



The American College of
Obstetricians and Gynecologists

FAQ

FREQUENTLY ASKED QUESTIONS
FAQ001
PREGNANCY

Nutrition During Pregnancy

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How can I plan healthy meals during pregnancy?

Planning healthy meals during pregnancy is not hard. The United States Department of Agriculture has made it easier by creating www.choosemyplate.gov. This web site helps everyone from dieters and children to pregnant women learn how to make healthy food choices at each mealtime.

How does MyPlate work?

With MyPlate, you can get a personalized nutrition and physical activity plan by using the "SuperTracker" program. This program is based on five food groups and shows you the amounts that you need to eat each day from each group during each *trimester* of pregnancy. The amounts are calculated according to your height, prepregnancy weight, due date, and how much you exercise during the week. The amounts of food are given in standard sizes that most people are familiar with, such as cups and ounces.

What are the five food groups?

1. Grains—Bread, pasta, oatmeal, cereal, and tortillas are all grains.
2. Fruits—Fruits can be fresh, canned, frozen, or dried. Juice that is 100% fruit juice also counts.
3. Vegetables—Vegetables can be raw or cooked, frozen, canned, dried, or 100% vegetable juice.
4. Protein foods—Protein foods include meat, poultry, seafood, beans and peas, eggs, processed soy products, nuts, and seeds.
5. Dairy—Milk and products made from milk, such as cheese, yogurt, and ice cream, make up the dairy group.

Are oils and fats part of healthy eating?

Although they are not a food group, oils and fats do give you important *nutrients*. During pregnancy, the fats that you eat provide energy and help build many fetal organs and the placenta. Most of the fats and oils in your diet should come from plant sources. Limit solid fats, such as those from animal sources. Solid fats also can be found in processed foods.

Why are vitamins and minerals important in my diet?

Vitamins and minerals play important roles in all of your body functions. During pregnancy, you need more folic acid and iron than a woman who is not pregnant.

How can I get the extra amounts of vitamins and minerals I need during pregnancy?

Taking a prenatal vitamin supplement can ensure that you are getting these extra amounts. A well-rounded diet should supply all of the other vitamins and minerals you need during pregnancy.

What is folic acid and how much do I need daily?

Folic acid, also known as folate, is a B vitamin that is important for pregnant women. Taking 400 micrograms of folic acid daily for at least 1 month before pregnancy and 600 micrograms of folic acid daily during pregnancy may help prevent major birth defects of the baby's brain and spine called *neural tube defects*. It may be hard to get the recommended amount of folic acid from food alone. For this reason, all pregnant women and all women who may become pregnant should take a daily vitamin supplement that contains the right amount of folic acid.

Why is iron important during pregnancy and how much do I need daily?

Iron is used by your body to make a substance in red blood cells that carries oxygen to your organs and tissues. During pregnancy, you need extra iron—about double the amount that a nonpregnant woman needs. This extra iron helps your body make more blood to supply oxygen to your baby. The daily recommended dose of iron during pregnancy is 27 milligrams, which is found in most prenatal vitamin supplements. You also can eat iron-rich foods, including lean red meat, poultry, fish, dried beans and peas, iron-fortified cereals, and prune juice. Iron also can be absorbed more easily if iron-rich foods are eaten with vitamin C-rich foods, such as citrus fruits and tomatoes.

Why is calcium important during pregnancy and how much do I need daily?

Calcium is used to build your baby's bones and teeth. All women, including pregnant women, aged 19 years and older should get 1,000 milligrams of calcium daily; those aged 14–18 years should get 1,300 milligrams daily. Milk and other dairy products, such as cheese and yogurt, are the best sources of calcium. If you have trouble digesting milk products, you can get calcium from other sources, such as broccoli; dark, leafy greens; sardines; or a calcium supplement.

Why is vitamin D important during pregnancy and how much do I need daily?

Vitamin D works with calcium to help the baby's bones and teeth develop. It also is essential for healthy skin and eyesight. All women, including those who are pregnant, need 600 international units of vitamin D a day. Good sources are milk fortified with vitamin D and fatty fish such as salmon. Exposure to sunlight also converts a chemical in the skin to vitamin D.

How much weight should I gain during pregnancy?

The amount of weight gain that is recommended depends on your health and your *body mass index* before you were pregnant. If you were a normal weight before pregnancy, you should gain between 25 pounds and 35 pounds during pregnancy. If you were underweight before pregnancy, you should gain more weight than a woman who was a normal weight before pregnancy. If you were overweight or obese before pregnancy, you should gain less weight.

Can being overweight or obese affect my pregnancy?

Overweight and obese women are at an increased risk of several pregnancy problems. These problems include *gestational diabetes*, high blood pressure, *preeclampsia*, *preterm* birth, and *cesarean delivery*. Babies of overweight and obese mothers also are at greater risk of certain problems, such as birth defects, *macrosomia* with possible birth injury, and childhood obesity.

Can caffeine in my diet affect my pregnancy?

Although there have been many studies on whether caffeine increases the risk of *miscarriage*, the results are unclear. Most experts state that consuming fewer than 200 milligrams of caffeine (one 12-ounce cup of coffee) a day during pregnancy is safe.

What are the benefits of including fish and shellfish in my diet during pregnancy?

Omega-3 fatty acids are a type of fat found naturally in many kinds of fish. They may be important factors in your baby's brain development both before and after birth. To get the most benefits from omega-3 fatty acids, women should eat at least two servings of fish or shellfish (about 8–12 ounces) per week and while pregnant or breastfeeding.

What should I know about eating fish during pregnancy?

Some types of fish have higher levels of a metal called mercury than others. Mercury has been linked to birth defects. To limit your exposure to mercury, follow a few simple guidelines. Choose fish and shellfish such as shrimp, salmon, catfish, and pollock. Do not eat shark, swordfish, king mackerel, or tilefish. Limit white (albacore) tuna to 6 ounces a week. You also should check advisories about fish caught in local waters.

How can food poisoning affect my pregnancy?

Food poisoning in a pregnant woman can cause serious problems for both her and her baby. Vomiting and diarrhea can cause your body to lose too much water and can disrupt your body's chemical balance. To prevent food poisoning, follow these general guidelines:

- Wash food. Rinse all raw produce thoroughly under running tap water before eating, cutting, or cooking.
- Keep your kitchen clean. Wash your hands, knives, countertops, and cutting boards after handling and preparing uncooked foods.
- Avoid raw and undercooked seafood, eggs, and meat. Do not eat sushi made with raw fish (cooked sushi is safe). Food such as beef, pork, or poultry should be cooked to a safe internal temperature.

What is listeriosis and how can it affect my pregnancy?

Listeriosis is a type of food-borne illness caused by bacteria. Pregnant women are 13 times more likely to get listeriosis than the general population. Listeriosis can cause mild, flu-like symptoms such as fever, muscle aches, and diarrhea, but it also may not cause any symptoms. Listeriosis can lead to miscarriage, stillbirth, and premature delivery. **Antibiotics** can be given to treat the infection and to protect your unborn baby. To help prevent listeriosis, avoid eating the following foods during pregnancy:

- Unpasteurized milk and foods made with unpasteurized milk
- Hot dogs, luncheon meats, and cold cuts unless they are heated until steaming hot just before serving
- Refrigerated pate and meat spreads
- Refrigerated smoked seafood
- Raw and undercooked seafood, eggs, and meat

Glossary

Antibiotics: Drugs that treat certain types of infections.

Body Mass Index: A number calculated from height and weight that is used to determine whether a person is underweight, normal weight, overweight, or obese.

Cesarean Delivery: Delivery of a baby through surgical incisions made in the mother's abdomen and uterus.

Gestational Diabetes: Diabetes that arises during pregnancy.

Macrosomia: A condition in which a fetus grows very large.

Miscarriage: Loss of a pregnancy that occurs before 20 weeks of pregnancy.

Neural Tube Defects: Birth defects that result from incomplete development of the brain, spinal cord, or their coverings.

Nutrients: Nourishing substances supplied through food, such as vitamins and minerals.

Preeclampsia: A condition of pregnancy in which there is high blood pressure and protein in the urine.

Preterm: Born before 37 weeks of pregnancy.

Trimester: Any of the three 3-month periods into which pregnancy is divided.

If you have further questions, contact your obstetrician–gynecologist.

FAQ001: Designed as an aid to patients, this document sets forth current information and opinions related to women's health. The information does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to the institution or type of practice, may be appropriate.

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Pregnancy Nutrition Guide

Meats/Beans

Grains

Vegetables

Dairy

Fruits

| Recommended number of daily servings* | Meats/Beans | Grains | Vegetables | Dairy | Fruits |
|---------------------------------------|---|---|--|--|--|
| 7-11 | <ul style="list-style-type: none"> 1 oz cooked skinless chicken or turkey 1 egg ¼ cup cooked black beans | 6-9 | 3-5 | 4-6 | 3-5 |
| Serving size examples | <ul style="list-style-type: none"> 1 oz cooked skinless chicken or turkey 1 egg ¼ cup cooked black beans | <ul style="list-style-type: none"> 1 slice whole-grain bread ½ cup cooked oatmeal ½ cup cooked whole-wheat pasta | <ul style="list-style-type: none"> 1 cup raw tomatoes 1 cup broccoli (chopped or florets) 1 cup raw or cooked carrots (strips, slices, or chopped) | <ul style="list-style-type: none"> ¼ cup shredded Swiss cheese 1 cup yogurt 1 cup milk or calcium-fortified soy milk | <ul style="list-style-type: none"> 1 medium apple 1 cup sliced banana 1 large orange |
| Good to know | <ul style="list-style-type: none"> Provide protein, which helps build bone, muscle, cartilage, blood, and skin Meat contains iron, as well as B vitamins, zinc, magnesium, and vitamin E Choose lean meats whenever possible | <ul style="list-style-type: none"> Provide carbohydrates needed for energy Rich in vitamins and minerals Many grain products are also fortified with folic acid Choose whole grains whenever possible because they contain more fiber | <ul style="list-style-type: none"> Low in calories, high in nutrients Excellent source of vitamins E, A, C—as well as folate, potassium, and fiber Try to choose a variety of vegetables throughout the day | <ul style="list-style-type: none"> Good source of calcium and vitamin D Drink 3 cups of milk per day Yogurt and cheese are good alternatives to milk Choose reduced-fat dairy products whenever possible | <ul style="list-style-type: none"> Low in calories, high in nutrients Excellent source of vitamin C and other antioxidants Vitamin C helps the body absorb iron Choose whole fruits instead of fruit juice whenever possible |

*Recommended number of daily servings vary by height and weight. Customized daily menus can be created at www.choosemyplate.gov/pregnancy-breastfeeding



COMMITTEE OPINION

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Committee on Obstetric Practice

This document reflects emerging clinical and scientific advances as of the date issued and is subject to change. The information should not be construed as dictating an exclusive course of treatment or procedure to be followed.

Weight Gain During Pregnancy

ABSTRACT: The updated guidelines by the Institute of Medicine regarding gestational weight gain provide clinicians with a basis for practice. Health care providers who care for pregnant women should determine a woman's body mass index at the initial prenatal visit and counsel her regarding the benefits of appropriate weight gain, nutrition and exercise, and, especially, the need to limit excessive weight gain to achieve best pregnancy outcomes. Individualized care and clinical judgment are necessary in the management of the overweight or obese woman who is gaining (or wishes to gain) less weight than recommended but has an appropriately growing fetus.

The amount of weight gained during pregnancy can affect the immediate and future health of a woman and her infant. The population demographics of women who become pregnant have changed dramatically over the past decade; more women are overweight or obese at conception. Evidence supports associations between excessive gestational weight gain and increased birth weight and postpartum weight retention but also between inadequate weight gain and decreased birth weight (1). Gestational weight gain recommendations aim to optimize outcomes for the woman and the infant. In 2009, the Institute of Medicine (IOM) published revised gesta-

tional weight gain guidelines that are based on prepregnancy body mass index (BMI) ranges for underweight, normal weight, overweight, and obese women recommended by the World Health Organization and are independent of age, parity, smoking history, race, and ethnic background (Table 1) (2). Other changes include the removal of the previous recommendations for special populations and the addition of weight gain guidelines for women with twin gestations. For twin pregnancy, the IOM recommends a gestational weight gain of 16.8–24.5 kg (37–54 lb) for women of normal weight, 14.1–22.7 kg (31–50 lb) for overweight women, and 11.3–19.1 kg

Table 1. Institute of Medicine Weight Gain Recommendations for Pregnancy ⇐

| Prepregnancy Weight Category | Body Mass Index* | Recommended Range of Total Weight (lb) | Recommended Rates of Weight Gain† in the Second and Third Trimesters (lb) (Mean Range [lb/wk]) |
|------------------------------|------------------|--|--|
| Underweight | Less than 18.5 | 28–40 | 1 (1–1.3) |
| Normal Weight | 18.5–24.9 | 25–35 | 1 (0.8–1) |
| Overweight | 25–29.9 | 15–25 | 0.6 (0.5–0.7) |
| Obese (includes all classes) | 30 and greater | 11–20 | 0.5 (0.4–0.6) |

*Body mass index is calculated as weight in kilograms divided by height in meters squared or as weight in pounds multiplied by 703 divided by height in inches.

†Calculations assume a 1.1–4.4 lb weight gain in the first trimester.

Modified from Institute of Medicine (US). Weight gain during pregnancy: reexamining the guidelines. Washington, DC: National Academies Press; 2009. ©2009 National Academy of Sciences.