

NGĀ KAI TOTIKA MĀ TE WAHINE HAPŪ

Eating for Healthy Pregnant Women



Eating well and doing moderate physical activity during pregnancy are important for you and your baby. Nutritional needs are higher when you are pregnant and meeting these needs helps protect the long-term health of both you and your baby.

Seek antenatal (prebirth) care as soon as you think you are pregnant.

Some pregnant women may need special advice from a dietitian about eating. This includes women who:

- are 18 years old or younger
- have a medical condition affecting their eating, such as diabetes
- are having more than one baby (eg, twins or triplets)
- eat very little or have a history of eating problems
- are vegetarian or vegan.

If you think you should see a dietitian, ask your Lead Maternity Carer (LMC, eg, your midwife, doctor or obstetrician) to arrange this for you.



Food for a Healthy Mother and Baby

Eat a variety of healthy foods every day from each of the four main food groups below:

1. vegetables and fruit
 2. breads and cereals (wholegrain is best)
 3. milk and milk products (reduced- or low-fat milk is best)
 4. lean meat, chicken, seafood, eggs, legumes, nuts and seeds.
- Limit your intake of fatty (especially saturated fat), salty and sugary foods and drinks by:
 - preparing foods with little added fat, salt and sugar
 - when shopping, reading labels and looking for foods that are lower in fats (especially saturated fat), salt and sugar. New Zealand women get most of their saturated fats from butter, milk, baked products, cheese, hot chips and meat.
 - If using salt, choose iodised salt.
 - Take care when buying, preparing, cooking and storing food so that the food is as safe as possible to eat. Follow the food safety guidelines in the section Food Safety in Pregnancy on page 11.
 - Drink plenty of fluids each day, especially water and reduced- or low-fat milk.
 - It is best not to drink alcohol during pregnancy.
 - Keep a healthy weight by eating well and being physically active each day (unless advised not to be physically active).

Traditional Māori and Pacific foods can be healthy choices.



Eat a Variety of Foods

You need a variety of healthy foods from the four food groups every day to provide for your growing baby as well as to maintain your own health.

1. Vegetables and Fruit

Vegetables and fruit provide carbohydrates (sugar and starch), fibre, vitamins and minerals and are low in fat.

- Eat plenty of vegetables and fruit.
- Enjoy fresh, well-washed vegetables and fruit or frozen or canned varieties. Steaming or microwaving vegetables is best. Go easy on butter or margarine.
- Include vegetables and fruit of a variety of colours.
- Limit juice and dried fruit intake because these foods have a high sugar content.

*Eat **at least six** servings per day of vegetables and fruit – **at least four** servings of vegetables and **two** servings of fruit. Only **one** serving of juice or **one** serving of dried fruit counts towards your total number of servings for the day.*



Serving size examples

Vegetables

- 1 medium piece of potato, kūmara, pumpkin, carrot, taro, kamokamo or yam (135 g)
- ½ cup cooked vegetables, eg, pūhā, watercress, silverbeet, taro leaves, bok choy, Chinese cabbage, broccoli, cabbage, corn or peas (50–80 g)
- ½ cup salad or bean sprouts (60 g)
- 1 tomato (80 g)

Fruit

- 1 apple, pear, banana or orange (130 g)
- 2 small apricots or plums (100 g)
- ½ cup fresh fruit pieces, eg, pineapple or mango (120 g)
- ½ cup stewed fruit (135 g)
- 1 cup fruit juice (250 g)
- 25 g dried fruit, eg, 2 tablespoons of raisins or 3 dates

2. Breads and Cereals

These provide carbohydrates (sugar and starch), fibre, and nutrients such as B vitamins and minerals.

- Eat plenty of breads and cereals, including rice, pasta, breakfast cereals and other grain products.
- Choose wholegrain varieties because they provide extra nutrients and fibre. They also help prevent constipation.

Choose **at least six** servings of breads and cereals each day.

Serving size examples

- 1 roll (50 g)
- 1 muffin (80 g)
- 1 medium slice rēwena bread (30 g)
- 1 medium slice bread (26 g)
- 1 cup cornflakes (30 g)
- ½ cup muesli (55 g)
- ½ cup cooked cereal, eg, porridge (130 g)
- 1 cup cooked pasta (150 g)
- 1 cup cooked rice (150 g)
- 1 cup cassava, sago or tapioca (150 g)
- 2 plain sweet biscuits (14 g)



3. Milk and Milk Products

Pregnant women need milk and milk products as sources of protein, vitamins and minerals, especially calcium and iodine.

- Choose reduced- or low-fat milk, yoghurt and cheese.
- Milk and milk products provide New Zealanders with most of their calcium. If you do not eat these foods or eat very little of them, ask your LMC about other calcium sources.
- Calcium is also found in such foods as wholegrain bread, broccoli, canned salmon, sardines, spinach, baked beans and tofu, but in lower amounts.
- If you are drinking soy milk, choose one that is calcium-fortified (check the label).
- If you follow a vegan diet, you will need to check that your soy milk has vitamin B12 added as well.

Have **at least three** servings each day of milk or milk products, preferably reduced- or low-fat products.

Serving size examples

- 1 large glass milk (250 ml)
- 1 pottle yoghurt (150 g)
- 2 slices cheese (40 g)
- 1 large glass calcium-fortified soy milk (250 ml)



4. Lean Meats, Chicken, Seafood, Eggs, Cooked Dried Beans, Peas and Lentils, Nuts and Seeds

These foods give you protein, iron, zinc and other nutrients.

- Your body needs more iron and zinc during pregnancy.
- Iron is important for healthy blood and for the development of the baby. Iron deficiency can occur during pregnancy. It is important that pregnant women have a good iron intake to help prevent iron deficiency.
- Iron in lean meats, chicken and seafood is well absorbed by the body. Eggs, cooked dried beans, peas and lentils, nuts and seeds also contain iron, but the iron is not as easily absorbed.
- Include foods rich in vitamin C with your meals to help absorb iron. Fresh vegetables and fruit, especially cooked taro leaves, broccoli, tomatoes, oranges, kiwifruit, mangoes and pineapple, are rich sources of vitamin C. This is especially important for vegetarian and vegan women, who may find it hard to get enough iron.
- Liver is a good source of iron, but eat no more than a small piece (100 g) once a week.
- Make sure that vegetables, fruit, meat, chicken and seafood are fresh and that cooked food is cooked well, served hot and eaten immediately after cooking (see the Food Safety in Pregnancy section, page 11).
- Seafood and eggs are also useful sources of iodine (see the Iodine section on page 17).
- Fish is an important source of long-chain polyunsaturated fatty acids, so its intake is recommended.
 - Some fish have higher levels of mercury, and high intakes of mercury are unsafe for your baby. However, there is little concern with canned tuna (check that it is skipjack or albacore tuna), canned salmon, canned mackerel or sardines, farmed salmon, tarakihi, blue cod, hoki, john dory, monkfish, warehou, whitebait and flat fish like flounder.
 - Some longer-lived and larger fish can contain more mercury so consumption of these should be limited to three servings (150 g per serving) per week. For example, uncanned wild-caught (not farmed) salmon, uncanned albacore tuna or mackerel, as well as kahawai, red cod, orange roughy and ling.
 - A small number of fish, for example, school shark, southern bluefin tuna, marlin and trout from geothermal regions and Lake Rotomahana, should only be eaten once a fortnight or not at all if consuming other types of fish or seafood.



- Eating Bluff oysters and queen scallops needs to be limited because of their high cadmium concentrations.
- Mercury levels in fish are actively monitored by the New Zealand Food Safety Authority (NZFSA). Over time the recommendations regarding mercury may change because of new findings related to this ongoing monitoring. For the most up-to-date information check the NZFSA website at www.nzfsa.govt.nz. Alternatively contact NZFSA on freephone 0800 693 721 or your doctor or nurse for more information.

Choose **at least two** servings from this group each day.

Serving size examples

- 2 slices cooked meat (approx 100 g), eg, beef, pork or lamb
- ¾ cup mince or casserole (195 g)
- 1 medium steak (120 g)
- 2 drumsticks or 1 chicken leg (110 g)
- 1 medium piece of cooked fish* (100 g), eg, warehou or eel
- small can of canned fish, eg, skipjack or albacore tuna, sardines, salmon or mackerel (90 g)
- 1 medium, freshly cooked pāua (120 g)
- 8 medium, freshly cooked mussels (80 g)
- 1 egg (50 g)
- ¾ cup canned or cooked dried beans, eg, bean salad or lentil dish (135 g)
- ½ cup nuts or seeds
- ¾ cup tofu

* See mercury and fish section on page 7.

Drink Plenty of Fluids Every Day

Use your thirst as a guide. Aim for nine cups of fluid each day.

Extra fluid may be needed during hot weather, after activity or if you are vomiting or constipated.

Water or reduced- or low-fat milk are the best choices.

Limit drinks containing caffeine, such as coffee, tea and cola drinks. Have no more than six cups of tea or



instant coffee (or three 'single' espresso-type coffees or one 'double' espresso-type coffee) each day.

Be cautious about drinking herbal teas. Discuss this with your LMC.

Tea should not be drunk with meals. The tannins in tea mean you will not absorb the iron in the meal as well as you could.

Limit soft drinks, flavoured waters, fruit drinks, cordials and diet drinks as these are low in nutrients and may be high in sugar. Energy drinks or 'smart' drinks are not recommended as they may contain high levels of caffeine and other ingredients not recommended for pregnant women.


Choose and Prepare Foods Low in Fat, Salt and Sugar

The best way to meet your extra needs is to choose foods from the four food groups. These are good sources of fibre, vitamins and minerals.

When shopping, read labels and look for foods that are lower in fat (especially in saturated fat), salt and sugar. If using salt, choose iodised salt.

Cut down on your intake of fat (especially saturated fat), salt and sugar by:

- choosing polyunsaturated or monounsaturated margarine (fortified with vitamin D) rather than butter or dripping, and spreading margarine thinly
- choosing foods rich in polyunsaturated fat and omega-3, including green leafy vegetables, nuts and seeds, oily fish (canned tuna, sardines, salmon or mackerel; warehou, eel), and oils (soybean, canola, flaxseed and walnut oils)
- choosing lean meats – trim off the fat, skim fat off stews, remove skin from chicken after cooking, skim fat off the top of boil-ups and eat more grilled, boiled or steamed fish
- reducing intake of sausages or processed meats, which can be high in fat – if eating these foods, grill rather than fry them and always heat until piping hot then serve them hot to reduce the risk of illness such as listeria (see the Food Safety in Pregnancy section on page 11)
- as often as possible when cooking, choosing to grill, steam, microwave, boil or bake foods without adding fat

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- eating meals without adding extra salt
 - choosing foods with no added sugar.

Many fast foods, takeaways and processed snacks are high in fat, salt and/or sugar. These include such foods as fish and chips, fried chicken, hamburgers, pies, chocolate bars, muesli bars, chippies, lollies, fruit leathers, cordials and soft/fizzy drinks. Limit intake of these foods and drinks. Only consider eating foods such as fried chicken, hamburgers and pies if they have just been made, are well cooked and are served piping hot (see the Food Safety in Pregnancy section, page 11).

Eat and Keep Active for a Steady Weight Gain

A healthy weight gain during pregnancy is best for you and your baby.

While there is no exact healthy weight gain, thin women may need to gain more weight and overweight women less. Talk to your LMC if you are concerned about your weight gain.

The weight you gain during pregnancy goes to the baby but also results from:

- the growth of the placenta and the uterus
- fluid around the baby
- breasts getting bigger for breastfeeding
- more blood being made
- fat stores, which will be needed as energy for breastfeeding.

In early pregnancy, your energy (kilojoule or calorie) needs increase by a small amount. You can expect to eat more food as the pregnancy progresses, but this does not mean you need to 'eat for two'. A good appetite and a steady weight gain – especially after the first three months – will usually mean you are eating enough.

Dieting during pregnancy is not recommended as it may result in a smaller and less healthy baby, and it could also affect your health.

Keeping active is important

Being physically active each day can help you avoid putting on excess weight, strengthen your heart and lungs and give you the extra energy and strength needed for the birth. Unless your LMC advises otherwise, aim for at least 30 minutes of moderate physical activity on most, if not all, days of the week.

Choose activities you enjoy that match your level of fitness. Suitable activities include brisk walking, swimming, aqua-jogging or any activity that is comfortable for you and leaves you with enough breath to hold a conversation.

Wear suitable clothes when being physically active, for example, a good support bra, loose clothing and supportive footwear.

Take breaks for a drink, food or a rest if you need to.

Contact sports and vigorous physical activity is not recommended. Avoid physical activity in extremely hot weather.

Don't start a new sport during pregnancy.

You may need more rest. Listen to your body. If you are tired, rest.

Food Safety in Pregnancy

In pregnancy, your immunity is lower so you and your unborn baby are more susceptible than usual to the kinds of food-borne illnesses that affect everyone. Bacteria like listeria, salmonella and campylobacter and pathogens like toxoplasma can cause food-borne illness. In pregnant women this can cause infection in you and your baby and miscarriage and stillbirth in extreme cases. Following some simple food safety steps, including avoiding some foods when you are pregnant, can prevent most food-borne illness and keep you both healthy. To keep food safe, all foods should be safely handled, stored and protected from cross-contamination. For example the bacteria transfer from raw chicken to cooked chicken if using the same chopping board for both.

You can keep food safe by:

- keeping cooked foods and ready-to-eat foods separate from raw and unprocessed foods so there is no cross-contamination
- washing your hands, utensils and chopping boards before preparing a different food, to avoid cross-contamination
- cooking food thoroughly, especially meat, which should be cooked till the juices run clear
- eating freshly cooked food as soon as possible after cooking
- eating canned food immediately after opening the can
- using cooked, prepared and canned food that has been stored in the fridge **within two days**
- reheating cooked food thoroughly so that it is piping hot, that is, above 70°C (Take special care to heat food thoroughly and evenly when using a microwave oven by stirring frequently.) Do not reheat food more than once
- washing and drying whole raw fruit and vegetables thoroughly
- ensuring that food is eaten before the use-by date
- cleaning the fridge regularly and checking that the temperature is between 2–4°C

- avoiding prepared ready-to-eat foods such as those bought from a supermarket deli or restaurant buffet unless they are heated until piping hot
- not eating prepared ready-to-eat foods such as shop-bought sandwiches where you can't be certain of product age, storage conditions or staff food handling.

There are a number of foods which are considered high risk with regards to listeria and other bacterial contamination.

During pregnancy do not eat any of the following foods:

- processed meats* such as pâté, salami, ham and luncheon
- cold pre-cooked meat* including chicken, corned beef and smoked chicken
- raw (unpasteurised) milk and raw milk products
- soft pasteurised cheese* (eg, brie, camembert, feta, blue, mozzarella and ricotta)
- prepared salads including rice or pasta salad, coleslaw, roasted vegetable and green salads
- hummus and other dips containing tahini
- raw, smoked*, or pre-cooked fish* or seafood* including sushi, smoked salmon, marinated mussels or oysters
- foods containing raw egg such as smoothies, mayonnaise or desserts like mousse
- soft serve ice cream
- ice cream from containers holding more than a single serve
- cream or custard especially in pre-made cakes or pastries (unless newly opened or home-made and fresh).

* Note that the foods on this list are safe to eat if heated thoroughly to piping hot, that is, above 70°C.

For more information and the most up-to-date list of high-risk foods to avoid consult New Zealand Food Safety Authority's (NZFSA) resource *Food Safety in Pregnancy*.

This can be viewed at www.nzfsa.govt.nz Alternatively contact NZFSA on freephone 0800 693 721 or your doctor, nurse or midwife for more information.

Snack Ideas

- **Sandwiches** – different fillings such as banana, yeast extract spread, cheese, baked beans, jam or peanut butter. Try a variety of bases, for example, wholegrain bread rolls, rēwena bread, crackers, rice cakes, crumpets, pita bread, muffins and baked bread fingers.
- **Vegetable sticks** – keep these in the fridge. Serve with plain unsweetened yoghurt or peanut butter.
- **Fruit** – try fresh, canned (unsweetened), frozen or dried, served whole, cut up with yoghurt or in an egg-free smoothie.

- **Cereals** – choose cereals low in fat and sugar, for example, porridge, untoasted muesli, corn flakes, bran flakes and wheat biscuits.
- **Popcorn** – pop using a little oil or margarine or use a microwave. Go easy on the salt.
- **Reduced- or low-fat milk products** – try yoghurt, cubes of cheese, reduced- or low-fat milk and milk puddings, for example, creamed rice.

Lunch Ideas

Base your lunch on breads or cereals:

- wholegrain bread/toast/roll
- wholegrain toasted sandwich
- pita, focaccia or Turkish bread
- pizza base
- rice or pasta
- rēwena bread
- crackers
- panini
- crumpets, muffins or fruit bread

... or try a microwaved baked potato.

Add a filling, topping or spread:

- canned baked beans, corn or spaghetti
- hard cheese
- yeast extract spread, jam, honey or peanut butter
- hard-boiled egg
- banana
- canned fish, such as tuna, sardines, salmon or mackerel (freshly opened)

... or try a pre-prepared frozen meal or pizza served piping hot.

Add an accompaniment:

- soup, either home-made, canned or made from a mix
- yoghurt
- glass of reduced- or low-fat milk
- fresh salad or stir-fried vegetables
- vege sticks (eg, baby carrots or tomato)

... or try an egg-free fruit smoothie.

Finish with fruit:

- fresh
- canned
- frozen
- dried.



Buying Your Lunch

When buying your lunch, choose healthy and safe options, such as:

- hot soup and toast
- hot savoury foods, for example, pizza, baked potatoes, rice and pasta dishes
- well-cooked toasted sandwiches
- a savoury muffin
- yoghurt
- fruit
- egg-free fruit smoothie, freshly made.



Remember ...

... to check the New Zealand Food Safety Authority (NZFSA) resource *Food Safety in Pregnancy* for updated lists of high-risk foods to avoid. These can be viewed on www.healthed.govt.nz or www.nzfsa.govt.nz respectively. Alternatively contact NZFSA on freephone 0800 693 721 or your doctor or nurse for more information.

Eat Well to Cope with Pregnancy Symptoms

Nausea and vomiting are common during early pregnancy, and this is often the first sign of being pregnant. This is referred to as 'morning sickness' but may occur at any time of the day or night, especially when you are tired or hungry.

Eat as well as you can. Your extra nutrition needs are small during early pregnancy so nausea and vomiting rarely cause any nutritional problems. However, if your vomiting is severe and you are unable to keep any food or fluids down, do seek advice from your LMC.

- Eat regularly, choosing smaller meals or snacks.
- Have fewer high-fat and spicy foods.
- Try a carbohydrate snack (such as a slice of dry toast, a cracker or fruit) before getting out of bed in the morning.
- Drink small sips of flat lemonade or ginger ale.
- Try ginger or foods flavoured with ginger.

- Give yourself extra time in the morning. Rushing can make you feel worse.
- Try and rest more.
- If cooking smells make you feel sick, cut down on cooking as much as you can. Have someone else help with cooking.

Indigestion and Heartburn

These are common towards the end of pregnancy.

- Eat regularly, choosing smaller meals or snacks.
- Have fewer high-fat and spicy foods.
- Avoid drinking fluids with meals.
- If a certain food upsets you, leave it for the time being.
- Avoid lying down straight after a meal.
- Going for a walk may help.
- Raise the head of the bed or use extra pillows.
- Check with your LMC before taking antacids.

Alcohol is not recommended

Your baby is sensitive to alcohol. The full effects of alcohol on your baby are unknown.

Alcohol, even in small amounts, will enter the baby's bloodstream, so whatever the mother drinks, the baby is having too. Alcohol could affect the development of your baby, especially of its brain.

Being smokefree is recommended

Smoking reduces the oxygen and food supplies to the baby and can slow down its growth and development.

Avoid smoky environments. Second-hand smoking (inhaling other people's smoke) has the same effect as smoking.

Mothers who smoke generally have more premature births and more underweight babies. A small baby does not mean an easier birth.

If you want to quit smoking, seek advice from your LMC.

Seek advice about taking medication

Use medication only as advised by your LMC, as they know which medications are safe for you and your baby.

Taking any other sort of drugs, for example, illicit drugs or party pills, is not recommended because these can affect the baby's growth and development.

Folic Acid

Folic acid is a vitamin that is needed for the formation of blood cells and new tissue. During pregnancy, your need for folic acid is higher. Lack of folic acid has been linked with neural tube birth defects (NTDs) such as spina bifida. The risk of having a child with these birth defects is low and can be reduced by taking a folic acid tablet.

- **Take a folic acid tablet** (0.8 mg) daily for four weeks (one month) before you might become pregnant through to 12 weeks (three months) after actually becoming pregnant. If you find out you are pregnant and haven't been taking a folic acid tablet, start taking tablets straight away and continue until the 12th week of your pregnancy. This recommended registered tablet can be purchased at pharmacies (or at a lower cost, when prescribed by your doctor or midwife).
- A higher dose folic acid tablet is also available for women with a higher risk of NTD pregnancy. Talk to your doctor or midwife about which folic acid tablet is best for you.
- Choose foods naturally high in folate or fortified with folic acid, such as:
 - well-washed, fresh, raw or lightly cooked vegetables
 - raw fruit, well-washed or peeled (citrus is especially high in folate)
 - bread and cereals, especially wholegrain
 - cooked dried beans and peas
 - yeast extracts
 - freshly cooked liver and kidney (no more than one serving a week)
 - folic acid-fortified breakfast cereals, bread or fruit juice.



Remember: eat **at least six** servings of vegetables and fruit per day, aiming for **10** servings per day.

Supplements

The only supplements recommended for all pregnant women are folic acid-only tablets and iodine-only tablets, which can be purchased from pharmacies at a reduced cost with a prescription from your midwife or doctor.

Choosing a variety of foods from the four food groups will meet your other requirements, and supplements will not be necessary.

Using vitamin and mineral supplements will not give you extra energy.

If you are taking any vitamin, mineral or herbal supplements, always let your LMC know. It is best to only take supplements when recommended by your LMC or a dietitian. Make sure they know you are pregnant.

Iodine and Iodine Deficiency

Iodine is an essential nutrient required in small amounts to support normal growth and development including normal brain development. It is important that unborn babies and infants receive enough iodine. Requirements for iodine increase during pregnancy and breastfeeding. Even with a well balanced diet, it is difficult to get enough iodine from food alone.



Therefore pregnant and breastfeeding women are advised to choose foods that are important sources of iodine and to take a daily iodine-only tablet throughout their pregnancy and breastfeeding.

Important sources of iodine in foods include well cooked seafoods, milk, eggs, some cereals, seameal custard and fortified bread. If salt is used, choose iodised.

- Take one 0.150 milligram (mg)/150 microgram (mcg or µg) iodine-only tablet daily when pregnant and breastfeeding.
- The recommended registered tablet can be purchased at pharmacies (or at a lower cost, when prescribed by your doctor or midwife).

For further information, contact a health professional such as your doctor, midwife, dietitian, nurse or pharmacist.

Supplements containing seaweed, kelp and iodine are not recommended for pregnant women because the iodine content and quality of the supplements is variable.



Vitamin D

Vitamin D is needed for strong bones and joints as well as healthy muscle and nerve activity. While it is found in some foods in the diet, the main source of vitamin D in New Zealand is sunlight. Vitamin D is made in the body through the action of sunlight on the skin. Examples of foods that contain vitamin D are fresh and canned oily fish (tuna, sardines, salmon, herring, mackerel, warehou, eel), eggs and vitamin D-fortified margarine. It is important to balance being in the sun with protecting yourself from potential harm such as skin cancer. Try to spend some time in the sun everyday but never let yourself get sunburnt. During daylight saving months (September to April) avoid being in the sun between 11.00 am and 4.00 pm. If you are in the sun during this time be 'sunsmart'. Wear a sunhat, protective clothing, sunglasses and SPF 30+ sunscreen. Some women are at particular risk of not making enough vitamin D in their skin from the sun. This includes women who:

- have dark skin (their skin takes a longer time to make vitamin D in the sun)
- stay inside most of the time
- keep their skin covered for religious or cultural reasons.

If you are concerned about not getting enough vitamin D, discuss this with a health practitioner, such as your doctor (GP), dietitian, lead maternity carer (LMC) or Well-child nurse.

Cravings and aversions

Most women experience strong likes and dislikes (cravings and aversions) for certain foods at some time during pregnancy. If you eat a variety of foods from the four food groups every day, cravings and aversions are unlikely to affect your pregnancy.

If you are experiencing problems with cravings, (for example, craving for unhealthy foods), having other eating problems or unable to eat a variety of foods, ask your LMC to arrange for you to see a dietitian.

Constipation

Constipation can result from the pressure of the growing baby and from hormonal changes that cause your gut muscles to relax.

Choose wholegrain breads and cereals, and vegetables and fruit (eg, bran muffins, kiwifruit, figs, corn and peas).

Drink plenty of fluids every day.

Go for a daily walk or be physically active in some other way.

Allergy prevention

During pregnancy, it is recommended that you eat well from the variety of foods in the four food groups. Avoiding common food allergens during pregnancy is not recommended.

However, if you do choose to avoid common food allergens during pregnancy or breastfeeding, talk to your doctor or Well Child nurse. They can refer you to a registered dietitian who will make sure that your nutritional needs are being met and help you identify all hidden sources of the food allergen in the diet.

For more information

You are entitled to free care from an LMC during your pregnancy. The booklet ***Your Pregnancy*** (code HE1420) gives you information on choosing an LMC. Once your baby is born, you and your infant are entitled to receive free Well Child care in accordance with the Well Child Tamariki Ora National Programme. This includes advice about and support with your own and your baby's nutrition requirements. This programme is delivered by your LMC from conception until 2–6 weeks after the birth of your baby. From 2–6 weeks onwards, your Well Child provider (Plunket, public health service, Māori or Pacific provider) will provide this care.

Talk to your LMC or Well Child provider about other information you want to know.

Other organisations for information

Healthline 0800 611 116

New Zealand College of Midwives

La Leche League (for breastfeeding support and information)

Maternity Services Consumer Council

NZ Multiple Birth Association, PO Box 1258, Wellington

Parents Centre New Zealand

Dietitian at local public health unit

New Zealand Food Safety Authority (for food safety and label reading advice)

For website information

Ministry of Health www.moh.govt.nz

Health Education resources www.healthed.govt.nz

New Zealand Food Safety Authority www.nzfsa.govt.nz

ISBN 978-0-478-19333-6 (print)
ISBN 978-0-478-19334-3 (online)



[New Zealand Government](http://www.govt.nz)