

# *Your Guide to a Healthy Pregnancy*

Obstetrics & Gynecology Clinic

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# Your Guide to a Healthy Pregnancy

## Why pregnancy follow-up is important

During pregnancy, your body changes a lot and your baby develops rapidly.

Medical follow-up allows us to monitor your health and that of your baby. Prenatal consultations make it possible to detect certain diseases, prevent complications and support parents during this important period.

Thanks to examinations and ultrasounds, it is possible to check that the pregnancy is progressing normally and to intervene quickly if necessary.



### To remember

**Regular follow-up during pregnancy reduces the risks for the mother and the baby.**

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# Nutrition and Lifestyle During Pregnancy

*Good nutrition helps your baby develop and contributes to your well-being during pregnancy.*





## Nutrition during pregnancy

During pregnancy, your dietary needs change. A balanced diet promotes the baby's development and your well-being.

Eat a variety of foods: fruits, vegetables, proteins, dairy products (milk, yogurt, pasteurized cheese).

Hydration: drink at least 2 liters of water per day.

Physical activity: stay active regularly (walking, stretching, adapted exercises).

Food safety: avoid raw or undercooked foods (fish, eggs, meat, soft cheeses).

Golden rule: "boil it, cook it, peel it".

Limit sugar and fat: maximum 1 sugary drink per day, avoid foods that are too fatty.



### Practical advice

It is more important to eat a balanced diet than to eat a lot.

# Folic acid

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Folic acid (vitamin B9) is essential for the development of the baby's nervous system, especially in early pregnancy.

A deficiency can increase the risk of neural tube defects, which affect the brain and spinal cord.

For this reason, supplementation is recommended before pregnancy and during the first trimester.



## Practical advice

Recommended supplement: 400–800 micrograms per day



# Iron

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During pregnancy, the blood volume increases in order to provide the baby with enough oxygen.

Iron is needed to produce red blood cells.

A deficiency can cause anemia, which can lead to fatigue, dizziness, and an increased risk of preterm delivery.

Blood tests are used to check iron stores.



## Practical advice

If iron stores are low, treatment may be prescribed.



# Calcium

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Calcium is important for the development of the baby's bones and teeth. It also contributes to the bone health of the mother.

In some areas, food intake may be inadequate. If the calcium obtained through food is not sufficient, the body draws its reserves from the mother's bones to meet the baby's needs.

To avoid this, it is recommended to consume calcium-rich foods: dairy products, certain green vegetables, fortified foods.

If dietary intake remains insufficient, supplementation with calcium tablets may be necessary, as recommended by the doctor.



## Conseil pratique

Apport recommandé :  
1000–1200 mg par jour

# Vitamine D

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Vitamin D helps the body absorb calcium and plays an important role for bones and the immune system.

In many countries, insufficiency is common, even in sunny regions.

A blood test can assess vitamin D levels.

Vitamin D deficiency can affect the development of a baby's bones and teeth, and some studies suggest that it is also important for brain development. To avoid this, supplementation may be necessary if food intake or sun exposure is insufficient.



## Practical advice

To avoid vitamin D deficiency, supplementation may be prescribed based on blood results.



## Oral hygiene

During pregnancy, the risk of gingivitis and cavities increases because of hormones.

Good oral hygiene protects the mother and reduces the risk of infections that can affect the baby.

Taking care of your teeth is a simple gesture that protects your health and that of your baby.



### Practical advice

- Brush your teeth 2x/day
- Flossing daily
- Consult a dentist if there is a problem (cavities, bleeding, pain)
- Minor dental care (simple cavities, cleaning) are possible during pregnancy



## Nicotine and Alcohol

Some substances can be dangerous during pregnancy.

Alcohol crosses the placenta and can affect the development of the baby's brain.

Smoking increases the risk of miscarriage, prematurity and low birth weight.



### Important

It is recommended to avoid alcohol and tobacco completely during pregnancy.





## Vaccination during pregnancy

Vaccination can protect the mother and newborn from certain serious infections.

# Tetanus and pertussis vaccine

Some vaccinations can protect both mother and baby during pregnancy.

The antibodies produced by the mother can be passed on to the baby and protect them during the first few months of life.

Recommendations may vary by country.

In Cameroon, tetanus vaccination is part of the health programme.

The combined dTca vaccine (diphtheria, tetanus, pertussis) is recommended between 28 and 36 weeks of pregnancy.

It also protects the baby from whooping cough for the first few months.



## Bon à savoir

La vaccination contre la coqueluche pendant la grossesse permet de protéger le bébé **avant qu'il puisse recevoir ses propres vaccins.**





## Analyses and samples during pregnancy

Analyses and samples make it possible to monitor the health of the mother and baby, to prevent complications and to ensure safe and serene support.



# Analyses and samples during pregnancy

Analyses and samples are carried out throughout the pregnancy to monitor the health of the mother and baby.

They make it possible to detect certain abnormalities early, to prevent complications and to ensure appropriate medical follow-up, for safe and serene support.



## Did you know?

Thanks to laboratory tests, many pregnancy complications can be detected early and, in many cases, avoided or better managed.



## Infections sought (screening)

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Some infections may be present without symptoms but be passed on to the baby during pregnancy or childbirth.

Analyses may include:

- HIV
- Hepatitis B
- Hepatitis C
- Syphilis
- Chlamydia

Screening for chlamydia is important because this infection can be treated.

Treatment reduces the risk of transmission to the baby.



### Infobox

Some infections can be passed on to the baby if left undetected.



# Immunity search

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Some infections are usually mild for the mother, but can be dangerous for the baby during pregnancy.

The tests make it possible to check if the mother is immune to:

- Rubella
- Chickenpox (VZV)
- Toxoplasmosis
- CMV

If the mother is not immune, preventive measures may be recommended.



## Infobox

Simple prevention measures can reduce some of the chances of infection.



# Blood group and Rhesus

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It is important to know the mother's blood type and rhesus.

If the mother is Rh-negative, specific follow-up may be necessary to avoid certain complications.



## Infobox - Rhesus incompatibility

When a mother is Rh- and the baby is Rh+, the maternal immune system can produce antibodies against the fetus's red blood cells, which can put it at risk. Blood grouping and anti-D prophylaxis can effectively prevent this risk.



# Screening for sickle cell disease

In some populations, sickle cell disease is also tested for by hemoglobin electrophoresis.

This analysis makes it possible to know if the mother is a carrier of a sickle cell trait.



## **Infobox - Sickle cell disease**

If both parents are carriers of the sickle cell trait, there is a 1 in 4 (25%) chance that the child will have the disease. Hemoglobin electrophoresis is used to identify carriers.



# Thyroid function

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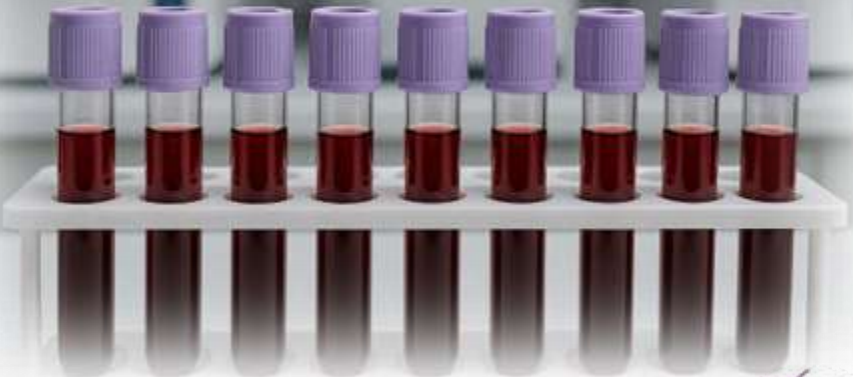
The thyroid produces hormones that are important for the development of the baby's brain.

A blood test (TSH) is used to check the function of the thyroid.



## Infobox - Thyroid function

Simple treatment usually corrects a thyroid disorder and reduces the associated risks, such as fetal growth retardation and the risk of miscarriage.



# Diabetes screening

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Some women can develop diabetes during pregnancy.

Screening may include:

fasting blood glucose and HbA1c (1 quarter)

OGTT test (between 24-28 weeks)



## Why screen for diabetes?

Gestational diabetes can lead to fetal macrosomia, complicate childbirth, and increase the risk of fetal distress. It is also associated with an increased risk of malformations, intrauterine growth restriction (IUGR) and fetal death in utero. Appropriate screening and care can limit these complications.



## If diabetes is detected

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The good news is that treatment can often reduce the risk.

Treatment may include:

- Adapted diet
- Physical activity
- sometimes drugs



### Good to know

A good follow-up most of the time allows a normal pregnancy.





## Hygiene and infection prevention during pregnancy

Some infections can be transmitted during pregnancy and pose a risk to the baby. Simple hygiene and dietary measures can reduce these risks.

# CMV (Cytomegalovirus)

CMV is a very common virus.

It is often symptom-free in adults, but infection during pregnancy can affect the baby.

The virus is transmitted mainly through the saliva or urine of young children.

Prevention tips:

- Wash your hands after changing a diaper
- Wash hands after wiping a child's nose
- Avoid sharing cutlery or glasses with a young child
- Avoid kissing a child on the mouth



## Be careful!

Young children can be carriers of CMV without being sick.



# Toxoplasmosis

Toxoplasmosis is an infection caused by a parasite.

It can be transmitted by:

- Raw or undercooked meat
- Improperly washed fruits and vegetables
- Contact with the soil (gardening)
- cat feces

Prevention tips:

- Cook the meat thoroughly
- Wash fruits and vegetables thoroughly
- Wash your hands after gardening
- Wear gloves when gardening
- Avoid handling the cat's litter box if possible



## Practical advice

Washing your hands before cooking and before eating is a simple and effective measure.



# Listeria (listeriasis)

Listeriosis is a rare but potentially serious bacterial infection during pregnancy.

It can be transmitted through certain contaminated foods.

Foods to avoid or consume with caution:

- Raw meat or fish
- Unpasteurized milk
- Certain unpasteurized cheeses
- Improperly stored food in the refrigerator

Prevention tips:

- Cook food thoroughly
- Keep food cold
- Respect the rules of hygiene in the kitchen



**Be careful!**

Listeriosis is rare but can be serious for the baby.



# Salmonella

Salmonella are bacteria responsible for digestive infections.

They can be present in:

- raw or undercooked eggs
- Raw poultry
- certain improperly stored foods

Prevention tips:

- Cook eggs and poultry thoroughly
- Wash hands after handling raw meat
- Clean kitchen surfaces after food preparation



## Good to know

Washing your hands before cooking and before eating is a simple and effective measure.



# Malaria

Malaria can be more severe during pregnancy. Prevention is essential to protect the mother and the fetus.

Preventive measures:

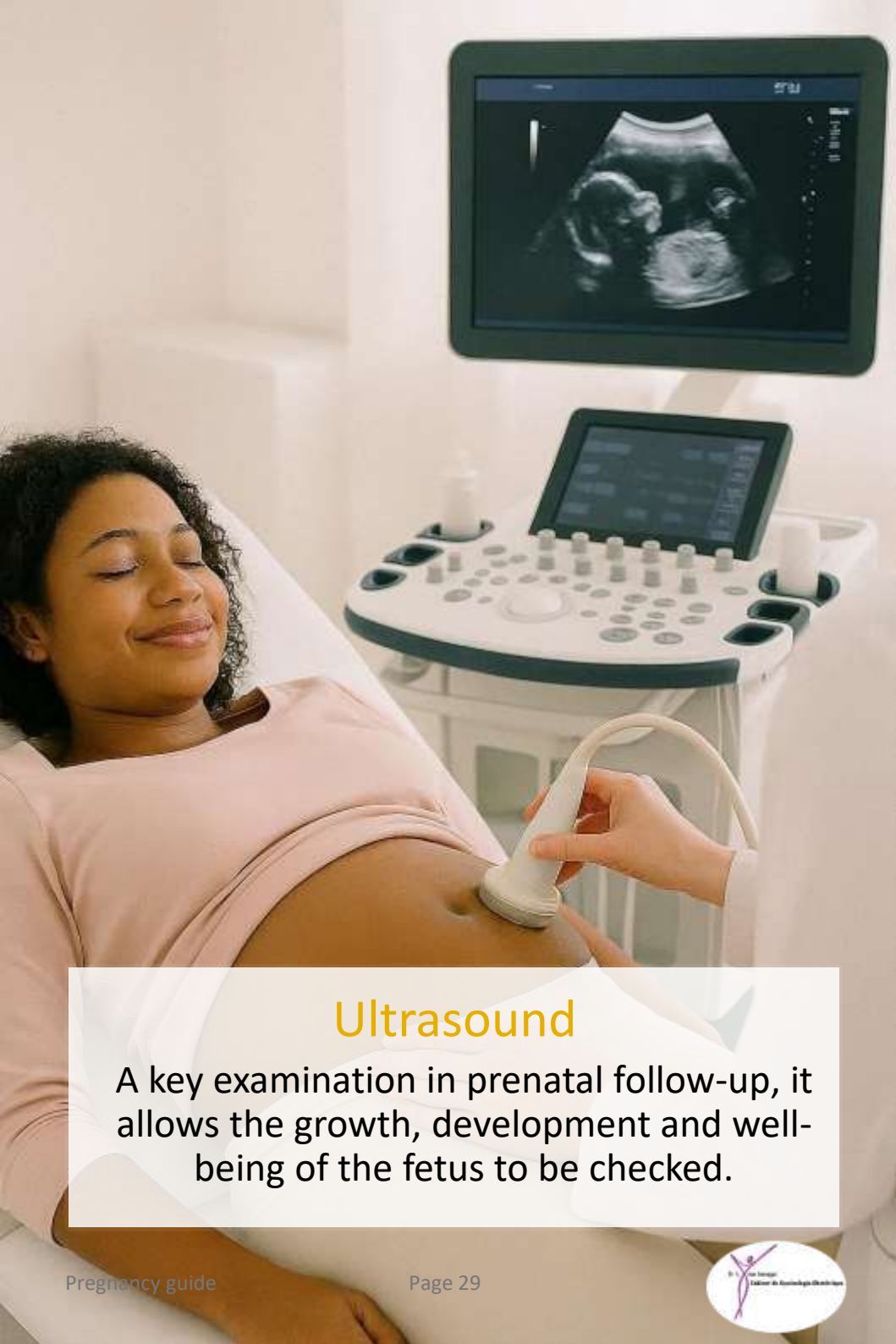
- Insecticide-treated mosquito net
- Preventive treatment (IPTp) according to medical recommendations
- Wearing covering clothing (long sleeves, pants) especially in the evening and at night
- Use of mosquito repellents suitable for pregnancy
- Avoid areas and times with a high presence of mosquitoes if possible



## Simple Malaria Measure

Sleeping under a mosquito net remains a simple, effective and highly recommended measure throughout pregnancy





## Ultrasound

A key examination in prenatal follow-up, it allows the growth, development and well-being of the fetus to be checked.

# The 1st trimester ultrasound

The first trimester ultrasound (11–13+6 weeks of amenorrhea) is a key step in pregnancy follow-up.

It allows you to:

confirm the intrauterine location of the pregnancy and the number of embryos

Accurately date pregnancy

Assess embryonic vitality

Perform nuchal translucency measurement and participate in the screening of chromosomal abnormalities

Estimating the risk of preeclampsia in combination screening

Observe the first fetal anatomical structures



## Did you know?

Thanks to this ultrasound we can detect more than 90% of trisomies when combined with other parameters.



# Morphological ultrasound

Morphological ultrasound (generally performed around 18-24 weeks) is an essential step in pregnancy follow-up.

It allows the baby's anatomy to be examined in detail and the proper development of the main organs to be checked.

The length of the cervix and the position of the placenta are also assessed.

It is a key examination for the detection of morphological abnormalities.



## Did you know?

The sex of the baby can sometimes be identified as early as 16 weeks, but it is usually confirmed during this ultrasound.



## 3rd trimester ultrasound

Between 28 and 32 weeks, the growth of the fetus is systematically controlled.

This ultrasound is mainly used to check the baby's development and biometrics.

It also offers a final evaluation of the fetal anatomy, as some malformations may not be visible until a later stage of pregnancy.

We also evaluate:

the position of the fetus

the location and appearance of the placenta

the amount of amniotic fluid



### Did you know?

A Doppler examination can complement the ultrasound.

It assesses maternal-fetal blood circulation (uterine, placental and fetal) and allows for the early detection of placental insufficiency or growth retardation.



# Common discomforts during pregnancy

During pregnancy, frequent and usually benign discomforts are related to hormonal and physiological changes; They can often be relieved by simple measures, but sometimes require medical advice.



# Nausea

Frequent especially in the 1st trimester, often in the morning or on an empty stomach, related to hormonal changes.

To relieve:

- Eat something as soon as you wake up (rusk, dry bread) before getting up
- Split the diet (5–6 small meals per day)
- Prefer cold or warm foods, which are often better tolerated
- Avoid strong odors and greasy or spicy foods
- Drink small amounts regularly, preferably between meals
- Ginger (infusion or biscuits) can help some women



## Important!

It is important to consult if there is significant or repeated vomiting, inability to eat or hydrate, or weight loss.



# Fatigue

Very common, especially at the beginning and end of pregnancy, linked to the increased needs of the body.

To improve:

- Get enough rest
- adapt your daily rhythm
- Maintain a balanced diet



## Important!

It is important to consult if you experience severe, unusual or persistent fatigue, or suspected anemia.



## Lower back pain

Frequent, in connection with changes in posture and weight gain.

To relieve:

Adopt a good posture

avoid carrying heavy loads

practice adapted gentle exercises

gentle massages can provide relief



### Important!

It is important to consult a doctor in case of intense, unusual pain, radiating to the legs or hindering walking.



## Other common symptoms

Many women suffer from dizziness, constipation or reflux during pregnancy. These disorders are common and usually benign. They are explained by the hormonal effects on digestion and blood circulation, as well as by the anatomical changes related to pregnancy.

To improve:

- Stay hydrated throughout the day
- Split meals
- Favor a diet rich in fiber and light
- Maintain gentle physical activity, which can help regulate bowel movements and circulation



### Important!

It is important to consult a doctor if you have persistent symptoms or significant discomfort on a daily basis.



## Warning signs

Some symptoms during pregnancy may indicate a situation that requires prompt treatment.



### Important!

It is important to consult immediately if:

- Heavy bleeding or after the 1st trimester
  - Severe abdominal pain
  - persistent fever
- Decreased baby's movements





## Childbirth

A key moment for the health of mother and baby, where appropriate care guarantees safety and well-being.

# Preparation for birth

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Birth most often occurs between 37 and 42 weeks.

It is useful to prepare in advance in order to approach this moment with more serenity.

It may be useful to visit the maternity ward before the birth, in order to familiarise yourself with the premises, to know the organisation, the reception conditions and certain practical aspects (for example the costs). This often makes you feel more confident on the day of delivery.

If the birth is planned in another country, many women usually travel between 32 and 36 weeks of pregnancy.



## Practical advice

Ideally to be done before 37 weeks

- Prepare the maternity suitcase
- Prepare important documents
- Organize childcare for other children
- Choose the person who accompanies you during the birth
- Plan the means of transport to get to the maternity ward
- Write down useful numbers (maternity, doctor, companion)
- Participate in a birth preparation course

# The beginning of childbirth

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Childbirth most often begins with regular contractions.

More rarely, it can begin with the breaking of the water bag.

In some situations (e.g. if the contraction is overdue or other medical reasons may increase the risk to the mother or baby), contractions can be medically triggered.



## Infobox: Recognizing Contractions

Labour contractions:

- become regular
- gradually increase in intensity
- do not disappear with rest
- can cause pain in the lower abdomen or back

*If in doubt, it is advisable to contact the maternity ward.*



# Physiological birth and pain management

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The work is done in phases:

Opening of the cervix: contractions cause the cervix to gradually open.

Pushing phase: When the cervix is fully open, the baby descends and the mother is encouraged to push actively.

Expulsion of the baby and placenta: after the baby is born, the placenta is expelled.

Monitoring during delivery:

The baby is monitored by CTG to ensure his safety.

The medical staff (midwife or doctor) regularly monitor the progress of the birth and the mother's condition.

If necessary, medication can be used to stimulate contractions, and pain can be relieved by medication or epidural (PDA).



## Tips for managing pain

- Breathing slowly and steadily during contractions
- Relax and rest between contractions
- Focus on a positive image
- Medication or epidural (PDA) if needed



# Medical assistance during childbirth

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Most children are born spontaneously, but sometimes help is needed:

Extraction with suction cup or small forceps

Small incision (episiotomy) to make it easier for the baby to come out

Epidural or other pain relief if needed

Caesarean section in about 1/3 of medically related births



## Infobox: caesarean section

Performed if the health of the baby or mother is at risk

Common reasons: fetal distress, presentation of the baby, placenta previa

Duration: 30–60 minutes, under local or general anesthesia

About 1/3 of births on average



## After giving birth

The postpartum period is an important recovery and adjustment phase for both mother and newborn.



# Postnatal follow-up

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The objective: to ensure the health and well-being of the mother and baby.

Key points:

Physical recovery: control of the scar (caesarean section or episiotomy), bleeding, pain.

General health: blood pressure, weight, check-up if complications during pregnancy (gestational diabetes, preeclampsia).

Breastfeeding: support, advice and possible problems.

Contraception: discussion of postnatal options.

Vaccinations: catch-up if necessary.

Psychological Well-Being: Baby Blues Screening and Postnatal Depression Prevention



## Practical tip:

First postnatal visit often at 6 weeks, or earlier if necessary.

Consult a doctor promptly if pain, heavy bleeding, fever, problems with baby or breastfeeding.

Talk openly about your mood and tiredness.

# Breastfeeding

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Breastfeeding has many advantages:

- Immune protection for the baby
- Faster recovery for the mother
- Strengthened mother-child bond

*However, not all mothers can breastfeed or sometimes choose another option.*

*The main thing is that the baby is well nourished and that the mother feels supported in her choice.*



## **Information:**

The WHO recommends exclusive breastfeeding for 6 months.





## Scientific sources

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This guide has been developed on the basis of current international recommendations in obstetrics and maternal-fetal medicine:

World Health Organization (WHO)

American College of Obstetricians and Gynecologists (ACOG)

Royal College of Obstetricians and Gynaecologists (RCOG)

International Society of Ultrasound in Obstetrics and Gynecology (ISUOG)

Deutsche Gesellschaft für Gynäkologie und Geburtshilfe (DGGG)

*The aim of these recommendations is to ensure safe, modern and child-friendly care.*


*Thank you for reading this guide*

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*Share this guide with other moms  
if you think it might be useful for them.*