

THINKING ABOUT THE NEXT BABY?



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Holding your new baby in your arms, it may be impossible to imagine that you will ever have the energy to go through it all again! But sooner or later, you may decide that you want another child.

If you had a low birth weight baby, a baby with a disability or special needs, a miscarriage or a stillbirth, you may be particularly anxious to do everything you can to create the best possible circumstances for your next pregnancy. This chapter explains how you and your partner can prepare for your next pregnancy.

Finding it hard to get pregnant?

It can take several months or more to get pregnant, even if it happened really quickly the first time.



Chapter 1 (page 14) explains when is the best time of the month to have sex if you want to get pregnant. If you are still not pregnant after a few months, talk to your doctor or family planning clinic.

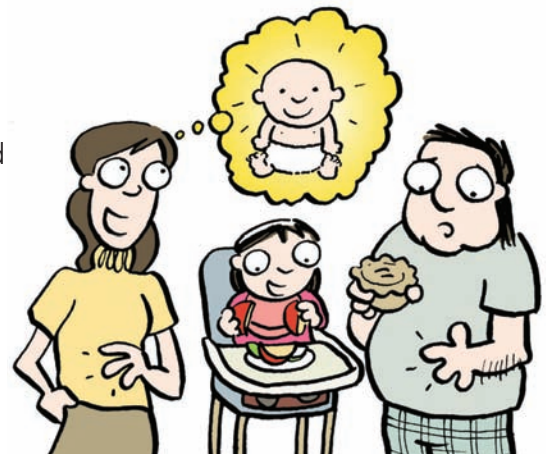
IT TAKES TWO

You will increase your chances of getting pregnant if you are in good health – and that applies to men too. A bad diet, smoking, drinking and unhealthy working conditions can affect the quality of sperm and stop you getting pregnant. You should both try to make your lifestyle as healthy as possible before you try to conceive.

Chapter 3 has advice about diet, smoking, alcohol and exercise, which can help you to conceive.

FOLIC ACID

Women should take 400 micrograms of folic acid from the time you start trying to conceive right up until you are 12 weeks pregnant. You can get these tablets from a supermarket or pharmacist. Eat foods that contain this important vitamin as well.



These include green, leafy vegetables, and breakfast cereals and breads with added folic acid.

You will need a bigger dose of folic acid if:

- you already have a baby with spina bifida
- you have coeliac disease
- you have diabetes
- you take anti-epileptic medicines.

Ask your GP for advice as well.

THINGS TO CONSIDER

Rubella (German measles)

Rubella in early pregnancy can damage your developing baby. If you were not immune during your last pregnancy, you should have been offered a measles, mumps and rubella (MMR) immunisation immediately after your baby was born. Before trying for another baby, it is important to check that you are immune by having a blood test. The blood test will measure if you have enough protection (antibodies) against rubella. Women with low or uncertain levels of antibodies can be immunised again.

Your weight

Maintaining a healthy weight can improve your chances of getting pregnant. You may have put on weight during your last pregnancy and want to go back to your normal size. This is particularly important if you weigh more than 100kg. The best way to lose weight is by following a balanced low-fat diet and doing exercise. It might help to join a slimming class with a friend or your partner to encourage and support you. Speak to your doctor if you need help or advice.



Medicines and drugs

Some medicines can harm a baby in pregnancy but others are safe.

If either you or your partner has a long-term illness or disability and has to take long-term medication, talk to your doctor about any possible effects on fertility or pregnancy.

Check with your doctor, midwife or pharmacist before you take any over the counter drugs.

Illegal drugs will affect your ability to conceive and can damage your baby's health. See page 181 for contact details for Narcotics Anonymous or talk to the National Drugs Helpline (FRANK) on 0800 77 66 00.

Diabetes and epilepsy

If you have diabetes or epilepsy, talk to your doctor before you try to get pregnant.

Postnatal depression and puerperal psychosis

If you have previously experienced postnatal depression or puerperal psychosis, talk to your doctor before you try to get pregnant.

Sexually transmitted infections (STIs)

STIs can affect your health and your ability to conceive. If there is any chance that either of you has an STI, it's important to get it diagnosed and treated before you get pregnant. STIs, including HIV, hepatitis B and hepatitis C, can be passed on through sex with an infected person, especially if you don't use a condom. Some STIs can be transmitted during sex without penetration. HIV, hepatitis B and hepatitis C can also be passed on by sharing equipment for injecting drugs.

If you are HIV positive, you can pass the virus on to your baby during pregnancy, at birth or when breastfeeding (see box on page 47).

WORK-RELATED RISKS

Your employer is required to take into account any work-related risks to new and expectant mothers.

Once you have told your employer that you are pregnant, they should make sure that your job does not pose a risk to you or your baby. Some risks can be avoided, for example by changing your working conditions or hours of work. If a risk cannot be avoided, your employer should offer you suitable alternative work with similar terms and conditions to your present job. If this is not possible, you should be suspended on full pay. This means that you will be given paid leave for as long as necessary. If you want advice on these issues, speak to Citizens Advice or your union if you have one.

Vaginal birth after a caesarean section

Most women who have had a caesarean section can have a vaginal delivery for their next baby. This depends on why you had a caesarean section the first time. Women thought to have a small pelvis, for example, may be advised to have a 'planned' (elective) caesarean section next time. Your GP, or midwife, will be able to advise you. Most women who are advised to try for a vaginal delivery in subsequent pregnancies do have normal deliveries.

