**MATERNITY AND INFANT CARE SCHEME**

Under the Maternity and Infant Care Scheme, antenatal care is provided free of charge to all expectant mothers (ordinarily residents of Ireland) using a combination of her own General Practitioner (GP) and a midwife/hospital obstetrician.

This care also extends to her newborn baby for 6 weeks after birth.

Under this scheme, your GP provides about half of your antenatal care and you only visit the hospital early in your pregnancy and for a reduced number of visits after that.

Once your pregnancy is confirmed, your GP will provide you with an application form which both you and your GP should complete and then return to your local health board where it will be processed for inclusion in the scheme.

Typically your schedule of antenatal care will be divided up as follows, (however, this can be modified by our GP and/or Obstetrician).

**Your first antenatal visit is not covered by the Maternity and Infant Scheme. Usual consultation fees apply.**

Your routine schedule is typically as follows (however, this can be modified by your GP and/or Obstetrician).

|  |  |  |
| --- | --- | --- |
| **Number of weeks pregnant** | **Visit to GP** | **Visit to maternity hospital/Obstetrician** |
| 12 weeks booking visit |  | \* |
| 16 weeks | \* |  |
| Before 20 weeks |  | \* |
| 24 weeks | \* |  |
| 28 weeks | \*Unless 1st pregnancy | \*(in case of first pregnancy) |
| 30 weeks | \* |  |
| 32 weeks |  | \* |
| 34 weeks | \* |  |
| 36 weeks |  | \* |
| 37 weeks | \* |  |
| 38 weeks |  | \* |
| 39 weeks | \* |  |
| 40 weeks |  | \* |

**Birth of Baby**

|  |  |  |
| --- | --- | --- |
| 2 weeks post natal (for baby) | \* |  |
| 6 weeks post natal (for both mum and baby) | \* |  |

**Subsequent Antenatal Visits**

At each subsequent antenatal visit, you will provide a urine sample, your blood pressure will be taken and you will be examined. Any concerns or anxieties you might have should be discussed at these visits. Most hospitals will have a course of antenatal classes which you and your partner can attend, near the time of birth. These classes allow you to learn about what to expect at the birth, the pain relief available and they offer breastfeeding support together with advice about looking after your health during pregnancy.

You are entitled to take paid time off work to attend antenatal appointments and antenatal classes under the Maternity Protection Regulations 2004.

Antenatal classes held by your local public maternity hospital are free of charge and you will need to book your place. It is usual to start your antenatal classes from about 30 weeks.

**Aim to eat a healthy diet. This should include a variety of foods including:**

* Starch based foods (such as bread, cereals, potatoes, rice and pasta)
* Plenty of fibre, which can be found in wholegrain breads as well as fruit and vegetables.
* Protein foods such as meat, fish, pulses, chicken, etc., every day. Choose lean meat, cut the fat off red meat and the skin off chicken.
* Dairy foods, such as yoghurt, milk and cheese.
* Try to avoid adding fat – for example by not frying food where possible.

**Include foods with plenty of iron, calcium and folic acid – a growing baby needs these nutrients right from the start of pregnancy:**

* **Iron** is mainly in red meat, pulses, dried fruit, green vegetables and fortified cereals.
* **Calcium** is mainly in dairy products such as milk, cheese and yoghurt. (Low fat milk, cheeses and yoghurts usually contain just as much calcium as the full fat varieties.)
* **Folic acid** is mainly in green vegetables, brown rice and fortified cereals.

**FOODS AND DRINKS TO AVOID DURING PREGNANCY**

* You should not eat the following if you are pregnant:
* **Anything with a lot of Vitamin A.** You need a small amount of Vitamin A to keep healthy. However, large amounts can harm an unborn baby, so avoid:
	+ Liver and liver products such as liver pate and cod liver oil supplements.
	+ Vitamin tablets or supplements which contain Vitamin A.
* **Food which may have high levels of listeria**. Listeria is a germ (bacterium) which does not usually cause problems in people who are not pregnant. However, pregnant women are more likely to become infected with listeria and it sometimes causes miscarriage, stillbirth or infections in the baby after birth. Foods which are most at risk of carrying listeria are:
	+ Undercooked meats and eggs. This may occur in some pre-cooked meats and pre-prepared meals. Make sure all meat foods are cooked until piping hot. Eggs should be cooked until the white and yolk are solid. Avoid foods that may contain raw eggs, such as some types of mayonnaise and mousse.
	+ Mould ripened and soft cheeses such as Brie, Camembert and blue veined cheeses. (Hard cheeses and processed cottage cheese are safe).
	+ Pates – including vegetable pates.
	+ Raw shellfish and raw fish (more details below)
	+ Unpasturised milk. **Note**: Goats milk is often unpasteurised, and goats milk products such as cheeses are often made from unpasteurised milk.
* **Certain Fish.** In general, fish is a good source of protein and other nutrients. Aim to eat at least 2 portions of fish per week, with at lease one portion being oily fish (see below). However, there are some important exceptions. Some types of fish contain a high level of mercury which can damage the developing nervous system of an unborn baby. Because of this, the Food Standards Agency (FSA) advises:
	+ You should not eat any shark, marlin or swordfish.
	+ Limit tuna – eat no more than four medium sized cans (drained weight = 140g per can) or two fresh tuna steaks per week (weighing about 140g cooked or 170g raw fish).
* Avoid eating raw fish or uncooked shellfish which may contain germs (bacteria, viruses or parasites).
* Also, some types of fish may contain a small amount of chemicals from pollution, including dioxins and polychlorinated biphenyls (PCBs). If you eat a lot of these fish, these chemicals may build up in your body over time, which may be harmful. Because of this, the FSA advises that you should have **no more than 2 portions a week** of any of the following fish:
	+ Oily fish, including mackerel, sardines, salmon, trout and fresh tuna. (Tinned tuna doesn’t count as oily fish).
	+ Sea bream, sea bass, turbot, halibut, rock salmon (also known as dogfish, flake, huss, rig or rock eel).
	+ Brown crabmeat.
* **Limit the amount of caffeine to no more than 300mg per day.** Some authorities advise limiting to 200mg per day. Caffeine is a substance that occurs naturally in foods such as tea, coffee and chocolate; is added to some drinks such as cola and some energy drinks; and is an ingredient of some cough and cold remedies, and some painkillers which you can buy at pharmacies. Having a lot of caffeine increases your risk of having a miscarriage and a baby with low birth weight. To give you an idea:
	+ One mug of instant coffee has about 100mg of caffeine.
	+ One mug of filter coffee has about 140mg of caffeine.
	+ One mug of tea has about 75mg of caffeine.
	+ One 50g plain chocolate bar has about 50mg of caffeine. Milk chocolate has about half the caffeine that plain chocolate has.
	+ One can of cola or half a can of an energy drink has up to 40mg of caffeine.
* **A note about peanuts:** at one point, the FSA advised that you may wish to avoid eating peanuts when you are pregnant in certain cases. This included if you have an atopic disease such as asthma, eczema or hay fever, or if a close family member has one of these conditions. This was because there was a concern that children could develop a peanut allergy as a result of their mother eating peanuts during pregnancy. However, in the light of new evidence, this advice was changed in December 2008. The FSA now advises that there is no need for women who are pregnant or breast-feeding, or who have children under 3 years, to change their diets to exclude peanuts.

**Toxoplasmosis**

Toxoplasmosis is an infection with a germ (bacterium) commonly found in raw meat and in sheep, lamb and cat poo (faeces). It can sometimes cause serious harm to an unborn baby. It can cause miscarriage, stillbirth and abnormalities in the baby. To avoid it:

* Wash your hands after handling raw meat.
* Do not eat raw or undercooked (rare) meat.
* Wash salads and vegetables, as any dirt may have been contaminated by cat faeces.
* Wash your hands after handling pets or animals, especially cats and kittens.
* Get someone else to clean out any cat litter trays when you are pregnant.
* Always wear gloves when gardening.
* Avoid sheep, especially during the lambing season.

**General Precautions for Handling Food**

Always wash your hands before handling food. Thoroughly wash all fruit and vegetables before eating them. Make sure raw meat and pre-prepared raw ready meals are properly cooked. This reduces your risks of getting infections from food. Various germs (bacteria, viruses or similar) can cause food poisoning. Food poisoning causes tummy (abdominal) pain, runny stools (diarrhoea) and vomiting. Two germs that are of particular importance to avoid during pregnancy have already been mentioned – listeria and toxoplasma. It is possible that other food poisoning bacteria may also cause complications during pregnancy. For example, gut infection with bacteria called salmonella and campylobacter may be associated with increased risk of pregnancy complications. So, it is wise to be extra vigilant about avoiding food poisoning.

Therefore, be strict about food hygiene:

* Always cook eggs and meat, including poultry, thoroughly.
* Wash fruit and vegetables.
* Wash your hands after going to the toilet, before handling food, before eating, after handling raw meat and after touching animals.

**Medication**

The effects of some prescribed medicines have been well studied and it is known that certain medicines are safe in pregnancy. For example, paracetamol at normal dose is safe and useful for headaches, backache and other aches and pains that may occur during pregnancy. However, for many medicines, it is not known for sure if they are safe or unsafe. So if you are pregnant, you should minimise your use of medication. This includes medicines that you can buy over the counter. Also, just because a medicine says it is herbal or natural, it does not necessarily mean that it is harmless or safe.

Always tell a doctor or dentist who prescribes medication for you that you are pregnant. Also, don’t take medicines that you can buy over the counter (including herbal remedies) unless they are known to be safe in pregnancy. The pharmacist will advise.

* Paracetamol at normal dose is safe and useful for headaches, backache and other aches and pains that may occur during pregnancy.
* Anti-inflammatory painkillers such as ibuprofen. You should not normally take these during pregnancy. Regular use during pregnancy may affect the large blood vessels of the developing baby.
* Laxatives. Constipation is common in pregnancy and you may a laxative. At first, it is best to try increasing the fibre in your diet and increasing the amount of non alcoholic fluids that you drink. If this fails, then fibre supplements such as bran, ispaghula and sterculia are safe. *Fybogel* is one such example commonly used for constipation in pregnancy. If you need something stronger, then it is best to discuss this with a doctor. Some laxatives such as docusate and lactulose may be prescribed safely for a short time.
* Antihistamines. These are commonly used for people with hay fever. Most manufacturers advise avoiding antihistamines in pregnancy. This is because there are no trials to show they are safe. However, there is no evidence of harm either.
* Decongestants such as pseudoephedrine and xylometazoline often bought for symptoms of common cold are best avoided in pregnancy.
* If you already take regular medication, ideally you will have discussed this with a doctor before becoming pregnant. If you have an unplanned pregnancy, discuss with your doctor as early as possible any medication that you take. In some cases, the risk of taking the medicine has to be balanced against the risk of not taking the medicine and your condition not being treated.

**Vitamins and Supplements**

**Folic Acid**

You should take folic acid tables (supplements). Ideally, do this from at least one month before you get pregnant, and continue taking them until at least the end of the 12th week of pregnancy – even if you are healthy and have a good diet. Folid acid is a naturally occurring vitamin found in spinach, sprouts, broccoli, green beans and potatoes. Some breads and breakfast cereals are fortified with folic acid. Because of the substantial benefits of folic acid, some countries routinely fortify staple foods, such as wheat, cornflour or rice with folic acid. Currently, there is a debate as to whether the UK should follow suit and fortify certain common foods with folic acid. You need a good supply of folic acid when you are pregnant to help with the development of the baby. If you take folic acid tablets in early pregnancy, you reduce the risk of having a baby born with a spinal cord problem such as spina bifida. You can buy folic acid tables from pharmacies. For most women, the dose is 400 micrograms (0.4mg) per day.

* If you have an increased risk of having a child with a spinal cord problem, then the dose is 5mg per day. You need a prescription for this higher dose – that is if:
	+ You have had a previously affected pregnancy,
	+ Your or your partner have (or have a family with) a spinal cord defect,
	+ You are taking medication for epilepsy,
	+ You are obese – especially if your body mass index (BMI) is 30 or more,
	+ You have coeliac disease, diabetes, sickle cell anaemia or thalassaemia.

Ideally, start taking folic acid tablets before becoming pregnant. The common advice is to start from the time you stop using contraception. If the pregnancy is unplanned, then start taking folic acid tablets as soon as you know you are pregnant.

**Vitamin D**

Vitamin D is needed for growth and supplements are recommended for all pregnant women, breast-feeding women and breast-fed babies. The dose if you are pregnant or breast feeding is 400 units (10 micrograms) daily. Some experts think that women who get little or no sunshine on their skin need a higher dose such as 800 units (20 micrograms) daily. This is because most of the Vitamin D that we get is made in the skin with the help of sunlight. Your doctor will advise.

**Iodine**

Iodine is known to be important for the healthy development of the brain of the fetus. A woman who is pregnant needs more iodine than usual to supply the developing fetus. If they do not have enough iodine, the baby may end up less intelligent than they otherwise would have been. Iodine mainly comes from milk, yoghurt, eggs and fish.

**Smoking**

Women who are pregnant should avoid smoking, due to the damage it can cause the unborn baby. It can also have long term effects on the health of your child after birth.

**Alcohol**

Women who are pregnant should not drink alcohol. The reason for this is that alcohol can cause damage to a developing baby. Alcohol gets to a baby through the placenta if a pregnant woman drinks alcohol. A baby cannot process alcohol very well so any alcohol in your baby stays in its body much longer than in you. This is known to be a risk for causing serious problems. At worst, babies can develop a syndrome of severe abnormalities, called fetal alcohol syndrome. In others, alcohol can cause problems for the baby such as poor growth, premature labour and physical and mental disability.

**Exercise**

For most women, it is important to do some regular physical exercise during pregnancy as part of living a healthy lifestyle. There are some circumstances in which this may need to be modified, and there are some sports which are best avoided in pregnancy, such as contact sports.

**Sex**

Sex is safe for most couples during pregnancy. Later in pregnancy, sex and orgasm may provoke contractions known as Braxton Hicks contractions. These make your bump feel hard. They can be uncomfortable but are quite normal. They usually pass after a few minutes.

Your doctor or midwife may advise you to avoid sex if you have had heavy bleeding in your pregnancy. This may also be the case if your waters have broken. This is because the protective barrier has gone, so having sex then may increase the risk of infection.

As the pregnancy progresses and the bump becomes bigger, you may find some positions more difficult. You and your partner may need to experiment to find something that works for both of you.

**Working during pregnancy**

If you think that your job may post a risk to a pregnancy, then ideally you should discuss this with your employer before you become pregnant or as soon as you become pregnant.

Certain jobs and workplaces may pose a risk to a pregnancy, in particular to the early stages of pregnancy. For example:

* Raw meat is sometimes contaminated with germs (bacteria) such as listeria and toxoplasma. If these germs infect adults they may cause listeriosis or toxoplasmosis, but may cause little harm. However, these germs can cause serious problems to your unborn child if you become infected when you are pregnant.
* If you work with certain animals. For example:
	+ You should avoid contact with sheep and lambs at lambing time. This is because some lambs are born contaminated with germs such as listeria, toxoplasma and chlamydia which may affect you and your unborn baby.
	+ Cats and kittens often carry toxoplasma germs and these are especially found in cat poo (faeces). So cleaning out cat litters and handling cats and kittens can be a risk.
* If your job puts you at risk of contracting Hepatitis B, you should be immunised against this virus. For example, if you are a healthcare worker or work at a daycare or residential centre. (Women with hepatitis B can pass on the infection to their child at childbirth).
* If you work with chemicals, fumes, radiation, etc. Some may be toxic to an unborn baby.

**Recreational Drugs**

The effects of all the different types of recreational (illicit) drugs on pregnancy are not fully known. However, there is an increasing amount of evidence to suggest that they are likely to pose a risk of damage to the baby. Examples include:

**If you take or inject heroin** when you are pregnant, it may increase the risk of:

* Miscarriage
* Slowing the growth of the baby, leading to low birth weight
* Premature labour, leading to the baby being “prem”
* Stillbirth
* The baby having withdrawal symptoms after birth

**Using cocaine** when you are pregnant is particularly hazardous. It may increase the risk of:

* Serious life threatening bleeding from the womb (uterus) in late pregnancy (placental abruption).
* Miscarriage.
* Slowing the growth of the baby, leading to a low birth weight.
* Premature labour leading to the baby being “prem”.
* Stillbirth.
* Possibly, abnormalities of the baby when it is born.

The above are just 2 examples.

Some people can stop drugs without any help; however, many people will require help. If you are using drugs and cannot stop easily, see your doctor for help. Your doctor will be able to refer you to a local community drug team for help. Most community drug teams can:

* Offer treatment plans. For example, one option for people who use heroin is to take substitute therapy with methadone in place of injecting heroin. This option is safer than injecting heroin during pregnancy.
* Provide counselling and information.
* Provide harm reduction activities such as needle exchange schemes.

**Animals**

Avoid contact with sheep and lambs at lambing time. This is because some lambs are born carrying the germs that cause listeriosis, toxoplasmosis and chlamydia. These may be passed on to you and your unborn baby. Toxoplasma is also found in cat poo. You should always wash your hands after handling cats and kittens and ask someone else to wash out cat litter trays.

**Travel**

In general, it is safe to travel during pregnancy. When in a car, wear the seat belt so that the straps go above and below your bump, not across it.

Flying is not known to be harmful. Most airlines will not allow you to fly in the late stages of pregnancy. This is because planes are not the ideal place to go into labour and they would prefer not to divert the flight to take you to the nearest hospital.

It makes sense not to travel to anywhere too remote and far from medical assistance, particularly in the early or later stages of pregnancy. Also, not all travel vaccinations are safe to use in pregnancy, so consider your destination carefully. If possible, avoid travel to destinations where malaria is prevalent, as pregnant women are more likely to be bitten and more likely to have complications if they develop the disease. Also avoid areas where Zika virus is circulating if possible, due to the risk of abnormalities in babies born to pregnant women who develop Zika.