



Kaiser Permanente

healthy beginnings

PRENATAL NEWSLETTER

▶ TODAY'S APPOINTMENT

Today your practitioner will:

- Check your blood pressure and weight.
- Listen to your baby's heartbeat.

Your practitioner may also check your baby's growth by measuring the size of your abdomen. If you've had a prenatal screening test or an ultrasound, your practitioner will discuss the results with you. If your pregnancy is considered "high risk," your practitioner will also talk with you about what this means and work with you to develop a care plan.

▶ NEXT APPOINTMENT

Date: _____ **Time:** _____

Day: _____

Practitioner: _____

Notes: _____

Please arrive for your appointment on time. If you need to cancel, call at least 24 hours in advance.

▶ Your baby: at 18 weeks



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Your baby is about 8 inches long and weighs about 8 ounces. If you could see your baby, you'd probably be able to recognize his or her sex. The umbilical cord that connects you and your baby is thickening and continues to carry blood and nutrients. The baby is passing urine, and meconium (the baby's first stool) is beginning to collect in the intestines. The *lanugo*, a soft, fine downy hair, covers the body, hair is starting to grow on the scalp, and tiny eyelashes and eyebrows appear. *Vernix caseosa*, a white creamy substance that protects the skin from long exposure to amniotic fluid, covers the body.

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The baby is moving around as its muscles become more active. You should start to feel your baby moving sometime between 18 and 22 weeks. At first, you may not feel the movements often or the fetal movements may feel like fluttering or "butterflies." Some women say that these movements feel like gas bubbles. As the baby grows and becomes stronger, the movements also become stronger.

▶ Your next prenatal appointment and tests

This visit may be scheduled to take place when you're 20 to 24 weeks pregnant. Your practitioner will explain the lab tests which will be performed at 24 to 28 weeks. You'll also learn about ways to take care of yourself and your baby in the second trimester, including healthy eating and exercise. You'll receive tips on preventing preterm (premature) labor so your baby won't be born before he or she has grown enough to be healthy.

▶ Work and pregnancy

Many healthy women with uncomplicated pregnancies continue working up until their due date. Others with medically complicated pregnancies may be advised to stop working sooner. (Please note that symptoms such as nausea, vomiting, digestive upset, swollen feet and ankles, dizziness, back pain, and fatigue are a normal part of pregnancy and aren't necessarily disabilities.)

RESTRICTING YOUR WORK OR ACTIVITIES

If you have an infection, a rupture of the amniotic sac (your bag of waters breaks), vaginal bleeding, uncontrolled diabetes, heart or kidney disease, high blood pressure, or preterm labor (labor more than 3 weeks before your due date), your practitioner might restrict your activity or work and fill out an "Off-work Order." If this occurs, you'll be re-evaluated for return to work or regular activity during your next prenatal visit.

WHEN YOU NEED TO STOP WORK

A medical leave from work will be given for any documented disability—that is, if you or your baby would be harmed if you keep on working.

DISABILITY BENEFITS

Check with your company's personnel or HR department to find out if you qualify for state and/or federal disability benefits. Your employer may have guidelines about when you can stop working before your estimated delivery date. Many employers offer extended time off or sick time after a disability.

Remember: It is important to fully understand your disability benefits. Filing a claim that is later found not to qualify can have serious consequences. If you have any questions or are unsure about your eligibility for disability benefits, contact your company's personnel department.

▶ PARTNER'S CORNER

You and your partner aren't experiencing the pregnancy in exactly the same way or at the same pace—even if you're both paying close attention to the pregnancy.

TAKE TIME TO TALK

It's important to have frequent conversations about the pregnancy and your love for your partner.

- Take turns discussing your excitement about having a child, your dreams, and your plans for the future.
- Take turns talking about your worries and concerns. If you "reflect" (repeat) what your partner says, she'll know you've heard her. Then she can reflect what you have to say.
- Talk about your financial situation. Do you need two paychecks to pay the bills? How much time off can each of you afford to take?
- Talk about how much time you'll take off when the baby is born. Ask your employer if you're eligible to take "family leave" time off to stay with your partner and your baby.
- Talk about friends or family members who will be available to help you and your partner after the baby is born.
- If parents or out-of-town relatives visit after the baby is born, discuss where they'll stay and for how long.
- Decide whether you want to take time off from work when other relatives will be there to help, or whether you want to stagger your time with others.
- Talk about religion. Does it matter what religion the baby will have?

- Talk about family. How close does each of you want to be with your parents and other relatives? What do each of you like about how you were raised; what do you want to do differently?

HOW YOU TALK MAKES A DIFFERENCE

The way you talk to each other can either strengthen or weaken your relationship. Though it may seem difficult at times, you can learn to improve your conversations so you'll both end up feeling heard and supported. It's important for each of you to know that the other is really listening and that you can talk about your feelings without fear of criticism.

WHEN YOU NEED HELP TO IMPROVE YOUR COMMUNICATION SKILLS

- Ask your practitioner about counseling services at Kaiser Permanente.
- Support groups for new parents are available at some Kaiser Permanente facilities and in your community. Call your local Health Education Center for more information on counseling services, parent support groups, and communication classes at your facility or in your community.
- Taking a communication class together can help your relationship develop. But even if only one person attends a communication class, the relationship can improve.

What you and your partner think and feel in the third month of the pregnancy may be very different from what each of you will think and feel in the fourth or fifth month—it's important to talk openly about your thoughts and feelings.

▶ Staying healthy during pregnancy and beyond

REDUCING STRESS

It's natural to feel some anxiety and worry during pregnancy. Your body is changing dramatically, and you're wondering about giving birth, your baby's health, and becoming a parent. At the same time, your partner and other family members and friends may be experiencing emotional changes and changes in their relationship with you. It's no wonder you might need to find new ways to reduce stress.

WAYS TO HANDLE STRESS

Learning new ways to deal with stress now will benefit you and your family for many years to come.

- Let go of the "superwoman syndrome" at home and at work. Ask your partner and other family members to help take care of housekeeping and cooking. Also, notice the situations or people that create stress for you and reduce or eliminate your contact with them.
- Take time every day to relax, even if only for 10 or 15 minutes. Sitting in a quiet room, listening to music, taking a warm (not hot) bath, or taking a walk are all simple ways to relax.
- Learn relaxation techniques, listen to a relaxation tape, or take a prenatal yoga class or a meditation class. Try the relaxation exercises on page 6. Your Health Education Center can refer you to a stress reduction class.

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▶ Smoking and pregnancy

If you've quit smoking, congratulations! If you smoke, try to stop now—for your health and your baby's.

- Women who smoke are more likely to have problems in pregnancy and childbirth.
- They tend to have premature and smaller (underdeveloped) babies who have problems after birth and throughout life.
- Smoking during pregnancy can cause your baby to be born underweight, which puts your baby at greater risk of serious illness, chronic lifelong disabilities, and even death.
- The risk of sudden infant death syndrome (SIDS), or "crib death," increases if a mother smokes during or after pregnancy.
- Children from smoking households have 4 times as many respiratory infections (lung, sinus, and ear infections) as those from nonsmoking households.
- If you've quit smoking, it's important to stay smoke-free during pregnancy and after your baby is born. Not smoking will help your health and the health of your family. You've worked hard to stop smoking. Use your new skills to remain smoke-free.
- Encourage your partner or other family members to quit smoking with you. It's easier not to smoke when you're surrounded by other nonsmokers. Support each other in staying smoke-free.
- Talk with your practitioner or visit your local Health Education Center for help with quitting smoking or staying quit. Some facilities offer smoking cessation programs specifically for pregnant women.

When you call
your practitioner



PLEASE BE READY TO PROVIDE:

- Your name.
- Your Kaiser Permanente health or medical record number.
- Your practitioner's name.
- Your due date.

CALL NOW IF YOU HAVE:

- Any vaginal bleeding or blood clots (clumps of blood).
- Abdominal or pelvic pain, other than mild cramping.
- Pain or fever with vomiting more than 2 to 3 times a day or that lasts more than an hour.
- Fever (temperature of 100.4° or greater).
- Pain with urination.



► Exercise and pregnancy

It's usually safe and beneficial to exercise during pregnancy, as long as you avoid exercises that could be dangerous to you or your baby. Ask your practitioner what exercises are safe for you to do. Be sure to mention if you're participating in any sports.

- Exercise improves mood, relieves stress, and lowers the risk of depression during and after pregnancy.
- If you exercise regularly (at least 30 minutes per day on most days), you'll feel fitter, control your weight gain, sleep better, and have less constipation and water retention.
- Special exercises to prepare for birth will be very beneficial to you during labor. Start now and practice for the rest of your pregnancy. (See the exercise section on this page).

MAKE YOUR EXERCISE AS SAFE AS POSSIBLE

- If you haven't exercised before, start a program of low-impact aerobic exercise gradually.
- These sports are generally safe throughout pregnancy: swimming, jogging, golf, racket sports, low-impact aerobics, walking briskly, and yoga. Prenatal yoga can help you feel more comfortable during pregnancy and help prepare your body for labor.
- Wear loose-fitting clothing, the right shoes, and adequate support for your breasts.
- Drink water before and after exercise.
- Avoid deep-bending motions and vigorous stretches.
- Spend 10 minutes warming up before exercising, and cool down for 5 minutes afterward.
- Stop if you experience vaginal bleeding, pain, cramps, dizziness, or headaches.
- Limit the high-intensity portion of a workout session to 10 to 15 minutes and the moderately intense portion to 20 to 30 minutes. Avoid low blood sugar levels by not exceeding 45 minutes of total exercise in a single session.
- If you usually exercise vigorously, reduce the intensity of your workout. Take your pulse by placing your index and middle fingers on the inside of your wrist. Count the number of beats for 10 seconds and multiply by 6. Your pulse should not go above 140 beats per minute. The baby's birth weight may be low if a woman exercises at a high intensity throughout her pregnancy.
- After week 16 of pregnancy, don't exercise on your back for longer than 3 minutes if you have any symptoms of dizziness, lightheadedness, nausea or sweating. The weight of the uterus can press on a large blood vessel (vena cava) and decrease your blood pressure, causing you to have these symptoms.
- Avoid activities during which you could fall if you lose your balance—your center of gravity has changed and will continue to change throughout your pregnancy.
- Some sports, such as scuba diving, are dangerous and should not be done during pregnancy. Other sports should be avoided because of the risk of falls. These include downhill skiing, horseback riding, gymnastics, waterskiing, and ice-skating. Sports such as volleyball, softball, hockey, and soccer become more dangerous in the last trimester and should be discontinued.
- You can use light weights (2 to 8 pounds) to tone your muscles if care is taken to prevent joint and ligament injury. Avoid heavy resistance on weight machines or use of heavy free weights.

► Staying healthy during pregnancy and beyond

(continued from page 2)

REDUCING ANXIETY AND WORRY

Make a list of all the fears and concerns you have right now and put them in order from least to most stressful. Look at the list and ask yourself:

- How realistic is the fear or worry? Is it very likely or very unlikely to occur? If it's very unlikely, see if you can simply relax and let the worry go.
- Is the concern something that you can change? If so, what exactly can you do? Who or what can help you change the situation? If it's not something that you can change or control, try to let the worry dissolve.

Share this list with someone you trust. If you'd like to speak with a counselor, ask your practitioner for a referral.

► Special exercises to prepare for birth

These simple exercises will help you strengthen the muscles that support your growing uterus. The muscles in your lower abdomen, lower back, and around the vagina (birth canal) come under great strain during pregnancy. During delivery, these same muscles must relax and stretch.

PELVIC TILT

This exercise relieves back pain and improves your abdominal muscle tone. Many women find it helpful to do pelvic tilts during labor.

- Get on your hands and knees on the floor with your back straight.
- Breathe in and relax your back.
- Breathe out, tighten your stomach muscles, and tuck in your buttocks. Your back will arch up.
- Hold the position and count to 5.
- Then breathe in once—twice—then relax your back so that it straightens.
- Repeat 25 times, 3 to 4 times daily.

KEGEL EXERCISES

Practice Kegel exercises several times a day to prevent leaking urine and to strengthen pelvic floor muscles. Kegel exercises can be done anytime, standing or sitting, such as while you're waiting for a red light to change, pumping gas, or standing in line at the grocery store.

- Firmly tighten the muscles around your vagina, as you would to stop urinating. It's not recommended to practice Kegel exercises while on the toilet because this may strain the pelvic floor muscles.
- Hold tightly for as long as you can (up to 8 to 10 seconds).
- Then slowly release the muscles and relax. Remember to keep breathing as you hold the muscles.
- Repeat 10 to 15 times, 3 to 4 times daily.

TAILOR STRETCH

This exercise stretches your inner thigh muscles.

- Sit on the floor with the soles of your feet together.
- Gently let your knees move toward the floor until you feel a mild stretch, and concentrate on relaxing. Don't push down on your legs with your hands.
- Hold and slowly count to 5. Relax.
- Repeat 5 to 10 times, twice daily.

Visit kp.org/pregnancy to learn more about these and other exercises.





► A healthy reflection of you

As your pregnancy progresses, the woman you see in the mirror begins to change before your eyes—you may feel beautiful one minute and ugly the next. In these middle months of pregnancy, you'll begin to "show." Blue jeans and dresses may no longer fit. You need to be creative and develop a wardrobe that you can live with for the next 5 or 6 months.

- If you work outside the home, you'll need maternity clothes that will be comfortable on the job. You will want several sets of maternity work clothes so you can wash one set while you wear another.
- Choose expandable clothes that can get bigger as your belly grows. Put a pillow on your belly to see how clothes may fit several months from now.
- Check consignment (used clothing) stores for maternity clothes. You can find great clothes at bargain prices.
- Ask friends who have recently been pregnant to lend you maternity clothes.
- Try men's clothes. Drawstring sweatpants can expand and be tied under your belly.
- Get a good bra that will support your breasts and expand as you grow. Go to a maternity store or a department store's lingerie department for a good fitting.

► How much weight should you gain?

You and your practitioner need to keep track of your weight so that you'll gain enough weight to support your growing baby, but not too much. The recommended amount of weight you should gain throughout your entire pregnancy is about 25 to 35 pounds. This varies depending upon your weight and body mass index (BMI) before you became pregnant. BMI helps to determine if your weight is appropriate according to your height. Women who gain too much weight during pregnancy are at increased risk of having a premature baby or a larger than average baby. Babies who are larger than average at the time of birth are at higher risk for a variety of health problems, including being overweight. Women who gain too much may also have health problems such as diabetes and high blood pressure, which can cause complications.

- You should gain about 1 to 4.5 pounds during the first trimester (the first 3 months) of your pregnancy.
- You should gain about 1 pound a week during the second and third trimesters (the last 6 months) of your pregnancy.
- If you're underweight, you'll need to gain more weight (about 28 to 40 pounds).
- If you're overweight, you may not need to gain as much weight (about 15 to 25 pounds).
- If you're obese, you need to gain less weight throughout your whole pregnancy (11-20 pounds).
- If you're having twins, your practitioner may refer you to a dietician who can advise you on your ideal weight gain.

WHAT TO DO IF YOU'RE GAINING TOO MUCH WEIGHT

- Cut down on fats like butter, margarine, oil, gravy, mayonnaise, salad dressing, sour cream, and sauces.
- Choose lean meats, chicken or turkey (without the skin), and fish.
- Drink nonfat or 1% milk. Eat nonfat or low-fat yogurt and low-fat cheeses.
- Avoid or limit fried foods and foods from fast-food restaurants.
- Snack on fresh fruit, raw vegetables, or popcorn (without butter) instead of chips and candy.
- For dessert, try fresh fruits, sherbet, or fruit ices instead of ice cream, cakes, or pastries.
- Replace any juice or soda you're drinking with water.
- Walk every day unless your practitioner tells you to rest more.

DON'T DIET!

Your weight gain is very important to your baby's normal growth and development. If you don't eat enough of the right foods, your baby can be deprived of important nutrients.

- Follow the "Daily food guide" (see *Healthy Beginnings*, Issue 1) and check off what you eat every day.
- Eat the recommended servings of healthy foods each day. Don't skip meals; your baby needs regular meals at regular times to grow properly.
- Don't try to lose weight while you're pregnant. Wait until after you finish breastfeeding your baby before trying to lose weight.
- Check with your practitioner if you have any questions or worries about the amount of weight you're gaining.

TAKE CARE OF YOURSELF

- Eat well-balanced meals with a variety of foods.
- Avoid fast foods with high fat and calories. Choose broiled chicken and salad instead of hamburgers and fries.
- Keep healthy snacks available to eat during the day.
- Read labels so that you know what is in your food and can make wise choices.
- Drink 8 to 10 eight-ounce glasses of fluid every day, including water, milk, and soup. Limit or omit coffee, tea, sodas, and other caffeinated drinks (like colas).
- Rest every couple of hours during the day. In late pregnancy, put your feet up or lie on your side if you can find a quiet space to rest.
- Let go of the "superwoman syndrome" at home and at work. Ask your partner and other family members to help take care of housekeeping and cooking.



► What you can do about common discomforts

Now that you're in your second trimester of pregnancy (after 12 weeks), you're probably feeling better and more energetic. If you're still tired, your body is letting you know that you need more rest. Pace yourself and rest as soon as you feel tired. Other discomforts may include the following:

HEARTBURN

You may experience heartburn along with a sour taste in your mouth. Heartburn is caused when stomach acids bubble back into the esophagus. It's not cause for concern, but it's unpleasant and uncomfortable.

Follow these suggestions for relief:

- Eat small, frequent meals.
- Avoid fatty, fried, or spicy foods.
- Avoid beverages that contain caffeine, such as coffee, tea, or soda.
- Avoid bending over or lying down after meals. Take a walk instead.
- Avoid tight clothes and waistbands.
- If heartburn is a problem at night, avoid eating just before bedtime and sleep propped up with pillows.
- Take an antacid, such as Mylanta, Maalox or Tums, for instant relief. If your heartburn does not respond to these antacids, you may use over the counter acid blockers such as cimetidine (Tagamet) or ranitidine (Zantac).
- Don't take high-sodium antacids such as Alka-Seltzer or baking soda.

CONSTIPATION

Pregnancy hormones cause the digestive tract to relax and function more slowly. Constipation is likely to result, especially as your pregnancy progresses.

The following suggestions may decrease constipation:

- Drink more fluids (keep a bottle of water near you during the day).
- Eat more high-fiber foods like fruits, vegetables, whole-grain breads, cereals, and dry beans.
- Exercise regularly.
- Establish a regular time for bowel movements.
- Try Metamucil, bran tablets, or Fiberall.
- Try an over-the-counter stool softener called Colace (also called docusate sodium) as directed by your practitioner.
- Don't use laxatives (such as Ex-Lax) without first talking with your practitioner.

HEMORRHOIDS

Hemorrhoids (dilated, twisted blood vessels in and around the rectum) are common, especially in the last months of pregnancy when the uterus is pushing constantly on the rectal veins. Hemorrhoids can cause pain, itching, and bleeding during a bowel movement, but usually improve without treatment shortly after birth.

Here are some tips that might help:

- Keep your stools soft by increasing your intake of liquids, fruits, vegetables, and fiber.
- Avoid sitting for long periods of time. Lie on your side several times a day.
- Cleanse the area with soft, moist toilet paper, Witch Hazel pads, or Tucks pads.
- Try ice packs to relieve discomfort.
- Take a "sitz bath" (a warm-water bath taken in the sitting position where only the hips and buttocks are covered) for 20 minutes, several times a day.
- Use Preparation H, Anusol, or 1% hydrocortisone cream to help relieve the pain.

FREQUENT OR PAINFUL URINATION

You may notice that you do not need to urinate as frequently as you did when you were first pregnant because your uterus is well out of your pelvis, putting less pressure on your bladder. Continue to drink plenty of fluids.

Call your practitioner if you feel burning or pain when you urinate. You'll need to be tested for a bladder infection.

Call immediately if you have chills and fever or a temperature of 100.4 degrees or greater, with or without backache. These symptoms could be a sign of a more serious infection.

RESTING AND SLEEPING POSITIONS

At this point in your pregnancy, lying on your side is better for you and the baby. When you are lying on your back, the weight of your uterus and your baby rests on the vena cava, the largest vein in your abdomen. When there is pressure on that vein, your blood pressure can go down and you may feel dizzy or light-headed.

- Sleep on your side with a pillow between your legs.
- If you find you have turned over onto your back, just roll back onto your side.
- After week 16 of pregnancy, avoid exercises where you have to lie on your back for longer than 3 minutes.

ROUND LIGAMENT PAIN

Round ligaments help support your uterus. As pregnancy progresses, these ligaments can stretch. Any movements that stretch these ligaments can cause dull or sharp pain across or on either side of your abdomen. It can occur when turning over in bed, walking quickly, or with sneezing and coughing. The following tips can help avoid the pain:

- Change positions slowly.
- Use your hands to support your weight when changing positions.
- Rest as much as possible.
- Try a maternity girdle or belt to help lift the weight of the uterus off the pelvic floor.

► Changes in your skin

As your baby grows, your pregnancy hormones can trigger changes in your skin. You can't fix darkening skin by bleaching, but you can often cover blotches with makeup. Be sure to use sunscreen because sun exposure can intensify darkening blotches on the skin.

These changes should fade away after your pregnancy and treatment is not usually necessary. If you're worried, talk to your practitioner.

STRETCH MARKS

Your uterus is expanding beyond your belly button and your abdomen is stretching to fit it. This may cause reddish streaks on your abdomen. These stretch marks might also appear on your breasts, buttocks, or thighs. After birth, these will fade to fine silvery lines, which may or may not disappear. Oils, creams, or lotions will make your skin feel better, but they can't stop stretch marks from forming.

LINEA NIGRA

You may get a narrow, dark line (linea nigra) that extends from your belly button to your pubic bone (the bone just above your vagina). This seems to occur more frequently with those who have dark hair and skin. It's caused by pregnancy hormones and will disappear or fade after birth.

CHLOASMA

You may find brown patches on your nose, forehead, cheeks, and neck. This "mask of pregnancy" is called chloasma and also results from pregnancy hormones. The brown patches may darken in the sun, so use sunscreen. After birth, they should lighten and then disappear.

RED SPOTS

You may get red spots on your face, neck, upper chest, arms, or on the palms of your hands. These are tiny interconnected blood vessels that are caused by your pregnancy hormones. All redness should disappear after you give birth.

► A to Z pregnancy dictionary

ANEMIA

A hemoglobin deficiency caused by low iron in the blood, which can produce fatigue, dizziness, and fainting.

CONTRACTION

The tightening of the uterine muscle. True contractions cause the cervix to thin out (efface) and open (dilate). They have a regular pattern. Braxton Hicks contractions (formerly called false labor contractions) can begin during the second trimester. They don't cause cervical changes and don't usually have a regular pattern.

DOPPLER

A highly sensitive sound device that, when placed on the pregnant woman's abdomen, allows the fetal heartbeat to be heard.

KEGEL EXERCISE

An exercise done by contracting vaginal muscles to strengthen the pelvic floor and to help prevent leakage of urine.

LANUGO

A soft, downy hair that covers a fetus's body and may be seen on the shoulders, back, forehead, and temples of a newborn.

MECONIUM

Baby's first stool, created by the sloughing off of the intestinal lining.

PREECLAMPSIA

A condition that develops in some pregnant women and is marked by protein in the urine, high blood pressure, sudden weight gain, or sudden swelling of the hands or face.

PRETERM LABOR

Uterine contractions that cause softening, thinning, or opening of the cervix between 20 and 37 weeks.

VENA CAVA

The large vein that returns blood to the heart and lungs to pick up oxygen. The oxygenated blood is then carried to the mother's tissues and to the baby through the arteries.

VERNIX CASEOSA

A white creamy substance that covers the baby's body to protect the skin from exposure to amniotic fluid.

► Wearing a seat belt

Even as your belly expands, you need to wear a seat belt to protect you and your baby. Use both the lap belt and the shoulder harness. Position the lap belt low, below the baby (not across your stomach or uterus).

The information in *Healthy Beginnings* is not intended to diagnose health problems or to take the place of medical advice or care you receive from your practitioner. If you have persistent health problems, or if you have further questions, please consult your practitioner. If you have questions or need additional information about your medication, please speak to your pharmacist. Kaiser Permanente does not endorse the medications or products mentioned. Any trade names listed are for easy identification only.



► Relaxation exercises for pregnancy and beyond

Learning to relax will increase your energy and lower your stress during pregnancy, as well as prepare you for relaxing during labor.

Achieving complete relaxation takes practice. These exercises can be performed with a partner or by yourself. Called "progressive" or "touch" relaxation, these exercises can help you:

- Identify areas where you hold your tension.
- Learn to release the tension.
- Respond to your partner's touch by relaxing.
- Learn that you can isolate one part of your body while the rest of your body relaxes.

To begin, get into a comfortable position, preferably lying on your side or propped up with pillows in a semi-sitting position on a bed or a couch. Close your eyes and take a deep breath through your nose. Exhale completely through your mouth. Repeat this "cleansing breath." Now, allow your breathing to become slower and effortless. Find a comfortable pace.

If possible, have your partner touch each area that you're relaxing as you inhale and contract the muscle. Have your partner feel the difference in muscle tone as you exhale and relax the area. If you're practicing alone, concentrate on tensing each muscle group, relaxing it, feeling the difference between tension and relaxation, and breathing.

Start with your forehead and move progressively toward your toes.

- Raise your eyebrows toward your hairline and contract your forehead while inhaling. (Partners, feel the tension.) Try not to laugh; it tightens the rest of your face.
- Now exhale...and release the tension. (Partners, feel the muscle relax.)
- Keeping your forehead relaxed, bite down and clench your teeth as you inhale. (Partners, feel the muscles on the sides of her jaws.)
- Now exhale...and release the tension; let your mouth open slightly. (Partners, feel the difference.)
- Next, raise your shoulders and tense up the neck and upper shoulder as you inhale. This is where many of us carry a lot of tension. Is your face still relaxed? (Partners, check the tension.)
- Now exhale...and release the tension. (Partners, massage her a little and make sure she's totally relaxed.)

- Extend your right arm as you inhale. Make a fist and tense your right arm all the way to your shoulder. (Partners, feel the tension.)
- Now exhale...and release the tension; let the arm drop to your lap.

Feel the tension and distraction dissolve with every exhalation. Feel the relaxation flood your body with every inhalation. Calm in...tension out. Focus in...distraction out.

Continue these steps with the left arm, abdomen, buttocks, left toes (flex toward nose), then right toes. When your whole body has been relaxed, take a deep breath and exhale any remaining tension. Visualize that the tension is moving from your head, down your body, and out through your toes. Take another cleansing breath.

Notice how relaxed your muscles feel. If there's one area in which you still feel tension, focus on it, breathe in and out 4 or 5 times, and relax it further each time.

This is an excellent technique to use in your daily life when you feel stressed. At work or at home, find a quiet place and practice this exercise. After 2 or 3 weeks of daily practice, you'll be able to produce the same relaxed feelings on the spur of the moment. You'll also get a head start on preparing your mind and body for labor.

Register now for a childbirth preparation/Lamaze series to learn more about relaxation and other techniques to help you during labor, delivery, and recovery.

MUSCLE GESTURES

Forehead: Lift your eyebrows up.

Jaws: Bite down and clench your teeth.

Shoulders: Raise your shoulders so that they almost touch your ears.

Arms: Extend your arms one at a time.

Hands: Make a fist after extending each arm.

Upper back: Arch your upper back as if your shoulders could touch behind you.

Thighs: Squeeze your thighs together.

Lower legs: Flex your feet one at a time so that your toes point toward your nose.