



NEW BEGINNINGS . . .

a newsletter dedicated to the pregnant family.

No. 5

Weeks 31-35 of Pregnancy

Physical Changes and Concerns

The questions of the second trimester have passed. You are becoming more aware of the reality of the child. This is a time of joy, fear, and anticipation.

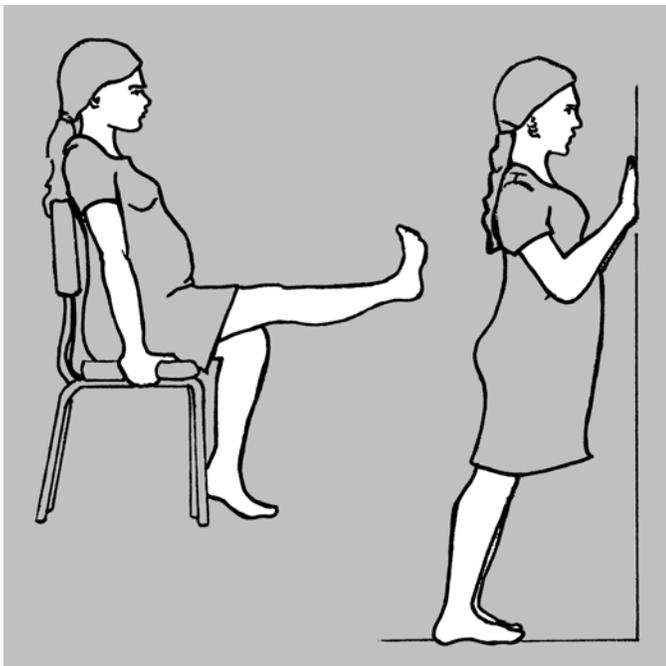
Physical Changes and Concerns

Leg Cramps

- Leg cramps are shooting pains in thighs or buttocks. They are due to the growing uterus putting pressure in the pelvic area. Increased pressure interferes with the blood and nerves traveling to your legs. Lack of calcium can also cause leg cramps.

Comfort Measures

- Straighten your leg and point your toes toward your head.
- Stretching exercises are also helpful.
- Stand 6-10 inches away from a wall. Lean forward. Stretch the calf muscles. Keep your legs straight. Don't bend at the knees.



Painful Intercourse

- Due to decreased blood in the pelvic area. This is caused by pressure of the growing uterus and the baby inside it.

Comfort Measures

- Try different positions for making love.
- Remember, love making does not harm a healthy mother and baby during pregnancy.
- Talk with your partner about what is most comfortable for you.

Urinary Frequency

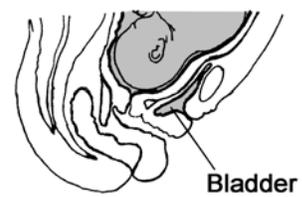
- Due to your baby pressing on your bladder.
- The kidneys can work better at night when you are lying down. So, the kidneys make more urine at night. You may have to empty your bladder during the night.

Normal Uterus



Bladder

Pregnant Uterus



Bladder

Comfort Measures

- Don't drink large amounts of liquid before bedtime.
- Take in the required amount of liquid during the day.
- Frequent urination at this time is normal, **but** if you notice:
 - a feeling of burning when passing your urine
 - urgency (a feeling of needing to pass your urine right away)
 - if you have a temperature . . . **You may have a urinary tract infection. Contact your health care provider.**

Changes in Posture and Walking

- Due to increased levels of hormones which makes the hip and pubic joints more flexible. These changes result in the well-known "waddle" of pregnancy.

Comfort Measures

- Use good posture when sitting or standing.
- Wear low-heeled shoes.

Preparation for Feeding Your Baby

Hopefully, you have already talked with your partner about this subject. As mentioned in an earlier newsletter, this should be a joint decision.

Breastfeeding

Attitude

One of the most important preparations for breastfeeding deals with attitudes. This is why it is so important for you and your partner to talk about how you will feed your baby. His strong support will be a big help to you. He may help offset negative comments you may hear from others.

Hygiene

- Use water only to cleanse the breasts and nipples. **Do Not Use Soaps or Rubbing Alcohol.** Natural secretions keep the nipple soft and clean.
- If leaking occurs from the nipple, water may be used to gently cleanse the area.
- Wear a clean, well-fitting bra. Remember: **No Plastic Liners.**

The bra that provides good support for you now should fit while you are nursing. If you need nursing bras, now is a good time to buy them. The size of your breasts in the 8th month of pregnancy is about the same size as when you are breastfeeding.

Bottle Feeding

There is preparation and planning to do if you have decided to bottle feed your baby. Your health care provider normally chooses the formula for your baby. However, you can choose the type of preparation which best suits your lifestyle. There are 3 forms available: ready-to-feed, concentrated, and powdered. There is a cost difference. Preparation time also varies. Saving time may be an important factor for a mother returning to work. A mother who is planning to stay home may use a method which is less expensive, but needs more

preparation time. Make a visit to your local stores to do comparison shopping. Government food supplement programs are available to help with the formula feeding needs of your baby. Contact your local WIC office to see if you are eligible.

Ready-to-feed Formula

This form is ready to use right from the bottle. It requires no mixing. It is also the most costly.

Concentrated Formula

This liquid form must be mixed with water. One concern with this form is the water it is mixed with. Are you on a city water system? Do you have your own well? Check with your local health officer or community health nurse to make sure your water is safe for infants. If you have your own water supply, write to the State Health Department for testing procedures and concerns about water supply.

Powdered Formula

This powder must be mixed with water so the same concerns about water apply. One advantage is the powder can be stored for long periods of time. You can mix enough formula for just one bottle at a time, or for the entire day.



Emotional Changes

During the last months of pregnancy the mother realizes "I am going to be a mother". Often this brings about a new understanding of herself and her role as a parent. The last months are a flurry of activity. Parents often enroll in classes to prepare for birth and parenthood. Cribs, clothing, and rooms for the baby are prepared.

The baby's activity becomes more noticeable and predictable. The baby's sleep patterns and activity at two months of age are similar to the baby's activity during the eighth month of pregnancy. Take notice . . . what is your baby's pattern?

Fathers

During the last two months of pregnancy, the father experiences emotional changes. He too, is preparing for a new role. He is focusing on himself to prepare himself as a father. Dad too, may show a surge of energy to achieve at home and on the job. He may feel a need to change the home to prepare for the baby's arrival.

Nutrition and Physical Activity

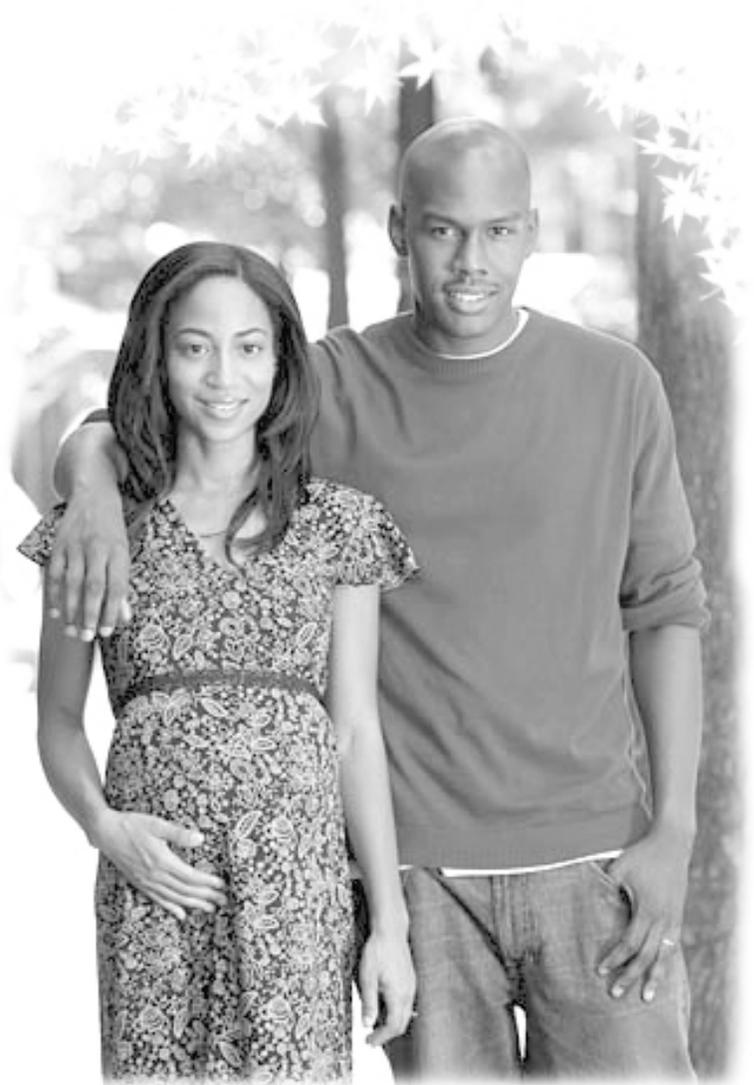
WIC (Women's, Infant's and Children's Supplemental Nutrition Program) This is a supplemental food program for women, infants and children. It is supported by the United States Government. It provides supplemental food, nutrition education and referral to limited income women, infants and children who are at nutritional risk. WIC is handled by local health agencies. If you haven't already done so, check with your local community health agency for details. Don't delay.

Exercise

As your pregnancy advances, your center of gravity changes. Your pelvic support loosens. Coordination usually decreases. This may have an effect on the type of exercises you choose to do. Exercises (walking, bike riding, and tennis) can be continued as long as you are comfortable. You may need to slow down or lighten your activity. Remember, exercise continued to the point of exhaustion or fatigue can decrease the baby's supply of oxygen.

Prenatal Visits

Sometime during the 8th month of your health care provider may do a vaginal exam. This is to check the readiness for delivery. A repeat blood test to check your hemoglobin may also be done.



NEW BEGINNINGS . . .

Written and Prepared at South Dakota State University by:
Carla Dieter, MS, RN And Carol Bergen, MS, RN

Advisory Panel:

Milton Mutch, MD, Obstetrician-Gynecologist, Sioux Falls, SD

Linda Marchand, CHE, District Nutrition Supervisor, Nutrition Services, South Dakota Department of Health, Rapid City, SD

Nancy Spyker, MS, RD State Nutritionist, South Dakota Department of Health, Pierre, SD

Colleen Winter, BSN, RN, Assistant Administrator, Maternal and Child Health, South Dakota Department of Health, Pierre, SD

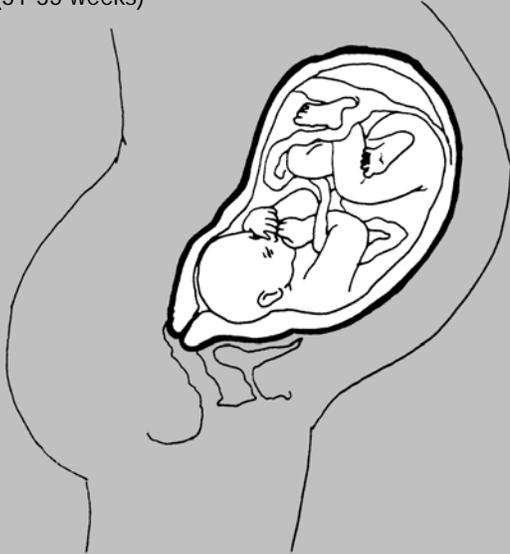
Jan Mueller, RN, ACCE, Childbirth Education Coordinator, Sioux Valley Hospital, Sioux Falls, SD

Gail Stafford, RN, Nurse Midwife, Indian Health Services, Rosebud, SD

Verna Schad, MS, RN, Acting Nurse Consultant, Indian Health Services, Cheyenne River Eagle Butte, SD

Fetal Growth and Development

(31-35 weeks)



- During this time your baby will grow from about 3 $\frac{3}{4}$ lbs. to 6 lbs.
- He is 16-19 inches long.
- Fingernails reach the end of the fingertips.
- Your baby is becoming "plump."

Family Relationships

Many decisions that will affect the entire family need to be discussed. If the mother is working outside the home, how long will she continue to work . . . how soon will she return to work . . . or **will** she return to work? Who will care for the baby if she does return to work?

The reality of parenthood becomes almost frightening. Being afraid is normal. Plan . . . Prepare . . . and Talk.