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Eating nutritious foods and gaining the appropriate amount of weight during pregnancy is vital to a healthy pregnancy, delivery, newborn, and recovery for mom. In fact, eating a well balanced diet during pregnancy has been found to decrease your risk for preterm labor, miscarriage, maternal nutrient deficiencies, and birth defects, among many other benefits for you and your baby (Samour & King, 2013). In this fact sheet we offer weight gain and nutrition suggestions that can improve the health of you and your baby during and after pregnancy.



Weight Recommendations During Pregnancy

The total amount of weight gained during pregnancy is very important (Bernstein, & McMahon, 2017). The amount of weight you should gain during pregnancy depends on your pre-pregnancy body mass index (BMI) and whether you are pregnant with one or multiple babies (Bernstein, & McMahon, 2017). Visit www.cdc.gov and search for “Adult BMI Calculator” to determine your BMI category prior to pregnancy. The table below provides the pregnancy weight gain recommendations for all BMI weight

categories. A woman of healthy weight prior to pregnancy who is pregnant with one baby should gain 25-35 lbs. throughout the course of her pregnancy (Center for Disease Control and Prevention [CDC], 2016). Weight gain recommendations are higher for all women who are with multiples. Talk with your health care provider if you're pregnant with multiples to determine a weight goal that is healthy for you and your babies (CDC, 2016).

Pre-pregnancy	Total gain for the pregnancy	1 st Trimester <u>total weight gain</u>	2 nd -3 rd Trimester <u>per week</u>
Underweight BMI <18.5	28 to 40 lbs.	2.2-6.6 lbs.	1.0-1.3 lbs./week
Normal weight BMI 18.5-24.9	25 to 35 lbs.	2.2-6.6 lbs.	0.8-1.1 lbs./week
Overweight BMI 25-29.9	15- 25 lbs.	2.2-6.6 lbs.	0.5-0.7 lb./week
Obese BMI ≥ 30	11-20 lbs.	0.5-4.4 lbs.	0.4-0.6 lb./week

(Academy of Nutrition and Dietetics [AND], 2014; Bernstein & McMahon, 2017; CDC, 2016)

Excess Weight Gain

Many women gain more weight than what is recommended. Gaining too much weight during pregnancy can be harmful for both baby and mom. Excessive weight gain increases the risk for the following health complications (Bernstein & McMahon, 2017; Samour & King, 2017):

In mom:

- High blood pressure
- Preeclampsia (high blood pressure and protein in the urine)
- C-section birth
- Gestational diabetes (and type 2 diabetes later in life)
- Weight retention after birth

And many more...

In baby:

- Low blood sugars at birth
- Large birth weight babies, which increases the risk for diabetes, obesity and cardiovascular problems later in life

Excess weight gain may be caused by the common misconception that you need to “eat for two” during pregnancy. In reality, healthy growth of you and your baby occur with only a small increase in the amount of food you need during pregnancy. Calorie needs don’t actually increase



until the second trimester when you need roughly 350 additional calories extra per day (Bernstein & McMahon, 2017; Butte, Wong, Treuth, Ellis, & O’Brian Smith, 2004). In the third trimester, when your baby is quickly packing on the pounds, you should be eating roughly 450 calories more per day (AND, 2014; Bernstein & McMahon, 2017). Keep in mind, 300-400 calories is about as much as a couple tablespoons of peanut butter and an apple, yogurt with fruit and nuts, or an open-faced tuna salad sandwich (Bernstein & McMahon, 2017; Samour & King, 2013).

Inadequate Weight Gain

Although excess weight gain is the most common weight issue during pregnancy, more and more women struggle with the idea of gaining the recommended amount of weight. Cutting calories, over exercising, and other dieting efforts are highly discouraged during pregnancy (Bernstein & McMahon, 2017). Just as there are complications associated with gaining too much weight during pregnancy, not gaining enough weight can also cause serious issues including (Bernstein & McMahon, 2017):

In mom:

- Vitamin and mineral deficiencies
- Bone and muscle loss
- Low iron stores and anemia
- Exhaustion and fatigue

In baby:

- Low birth weight
- Malnutrition
- Inadequate growth during pregnancy (Intrauterine growth restriction (IUGR))

Common Nutrition Conditions

There are a variety of nutrition-related conditions that many women experience during pregnancy. The table below includes suggestions for managing a few of the most common conditions through changes in diet.

Management of Common Nutrition Conditions During Pregnancy.

(AND, 2014; Bernstein & McMahon, 2017; Samour & King, 2013)

Condition	Management
Nausea and vomiting (morning sickness)	<ul style="list-style-type: none">• Eat foods that are easily tolerated (usually includes crackers, yogurt, and other foods high in carbohydrates)• Avoid foods that have strong smells• Sip water throughout the day• Take iron supplements with food• Consume foods and beverages with ginger• Take a B6 supplement (don't take more than 100mg/day)• Talk to your doctor if vomiting is really severe and/or persists past the first trimester
Constipation	<ul style="list-style-type: none">• Consume 28 grams or more of fiber per day. Fiber is found in vegetables, fruits, legumes, and whole grains.• Drink 12-13 cups of water per day.• Be physically active for at least 30 minutes every day.
Heartburn	<ul style="list-style-type: none">• Avoid fatty and spicy foods.• Avoid eating right before bed or laying down.• Limit caffeine, chocolate, mints, and other foods that trigger heartburn for you.

Important Nutrients

All nutrients are important to consume during pregnancy; however, there are a few that are especially essential for your baby's growth and development.

Protein: A woman's protein needs go up to about 71 gram a day during pregnancy (Bernstein & McMahon, 2017). This is approximately the amount of protein in 1 cup of chicken (43 g), 1/2 cup of lentils (9 g), two eggs (12g), and 1/4 cup of peanuts (9 g). Adequate protein is especially important for muscle growth, heart development, and other parts of a baby's body.

Omega 3 Fatty Acids: Omega 3 fatty acids are a specific type of polyunsaturated fatty acids (heart healthy fats) (Bernstein & McMahon, 2017). Omega 3 fatty acids (such as DHA and EPA) assist with brain development while also decreasing inflammation, and supporting a healthy immune system (Bernstein & McMahon, 2017; Wenstrom, 2014). Omega 3 fatty acids can be found in fatty fish such as tuna, salmon, anchovies, sardines, and shrimp (Wenstrom, 2014).

Other sources of Omega 3 fatty acids include chia seeds, flax seeds, walnuts, soybeans, and leafy-green vegetables (Wenstrom, 2014). Omega 3 supplements are available, however, consumption of omega 3 rich foods is recommended in place of supplements when possible (Wenstrom, 2014). It is recommended that pregnant women consume at least 8oz of seafood per week (AND 2014). Pregnant women should avoid eating high mercury fish, and should limit albacore tuna to no more than 6oz per week.

Fish Low in Mercury (enjoy)

- Salmon
- Tilapia
- Shrimp
- Tuna (canned light)
- Cod
- Catfish

Fish High in Mercury (avoid)

- Tilefish (from the Gulf of Mexico)
- Swordfish
- Shark
- King Mackerel

(Bernstein & McMahon, 2017)



Folate: Folate, also called folic acid, is essential because of the role it plays in decreasing the risk of neural tube defects, low birth weight, and preterm births in babies (Crider, Bailey & Berry, 2011). Since a baby's neural tube forms in the first several weeks of pregnancy, it is recommended that all women of childbearing age consume at least 400 µg of folate per day through food or supplementation starting at least 1 month prior to conception (Bernstein & McMahon, 2017). Folate can be found in a variety of legumes, green leafy vegetables, asparagus, and broccoli among many other fruit and vegetables (AND, 2014). You can also find folate supplemented in cereal, pasta, bread, tortillas and other enriched grain products (AND, 2014; Crider et al., 2011; Samour & King, 2013). Look for "folic acid" on food labels.

Iron: Iron needs increase to 27 mg/day during pregnancy, but needs can be as high as 60 mg/day for women with very severe iron deficiency anemia (Bernstein & McMahon, 2017). During pregnancy, iron has many functions for your baby including growth and development, and oxygen and blood supply, among others. Red meat, poultry, fish, and some green vegetables are all good sources (AND, 2014). Try eating iron rich foods (or supplements) with foods that are rich in vitamin C and low in calcium for best absorption (AND, 2014).

Food Safety: During pregnancy, there is increased risk of foodborne illness for the mom and fetus, because the immune system doesn't work as well during pregnancy (AND, 2014). Pregnant women should carefully follow the FDA's food safety guidelines, which can be found here: <https://www.fda.gov/Food/ResourcesForYou/HealthEducators/ucm083308.htm>

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