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Got Baby Fever?

Check out this must-read nutrition + wellness guide to preparing for pregnancy!

You're likely aware that changes to your eating habits are recommended to best support a growing baby, but did you know it's ideal to reflect on these things before you even conceive? Read on to learn more about evidence-based recommendations for nutrition, activity, and mental wellness if you're planning a pregnancy.

Nutrition for you (*before* eating for two)

Establishing healthy, balanced eating habits before pregnancy helps to ensure your body is ready to fuel the amazing process of growing a baby. There's also evidence that your nutrition prior to conception actually influences your baby, too! Eat a variety of foods, don't restrict your intake or certain foods unnecessarily, and practice mindful eating.

Folate The most important nutrient to consider before pregnancy is folate/folic acid. Folate is the general term for all forms of vitamin B9, and folic acid is a synthetic supplemental form found in vitamins and fortified food products. The active form of this essential nutrient is involved in many critical bodily functions, such as the production and maintenance of new cells in the body.



All forms of folate/folic acid significantly reduce risk of spinal cord defects (neural tube defects; NTDs) when consumed in adequate amounts before conception and throughout pregnancy. But more isn't necessarily better - the dose matters, as both too little and too much is not ideal. It's recommended that women who might become pregnant supplement with folic acid, which is best taken with food.

Ideally, begin supplementing at least three months prior to conceiving. Take 400 micrograms (0.4mg) daily if your Body Mass Index is 30kg/m² or less, and your doctor or midwife has indicated you have an otherwise low risk of experiencing a NTD pregnancy. You might consider taking the active form of folate if you have any infertility history, recurrent miscarriage, or a known genetic variant that reduces your body's conversion of folic acid to the active form (two copies of the MTHFR mutation) - see the FAQ Section (page 4) for more details.

Women at moderate risk for a NTD pregnancy are recommended to take 1000 micrograms (1mg) of folic acid daily; a few examples include if you have Crohn's, Colitis, active Celiac Disease, previous gastric bypass surgery, diabetes, or if you take certain prescription medications. It's also found that women with a pre-pregnancy BMI of >30kg/m² benefit from this dose of folate.

The highest recommended dose of 5mg daily is only indicated if you have experienced a previous NTD pregnancy, or if you/your partner has a personal NTD history.

Folic acid supplementation is recommended throughout pregnancy and breastfeeding, so don't ditch your supplement too soon. It can be difficult to consistently meet your requirements through food alone. (According to Health Canada, over 75% of women consume less than the amount required for pregnancy.) It's still safe to consume folate-rich foods on top of your supplement, like leafy greens, citrus fruits, asparagus, broccoli, legumes, and fortified grain products. A multivitamin, prenatal multivitamin, or folic acid on its own are all options; check the label and discuss with your obstetric provider or Maternal Wellness Dietitian if you're uncertain



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how to best meet your requirements. Do not take multiple tablets of multivitamins to meet folate requirements.

Vitamin D The sunshine vitamin is one that most Canadians don't get enough of without supplementation, and some recent research shows that vitamin D insufficiency in a mom-to-be before conception and in early pregnancy may increase baby's future asthma risk. Most multivitamins and prenatal vitamins contain vitamin D, but many health experts agree that a higher dose of 1000-2000IU per day is needed for most Canadians to have optimal vitamin D levels. Low vitamin D in dad-to-be has also been linked to reduced sperm motility and low testosterone, so it's wise for you both to be supplementing in the weeks and months before conceiving (and throughout pregnancy/breastfeeding). Don't take more than 4000IU daily from all supplemental sources without medical supervision.

Plant-based diet? If you follow a vegan, vegetarian, or semi-vegetarian diet, or have history of anemia, ask your physician about getting a blood test to confirm your body's pre-pregnancy iron and vitamin B12 stores are optimal. Most women have these tested at some point in pregnancy as well, since these nutrients will be extra important as your body begins to amp up its red blood cell production to support a growing baby.

Alcohol Evidence shows modest intake of 1-2 standard drinks per occasion doesn't seem to pose a significant risk to baby, but there is no official safe alcohol intake for a mama-to-be since a well-designed scientific study has obvious ethical concerns and because individual women respond differently to the same quantity of alcohol. And since many women don't discover their pregnancy until several weeks in, it's best to err on the side of caution.

It's also not a bad idea for *both* parents-to-be to limit intake of alcoholic beverages if you're trying to get pregnant. A recent study found the number of drinks per occasion regularly taken



by dad in the months before conception increased baby's chances of a smaller head size at birth, but this research has yet to be studied robustly. In my opinion, it reminds us that baby is very likely affected by the health habits of both parents (and/or donors) in the months leading up to conception.

Beware of misinformation Learn from reputable sources about which foods + beverages you should limit or avoid during pregnancy, so when the time comes you're eating safely. Chat with a Registered Dietitian if you've got questions/concerns about your eating habits or nutrition status. I offer personalized pre-conception and fertility nutrition consultations, if you feel a comprehensive look at your personal dietary/lifestyle might be beneficial!

FAQ: Are some vitamins/supplements better than others?

The regulations for supplements sold in Canada are not as rigorous as those for prescription medications, but the rules that do exist are certainly better than none. Check the packaging to be sure the product you choose has a Natural Health Product number (NHP). Generic brands can be a cost effective option. Supplements derived from natural sources aren't necessary, but if you choose one be sure it contains an NHP number and discuss with a qualified health professional before you start taking it (some natural source supplements also contain herbs that are unsafe for pregnancy). Remember that not all natural ingredients are good, and not all synthetic ones are bad; what's most important is that all ingredients are evaluated for safety. Ask your Doctor, Pharmacist, or Dietitian for more information.

FAQ: I've heard many women can't properly absorb/use folic acid. What's the deal?

Folic acid and folate from supplements/food are not the biologically active forms of this B-vitamin. The body converts these into an active form, L-methylfolate (also called Metafolin or



Quatrefolic). Genetic testing can provide personalized information about your body's ability to convert folic acid and folate into the active L-methylfolate, however it is an expensive test and not covered by health care.

Many women carry a gene that reduces folic acid/folate conversion to its active form in the body, but only women who carry *two* copies of this gene are thought to convert inadequate folate for optimal functioning of the body. There isn't enough evidence yet to say whether women carrying this gene should be supplementing with L-methylfolate instead of folic acid. If you do choose to supplement with L-methylfolate, a daily dose of 400 micrograms (0.4mg) meets recommendations for low-NTD risk women, and minimizes your chances of side effects found at higher doses. If you want to know more, you can always check with your Doctor, Midwife, or Maternal Wellness Dietitian for guidance on appropriateness and dosage before starting on a supplement.

Move yo' body



Prioritizing physical activity before getting pregnant has so many potential benefits for both your physical and mental health. Regular exercise boosts mood and well being, improves sleep quality, gives you physical stamina, and provides a great big long list of other health perks.

Getting into an activity routine before you're pregnant improves the chances that you'll also remain active throughout pregnancy. And unless you experience certain pregnancy complications, activity throughout pregnancy will also help

you increase your energy levels, provides you with better stamina for labour + delivery, and helps in managing stress. Pregnant women who remain active throughout pregnancy also appear to have reduced risk for postpartum depression. If you're not already convinced, there's also evidence to support positive health effects in babies and children born to mothers who were physically active during pregnancy. Find activity you truly enjoy doing, so that movement feels like an indulgent act of self-care instead of a chore!

Mental Wellness



The experience of trying to get pregnant ranges from exciting to depressing, depending on your personal circumstances. For those struggling to conceive, or managing the emotional turmoil in the aftermath of pregnancy loss, connecting with a mental health professional to help you and your partner work through these emotions can be a huge help. The same goes for any other challenging factors surrounding pregnancy.

Don't be afraid to ask your healthcare providers for a referral to a therapist (ask for someone working specifically in reproductive mental health, if possible).

Taking care of your basic needs and finding routine during any stressful time can also help. Eat regularly, cook balanced meals from home whenever possible, establish a consistent sleep routine, stay active, and get outdoors. Let family or friends know if you could use some extra support with any of these important elements of self-care.

