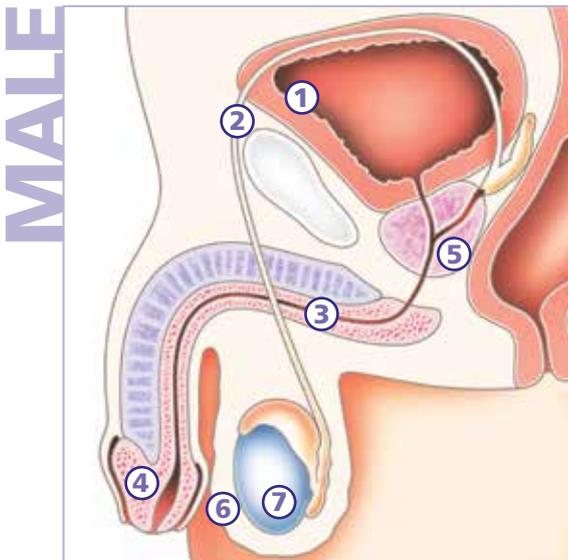


BECOMING PREGNANT



Male sex organs	10	Boy or girl?	13
Female sex organs	11	The best time to get pregnant	14
The female monthly cycle	12	Twins, triplets or more	14
Conception	12	The signs of pregnancy	15
Hormones	13	Pregnancy tests	15

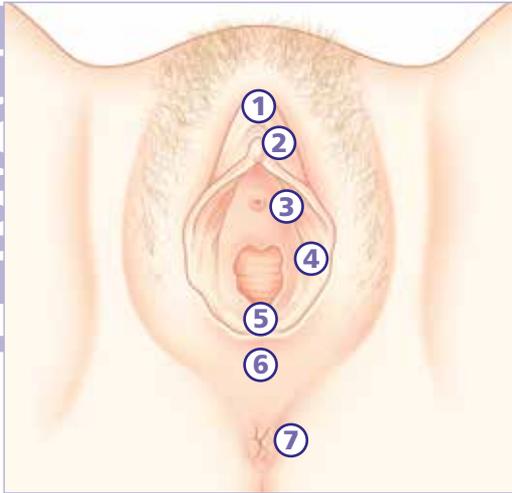
This chapter describes the physical process of getting pregnant and includes information about the male and female sex organs, the female monthly cycle and when you are most likely to conceive. It also explains what you should do when you find out you are pregnant and how you might feel when you first conceive.



MALE SEX ORGANS

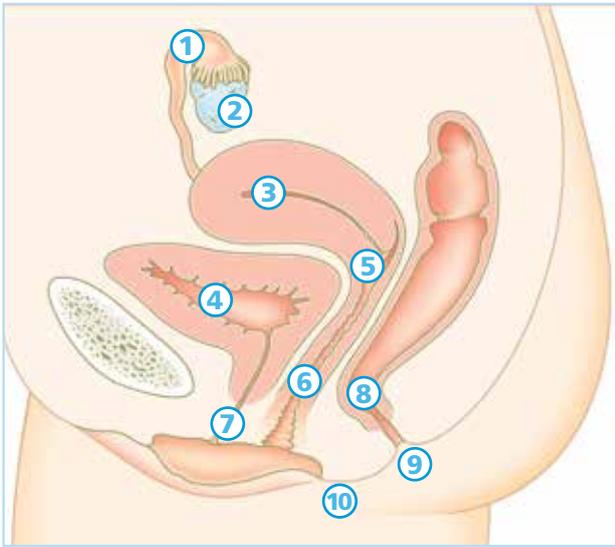
- 1 Bladder**
- 2 Vas deferens** The two tubes called the vas deferens carry sperm from the testes (testicles), where sperm are made, to the prostate and other glands. These glands add secretions that are ejaculated along with the sperm.
- 3 Urethra** The urethra is a tube running down the length of the penis from the bladder, through the prostate gland, to an opening at the tip of the penis. Sperm travel down the urethra to be ejaculated.
- 4 Penis** The penis is made of erectile tissue, which acts like a sponge. When it becomes filled with blood, the penis becomes hard and erect.
- 5 Prostate gland** This is a gland at the base of the penis.
- 6 Scrotum** The testes are contained in a bag of skin called the scrotum, which hangs outside the body. The scrotum helps to keep the testes at a constant temperature, just below body temperature. This is necessary for sperm to be produced. When it is warm, the scrotum hangs down away from the body to keep the testes cool. When it is cold, the scrotum draws up closer to the body for warmth.
- 7 Testes** Men have two testes, which are glands where sperm are made and stored.

parts of
the
body

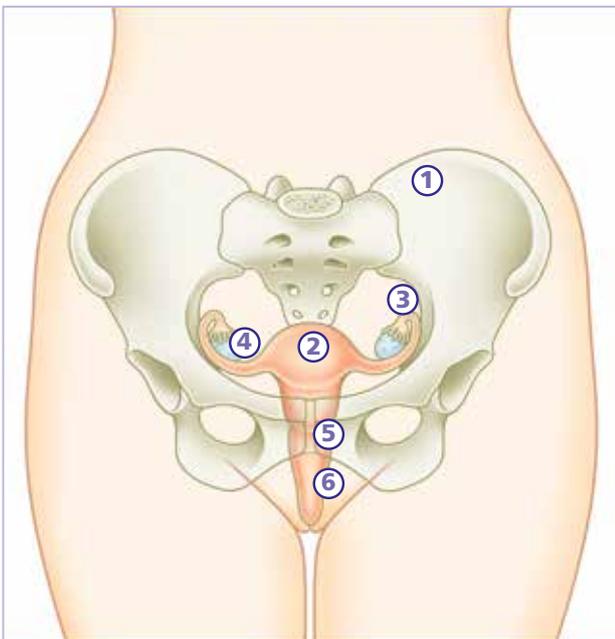


FEMALE SEX ORGANS

- ① Hood of clitoris
- ② Clitoris
- ③ Urethra
- ④ Vulva
- ⑤ Opening of vagina
- ⑥ Perineum
- ⑦ Anus

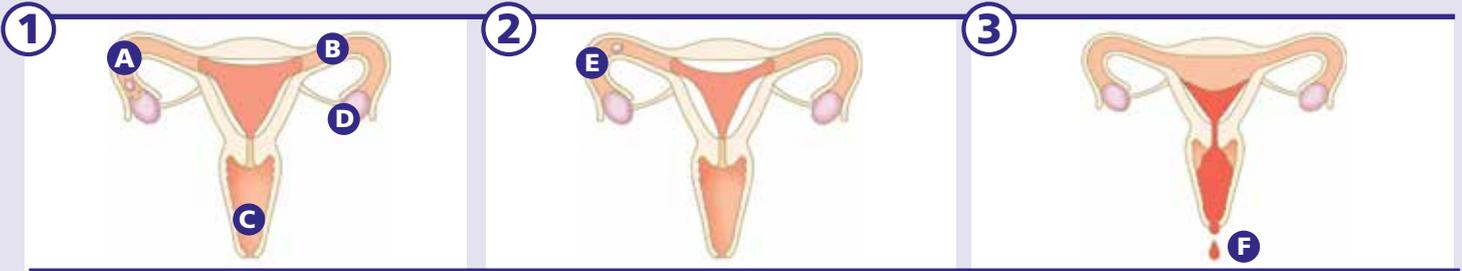


- ① Fallopian tube
- ② Ovary
- ③ Womb or uterus
- ④ Bladder
- ⑤ Cervix
- ⑥ Vagina
- ⑦ Urethra
- ⑧ Rectum
- ⑨ Anus
- ⑩ Perineum



- ① **Pelvis** The pelvis is the bony structure that the baby will pass through when it is born.
- ② **Womb or uterus** The uterus is about the size and shape of a small, upside down pear. It is made of muscle and increases in size as the baby grows.
- ③ **Fallopian tubes** The fallopian tubes lead from the ovaries to the uterus. Eggs are released from the ovaries into the fallopian tubes each month. This is where fertilisation takes place.
- ④ **Ovaries** There are two ovaries, each about the size of a walnut. They produce the eggs or ova.
- ⑤ **Cervix** The cervix is the neck of the uterus. It is normally almost closed, with just a small opening through which blood passes during monthly periods. During labour, the cervix will dilate to let the baby move from the uterus into the vagina.
- ⑥ **Vagina** Most babies are born through the vagina, which is a tube about 8cm (3 inches) long. It leads from the cervix down to the vulva, where it opens between the legs. The vagina is very elastic, so it can easily stretch around a man's penis during sex or around a baby during labour.

The female monthly cycle



- A** Egg being released
- B** Fallopian tube
- C** Vagina
- D** Ovary

Ovulation occurs each month when an egg (ovum) is released from one of the ovaries. Occasionally, more than one egg is released, usually within 24 hours of the first egg. The 'fingers' at the end of the fallopian tubes help to direct the egg down into the tube. At the same time, the lining of the uterus begins to thicken and the mucus in the cervix becomes thinner so that sperm can swim through it more easily.

- E** Egg progressing down the fallopian tube

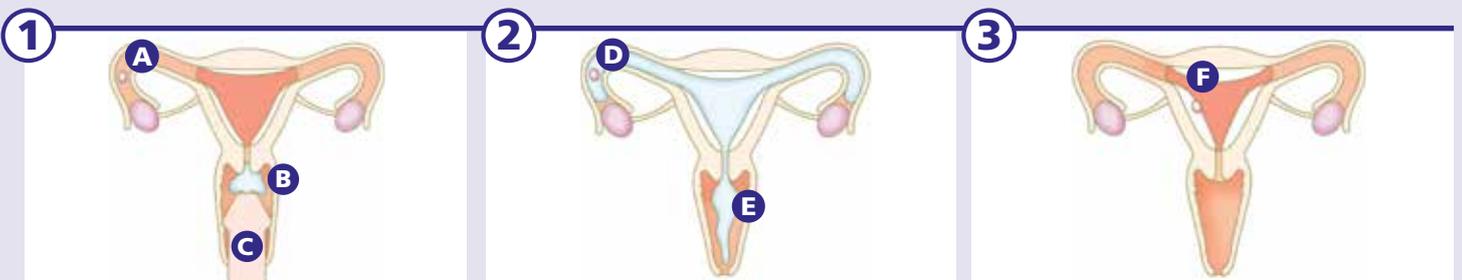
The egg begins to travel down the fallopian tube. If a man and woman have recently had sex, the egg might be fertilised here by the man's sperm. The lining of the uterus is now thick enough for the fertilised egg to be implanted.

- F** Uterus lining being shed

If the egg is not fertilised, it will pass out of the body during the woman's monthly period along with the lining of the uterus, which is also shed. The egg is so small that it cannot be seen.

Conception

Conception is the process that begins with the fertilisation of an egg and ends with the implantation of an egg into a woman's uterus.



- A** Egg
- B** Sperm being ejaculated
- C** Penis

Ovulation

A woman conceives around the time when she is ovulating; that is, when an egg has been released from one of her ovaries into one of her fallopian tubes.

- D** Egg being fertilised
- E** Sperm

Fertilisation

During sex, sperm are ejaculated from a man's penis into a woman's vagina. In one ejaculation there may be more than 300 million sperm. Most of the sperm leak out of the vagina but some begin to swim up through the cervix. When a woman is ovulating, the mucus in the cervix is thinner than usual to let sperm pass through more easily. Sperm swim into the uterus and into the fallopian tubes. Fertilisation takes place if a sperm joins with an egg and fertilises it.

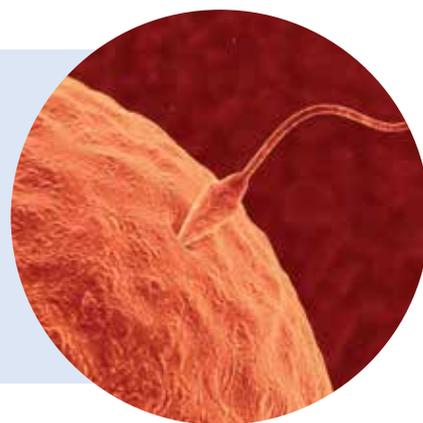
- F** Attached embryo

Implantation

During the week after fertilisation, the fertilised egg (which is now an embryo) moves slowly down the fallopian tube and into the uterus. It is already growing. The embryo attaches itself firmly to the specially thickened uterus lining. This is called implantation. Hormones released by the embryonic tissue prevent the uterus lining from being shed. This is why women miss their periods when they are pregnant.

Sperm is about 1/25th of a millimetre long and has a head, neck and tail. The tail moves from side to side so that the sperm can swim up the vagina into the uterus and fallopian tubes.

One egg or ovum (occasionally two or more) is released from the woman's ovaries every month. It moves down into the fallopian tube where it may be fertilised by a man's sperm.



HORMONES

Both men and women have hormones, which are chemicals that circulate in the bloodstream. They carry messages to different parts of the body and result in certain changes taking place. Female hormones, which include oestrogen and progesterone, control many of the events of a woman's monthly cycle, such as the release of eggs from her ovaries and the thickening of her uterus lining.

During pregnancy, your hormone levels change. As soon as you have conceived, the amount of oestrogen and progesterone in your blood increases. This causes the uterus lining to build up, the blood supply to your uterus and breasts to increase and the muscles of your uterus to relax to make room for the growing baby.



The increase in hormone levels can affect how you feel. You may have mood swings, feel tearful or be easily irritated. For a while you may feel that you cannot control your emotions, but these symptoms should ease after the first three months of your pregnancy.



BOY OR GIRL?

Every normal human cell contains 46 chromosomes, except for male sperm and female eggs. These contain 23 chromosomes each. When a sperm fertilises an egg, the 23 chromosomes from the father pair with the 23 from the mother, making 46 in all.

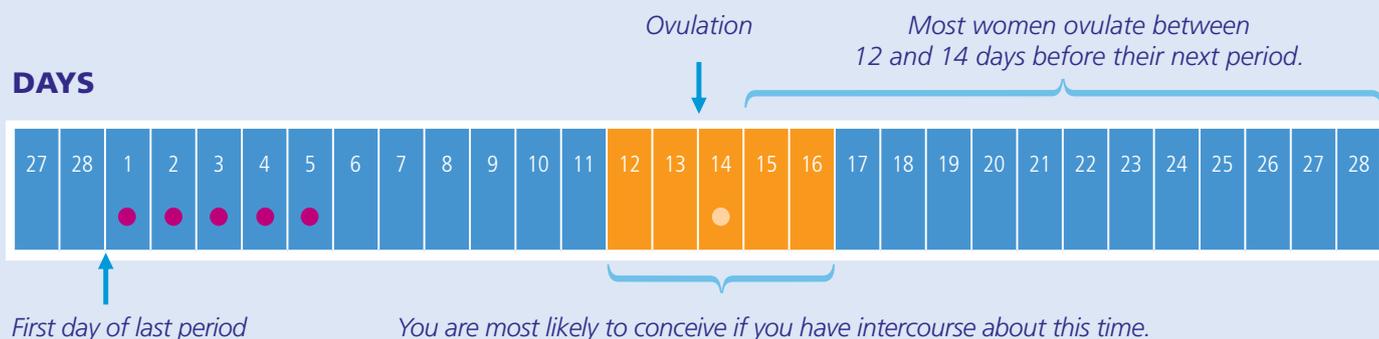
Chromosomes are tiny, thread-like structures which each carry about 2,000 genes. Genes determine a baby's inherited characteristics, such as hair and eye colour, blood group, height and build. A fertilised egg contains one sex chromosome from its mother and one from its father. The sex chromosome from

the mother's egg is always the same and is known as the X chromosome. But the sex chromosome from the father's sperm can be an X or a Y chromosome.

If the egg is fertilised by a sperm containing an X chromosome, the baby will be a girl (XX). If the sperm contains a Y chromosome, the baby will be a boy (XY).



This chart shows a 28-day cycle. Yours may be longer or shorter.



THE BEST TIME TO GET PREGNANT

You are most likely to get pregnant if you have sex within a day or so of ovulation (see chart). This is usually about 14 days after the first day of your last period.

An egg lives for about 12–24 hours after it is released. For you to get pregnant, the egg must be fertilised by a sperm within this time. Sperm can live for up to seven days inside a woman's body. So if you have had sex in the seven days before ovulation, the sperm will have had time to travel up the fallopian tubes to 'wait' for the egg to be released.

TWINS, TRIPLETS OR MORE

Identical twins occur when one fertilised egg splits into two; each baby will have the same genes – and therefore they will be the same sex and look very alike.

Non-identical twins are more common. They are the result of two eggs being fertilised by two sperm at the same time. The babies may be of the same sex or different sexes, and will probably look no more alike than any other brothers and sisters. A third of all twins will be identical and two-thirds non-identical.

Twins happen in about 1 in every 65 pregnancies. A couple is more likely to have twins if there are twins in the woman's family. Triplets occur naturally in 1 in 10,000 pregnancies and quads are even rarer. Nowadays, the use of treatments such as in vitro fertilisation (IVF) has made multiple births more common.

Are you carrying twins?

You might suspect that you are carrying more than one baby if:

- you are very sick in early pregnancy

- you seem bigger than you should be for your 'dates'
- you have had fertility treatment.

It is usually possible to find out through your dating ultrasound scan, which happens between eight and 12 weeks (see page 48).

You may need another scan after this to find out whether the babies share a placenta (are identical) or if they have two separate placentas, in which case they can be either identical or non-identical. It is important to know this because women with babies who share a placenta will need to have more appointments and scans. If this cannot be determined, you should be offered a further scan. A third of identical twins have two separate placentas. This happens when the fertilised egg splits in the first 3–4 days after conception and before it implants in the uterus.



What is different about being pregnant with twins or more?

Multiple pregnancies have a higher risk of complications – particularly premature birth. If your babies share a placenta (identical twins) or if you are having more than two babies, you should be offered your pregnancy care at a special clinic for multiple pregnancies. These clinics are not held in every hospital in Northern Ireland, and you might need to travel to another hospital. Your doctor might also refer you to the Regional Fetal Medicine Service in Belfast if you require more specialised care. If your babies are triplets or if they share a placenta it is recommended that you are scanned every two weeks from 16 weeks onwards, and every four weeks if your babies have separate placentas. You are more likely to have a caesarean section but twins can sometimes be delivered vaginally. Your doctor should discuss this with you. It is possible to breastfeed twins and triplets and there is more information about how you can do this in Chapter 10. Advice on the care you might expect during pregnancy is available from the National Institute for Health and Care Excellence (NICE), www.nice.org.uk/guidance/cg129/informationforpublic

Help and support



You might find it helpful to contact support groups like **Tamba** (Twins and Multiple Births Association) (see page 185) before your babies are born.



THE SIGNS OF PREGNANCY

For women who have a regular monthly cycle, the earliest and most reliable sign of pregnancy is a missed period. Sometimes women who are pregnant have a very light period, losing only a little blood. Other signs of pregnancy are as follows:

- Feeling sick – you may feel sick, or even be sick. This is commonly known as ‘morning sickness’ but it can happen at any time of the day. If you are being sick all the time and cannot keep anything down, contact your GP.
- Changes in your breasts – your breasts may become larger and feel tender, like they might do before your period. They may also tingle. The veins may show up more and the nipples may darken and stand out.
- Needing to pass urine more often – you may find that you have to get up in the night.
- Being constipated.
- An increased vaginal discharge without any soreness or irritation.
- Feeling tired.
- Having a strange taste in your mouth – many women describe it as metallic.
- ‘Going off’ certain things, for example tea, coffee, tobacco smoke or fatty food.

PREGNANCY TESTS

Pregnancy tests can be carried out on a sample of urine from the first day of a missed period, which means that, if you are pregnant, you are about two weeks after conception. Some very sensitive tests can be used even before you miss a period.

You can collect urine at any time of the day. Use a clean, soap-free, well-rinsed container to collect it.

Many pharmacists and most pregnancy advisory services also offer tests, usually for a small fee. You can buy do-it-yourself pregnancy testing kits from pharmacists. They can give you a quick result and you can do the test in private. There are a range of tests that are available. How they work varies, so check the instructions.

Results of the test

A positive test result is almost certainly correct. A negative result is less reliable. If you still think you are pregnant, wait a week and try again or go and see a midwife or GP.



See your midwife or doctor as soon as possible if you are currently being treated for a long-term disease such as hypertension or epilepsy, or you have serious mental health problems. Women with diabetes should contact the hospital as soon as possible, that is the next working day.