie, camembert, ricotta and feta (these are safe if cooked and served hot)
- ready-to-eat foods, including leftover meats, which have been refrigerated for more than one day
- dips and salad dressings in which vegetables may have been dipped
- raw vegetable garnishes.

The following foods are safe to eat:

- freshly prepared foods, to be eaten immediately
- freshly cooked foods, to be eaten immediately
- hard cheeses, cheese spreads, processed cheese
- · milk-freshly pasteurised and UHT
- · yoghurt
- · canned and pickled food.

Other food safety recommendations to prevent Listeria infection

- wash your hands before preparing food and between handling raw and ready-to-eat foods
- · keep all food covered
- place all cooked food in the refrigerator within one hour of cooking
- store raw meat, raw poultry and raw fish on the lowest shelves of your refrigerator to prevent them dripping onto cooked and ready-to-eat foods
- keep your refrigerator clean and the temperature below 5°C
- strictly observe use-by or best-before dates on refrigerated foods
- do not handle cooked foods with the same utensils (tongs, knives, cutting boards) used on raw foods, unless they have been thoroughly washed with hot soapy water between uses
- all raw vegetables, salads and fruits should be well washed before eating or juicing, and consumed fresh
- defrost food by placing it on the lower shelves of a refrigerator or use a microwave oven
- thoroughly cook all food of animal origin, including eggs
- keep hot foods hot (above 60°C) and cold foods cold (at or below 5°C)
- reheat food until the internal temperature of the food reaches at least 75°C (piping hot)
- when using a microwave oven, read the manufacturer's instructions carefully, and observe the recommended standing times to ensure the food attains an even temperature before it is eaten.

OTHER GENERAL DIETARY ADVICE IN PREGNANCY

- Reduce caffeinated drinks to 3 cups per day such as tea, coffee and cola
- Artificial sweeteners should be consumed in moderation
- Iron rich foods: lean red meat, chicken, fish, legumes, wholegrain bread, cereals, dark green leafy vegetables, cereals fortified with iron, nuts and eggs
- · Calcium: Dairy products or calcium enriched products
- Vitamin B12 foods: Milk and eggs.

You can view the Nutrition+Pregnancy Booklet here.

Exercising in Pregnancy

Being active during pregnancy can be beneficial to your health and wellbeing. It can reduce the risk of gestational diabetes and high blood pressure, as well as improving energy, sleep and fitness. It is recommended to aim for at least 30 minutes of exercise a day.

See Department of Health Guidelines for Exercise in Pregnancy.

Recommended exercise includes:

- · Walking or jogging
- Swimming
- Exercise bikes or cross trainers
- Yoga or Pilates (with pregnancy considerations)
- Daily activities such as walking the stairs or cleaning
- Pregnancy exercise classes
- Strengthening exercises using body weight, resistant bands or light-moderate weights
- Pelvic floor exercises

The amount of activity you undertake in pregnancy will depend on your level of fitness pre- pregnancy. It is not recommended that you start vigorous exercise whilst pregnant, however, it may be safe for you to continue at the level you are used to pre-pregnancy.

Exercise you should avoid includes:

- High impact or contact sports with a risk of falling or being hit in the stomach such as horse riding, skiing, martial arts and scuba diving
- · Using heavy weights
- High altitude exercise
- Activities that you need to lie on your back for more than a couple of minutes
- HOT yoga or pilates
- Wide squats or lunges

If you feel unwell you should stop exercising immediately and contact a doctor.

If you experience any of the following, you should contact the Maternity Assessment Centre:

MAC at Joan Kirner Women's and Children's at Sunshine Hospital - 9055 2300

MAC at Bacchus Marsh Hospital - 5367 9615

- Headache
- Severe pain
- Dizziness/ Feeling Faint
- Amniotic fluid leakage
- Chest Pain
- Change in your baby's movements
- Heart palpitations
- Calf pain or swelling
- Swelling of the face, hands or feet
- Muscle weakness
- Vaginal bleeding
- · Difficulty breathing
- Contractions
- Cramping in lower abdomen



Other Pregnancy Topics

LOOKING AFTER YOUR TEETH

Pregnant women are at risk of gum disease in pregnancy due to natural hormonal changes. In severe cases, this could affect your baby's development or increase the risk of premature birth or having a baby with a low birth weight. You should not delay visiting a dentist because you are pregnant.

To maintain healthy teeth and gums you should follow usual oral hygiene advice such as brushing your teeth twice a day, flossing your teeth once a day and reducing sugary foods and drinks. After vomiting you should rinse your mouth with water and wait 30 minutes before brushing your teeth.

You can access a fact sheet about oral health in pregnancy from Dental Health Services Victoria here.

TRAVEL DURING PREGNANCY

Advice about travelling during pregnancy may depend on your individual risk which should be discussed with a midwife or doctor. If you intend on taking a flight you should check with your local airline as many airlines will not allow a pregnant woman to travel over 35 weeks.

Things to bear in mind when travelling during pregnancy:

- Ensure you have appropriate travel insurance
- If you will not be moving for long periods there are measures you can take to reduce the risk of a clot forming in your legs, known as deep vein thrombosis (DVT):
 - Wear compression stockings
 - Do frequent leg exercises or walk at regular intervals if possible
 - Reduce dehydration (avoid caffeine and drink plenty of water)
- Be careful to avoid food poisoning
- Be mindful that most travel vaccinations are not safe in pregnancy such as typhoid.
- Wear your seatbelt under your bump across your lap and above your bump between your breasts.

PELVIC FLOOR EXERCISES

Pregnancy puts significant stress on your pelvic floor. It is recommended that you commence pelvic floor exercises in pregnancy to strengthen these muscle which will help to reduce the risk of you not being able to control your urine, faeces or wind (incontinence). If you already suffer with incontinence you should let your midwife or doctor know. The following resources can help you learn more about why and how to perform pelvic floor exercises:

pregnancybirthbaby.org.au

betterhealth.vic.gov.au

SEX DURING PREGNANCY

Sex is generally safe in pregnancy unless your midwife or doctor have recommended otherwise. Occasionally you may get some spotting after sex. While this may be normal, it is best to let your doctor or midwife know.

Useful Resources

WEBSITES

Better Health Channel

Raising Children

Pregnancy Birth and Baby

Australian Breastfeeding Association

Spinning Babies

Evidence Based Birth

PANDA - Perinatal Anxiety and Depression

BOOKS

Birth with Confidence by Rhea Dempsey

Gentle Birth, Gentle Mothering by Sarah Buckley

Birth like a Feminist by Milli Hill

Guide to Childbirth by Ina May Gaskin

Birth Skills by Juju Sundin



IMPORTANT CONTACTS

Bacchus Marsh Hospital

MAC (Maternity Assessment Centre)	5367 9615
Bacchus Marsh Hospital	5367 2000
Appointments	5367 9150
Interpreter Service (Language Loop)	9280 1941
Healthy Mothers, Healthy Babies	9747 7609
Tweddle (infant settling and feeding clinic)	9747 7609

Joan Kirner Women's and Children's at Sunshine Hospital

MAC (Maternity Assessment Centre)	9055 2300
Appointments/bookings	8345 1727
Shared Care	9055 2446
Sunshine Hospital	8345 1333
Interpreter Service	1300 739 731
Tweddle	9689 1577

INTERPRETER SERVICE

We have interpreters available Monday to Friday 8:30am – 5:00pm, please ask one of our staff members to book an interpreter for your appointment. Outside of this time or when an interpreter is not available, the telephone interpreting service can be used.

Bacchus Marsh Interpreter Service (Language Loop)	9280 1941
Joan Kirner Women's and	
Children's Interpreter Service	1300 739 731

westernhealth.org.au

The Australian Charter of Healthcare Rights describes the rights of all people who use the Australian healthcare system. Copies of the charter in community languages are available near the main entrance of all Western Health hospitals, or ask a staff member or volunteer.

For more information, visit safetyandquality.gov.au/australian-charter-healthcare-rights

