

Whether it was planned or unplanned, your pregnancy will bring you great emotions. Along with the joy and excitement will come a host of questions and concerns. In order to reassure you and help you live a serene pregnancy, this guide provides you with a wealth of useful information. Don't let anxiety and stress get the better of this magical moment.

Enjoy the next nine months and smile. It's life you're carrying inside you!

In this guide...

Nutrition	4
Folic acid	5
Alcohol	7
Tobacco	8
Medication and pregnancy	9
Nausea and vomiting	10
Physical activity	11
Weight gain	13
Physical changes	14
The dad's role in all of this	17
Prenatal care	18
The evolution of your pregnancy	19
What to pack for the hospital	31
The baby blues or postpartum depression	33
Feeding your baby	34

© Familiprix Inc. 2020

WARNING AND DISCLAIMER: All rights reserved. Any reproduction and/or transmission, in whole or in part, in any form or by any means whatsoever, is strictly prohibited unless prior written authorization has been obtained from Familiprix Inc.

Neither Familiprix Inc. nor any person involved in the preparation, production and/or distribution of this publication provides any guarantee or assumes any responsibility whatsoever with respect to the accuracy, timeliness and content of the publication, or can be held responsible for any errors or omissions.

The contents of this publication are provided for your information. It is not intended to provide specific advice applicable to your situation and can in no way be considered as constituting a representation, warranty or advice of a medical nature. If you require medical advice or guidance, you should consult a physician, pharmacist or other qualified healthcare professional.

Nutrition

Good food and healthy lifestyle are key elements to ensure you put all the odds on your side in order to have a healthy pregnancy. As your pregnancy progresses, you will need to eat more to meet the nutritional needs of both you and the foetus. The best way to keep weight off and stay in shape is to vary colours and flavours, making sure to follow Canada's Food Guide.

Pregnant women's immune systems are often altered and some infections can be more severe and even increase the risk of potentially fatal problems for the baby. For example, listeriosis is a rare disease caused by bacteria that can contaminate certain foods. Given the serious consequences that contracting this bacterium can have, it is recommended that you avoid consuming products that are an excellent sources of transmission.

ACCORDING TO THE PUBLIC HEALTH AGENCY OF CANADA, AVOID CONSUMING...

- Raw fish and seafood, especially crustaceans and shellfish such as oysters and clams
- Undercooked meat, poultry, fish and seafood
- Hot dogs and charcuteries (cured meats)
- All foods containing raw or partially cooked eggs
- Unpasteurized dairy products and derivatives
- Unpasteurized juices, such as some apple juices
- Raw sprouts, especially alfalfa sprouts¹



1 Source: https://www.canada.ca/en/public-health/services/pregnancy/healthy-eating-pregnancy.html

Folic acid

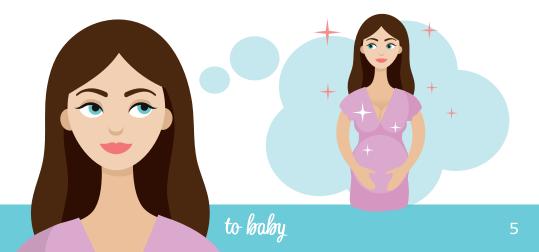
The first weeks of pregnancy are crucial to your baby's future health. In fact, it is during the first four weeks (when you usually don't know you're pregnant) that the foetus' brain, spinal cord and skull develop. Folic acid, also known as **vitamin B9**, plays an important role at this stage of development, helping to grow and protect the body's cells.

Folic acid is found naturally in leafy green vegetables, citrus fruits and whole grains. Specifically, the following foods are known to be a good source of folic acid:

- Lentils
- Corn
- Asparagus
- Broccoli
- Brussels sprouts
- Spinach
- Peas
- Oranges
- Fortified grains

- Enriched white flour
- Pasta
 - Cornmeal

Getting enough folic acid daily is a real challenge. That's why, in order to guarantee the amount needed by the foetus, specialists suggest taking a supplement. It would be ideal to start taking supplements about **three months before conception** and continue throughout pregnancy, as folic acid plays a particularly important role in the very first weeks of the baby's development.





If you are planning to become pregnant or are already pregnant, do not hesitate to consult your pharmacist. They can help you with vitamin supplementation to make sure you have everything the foetus needs.

By making sure that you take a **folic acid** supplement and follow the recommendations of **Canada's Food Guide**, you significantly reduce the risk of birth defects, including neural tube defects such as spina bifida (the spine or its covering protruding from the back), anencephaly (the absence of part of the brain), or encephalocele (part of the brain develops outside the skull).



Alcohol

If there's one thing to remember, it's that pregnancy and alcohol don't mix. The amount of alcohol ingested and the frequency of consumption are directly proportional to the possible damage to the baby. A woman who consumes alcohol regularly and in large quantities exposes her baby to several potential disorders such as growth retardation, intellectual deficiency, foetal alcohol syndrome, deformities or premature delivery. There is even a risk of miscarriage.

Some women sometimes worry that they drank alcohol before they knew they were pregnant. If you've ever had a drink, there's probably nothing to worry about. However, if regular drinking tends to be higher, then it's a good idea to talk to a healthcare professional.

While there is no evidence of a potentially harmful effect on the foetus and the occasional drink, there are no studies that determine the minimum safe level of alcohol consumption for the baby's development. For this reason, avoiding alcohol remains without a doubt the safest choice.

Tobacco

Your pharmacist is your best ally in quitting smoking, Consult your pharmacist today!

Learning that you're pregnant is an excellent reason for you and for the father to quit smoking. Quitting is not always easy, as it is an addiction for many people, but there are many tools available. Just talk to your healthcare professional.

It is well known that smoking during pregnancy has a harmful effect on both the mother and the development of the foetus. Whether through direct exposure or second-hand smoke, the risks of placental abruption, premature delivery, slower growth and sudden infant death syndrome are increased.



Medication and pregnancy

Many medications and natural health products are not compatible with pregnancy and should all be considered with caution.

Some substances could have terrible consequences, such as creating birth defects, causing spontaneous abortions, premature delivery or even increasing the risk of sudden infant death syndrome. Data is limited, but there are several sources on the use of medication during pregnancy that are available to health professionals. It is imperative to confirm with your doctor or pharmacist before taking any medication during your pregnancy. If drug therapy must be continued or started during pregnancy, it is the healthcare professional's judgement to ensure that the benefits of taking the medication outweigh the potential risks.

Before taking any medication, whether overthe-counter or prescription, and even before taking any natural health product, consult your healthcare professional.





Nausea and vomiting

Many women will suffer from nausea and vomiting during pregnancy. In fact, it is often one of the first symptoms to occur. As much as it can make you happy (you're really expecting a baby!), nausea and vomiting can be unpleasant and even disabling. These discomforts usually appear around the 6th week of pregnancy and usually subside around the 12th week.

For a minority of women (20%), the symptoms will persist longer, sometimes even until the end of the pregnancy.

Although they are usually harmless to the mother and baby in the short term, it is important to talk to your doctor if you are unable to eat anything without vomiting.

TIPS AND TRICKS TO BETTER MANAGE NAUSEA AND VOMITING

- Drink small amounts of water often throughout the day
- Avoid drinking during or immediately after meals
- Eat smaller meals, more frequently, so that the stomach is never empty, as fasting may increase nausea
- Likewise, when you wake up, eat a few crackers before you even get out of bed
- · When you are in the prone position, stand up slowly
- · Never go to bed immediately after eating
- Get some rest!

If, despite your best efforts, your condition does not seem to be improving, there are safe and effective prescription and non-prescription treatments that can help. Talk to your healthcare professional!

Physical activity

The benefits of regular physical activity are well established. Indeed, moving:

- Improves mood and self-image
- Helps you put on the weight you need
- Helps you relax and reduce stress
- Promotes sleep
- Improves muscle tone, strength and endurance
- Helps you develop greater stamina in preparation for delivery
- Allows you to better cope with the physical changes of pregnancy and to recover more quickly after delivery
- Gives you energy

These are good reasons to make physical activity part of your routine. Your choice of activity should be based on your fitness level and stage of pregnancy. Usually, low-impact, moderate-intensity activities such as walking, cycling and swimming are good exercises for pregnant women.

For women who were inactive before pregnancy, it is usually recommended to start with training periods of a few minutes at a time and gradually increase the duration of these periods.

However, if you were already active before becoming pregnant, it is possible to continue your physical activities while changing your routine.

Talk to your doctor to find out if any changes need to be made.





An exercise of adequate intensity should allow you to speak normally. If not, lower the intensity.

Drink before, during and after exercise to avoid dehydration.



ZZZ

If you are more tired than usual, take a day off.

Avoid exercising in extreme heat or on very humid days.



HERE IS A LIST OF SAFE EXERCISES FOR PREGNANT WOMEN:

- Brisk walking
- Bicycle
- · Stationary bike
- Swimming
- Aquafit
- Aerobic dance with reduced ground impacts
- Cross-country skiing
- Snowshoe
- Yoga
- Exercises on a training staircase, with an elliptical machine or with other training machines
- Jogging (during the first two trimesters, provided you have been jogging regularly beforehand)



Weight gain

Weight gain during pregnancy is normal and desirable. It is not just a simple fat gain. Many changes take place within you.

The recommended weight gain depends on your prepregnancy weight and can vary from woman to woman. Make sure you know your recommended weight gain based on your prepregnancy weight. The following table is a guide to recommended weight gain based on your pre-pregnancy Body Mass Index (BMI). Note that this scale is not valid for multiple pregnancies (twins, triplets, etc.), which generally result in greater weight gain. This guide is for information purposes only; your doctor's recommendations take precedence!

Your BMI before pregnancy	Recommended weight gain
Below your healthy weight: BMI less than 18.5	28 to 40 lbs - 12.5 to 18 kg
Healthy weight: BMI between 18.5 and 24.9	25 to 35 lbs - 11.5 to 16 kg
Above your healthy weight:	15 to 25 lbs - 7 to 11.5 kg



To calculate your BMI:

Weight in kg

Height in sq. meters

=

BMI



Physical changes

Pregnancy definitely brings its share of body changes, usually due to hormone variations. While some may not be too disruptive, others will unfortunately cause some discomfort.

SKIN

Many women notice a change in the appearance of their skin and scalp during pregnancy. Some women will complain of **hyperpigmentation of the skin**, i.e. the appearance of distinct areas where the skin becomes darker, such as the line between the navel and the pubis.

Pregnancy masks, resulting from sun exposure, are also among these possible changes.



In general, although these changes can sometimes be worrisome, the majority of these changes diminish or even disappear within a year following childbirth.

Stretch marks are often feared by expectant mothers. Usually appearing during the second half of pregnancy, mainly on the abdomen, thighs, hips and breasts, they are secondary to a sudden and significant stretching of the skin.

Unfortunately, although we want by all means to ensure that they never appear, there is no way to prevent them. We can only limit their appearance by drinking enough water, eating a healthy and balanced diet and regularly massaging the areas at risk with moisturizing cream.



BLADDER

Bladder functions change early in pregnancy, leading to an increase in the need to urinate. Later, as the foetus expands and the baby's head weighs on the bladder, these sensations tend to make the mother want to urinate more often as well. In addition, the size of the kidneys tends to increase, which may also contribute to more frequent urges to urinate, especially at night.



DIGESTIVE SYSTEM

Hormonal changes caused by pregnancy tend to slow digestion. As a result, women often suffer from **gastroesophageal reflux**, **heartburn** and **constipation**. In order to prevent these symptoms, it is suggested to eat easily digestible foods and to avoid for example:

- Spicy foods
- Coffee
- Soft drinks
- Fatty foods
- · Chocolate and many others

In more extreme cases, there are effective medications to help relieve these ailments and to aid digestion throughout pregnancy. Talk to your healthcare professional!

GESTATIONAL DIABETES

Pregnancy diabetes or gestational diabetes manifests itself by an increase in blood sugar levels. The placenta is thought to be responsible for this effect by producing certain hormones that interfere with the action of insulin produced by the pancreas. The blood tests taken during your pregnancy follow-up allow us to check your blood sugar level. The first step in treatment is a healthy diet and a healthy lifestyle that includes physical activity. If these measures are not sufficient, your doctor may decide to prescribe insulin in order to better control blood sugar levels and thus reduce the effects on the baby. Usually, most mothers' blood sugar levels return to normal after giving birth.

ARTERIAL PRESSURE

During pregnancy, some women may suffer from high blood pressure (hypertension). Hypertension occurs when blood pressure is higher than the normal target values. This is why your doctor measures your blood pressure at every appointment. Rest and reduced activity are the first steps in treatment. You may also be prescribed medication to lower your blood pressure. If your blood pressure rises again and protein is found in your urine, it may mean that you have preeclampsia.



Your doctor may consider hospitalization for closer follow-up of both you and your unborn baby, and may decide to induce delivery, depending on the severity of the illness and the stage of pregnancy.

SEXUALITY

During pregnancy, there may be a change in your sexual habits. You may abandon some practices in favour of others. It is also normal to experience changes in desire: sometimes your desire is increased, sometimes it is decreased. Some couples may avoid having sex during pregnancy because they are wrongly afraid of miscarriage or harm to the baby. Don't be afraid: the uterus protects the baby, and the baby is safe during sex. Therefore, unless your healthcare professional advises otherwise, pregnancy is not a contraindication to sexual activity.

The dad's role in all of this

Sometimes the father may experience some physical and emotional symptoms during his partner's pregnancy. This is called **couvade syndrome** or **sympathetic pregnancy**. It is estimated that about one in five fathers may suffer from it. Among the symptoms are:

- · Weight gain
- · Nausea and vomiting
- Sleep disorders
- Headaches
- Abdominal cramps
- Fringes
- Pain similar to contractions on the day of delivery



Prenatal care

Each pregnancy is unique, so the frequency of visits may vary from woman to woman. The interval between each appointment will be determined by your doctor based on your health, lifestyle and personal history. However, the following schedule is usually suggested:



Pregnancy is a huge change in life and doctor's visits are the perfect time for expectant parents to discuss everything that's on their minds. Do you have concerns, need reassurance or simply need to clarify some things? This is the time to talk about it. Ask your questions. So that you don't forget them, get into the habit of writing them down as you go along.

Several mobile applications exist to accompany you throughout your pregnancy, so don't hesitate to use all the features they can offer you.

The evolution of your pregnancy



∠ thweek

Changes in Mommy

Virtually no signs of pregnancy are yet perceptible. If you have a positive test, it's time to make some changes in your lifestyle, especially with regard to alcohol and tobacco.

Changes in baby

Size: 1 mm, like a poppy seed.

Placenta and amniotic fluid begin to form.



5

Changes in Mommy

Fatigue is starting to set in. Your body is working non-stop to start building this little being.

Changes in baby

Size: Less than 2 mm, like a sesame seed.

The embryo's heart begins to beat, but it is too early to hear it. The placenta and the beginning of the umbilical cord begin to deliver nutrients to the embryo.



6

Changes in Mommy

This could be the beginning of the nausea. Your breasts are probably sore, the nipples may become darker. You may feel the urge to urinate more often and you may have trouble sleeping. Keep your chin up! These symptoms tend to disappear at the end of the first trimester.

Changes in baby

Size: 5 mm, like a grain of rice.

The location of the eyes and nose is determined. Kidneys, lungs and liver are formed.

The heart beats more regularly.

 $\overline{/}$

Changes in Mommy

Nausea is more frequent. Some women may also experience heartburn.

Changes in baby

Size: 8 mm, like a small cornflower.

Arms and legs appear, but the fingers are not yet separated. The eyes are clearly visible. The brain begins to form.





Changes in Mommy

The body begins to show some roundness. Due to the increase in hormone levels, some discomfort may be felt. For example, heavy legs, constipation and mood swings.

Changes in baby

Size: 1.3 cm, like a raspberry.

The brain, kidneys, liver, blood network and digestive system develop. The bowel begins to function. The nervous system communicates with the muscles, so the embryo becomes more and more active.



Changes in Mommy

The presence of the pregnancy hormone (hCG) is at its peak. Symptoms of pregnancy are therefore very present (nausea, fatigue, shortness of breath and the urge to urinate).

Changes in baby

Size: 2.5 cm, like a grape.

It increasingly looks more and more human. Its arms and legs are getting longer. The fingers have separated and the toes are beginning to form.





10

Changes in Mommy

The foetus is taking up more and more space. The uterus tends to rise. The belly is slowly becoming rounder and the breasts are becoming more and more tense.

Changes in baby

Size: 2.9 cm, like a date and its weight is around 2.5 g.

All parts of the body are in place. The eyes are clearly visible and the eyelids overlap. The baby is starting to move limbs, but you don't feel it yet.



11

Changes in Mommy

Your uterus is growing and is about the size of an orange now. You are probably feeling short of breath because of the increased blood volume. Your kidneys are working to remove waste products created by the foetus. Remember to stay hydrated.

Changes in baby

Size: 5 cm, like a fig.

The baby's heart is beating twice as fast as yours. A thin layer of skin covers baby's body. Fingers and toenails are forming.



17

Changes in Mommy

It is normally at this stage that the first ultrasound is performed. Nausea and fatigue begin to subside.

Changes in baby

Size: Like a plum.

The features of the baby's face are forming. Eyelids form but remain closed.
Sucking movements begin.



2nd trimester

13

Changes in Mommy

It's the beginning of the second trimester. Symptoms are less present and energy is flowing back.

Changes in baby

Size: between 6 and 10 cm, like a kiwi.

All the vital structures are in place and the organs are doing their work.
Skeletal bones begin to form.



14

Changes in Mommy

Your breasts are getting more and more painful. Your skin may be drier, remember to moisturize it. Hyperpigmentation of the skin (especially the line between the navel and the pubis) may appear.

Changes in baby

Size: Between 8 and 11 cm, like a peach.

The genitals are differentiated. The baby opens their mouth and swallows liquid. The vocal cords are in place.



15

Changes in Mommy

Your belly continues to round and your hips widen. Keep up your good eating habits to make sure your baby has everything he needs.

Changes in baby

Size: Between 10.5 and 11.5 cm, like a pear.

The baby's hair is starting to grow.



16

Changes in Mommy

The breasts may start secreting colostrum, it is okay, don't worry about it.

White vaginal secretions may become more abundant, again, don't worry. Your uterus is rising, which can cause digestive problems.

Changes in baby

Size: 14 cm, like an avocado.

The foetus' head is still out of proportion compared with the body, but the torso, arms and legs are getting longer. Baby can move the arms and legs.



17

Changes in Mommy

The pregnancy hormone is finally doing some good! Some women benefit from an "aura of beauty". Hair and nails can be remarkably beautiful.

Changes in baby

Size: 17 cm, like an orange.

The baby starts to get bigger and accumulate fat. Heartbeat gets stronger.



18

Changes in Mommy

Protect your skin from the sun to avoid pregnancy mask (brownish spots on the forehead, cheekbones and around the mouth). The risk of pregnancy mask may even continue during the first few months after giving birth, so protect your skin.

Changes in baby

Size: 18 cm, like a pitaya.

The baby's digestive system functions properly. Fingerprints are forming.





19

Changes in Mommy

You may already know the sex of your baby or you may be about to find out.

Changes in baby

Size: 21 cm, like a grapefruit.

The vernix, a whitish, creamy substance, begins to cover the skin to protect it.



20

Changes in Mommy

Half of the pregnancy has passed. You may feel the baby moving. He's starting to make you feel his presence.

Changes in baby

Size: 22 cm, like a mango.

The baby is sensitive to changes in the environment. Baby often has hiccups.



21

Changes in Mommy

The increase in your weight can be felt and may cause back pain. Bowel movements may decrease and cause constipation. You are becoming increasingly out of breath.

Changes in baby

Size: 23 cm, like a cantaloupe.

Baby's wake and sleep cycles are consistent.



))

Changes in Mommy

Your pelvis becomes even larger and the increase in blood volume brings its share of inconveniences: cramps, haemorrhoids and varicose veins.

Changes in baby

Size: 25 cm, like an eggplant.

23

Changes in Mommy

Prenatal classes are a good way to involve the partner in the adventure.

Changes in baby

Size: 27 cm, like an eggplant.



74

Changes in Mommy

As your baby produces red blood cells, make sure you get enough iron to meet the demand. Baby now hears low-pitched sounds, a great opportunity for Daddy to start talking to his baby.

Changes in baby

Size: 28 cm, like an eggplant.

Baby moves around a lot and still has room to do so. Baby can react to caresses.

2nd trimester

25

Changes in Mommy

It is normal to feel tired as many changes are taking place in your body. Your heart is beating faster and your thyroid gland is working at full capacity, which can make you sweat more than usual.

Changes in baby

Size: 30 cm, like a papaya.

Baby's skin is thin and delicate. Blood vessels and capillaries form under the skin, giving it a rosy complexion.

26

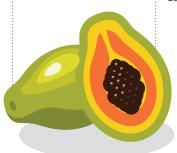
Changes in Mommy

You probably have several concerns or questions about the upcoming baby. It's a good time to start making preparations, such as the baby's room.

Changes in baby

Size: 33 cm, like a papaya.

Baby's nostrils have opened. The lungs and breathing muscles are able to work.



27

Changes in Mommy

The second trimester is coming to an end. Your uterus is compressing your stomach, which can increase heartburn and reflux. You may also experience non-painful and irregular false labour, which is normal.

Changes in baby

Baby's eyes begin to open and the vision-related areas of the brain are now active.



28

Changes in Mommy

The belly's getting bigger and bigger. Sleep may become more difficult.

Changes in baby

Baby's bronchial tubes are developing. Blood vessels stretch all over the lungs. 29

Changes in Mommy

It would be good to start thinking about your birth plan (what you want during the birth and even afterwards).

Changes in baby

Size: 34 cm, like a small pumpkin.

Baby looks more and more like a full-term child. Baby now has eyelashes. 30

Changes in Mommy

You've probably gained 8 to 9 kg since the beginning of the pregnancy. Continue to make good food choices to meet the nutritional needs of both you and your baby.

Changes in baby

Size: 35 cm, like a small pumpkin.

Baby is filling up with energy and gaining weight.



3rd trimester

31

Changes in Mommy

The baby's starting to move down, which might help your heartburn. You may see varicose veins appear, so moisturize your skin as much as possible.

Changes in baby

Size: 36 cm, like a small pumpkin.

The baby continues to grow. As the space starts to run out, baby moves a little less.

32

Changes in Mommy

It would be a good idea to start packing your suitcase to be ready when the day comes.

Changes in baby

Baby can now perceive shadow and light. Baby may already have the head pointed downwards, but can still change position before the pregnancy is full term. 33

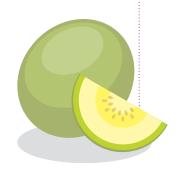
Changes in Mommy

Weight gain may accelerate. Continue to make wise food choices.

Changes in baby

Size: 39 cm, like a melon.

Baby can grab a toe or suck a thumb.



34

Changes in Mommy

To strengthen the bone system, it is recommended to eat a lot of calcium and vitamin D.

Changes in baby

Size: 41 cm, like a melon.

The baby moves less and less, due to lack of space. Baby continues to accumulate fat. 35

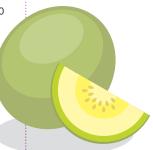
Changes in Mommy

Preparing frozen meals may make it easier for you after baby is born.

Changes in baby

Size: 43 cm, like a melon.

The baby is positioning itself for exit.



36

Changes in Mommy

As your baby moves down, it weighs more and more on your bladder, increasing your urge to urinate. You may have swollen ankles, so support stockings may be a good alternative.

Changes in baby

Size: 45 cm, like a melon.

The bones of its skull are not yet fused, making it malleable to adapt to childbirth. They will weld together during her first year of life.



37

Changes in Mommy

You are now considered to be full term. Your baby can come at any time. Your medical appointments are more frequent; do not hesitate to ask all your questions.

Changes in baby

Size: 48 cm, like a watermelon.

Baby is putting on weight and the folds of the skin are diminishing.

38

Changes in Mommy

The baby should be here any minute. It is useless to try to provoke things, it will happen when the time is right.

Changes in baby

Size: 50 cm, like a watermelon.

Baby's growth rate is slowing down.

39

Changes in Mommy

You may have a sudden urge to clean the house. That's good timing, you'll be ready for the baby's arrival.

Changes in baby

Baby is tight in your uterus.

40

Changes in Mommy

You've probably already had your baby. Congratulations!

Changes in baby

The journey is now over. Welcome to the world!

What to pack for the hospital

A few weeks before your baby is full term, it is strongly recommended that you pack your suitcase so that you are ready to leave for the hospital when the time comes. Here are a few suggestions of items to include in your suitcase so that you don't forget anything:

- A bathrobe, a jacket or pyjamas
- O Several panties you won't have any remorse to throw away
- Two bras because lactating can get your clothes wet
- Socks or slippers
- A maternity set for your discharge from hospital
- A toiletry kit: Shampoo, hairbrush, soap, toothpaste, toothbrush, deodorant, a bit of make-up (a bit of lipstick is good for morale!), a hair dryer, etc.
- O A lanolin-based cream if you plan to breastfeed
- Sanitary napkins for heavy losses
- O Your health insurance card and hospital card if applicable
- A list of your medications, if you are taking any
- O Your supplementary health insurance papers
- Your prenatal care
- O A book, magazines
- If you plan to breastfeed, it is best to have good nursing bras that will be much more comfortable when you feed your baby



OTHERS

An inflatable donut cushion that will help you be comfortable while sitting down
 A box of nursing pads
 A bag for dirty clothes
 A mask (eyes) to sleep
 A cell phone and/or tablet with a charger
 Your birth plan (special requests for delivery)
 Lip balm

O Snacks (muffins, soft bars, dried fruit, fruit juice, etc.)

ESSENTIALS FOR BABY

- Some pyjamas
- Some bodysuits
- A cotton cap
- Stockings
- Two soft blankets
- Soap and mild shampoo
- Diapers
- Some sucks (if desired)
- Outdoor clothing (adapted to the season)
- The car bench for the car (make sure you read the instructions)

THE ESSENTIALS FOR DAD

- Comfortable clothes and shoes
- Food and refreshments
- O His toiletry kit
- Sleepwear
- Some change of clothes

The baby blues or postportum depression

Hormonal changes after childbirth can cause mood swings and tears. This can last from a few hours to two weeks. During this time, take care of yourself and rest as soon as you have the chance. Talk to your relatives about what you are going through. However, if you suffer from insomnia, loss of appetite or have been feeling unhappy for several weeks, talk to your doctor. This could be postpartum depression.

Dads may also suffer from perinatal depression. It has been found that the rate of perinatal depression in men is much higher when the woman suffers from postpartum depression.





Feeding your baby

The baby's finally here! You can choose to breastfeed your baby, give them commercial formulas or combine the two.

BREASTFEEDING

Breast milk is undoubtedly the best for your baby. Unique and inimitable, its composition, which provides the energy your baby needs, is very easy to digest and stands out for the quality of its nutritional intake and immunological properties.

During the first days of breastfeeding, the breasts produce **colostrum**. It is a yellowish, thick, viscous, salty liquid, very rich in antibodies, vitamins, minerals and proteins. The size of the baby's stomach is about the size of a hazelnut at birth. The quantity of colostrum produced is perfectly adapted to it: highly concentrated in calories, antibodies and nutrients essential to the newborn baby.

Gradually, the quantity of colostrum (and then milk) ingested by the baby will increase from a few millilitres at the beginning to 200 ml per day at the start of the milky period, then between 700 and 800 ml per day from the end of the milky period until the age of 6 months. The quantity of milk gradually increases so that the baby's stomach gets used to the increased intake.

Lactation usually occurs between the 2nd and 7th day after delivery.

It is more likely if the baby is suckling regularly, day and night, and is not receiving a bottle of water or commercial infant formula. An early and effective first feed helps the milk supply. Breast engorgement may occur at this stage, but frequent feedings will reduce it. A caesarean section, certain maternal illnesses or stress during childbirth can delay lactation.

The milk is fluid, bluish, white or yellowish. Its colour has nothing to do with its richness, and its content varies during the same feed and over the course of the days. Since it continually adjusts to the baby's needs, it is the ideal food to nourish him adequately. There is no such thing as "poor milk." Even when breast milk looks clear, it is still nutritious and of high quality.

The same nutrients are found in all women's milk. Remember that the more often the baby feeds (with a good latch), the faster the milk will come in, the less engorged the breasts will be and the more milk will be produced.

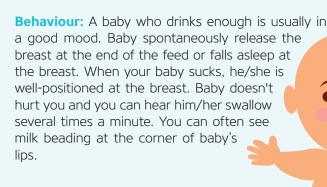
There are several monitoring criteria to ensure that breastfeeding is going well. Here are a few of them:

Baby weight: At birth, it is normal for babies to lose weight. A loss of 7 to 10% of birth weight is tolerated. A full-term baby usually regains his or her birth weight in the second week of life. Most babies gain at least 140 grams (5 ounces) per week. When breastfeeding is well established, babies can gain up to 1.5 kg (3 pounds) per month during the first three months. After three months of age, your baby's weight gain may slow down. Most babies double their birth weight in three months, and will double it again in about nine months after that.



Diapers: After lactation starts, the baby wets abundantly at least 6 diapers per 24 hours (clear, odourless urine). Your baby may not wet as many diapers immediately after discharge from hospital. A general rule of thumb is that your baby should wet the same number of diapers as their age in days, up to 6 days. In the first few days, your baby will have meconium stool. If they get enough milk, the stools will gradually change colour from black to greenish-brown, and to yellow. Baby may also have yellow stools with lumps, at least one a day, but usually one after each feeding.

After six weeks, the number of stools per day may decrease. Each baby has their own rhythm.





For some reason, a breastfeeding mother may want to give an occasional bottle (either with her milk or with a commercial formula). Ideally, bottle feeding should be avoided during the first few weeks of life, in order to properly establish milk production and to avoid the infant's preference for the nipple, which probably flows faster with less effort.

If you are breastfeeding, you owe it to yourself to adopt a healthy lifestyle, much as you did when you were pregnant, with the exception of dietary restrictions. Unlike when you were pregnant, there are no longer any prohibitions.

You can eat raw meat without any problem. You must only make sure that you have a healthy, varied diet and in sufficient quantity to have a good milk production.

Dieting with rapid weight loss should be avoided. It is also essential to stay well hydrated and get enough rest (which is often easier said than done with a baby at home).

As for cigarettes, it is obviously suggested to quit smoking or to smoke less while breastfeeding because smoking can decrease the amount of milk. Although the impact on a child's weight has not been formally demonstrated, secondary smoke may increase the risk of developing complications for the baby.

ALCOHOL AND BREASTFEEDING

Regarding alcohol, since it passes into breast milk, abstinence is the safest option. However, a breastfeeding woman who wishes to consume alcohol on an occasional basis should do so within the breastfeeding schedule. Drinking alcohol immediately after a feed is a good way to minimize the concentration of alcohol in the milk of the next drink. Of course, substances, such as cannabis, cocaine and amphetamines should be avoided during breastfeeding.

Finally, caution should be exercised when using medications or natural products. Pregnant or breastfeeding women should always consult a healthcare professional before taking any medication or natural product.

COMMERCIAL MILK FORMULAS

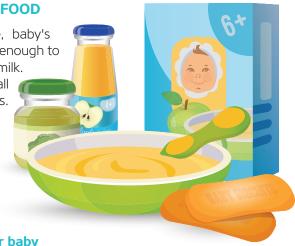
For moms who can't or won't breastfeed, commercial formulas are an option for feeding baby.

When choosing a formula, choose one that contains iron. The Canadian Paediatric Society recommends avoiding frequent changes in the choice of formulas offered to infants. Special and therapeutic formulas should only be used when warranted by the infant's health status and with medical advice.



INTRODUCTION OF SOLID FOOD

By about six months of age, baby's digestive system is not mature enough to receive anything other than milk. Until six months, milk meets all of your baby's nutritional needs. However, some babies are very interested in what's on their parents' plates around 4 ½ months.



How do you know when your baby is ready for solid foods?

- If baby shows signs of interest and tries to catch and taste what you are eating
- If the number of feedings has increased for more than five days, and after each feeding, baby seems unsatisfied
- If baby is about six months old
- If baby is sitting in a highchair and is able to turn his/her head to indicate refusal
- If baby closes his/her mouth on the spoon and is able to swallow the contents

Milk may be given before or after solids. There is no need to reduce the number of feeds. On the contrary, the baby who starts to eat should drink as much as before. Solids should be considered as complementary feeding.

In conclusion...

From a positive pregnancy test to the arrival of the baby in your lives, you will face many questions. Becoming a parent is not a trivial step in life, and you have to learn to tame your new role. Trust yourself; you are the best person to take care of your child. If you need support or if you have any questions, know that your pharmacist is there to help you.



Useful sources and links

Naître et grandir:

www.naitreetgrandir.com

The Society of Obstetricians and Gynaecologists of Canada (SOGC):

www.sogc.org

A Sensible Guide to a Healthy Pregnancy (Public Health Agency of Canada):

https://www.canada.ca/en/public-health/services/health-promotion/healthy-pregnancy/healthy-pregnancy-guide.html

Entraide Naturo-lait:

www.entraidenaturolait.com

Ligue la leche:

www.allaitement.ca

Familiprix:

www.familiprix.com



Notes:

Notes:



In this guide...

- Nutrition
- Folic acid
- Alcohol
- Tobacco
- Medication and pregnancy
- Nausea and vomiting
- Physical activity
- · Weight gain
- Physical changes
- The dad's role in all of this
- Prenatal care
- The evolution of your pregnancy
- · What to pack for the hospital
- · The baby blues or postpartum depression
- Feeding your baby





familiprix