



# Diet and Exercise during Pregnancy

Presentation boards  
for parental counselling

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# Information for users

Women looking to conceive, expectant mothers and their partners have to fight their way through stacks of at times contradictory information about diet and lifestyle during pregnancy. Sensitive, competent and practical counselling is called for – not least because the lifestyles of expectant mothers can favourably influence the health of their children later on in life. For this reason, the network 'Healthy Start – Young Family Network' has compiled this presentation folder to help experts in their work.

**The topic:** This presentation concentrates on the lifestyle of expectant mothers during pregnancy. By eating a balanced diet and exercising regularly, expectant parents can contribute to the birth and growth of a healthy child. Other issues touched on here include supplements, food poisoning and certain risks during pregnancy.

**The basis:** The standardised recommendations for action (→ see III) issued in consensus by the national network 'Healthy Start – Young Family Network' form the basis of these presentation boards. All the relevant specialist societies, institutions and associations support these recommendations.

## The colour coding system used in these presentations.

### Pink – Exercise and weight

Women should engage in daily activity during pregnancy. There are plenty of opportunities to do so in everyday life, both during leisure time and when playing sports. By doing so, expectant mothers also contribute to a healthy weight development.



### Green – Eating and drinking

Balanced nutrition is particularly important for expectant mothers. But they do not need to follow a certain diet plan. In addition, they should take folic acid and iodine supplements right from the start.



### Pink – What else is important?

Breastfeeding is the best option for the child. During pregnancy, parents should obtain information on breastfeeding to ensure that everything proceeds smoothly later on. The following applies to the topics of alcohol and cigarettes, preventing allergies and gestational diabetes: Expectant parents who are well-informed and act accordingly reduce the risk of complications during pregnancy and childbirth, as well as the risk of the child developing health problems.



**Suitable for:** The presentation boards are suitable for use when counselling small groups, (expectant) parents or individual persons, for instance during individual sessions with midwives, in courses for parents, in pregnancy counselling centres or during regular check-ups at the gynaecologist's. The statements and recommendations contained in the presentation boards apply to healthy, pregnant women.

**Flexible and versatile:** It is not necessary to use all of the presentation boards every time. Which of them, and how many are used, depends entirely on the questions that the expectant parents have and on the available time. For instance, the pink presentation boards on exercise and weight could be discussed as part of the initial check-up. The presentation boards E14 and E18 are more pertinent if parents are looking for clear information on how to structure their meals.

### One side for parents, the other for specialists.

The different sides for the parents and the specialists are arranged in such a way that they both see 'their' side at the same time. This is why the sequence of the presentation boards cannot be changed.

# Important information for mums and babies

It's good  
for us both!

Remain physically active



Eat well



Relax





# Important information for mums and babies

It's good for us both!

- Blood vessels and the umbilical cord connect mother and child during pregnancy.
- Anything that is good for the mother will also promote the growth and healthy development of the child.



## Remaining physically active

- **Benefits for the mother:** She feels well and gains a normal amount of weight. She has a reduced risk of gestational diabetes.
- **Benefits for the mother and child:** The metabolism and circulation are stimulated. The child is well-supplied with oxygen and nutrients via the umbilical cord.



## Eating well

- Starting now, your child eats and drinks the same things as you.
- For the child to develop well, it is important that the mother enjoys a balanced and varied diet!



## Aim of the presentation board

- Expectant parents are aware that the mother's lifestyle is crucial to the growth, development and health of the child.

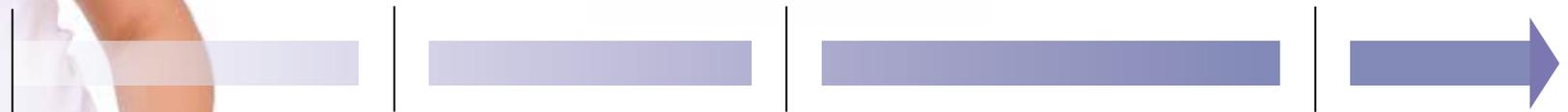


## Relaxing

- Breaks and regular relaxation help expectant mothers to feel emotionally balanced.
- This has a positive impact on the unborn child.

# Think ahead to tomorrow

There are things  
I can do NOW to help  
my child grow up  
healthy.





## Think ahead to tomorrow

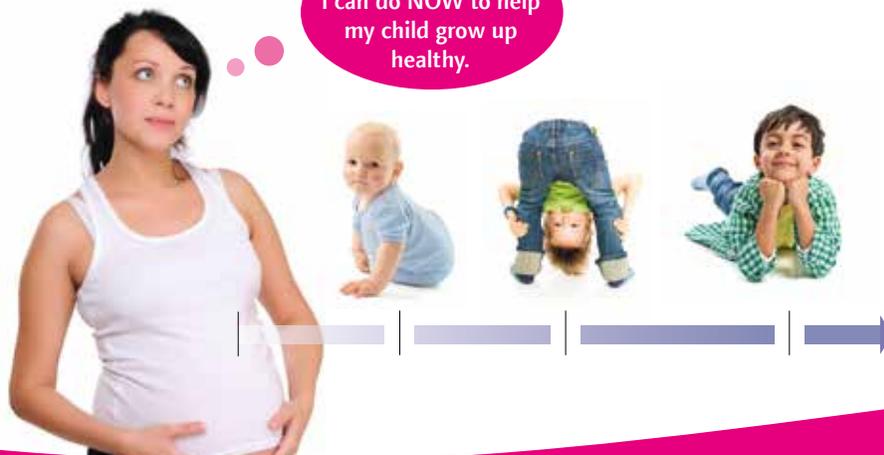
Expectant mothers can **positively influence** their own well-being and the health of their child, even in the future, by choosing a healthy lifestyle before and during pregnancy!

What expectant mothers eat and drink and how they exercise affects the metabolism of their child, and can have a **favourable and lasting impact** on its health even later on in life.

**The illustration shows a positive example of a healthy pregnancy:**

- During pregnancy, the expectant mother **exercises regularly, eats a balanced diet**, and takes time to relax. She has a normal weight at the start of her term.
- This creates an ideal setting to ensure that the child enters the world with a **normal body weight**, and that its weight will remain within a healthy range in future. This can have a positive impact on its metabolism: For instance, the child will possess a good disposition to process sugar, and will not be overly susceptible to storing fat.
- Even as an infant, child and adolescent, its **metabolism will stay healthy**.

There are things I can do NOW to help my child grow up healthy.



### Aim of the presentation board

- Expectant parents are made aware of the fact that the lifestyle of pregnant women will also affect the health of their child later on in life.

**Counselling tip:** Particularly when counselling overweight women who are already pregnant, it is important to draw their attention to the **opportunities** that a healthy lifestyle would present for their child. Expectant mothers should be made aware of the actions they can actively undertake. However, they must not feel put under pressure or develop a sense of guilt.

### Frequently asked questions:

**Is it too late to start paying attention to a healthy lifestyle during the fifth month?**

No, it is never too late! The mother and the child benefit from a balanced and varied diet, regular exercise and periods of rest throughout the entire pregnancy.

**How does an unhealthy lifestyle affect the child?**

An unhealthy lifestyle, e.g. overeating by the mother, can unfavourably 'program' the child's metabolism right from the start. The likelihood that a child is born overweight is higher if the mother does not exercise enough, eats 'for two' and is obese. This means that the child has a heightened risk of becoming obese and developing diabetes mellitus later on in life.

# Exercise pays off

... also for  
childbirth!

The right weight



Happier and more content



Less back pain



Regaining fitness fast





# Exercise pays off

Exercise during pregnancy preserves and/or improves the mother's physical fitness and enhances her sense of well-being. It also helps alleviate typical complaints and complications associated with pregnancy, sometimes even preventing them altogether.



## The right weight

- Active women are less likely to gain excessive weight during pregnancy, as they use up more energy (calories).
- Women who remain active during pregnancy are more likely to return to their former weight after giving birth.



## Happier and more content

- Women who remain active during pregnancy are **usually more balanced** and **emotionally stable**.
- They are less prone to sudden mood swings and depression compared with less active women. Postnatal depression is also less common among young mothers who exercise regularly.



## Less back pain

- The back is asked to carry a particular burden during pregnancy.
- The enlarged womb and the growing child displace the **centre of gravity** and precipitate a different **posture**. Hormones loosen ligaments.
- Targeted exercises help strengthen the **musculature** and foster a stable **posture**. This contributes to preventing back pain and other joint complaints.



## Regaining fitness fast

- Women who remain active during pregnancy are fitter and need less time to get back in shape after giving birth.

... also during childbirth!

- Studies have shown: expectant mothers who remain active frequently cope better with childbirth and require **less pain medication**.
- Here, it is fair to assume that their keener **physical awareness and sense of self-worth** are very important contributing factors.

## Aim of the presentation board

- Expectant parents are familiar with the benefits of physical activity during pregnancy.

## Frequently asked questions:

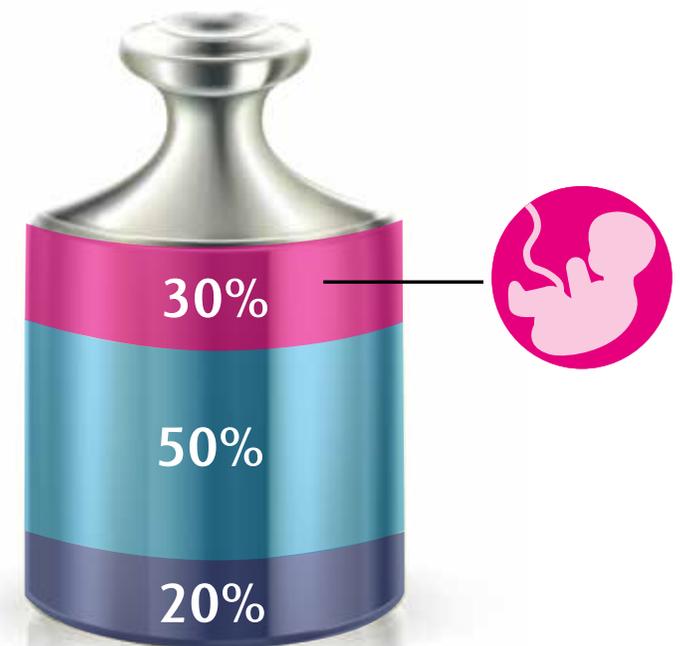
### Is exercise harmful during pregnancy?

No! Studies have shown that a reasonable amount of physical exercise (→ see F6) is good for the mother and the child, and that it is likely to make childbirth easier. Exercise does not pose a risk to a healthy, stable pregnancy. But the gynaecologist or midwife should always be consulted in the event of any uncertainties, complaints or complications!

# Weight: Aim for a normal development



Total weight gain:  
10–16 kg





# Weight: Aim for a normal development

Women differ greatly in terms of how much weight they gain during pregnancy.

**Expectant women in a normal weight range** are likely to put on between **10 and 16 kg**. But weight does not rise significantly until the second trimester.

Total weight gain:  
10–16 kg



## The following factors account for the weight gain

- approx. **30%**: weight of the **unborn child**,
- approx. **50%**: **lymphatic fluid**, increased **blood volume**, **breast tissue** and **fat reserves** (needed for breastfeeding; they are depleted during nursing),
- approx. **20%**: enlarged **womb**, **amniotic fluid** and **placenta** (is expelled during childbirth).

**Counselling tip:** Some expectant mothers find it unpleasant and stressful to be weighed in their doctor's surgery. This is why it is imperative for counselling to be individual and empathetic. Positive statements such as "You are giving your child a good chance to grow up healthy" should be used instead of negative comments such as "That will increase the risk of ...".



## Aims of the presentation board

- Expectant parents know that during pregnancy, each woman will experience an individual weight curve.
- They are familiar with the recommendation of '10 to 16 kg' for expectant mothers with normal weight, and how the weight gain should be distributed.

**Note:** The Body Mass Index (BMI) is a good point of orientation to assess weight before pregnancy:

$$\text{BMI} = \frac{\text{Body weight (kg)}}{\text{Height (m)}^2}$$

WHO*categories	BMI before pregnancy
Underweight	< 18.5
Normal weight	18.5–24.9
Overweight	25–29.9
Obese	≥ 30

\* WHO = World Health Organization

## Frequently asked questions:

### Does the recommendation on weight gain during pregnancy also apply to overweight and underweight women?

Overweight women do not need to gain quite as much weight; underweight women should gain slightly more. Expectant mothers who quickly gain (too much) weight can use a balanced diet and regular physical activity to positively influence their weight development.

# Active in sports and in everyday routines

## Sports



## Leisure



## Everyday life





# Active in sports and in everyday routines

**Every step counts!** The exercise pyramid shown at the front indicates (from bottom to top) how the types of movement, performed with different levels of intensity, should be incorporated into a healthy lifestyle, and where they can take place.



## Everyday activities

- are **activities we perform during 'normal' daily routines**: e.g. in the family, around the house or on the go, without requiring scheduled times or plans, as would be the case for sports.
- can be incorporated into the day at any time and anywhere.
- are usually only **mildly strenuous**.
- form the **base** of the pyramid; they account for the lion's share of movement throughout the day.

**Examples:** taking the dog out for a walk, running errands on foot or by bike, taking the stairs instead of the lift, going out for a walk with colleagues during the lunch break, shopping for a few groceries on foot, light housework or gardening, playing with the children.



## Leisure activities

- are **deliberate, planned physical activities during one's free time**.
- are **moderately strenuous**, and most people will only get **hardly to slightly out of breath** and start sweating.
- account for the **central section** of the pyramid.

**Examples:** bicycle excursions, walks, hikes, dancing, or more laborious gardening.



## Sporting activities

- are **more intense physical activities**, such as club sports or sports played during leisure times.
- cause moderate **sweating and breathlessness**.
- are found at the **tip** of the pyramid.

**Examples:** aqua-fitness/swimming, yoga/pilates, (Nordic) walking, aerobics.



## Aim of the presentation board

- Expectant parents are familiar with the various types of exercise that can be included in daily routines.

**Counselling tip:** Ask open-ended questions to help break the ice, e.g. "Which physical activities are you familiar with in everyday routines, in your free time or in sports? Collect a few examples."

# In moderation, but often!



The  
'Talk Test' is a  
good trick!





## In moderation, but often!

Current recommended activity levels for expectant mothers are: **women should engage in daily activity during pregnancy.** Here, it is important to find the right balance, to do neither too little nor too much strenuous activity.



### In moderation, but often!

- Expectant mothers are advised to include at least **30 minutes** of physical activity over the course of the day, and on as many days as possible during the week.
- Every kind of activity counts – in everyday routines, leisure or in sports – that involves at least ‘a little’ effort.
- Women who so far have tended to be less fleet-footed can start out with activities that involve **low to moderate exertion**, and can then increase their levels from there.
- More nimble women can continue at **moderate intensity**.

The Talk Test is a good trick!

- Each expectant mother will have an individual take on whether an activity/exercise is ‘strenuous’, and ‘how strenuous’ it is. Among other aspects, it depends on their **current stamina**.
- The **‘Talk Test’** is an excellent and simple way of avoiding overexertion: The degree of exertion is appropriate if the expectant mother can conduct a normal conversation during the exercise.
- Anyone who becomes so out of breath that they start gasping and are unable to talk normally, should reduce their speed somewhat.
- Particularly strenuous activities should be avoided entirely.



### Aim of the presentation board

- Expectant-parents are familiar with the benefits of physical activity (duration and intensity) during pregnancy.

**Note:** Moving around outside is an excellent source of vitamin D – which helps build healthy bones!

### Frequently asked questions:

#### Vitamin D supplements?

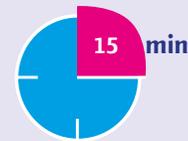
The mother and her child need vitamin D for healthy bones. It is produced above all in the **skin** as a result of **exposure to sunlight (UVB radiation)**. But in our northern hemispheres there is not much sunlight in winter. Expectant mothers who rarely perform physical exercise outside, who largely cover their skin, and women with dark complexions, should take vitamin D supplements following consultation with their physicians.

# An example of an active everyday routine

Cycling to work



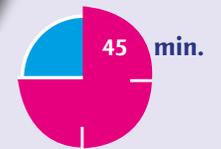
A walk during break time



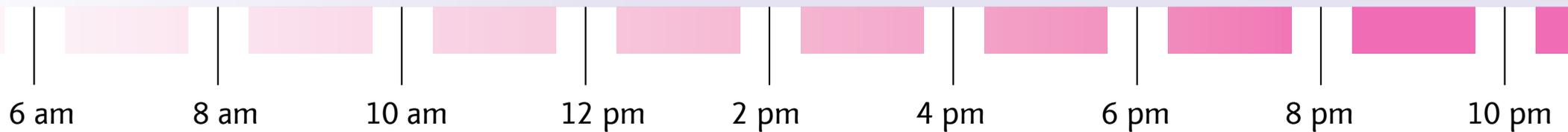
Get off the couch for a yoga course



Every Thursday



90 Min.





# An example of an active everyday routine

The following example shows how easy it is to incorporate small 'portions' of movement in everyday routines – of course with one's partner or friends as well!

## Example for the daily routine of an active expectant mother:



Activities in daily routines and during leisure time, divided into several 15-minute sessions, produce 45 minutes of physical exercise per day.

**Cycling to work** (and back)  
(or get off one stop earlier, perhaps park the car a little further away)

2 x 15 = 30 minutes



**A walk during break time**

+ 15 minutes

---

**45 minutes**



An additional sports course lasting 45 minutes:  
This day will even involve 90 minutes of exercise.

**Get off the couch for a yoga course**

+ 45 minutes

---

**90 minutes**



### Aim of the presentation board

- Expectant parents are familiar with examples of physical activity in everyday routines.

**Counselling tip:** Ask open-ended questions to help break the ice, e.g. "When are you active in everyday routines? How often does it happen? Use a scale from 0 (never) to 10 (very frequently) to describe the frequency. What would need to happen if you wanted to achieve a higher score for X (higher number)?"

### Frequently asked questions:

**How can expectant mothers motivate themselves to be more active?**  
Fixed times and getting together with other people to exercise are great sources of motivation. The partner can also become a source of motivation by joining in the exercise. Do not expect an unreasonably high performance, and be careful to take breaks.

# Which sports are suitable?

Before

Now

Competitive athletes



Regular exercisers



Sporting novices





# Which sports are suitable?

## Before → Now

The **types of sport** and their **intensity** depend on how much exercise the expectant mother took part in before becoming pregnant. The images show a 'before/after' comparison for athletes, people who exercise regularly, and for novices (from top to bottom).



### Competitive athletes

- Active sportswomen with **good stamina** can maintain a **moderate** level of training during pregnancy.
- It is better to steer clear of heavy gym work or competitions.
- The expectant mothers are also advised to give up high-risk sports (such as fencing, boxing) in favour of less dangerous **alternatives**.



### Regular exercisers

- In most cases it is fine to **continue** with regular exercise such as jogging, aerobics or yoga.
- The aim: to stay fit, but not to increase stamina or performance.
- It may be necessary to switch to sports with fewer injury concerns (e.g. swimming or Nordic walking instead of volleyball).



### Sporting novices

- The best way to start is with **simple sequences of movement** like walking, swimming or aerobics (fitness).
- The frequency and duration of exercise are then **slowly increased**.
- A trainer with special qualifications for sports and exercise during pregnancy, or the midwife, can provide advice and support here.



## Aim of the presentation board

- Expectant mothers are familiar with types of sport that are recommendable specifically for their personal situations.

### Additional information:

- Make sure you drink enough liquids: Drink roughly 1 l per hour, preferably water.
- Do not accelerate quickly or come to a sudden stop, do not jump or spin vigorously.
- Avoid exercises lying on your back (especially at the end of the term).

### Frequently asked questions:

#### Which types of sport are suitable for expectant mothers?

Recommended	Conditionally recommended	Not recommended
Easy on the joints, water sports	Avoid high-intensity exercise	Sports involving an elevated risk of injury; avoid high-intensity exercise
(Nordic) walking, strolls, hiking	Tennis	Horse-back riding
Cycling (in the fresh air)	Rowing, sailing	Climbing
Swimming	Inline skating	Downhill skiing
Aqua-fitness, jogging, spinning	Golf	Martial arts
Yoga/Pilates	Track and field Badminton Table tennis	Diving Body-building Marathons, triathlons (competitions)

*(modified recommendations issued by the NRW State Athletic Federation in 2011 and Korsten-Reck et al. 2009)*

# Restoring fitness after childbirth

Uncomplicated births



We started immediately after the birth.

C-section: Wait for 6–8 weeks





# Restoring fitness after childbirth

The new mothers should get back to exercising as soon as possible after giving birth. Initially, they will focus on **postpartum gymnastics** and **training the pelvic floor**.



## Uncomplicated births

- **Puerperal gymnastics** like gentle pelvic floor exercises, but also routine and leisure activities (e.g. strolls), can begin **immediately**.
- **Postpartum gymnastics** to stabilise the pelvic floor can start **after approx. 6 weeks** (the pelvic floor becomes looser, and is placed under immense strain during pregnancy and child birth).
- These exercises help prevent any uterus prolapse or weakness of the bladder (which may not occur until years later).
- The ligaments and tendons are restored to strength after 6 to 8 weeks, and the pelvic floor has recovered completely.
- In the first few months after childbirth: do not lift any heavy loads, and do not engage in any work involving significant physical exertion. Competitive sports are also prohibited.



## C-section Wait for 6–8 weeks

- After a C-section, **wait for around 6 to 8 weeks** before beginning **postpartum gymnastics**, and only afterwards should the mother return to other sporting activities.
- In the first weeks after the procedure: save your strength, and do not lift any heavy loads.



## Aim of the presentation board

- Expectant parents are familiar with the recommendations for physical activity after a pregnancy.

**Counselling tip:** The statutory and some private health insurance providers bear the costs for up to 10 sessions of postpartum gymnastics, provided they are held by qualified midwives or physiotherapists. Postpartum gymnastics must be complete by the end of the ninth month after childbirth.

## Frequently asked questions:

### Playing sports even while breastfeeding?

Yes, you can. The milk does not turn 'sour' when nursing mothers play sports. But the mother will have to drink substantially more (around 1 l of water per hour of sport) to replace the additional fluids lost due to perspiration. This ensures that sufficient milk will be produced. The best way to proceed is to nurse the child immediately before sports to prevent undue tension in the breast and to make sure the child is well-fed while the mother is exercising.

# Eat well, but not for two

I do not need  
additional calories  
until the last few  
months.



or





## Eat well, but not for two

A pregnancy is a good time to reconsider, and possibly change, personal **(eating) habits**. This applies just as much to expectant fathers! It's easier than one would think to maintain a healthy diet, simply by becoming aware of a few facts. There is plenty of room for **enjoyment** in a balanced diet.

Expectant mothers do not need additional calories until the last few months.

- Many women overestimate how many calories they need during pregnancy. They believe that they now have to 'eat for two'.
- In actual fact, expectant mothers only need an additional **200 to 300 kilocalories** (kcal) per day **in the final months**.
- By contrast, the need for **vitamins and minerals** rises right at the start of pregnancy and to a far greater extent than the need for energy.
- Hence, as a rule: Pick foods with **low energy**, but **plenty of vitamins and minerals**. Regularly eat fruit, vegetables, whole grain products, low fat milk (products) and fish.



### These meals each contain around 350 kcal

- 1 slice of whole grain bread (without butter), with a slice of cheese and tomato
- 1 bowl of vegetable soup with noodles
- 1 portion of couscous and vegetable salad



### Aims of the presentation board

- Expectant parents know when to start eating more during a pregnancy.
- They are familiar with examples of portions needed to cover these added requirements.



**Counselling tip:** The **basket of groceries** in the diagram can be used to initiate a conversation: 'Take a look at the grocery basket. Which of the foods that you see there do you enjoy eating? What else do you eat? How much time do you take to eat on an average day? Do you eat regularly at fixed mealtimes, or is it more "on the fly"?'

### Frequently asked questions:

#### Is it necessary to eat differently during pregnancy?

No! Expectant mothers can observe the same recommended dietary patterns as other women who are not pregnant. There are only a few particular pointers that need to be considered during pregnancy, for instance to avoid eating uncooked animal products (see F19). On no account should the women start a special 'diet', for instance to lose weight, to prevent gaining too much weight, or in an attempt to prevent the child developing allergies (see F23).

# A balanced diet based on the traffic light system



© aid infodienst e. V., idea: Sonja Mannhardt



# A balanced diet based on the traffic light system

## The aid dietary pyramid (shown at the front)

- It is a **simple model** that anyone can use to assess and improve their own eating habits.
- It **applies to everyone**: children, adolescents, adults, and even expectant mothers.
- It shows which foods are recommended for daily consumption, and in which quantities.
- It places foods in **8 groups**, arranged on 6 levels. Simple symbols are used to show the individual food groups (from bottom to top):
  - Drinks: A glass of water with a straw
  - Fruit: An apple
  - Vegetables: A carrot
  - Cereal (products) and side dishes: Ears of wheat and potatoes
  - Milk (products): A bottle of milk and cheese
  - Meat, sausage, fish, and eggs: Meat and fish
  - Oils and fats: A bottle of oil and butter
  - Sweets and snacks: A bag of chips and a sweet
- Consists of **22 building blocks**. Each building block stands for one portion. The number shown on the dice indicates the recommended portions (see F13) per day.

The **traffic lights** help assess the selection and the amounts of food.

### Green: plenty

- These foods form the basis of a balanced diet.
- 6 portions of low or zero-calorie fluids (above all water).
- 3 portions of vegetables, 2 portions of fruit.
- 4 portions of cereal products and side dishes (potatoes/rice/pasta).

**Tip:** More on the aid dietary pyramid:  
[www.aid.de/ernaehrung/ernaehrungspyramide.php](http://www.aid.de/ernaehrung/ernaehrungspyramide.php)  
 The aid dietary pyramid as an app: What I eat



## Aim of the presentation board

- Expectant parents are familiar with the aid dietary pyramid, the classification of foods into 8 groups, and the recommended portions.

### Yellow: moderate

- Yellow means in moderation, but often.
- 3 portions of low-fat milk (products).
- 1 portion of meat and sausage products, fish or egg.
- Alternate low-fat and high-fat types of fish.

### Red: sparingly

- Red stands for foods that should be eaten sparingly.
- 2 portions of fat and oil (e.g. butter, margarine or vegetable oil).
- 1 portion of 'extras' like sweets or snacks.  
Sweets are best eaten as a dessert, after a meal.

## Frequently asked questions:

### What do potato chips, packaged muesli and lemonade count as?

They are among the 'extras' (red), because they contain a lot of fat or sugar. Many packaged mueslis (**breakfast cereals**) sold by retail outlets are sweet. You should certainly take a look at the label!

### Do expectant mothers need meat?

Not necessarily. A **vegetarian diet** (with milk, dairy products, and egg) is possible, provided the diet remains balanced in its composition. In this case the 'meat building block' is replaced by egg, whole grain cereal products, legumes, or soy products, for instance a patty made of fried whole grain cereal or lentils. Expectant vegetarians who do not eat fish should take omega-3 fatty acid (docosahexaenoic acid – DHA) supplements.

It is not advisable to maintain a **purely vegetable (vegan) diet** during pregnancy, as it will not provide all nutrients in sufficient quantities.

# Folic acid and iodine supplements, right from the start

Folic acid



During the first 3 months



400 µg

Iodine



Throughout pregnancy



100(-150) µg



# Folic acid and iodine supplements, right from the start

A balanced diet (see F11) will provide the expectant mother with almost all the nutrients that she and her child need. **Folic acid** and **iodine** are the exceptions here. For these two, it is necessary to take supplements in tablet form. This is because the need for these substances rises from the start, or even before conception, and it cannot be satisfied by natural foods. A good supply is important for the healthy development of the child.



## Choose foods that are rich in folic acid + 400 µg folic acid/day in a tablet form during the first 3 months

- Folic acid is important for cell division and growth processes, and therefore for the healthy development of all the child's organs.
- **Picking foods rich in folic acid** means:
  - 3 portions of **vegetables** (e.g. spinach, cabbage, peas, cucumber, tomatoes) per day,
  - 2 portions of **fruit** (e.g. citrus fruit or berries) per day,
  - **Whole grain products** wherever possible.
- **In addition, also take:** 400 µg of folic acid per day
  - As soon as you decide to conceive, and
  - During the first 3 months of pregnancy.



## Choose foods that are rich in iodine + 100(-150\*) µg iodine/day in tablet form throughout pregnancy

- Iodine is important for the healthy physical and mental development of the child.
- **Picking foods rich in iodine** means:
  - **Use iodised salt**, preferably products prepared with it, such as bread and meat products.
  - 3 portions of **milk (products)** (e.g. yoghurt, buttermilk, cheese) per day.
  - 2 portions of **saltwater fish** (e.g. pollock, cod) per week as the best natural source of iodine.
- **In addition, also take:** 100(-150\*) µg of iodine per day
  - During the entire pregnancy
  - Consult your physician in the event of hyper- or hypothyroidism.

\* In cases of low-iodine diets



## Aims of the presentation board

- Expectant parents are familiar with foods that are rich in iodine and folic acid.
- They are aware of the recommendations to take iodine and folic acid supplements.

## Frequently asked questions:

### Do expectant mothers have to take iron tablets?

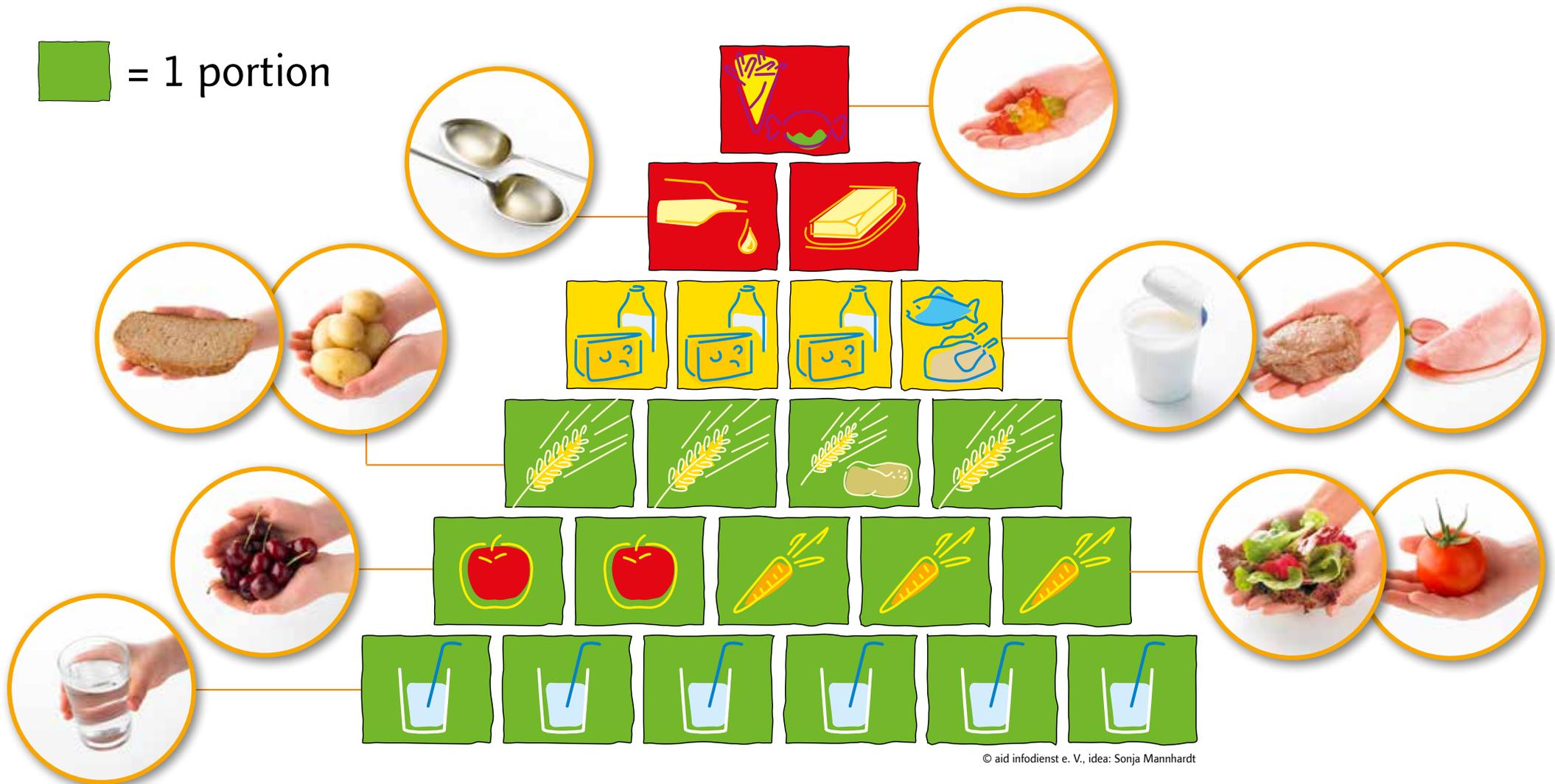
No, most women do not have to during pregnancy. Iron is needed to promote the growth of, and blood supply to, the child, but the expectant mother loses less iron when she stops menstruating. The attending physician keeps an eye on the iron status during check-ups. He/she will only prescribe tablets if they are necessary. Meat and meat products, fish and poultry, vegetables such as spinach, fennel, legumes, nuts and seeds, as well as whole grain products naturally contain iron.

### Do expectant mothers need multivitamin tablets?

No. Multivitamin tablets cannot replace a balanced diet. Some preparations may even contain an unfavourable composition of vitamins and minerals. When taken in high quantities, some nutrients like **vitamin A** may even be harmful to the unborn child. This is why you must not take vitamins based on your own judgement and discretion. Women who would prefer not to do without supplements should discuss the issue with their physicians.

# Using your hands to judge portions

 = 1 portion



© aid infodienst e. V., idea: Sonja Mannhardt



# Using your hands to judge portions

The illustrations adjacent to the pyramid show the right **quantity for one portion**. It is measured using the hands for food, with glasses for drinks, and with tablespoons for fats and oils.



## Aim of the presentation board

- Expectant parents are familiar with the portion sizes for the food groups, and use them as a means of orientation.



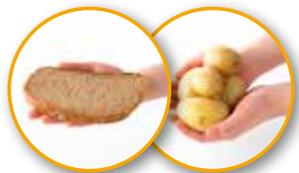
### 1 portion of drinks =

- One large glass or one mug (300 ml).



### 1 portion fruit and vegetables =

- Whole fruit and vegetables (e.g. tomatoes, kohlrabi, cucumber, apple, banana): a handful.
- Chopped or frozen vegetables, salad and small fruit (e.g. peas, lamb's lettuce, cherries, strawberries): two hands held like a 'bowl'.



### 1 portion cereal products =

- Bread (slice): whole hand with outstretched fingers.
- Sides such as potato, pasta, and muesli: two full hands.



### 1 portion milk and dairy products =

- One glass (250 ml) of milk, one cup (150 g) of yoghurt or one slice (30 g) of cheese.



### 1 portion meat, fish, eggs =

- Fish: one palm.
- Meat: just under one palm, roughly a side plate.
- Eggs: 1 or 2.



### 1 portion of fat and oil =

- 1.5 to 2 tablespoons of oil and spreadable fat per day, equivalent to 3 to 4 teaspoons.



### 1 portion of 'extras' =

- Sweets and snacks consumed over the course of a day should fit in one hand or be equivalent to one piece (e.g. chocolate bar).
- No more than 200 kcal per day.

# Eating regularly

Main meals

Breakfast



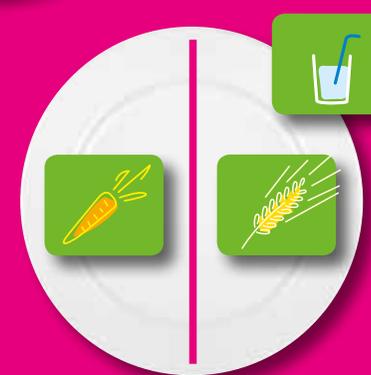
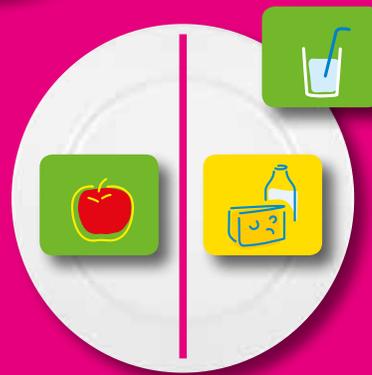
Lunch



Dinner



Snacks in-between





## Eating regularly

The 22 building blocks in the aid dietary pyramid (see F11) are spread over several (3 to 5) meals per day. The diagram shows an example of regular meals, consisting of **3 main meals** (breakfast, lunch, dinner = a large plate with 3 different food groups), and **up to 2 snacks in between** (= small plate with 2 different food groups). Not shown for reasons of simplicity: spreadable fats, sweets and snacks (red section of the pyramid).



### Recommendations for the composition of a balanced diet

- **With every meal**
  - 1 drink (1 glass of water or an unsweetened beverage like herbal or fruit tea). Also drink between meals.
  - At least 1 portion of fruit, vegetables or salad.
- Foods from the 'green' area of the pyramid should account for at least half of the plate.
- Also applies to food eaten **away from home**. For instance, a piece of fruit, or a salad prepared later on at home can wonderfully complement some fast food eaten occasionally when out and about.



### Aim of the presentation board

- Expectant parents are aware of how to put together balanced meals using the 22 building blocks contained in the pyramid.

**Counselling tip:** The diagram with the plates is intended as a rough guide, and not as strict instructions. Not every meal needs to be perfectly composed, but the aggregate total for the week should be right.

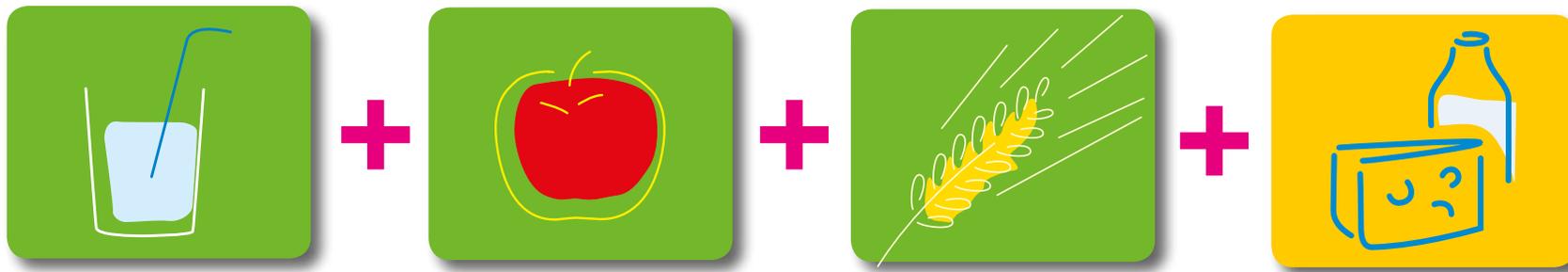
### Frequently asked questions:

#### Does it always have to be 5 meals?

No, 3 or 4 meals would also be sufficient. Every expectant mother has her own preferences and habits. Women who like larger meals can spread the snacks as shown in the diagram over the main mealtimes, e.g. 1 portion of fruit and 1 portion of salad for lunch.

But frequently it is better for the women to eat small meals if they suffer from nausea or heartburn, but also in the later stages of pregnancy (the child is larger and may press against the stomach).

# Easy breakfasts



Pick whole grain



# Easy breakfasts



## Building blocks for balanced breakfasts:

- 1 building block each: a drink (green), fresh fruit (green), cereal (green), milk (or dairy product) (yellow).

## Examples of a suitable breakfast:

- 1 whole grain roll (green) with cheese (yellow) and 1 kiwi fruit (green), 1 glass of apple spritzer (3 parts water, 1 part apple juice) (green).
- Muesli made of oatmeal (green), fresh fruit (green) and low-fat yoghurt (yellow), one cup of coffee (green).



## Pick whole grain

- Whole grain bread contains twice as much iron, folic acid and magnesium as white bread. It also contains a lot of **roughage**. This means that it is very filling and helps prevent constipation.
- Whole grain bread must contain the entire grain, but does not have to be grainy. It is also available made of **finely ground corn**.
- **Tip:** At least of half of the cereal products should be whole grain.



## Aim of the presentation board

- Expectant parents are familiar with what makes a balanced breakfast.

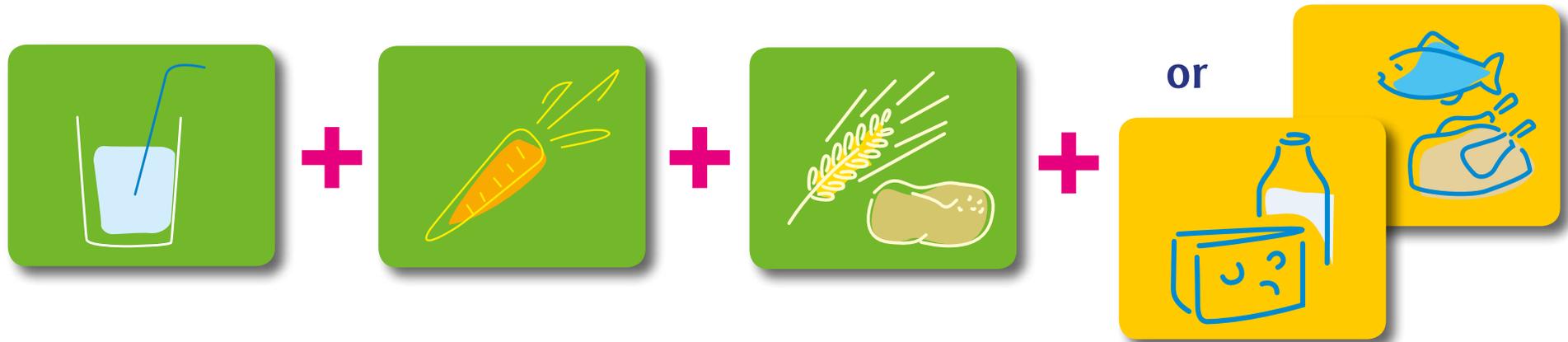
**Counselling tip:** The counselling sessions should clearly show that expectant mothers can and should select from a broad range of products. Personal preferences are what 'tie everything together' when selecting ingredients for a meal. Open-ended questions help break the ice, e.g. "What did you have for breakfast today?", "Which types of bread, which spreads and cold cuts do you prefer?", "How could you change your favourite breakfast to make it more balanced?"

## Frequently asked questions:

### Do expectant mothers have to do without coffee?

Women can drink up to 3 cups of coffee a day during pregnancy. But besides coffee, coke, black and also green tea contain caffeine. Important: Pay attention to the total amount of caffeine consumed. Expectant mothers should steer clear of energy drinks that contain large quantities of caffeine.

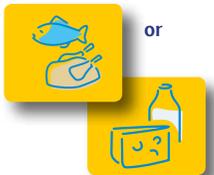
# What a hot meal might look like





# What a hot meal might look like

A hot meal should be on the menu every day. It increases the variety of foods on offer. The hot meal can be taken at lunch or dinnertime.



**A balanced hot meal can be put together by combining the following building blocks:**

- 1 portion each: a drink (green), vegetables (green), cereal or side dish (green), meat, fish or egg (yellow), alternatively a dairy product (yellow).
- A small handful of sweet snacks (red, not shown) as dessert is permitted occasionally.

**Examples of suitable hot meals:**

- Mashed potato (green) with spinach (green), salmon (yellow). With 1 glass of water.
- Salad made of couscous (green), tomato and other vegetables (2x green) with herbal quark (yellow). And a glass of water.

**Fruit and vegetables are the main constituents**

- Fruit and vegetables contains plenty of **vitamins and minerals**, but not much energy (high **nutrient density**).
- They provide **roughage**, which contributes to healthy digestion.
- Eat fresh fruit and vegetables; if possible, always eat uncooked fruit, and roughly half of the vegetables uncooked.
- Alternatively: frozen fruit and vegetables without added ingredients. Before eating, always heat frozen fruit and vegetable to > 70 °C. This helps prevent food poisoning.
- A glass of fruit or vegetable juice can occasionally replace a portion of fruit or vegetables.



## Aim of the presentation board

- Expectant parents are familiar with what makes a balanced hot meal.

**Use oil and fat sparingly**

- 2 portions of fat per day, including at least 1 portion of oil, and no more than 1 portion of butter/margarine.
- Where possible, use vegetable oil (e.g. **canola oil**). It contains essential fatty acids (e.g. omega-3 fatty acids).
- The best dosage method is using **a tablespoon**.
- Prepare salads with a vinegar and oil dressing. One table spoon of oil per person.

## Frequently asked questions:

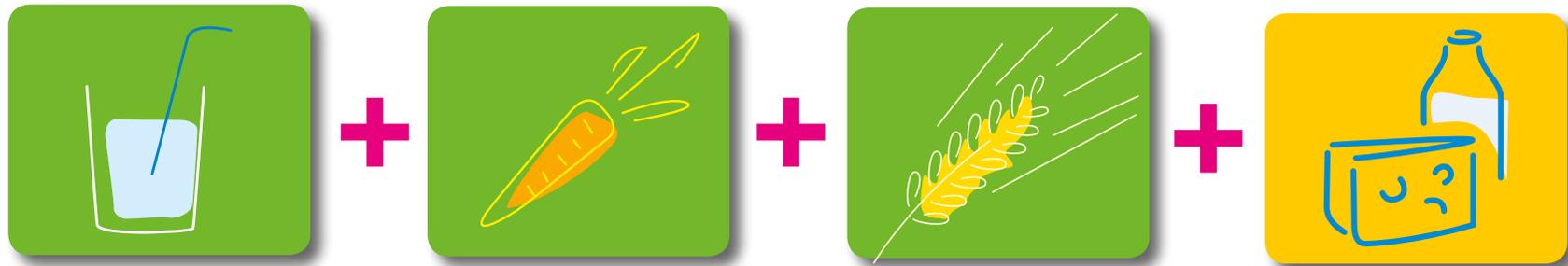
**Are iced teas and coke suitable beverages?**

No! Iced teas contain a lot of sugar, and therefore energy. They do not quench thirst. What's more, coke and many iced teas contain additional caffeine (see F15).

**What about shakes and smoothies?**

They usually contain a lot of energy and sugar. In some cases they are (significantly) more concentrated than fruit juice, which means they have a lower water content. So they are best taken with water. In order to prevent food poisoning when out and about, it is best to drink industrially manufactured and packed smoothies or to prepare fresh smoothies at home.

# What a cold meal might look like





# What a cold meal might look like



## Aim of the presentation board

- Expectant parents are familiar with what makes a balanced cold meal.



**A balanced cold meal can be put together by combining the following building blocks:**

- 1 building block each: a drink (green), vegetables (green), cereal (green), milk (dairy product) (yellow) or meat/sausage (yellow).

**Examples of a suitable cold meal:**

- 1 slice of whole grain bread or pumpernickel (green) with herbal quark (yellow), accompanied by a tomato and cucumber salad (green). One cup of unsweetened herbal tea (green).
- 1 whole grain roll (green) with a salad leaf (green), boiled ham or a slice of cheese (yellow), small radishes and fresh cress (green). Served with a cup of low-fat milk (yellow) and one glass of apple spritzer (3 parts water, 1 part apple juice).

**Milk and dairy products: Low-fat if possible**

- Milk, cheese and yoghurt are sources of protein, calcium for the bones, vitamins and fat.
- To avoid consuming too much energy, it is advisable to choose **low-fat products**:
  - Milk drinks, yoghurt and sour milk with 1.5% fat.
  - Where possible, choose low-fat cheese (fat content: 30 to 40% fat in dry matter [f.i.d.m.]).

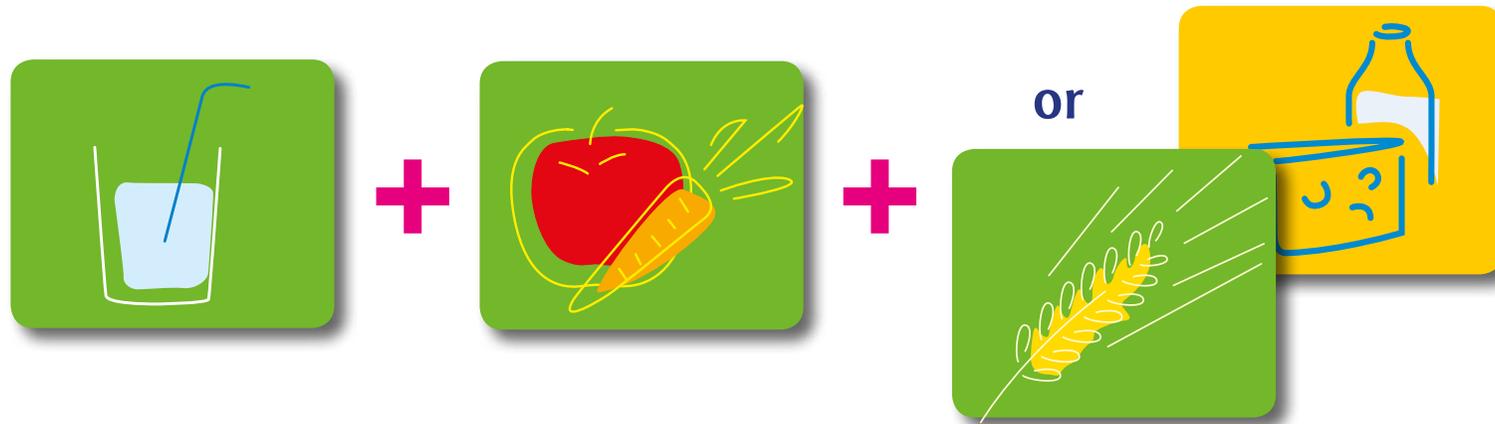


## Frequently asked questions:

**What must women pay attention to during pregnancy in relation to dairy products?**

Always use milk (products) made of **pasteurised** or **heat-treated** milk. Do not drink unpasteurised milk. It can cause food poisoning. This applies equally to cheeses made of unpasteurised milk, except hard cheese. Unpasteurised dairy products carry the information "made with raw milk". Ask the sales assistant when purchasing unpackaged cheeses from the cheese counter (see F19).

# Good snacks





# Good snacks

Sometimes it is necessary to exercise particular care in choosing good snacks for in-between. Some expectant mothers eat far too many 'goodies' containing excessive quantities of sugar and energy. And this is bound to leave its mark on the blood sugar levels, and the woman's weight.



or



## An ideal snack for in-between can be put together using these building blocks:

- In each case: 1 drink (green), 1 portion of fruit or vegetables (green), 1 cereal product (green) or 1 dairy product (yellow).

## Examples of suitable snacks:

- 1 yoghurt (yellow) with fresh fruit (green), 1 glass of juice spritzer containing 3 parts water and 1 part juice (green).
- Carrot sticks (green) with herbal quark (yellow) and 1 glass of water (green).

## Drinks: Water comes first

- Drink water at every meal and between meals: at least 6 glasses (300 ml each).
- Tap water and mineral water are unbeatable thirst quenchers.
- Also suitable: Rooibos tea, unsweetened herbal and fruit teas.
- Instead of pure, it is better to drink fruit juices as spritzers, mixed using roughly 3 parts water and 1 part juice.
- Drink more than 6 glasses when exercising, on hot days, or if you are losing fluids (e.g. when vomiting).



## Aim of the presentation board

- Expectant parents are familiar with what makes a balanced snack.

## Frequently asked questions:

### Which drinks should be avoided?

Sweet drinks like lemonade or malt beer are counted as extras (red). Their **sugar content** makes them unsuitable to quench thirst (check the list of ingredients!). Bitter Lemon and Tonic Water contain the herbal ingredient quinine, which taken in large quantities can harm the child. Milk is also not suitable to quench thirst, as it contains a lot of energy and protein.

### Is tap water safe?

Drinking water is closely monitored, so it is good quality and safe. Leave the water to run for a while in the morning, or if the tap has been closed for a while. Wait until the water coming out of the tap has a constant cold temperature. Do not drink water from lead pipes.



# Playing it safe

Wash your hands



Wash fruit and vegetables



Do not eat raw animal products

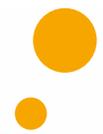


It always tastes best when freshly prepared!

Thoroughly cook meat and fish



Store and prepare uncooked products separately





# Playing it safe

Expectant mothers should be particularly concerned with preventing **food poisoning**, as certain illnesses can also damage the unborn child. Although the risk of falling ill is extremely slight, expectant parents should always observe the following tips to be on **the safe side**:



### Wash your hands:

- Before preparing food, after touching uncooked food, before eating, after each visit to the toilet, and each time you touch an animal: always wash your hands thoroughly in warm, soapy water.



### Wash fruit and vegetables:

- Thoroughly wash vegetables, leaf salads, fresh herbs and fruit before preparing meals.
- First wash, then peel, then wash again any food with clumps of soil, for instance carrots or potatoes.
- Try and avoid pre-washed and cut salad mixtures, delicatessen salads and antipasti from salad bars.



### Do not eat raw animal products:

- Do not eat any unpasteurised dairy products, uncooked meat, uncooked sausage and ham, raw fish, seafood or eggs, or any products made from these ingredients that have not been thoroughly heated! They may contain bacteria that are only killed when exposed to heat.
- It is also advisable to stay away from soft cheeses (such as camembert) and smoked fish.



### Thoroughly cook meat and fish:

- Always thoroughly heat animal products (> 70 °C internal temperature for at least 2 minutes; use a clean meat thermometer if you have one handy).
- Rule of thumb: Well-cooked meat is grey on this inside, and no longer pink. The meat juices are then colourless and clear.



## Aims of the presentation board

- Expectant parents are familiar with and observe recommendations for handling food in a hygienic manner.
- They know how to avoid food poisoning.



### Store and prepare uncooked products separately:

- This applies to fresh vegetables, food covered with soil, raw eggs, uncooked meat and raw fish.
- Thoroughly clean in hot, soapy water all objects that come into contact with these products.



### It always tastes best when freshly prepared!

- People who cook and prepare their meals fresh always know how (hygienically) the dishes have been put together, and therefore reduce their personal risk of food poisoning.
- The meals can be prepared to suit personal tastes and preferences.

## Frequently asked questions:

### Which types of food poisoning are serious?

Particularly **listeriosis** and **toxoplasmosis**. The latter is caused by parasites, while listeriosis is a bacterial (listeria) condition. They can both lead to severe illnesses of the unborn child and complications during pregnancy. Thankfully, they are quite rare.



Further information:

**Protect yourself against food poisoning during pregnancy**, order no. 346, [bestellung@aid.de](mailto:bestellung@aid.de)

**BFR Leaflets: Consumer tips on listeriosis and toxoplasmosis**, [www.bfr.bund.de/de/publikationen/merkblaetter\\_fuer\\_verbraucher-512.html](http://www.bfr.bund.de/de/publikationen/merkblaetter_fuer_verbraucher-512.html)

# Booze and smoke – no thanks!

Alcohol and  
cigarettes?  
Not with us!

It's so nice that  
we quit together!





# Booze and smoke – no thanks!

Alcohol and cigarettes?  
Not with us!

- The placenta and umbilical cord quickly transport **alcohol** into the **circulatory system** of the unborn child: It takes just a few minutes for the child to have the same alcohol level as its mother.
- But the child's **liver** is not yet developed. It is unable to break down alcohol, or is not equipped to do so adequately. The effects of the alcohol last longer in the child than in the mother, and may be detrimental for its development.

The safest way? **Do without** alcohol entirely!

- **Smoking** (active and passive) harms the unborn child.
- Tobacco smoke increases the **risk of allergies** (allergic respiratory diseases).
- Smoking **reduces blood circulation** through the placenta: The child receives less oxygen and fewer nutrients.
- The more frequently the mother inhales cigarette smoke, the more severe the consequences for the child.

Do not smoke, and do not remain in rooms in which people are or have been smoking.



## Aim of the presentation board

- Expectant parents are familiar with the harmful effects that alcohol and tobacco smoke have on the unborn child.

It's so nice that we  
quit together!

- Pregnancy is a wonderful opportunity for both partners to stop smoking. **Doing it together** makes it easier to quit!
- The same is true of alcohol.

**Counselling tip:** In the event that expectant parents do not manage to stop smoking, they should be enabled through counselling to keep the harmful effects on the mother and unborn child as insubstantial as possible: Do not smoke in the presence of the expectant mother; do not smoke in the apartment or in the car. If at all, only smoke with windows wide open and at a substantial distance from the expectant mother.

Counselling services to quit smoking:

**[www.rauchfrei-info.de](http://www.rauchfrei-info.de)**

An online programme to help people give up smoking and alcohol: **[www.iris-plattform.de](http://www.iris-plattform.de)**.

## Frequently asked questions:

### Is alcohol harmful during the early phase of pregnancy?

Alcohol must be viewed critically in all phases of pregnancy. The risk of harming the child is highest if significant quantities of alcohol are consumed regularly. But the risk of damage is small if the women did not drink much alcohol before learning of their pregnancy.

# Breastfeeding is worth it!

It's rare enough for  
the best things  
to be free!

It's really handy to  
have everything you need  
right there all the time!

Breastfeeding makes  
you happy – it's the  
hormones!

And it's fantastic that  
nursing protects against  
breast cancer!

Breastfeeding  
forges bonds!





# Breastfeeding is worth it!

Women who decide to breastfeed during pregnancy are perfectly equipped for a successful start to nursing. Midwives, nursing and lactation coaches can help answer any questions (See Advice & Assistance on Page II for addresses)

## Bonus points for breastfeeding:

### It's rare enough for the best things to be free!

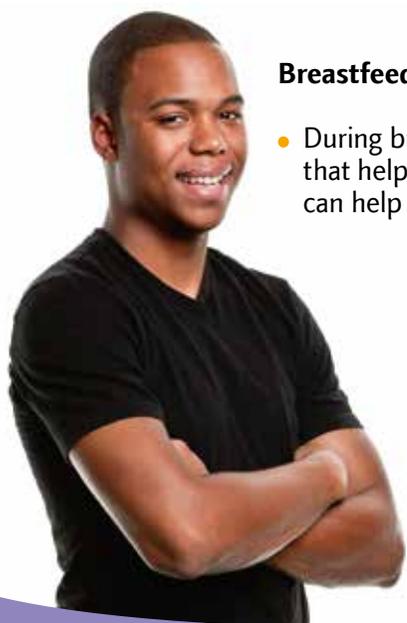
- Breastfeeding **saves on costs** for industrially manufactured formula, for bottles, nipples, electricity to prepare the formula, cleaning, and on the travel expenses of shopping.

### And it's fantastic that nursing protects against breast cancer!

- Nursing reduces the risk of **breast and ovarian cancer**.
- Breastfeeding also helps tighten the **womb**, which leads to faster postpartum regression.

### Breastfeeding makes you happy – it's the hormones!

- During breastfeeding, the body secretes certain hormones that help the mothers relax and feel happy. So breastfeeding can help ward off the **baby blues**.



## Aim of the presentation board

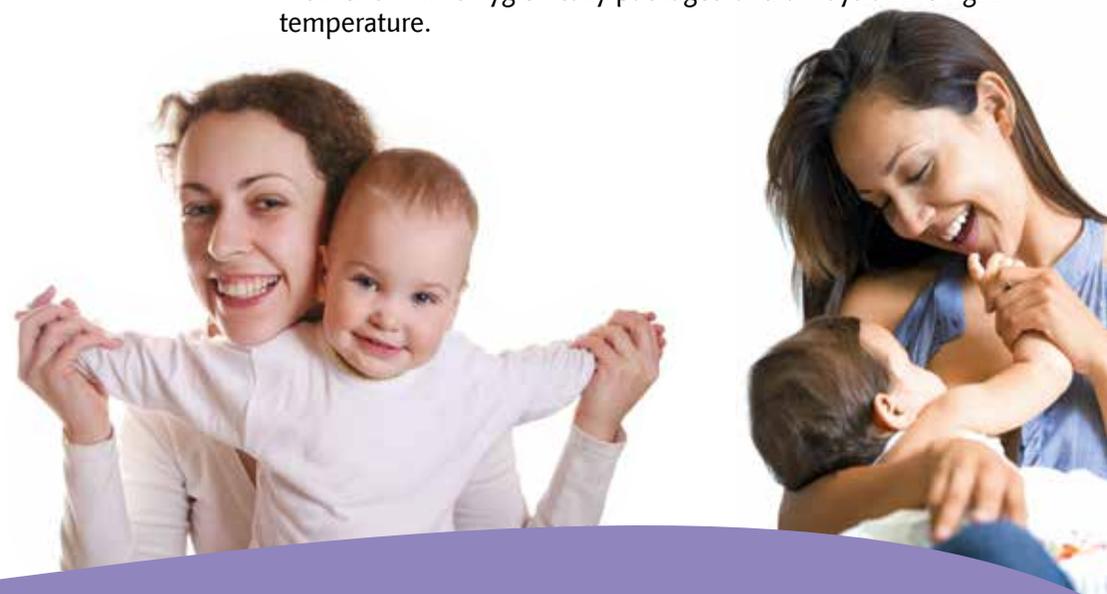
- Expectant mothers are motivated to start breastfeeding after giving birth.

## Breastfeeding forges bonds!

- Nursing strengthens the **mother-child relationship**: The child senses and smells the mother. It feels safe. The mother also senses the intimacy.

## It's really handy to have everything you need right there all the time!

- Breastfeeding saves time and work: Nothing needs to be prepared, stirred or warmed up, and there are no bottles and nipples to rinse.
- You have **all you need** wherever you happen to be. A bottle, formula and hot water are no longer needed. A mother's milk is hygienically packaged and always at the right temperature.



# Successful breastfeeding



Our child gets mother's milk!





# Successful breastfeeding



## Aim of the presentation board

- Expectant parents know what they can do to increase the likelihood of a good start to breastfeeding.

Our child gets mother's milk!

- Breastfeeding is not just the mother's business. Mothers who receive support from their **partners** are more likely to start breastfeeding and to continue doing so for longer, compared with women who do not receive support from their partners.
- It is important to actively involve the partner from the start!



## Support from experts in breastfeeding

- **Midwives** are delighted to answer questions about breastfeeding and to help get things started – even at the mother's home. They prepare expectant mothers for childbirth, accompany them during the birth itself, and visit the mothers to provide aftercare.
- **Nursing and lactation experts** provide tips and support in all questions regarding breastfeeding, even before the birth.

## The best ways to ensure a good start to breastfeeding:



### Early skin contact

- A child that is placed on the naked skin of its mother (tummy) directly after birth will immediately start (when it is awake) to search for the breast and to suckle.



### Sharing a room

- Mothers who share a room with their child from the start can nurse the infant at any time it is hungry. Milk production will quickly adjust to suit this natural rhythm.

## Frequently asked questions:

### Can every mother breastfeed their child?

Practically every woman can breastfeed their child. The size of the breasts or the shape of the nipples do not matter: breasts are designed to feed the child, and they are specialised for this task.

### Is it good to prepare for breastfeeding?

Rubbing, pinching and brushing to harden the nipples will do more harm than good. The body prepares itself for breastfeeding.

### For how long should a child be nursed exclusively?

The child should receive exclusively mother's milk until at least the start of the 5th month, but no longer than until the start of the 7th month. Occasional breastfeeding is also beneficial. The mother and child can continue to breastfeed in addition to baby food for as long as they like.

# Preventing allergies, even during pregnancy

No thanks!



2x (saltwater) fish/week



Enjoy consciously instead of doing without



Building a healthy nest



Breastfeeding – find out more now





# Preventing allergies, even during pregnancy

There is a greater **risk of allergies** if one or both parents or a sibling already suffer from allergies. There is no one method to prevent allergies in the child, but there are simple **preventative measures** that can be taken to reduce or at least postpone the emergence of allergic reactions:



## No thanks!

- Tobacco smoke in particular significantly increases the risk of allergies. Passive smoking counts as well!
- Ensure that at the start of pregnancy there is a **smoke-free home environment**: expectant mothers must not smoke.



## 2x (saltwater) fish/week

- Eat regular helpings of saltwater fish 2x per week. One of these portions should be lean fish (e.g. herring, mackerel, salmon, sardines).
- **Fat-rich saltwater fish** appear to protect against allergies.



## Enjoy consciously instead of doing without

- A balanced and **varied diet for the mother** will also benefit the unborn child.
- In contrast, trying to lose weight or avoiding certain foods that frequently cause intolerances do not protect against allergies. Quite the contrary: This can lead to a nutrient deficiency, and may even harm the child.
- Expectant mothers who themselves suffer from allergies must avoid the food that triggers an intolerant reaction. A qualified nutritionist will help to design a balanced diet.



## Building a healthy nest

- When renovating, it important to use **paint and varnishes that are low in solvents**.
- **Mould** around the house increases the risk of asthma, runny noses and neurodermatitis. Make sure any mould is removed.
- Regularly open the windows wide to air the house (**intermittent ventilation**). This ensures there is sufficient fresh air and prevents 'damp spots' from forming in the rooms. You should only ventilate during quiet periods if you live next to a busy road.
- Children who are susceptible to allergies are better off growing up in an environment without cats. This is why it is not advisable to acquire a cat as a new pet.



## Breastfeeding – find out more now

- Allergens introduced under the protection of the mother's milk appear to trigger allergies less often.



## Aim of the presentation board

- Expectant parents know what they can do during pregnancy to help prevent the emergence of allergies.

## Frequently asked questions:

### What should I pay attention to when serving fish?

Salmon, herring and mackerel, among others, are recommended. Tuna or swordfish are not suitable, as they may contain contaminants (heavy metals).

# Gestational diabetes – early detection and prevention

Check-ups by a gynaecologist



Nutrition



Exercise





# Gestational diabetes – early detection and prevention

Gestational diabetes (**also known as gestational diabetes mellitus GDM**) is a metabolic disorder caused during pregnancy by predisposition or hormones. Obesity, an unhealthy diet, and insufficient exercise may also contribute to this condition. GDM responds **well to treatment, provided it is diagnosed early on**. If left untreated, however, the mother may suffer complications during pregnancy, and it may lead to the child suffering from metabolic disorders, obesity and diabetes in adulthood.

The 3 most important pillars of **prevention and treatment**:

## Check-ups by the gynaecologist



- The check-up conducted during the first trimester ascertains whether the expectant mother suffers from **diabetes**, or whether there are certain **risk factors** such as diabetes in the family, or obesity.
- A variety of check-ups are then conducted at different times if diabetes is not diagnosed:
  - **If** there is at least one **risk factor**, a blood analysis is conducted during the first trimester in order to check the blood sugar levels.
  - **No risk factors**: A screening for GDM is conducted between the 24th and 28th week by means of a glucose tolerance test. This test is recommended for all expectant mothers to provide certainty.

**Counselling tip:** All expectant mothers who have not been diagnosed with diabetes should be checked for GDM. According to the new, i.e. amended “Maternity Guidelines”, this is defined as a preventative treatment and is covered by statutory health insurance.



## Aims of the presentation board

- Expectant mothers attend the check-ups to identify gestational diabetes.
- They are familiar with the methods of prevention and treatment.

## Nutrition

- The same recommendations stated for everyone else in the aid dietary pyramid (see slide 11) apply here as well.
- **Special measures for expectant mothers suffering from GDM:**
  - Eat at least 3 portions of vegetables per day, and – due to the sugar content – no more than 2 portions of fruit.
  - Always choose whole grain cereal products. Whole grain products cause the blood sugar level to rise at a slower pace compared to products made of white flour.
  - Only eat small quantities of sweets/snacks, and when possible exclusively after a meal.
- Avoid drinks sweetened with sugar.

## Exercise

- **Regular physical exercise** and **sports** help achieve a harmonious energy balance.
- **Moderate endurance** or **strength training** reduces the amount of insulin needed to transport sugar out of the blood and into the body’s cells. This lowers the mother’s and the child’s blood sugar level.

**Note:** Simply making changes to the diet and exercise plan is sufficient to successfully treat minor cases of gestational diabetes 80 to 90% of the time.

# Advice and assistance – useful addresses

## For questions regarding pregnancy and family planning

Interested persons will find family planning and pregnancy counsellors in their area at:

Berufsverband der Frauenärzte e. V.  
[www.frauenaeerzte-im-netz.de](http://www.frauenaeerzte-im-netz.de)

Deutscher Hebammenverband e. V.\*  
Telephone: +49 721 981890  
Email: [info@hebammenverband.de](mailto:info@hebammenverband.de)  
[www.hebammenverband.de](http://www.hebammenverband.de)

Nationales Zentrum Frühe Hilfen  
Telephone: +49 221 89920  
Email: [redaktion@fruehehilfen.de](mailto:redaktion@fruehehilfen.de)  
[www.fruehehilfen.de](http://www.fruehehilfen.de)

### Online counselling:

[www.profamilia.de](http://www.profamilia.de)  
The experts here provide online answers to questions on family planning and pregnancy.

\*Also for questions about breastfeeding

## For questions regarding diet during pregnancy

Interested persons will find the addresses of qualified nutritionists close by at:

Berufsverband Oecotrophologie e. V.  
Telephone: +49 228 289220  
Email: [vdoe@vdoe.de](mailto:vdoe@vdoe.de)  
[www.vdoe.de](http://www.vdoe.de)

Verband der Diätassistenten –  
Deutscher Bundesverband e. V.  
Telephone: +49 201 94685370  
Email: [vdd@vdd.de](mailto:vdd@vdd.de)  
[www.vdd.de](http://www.vdd.de)

German Nutrition Society  
Telephone: +49 228 3776600  
Email: [webmaster@dge.de](mailto:webmaster@dge.de)  
[www.dge.de](http://www.dge.de)

Deutsche Gesellschaft der qualifizierten  
Ernährungstherapeuten und Ernährungsberater – QUETHEB e. V.  
Telephone: +49 8682 954400  
Email: [info@quetheb.de](mailto:info@quetheb.de)  
[www.quetheb.de](http://www.quetheb.de)

### Online counselling:

[www.was-wir-essen.de](http://www.was-wir-essen.de)\*\*  
Experts at aid infodienst post answers to online questions regarding diet during pregnancy.

\*\*Also for questions about preventing allergies

## For questions about breastfeeding

Interested persons will find assistance for questions relating to breastfeeding at:

Arbeitsgemeinschaft Freier Stillgruppen e. V.  
Email: [geschaeftsstelle@afs-stillen.de](mailto:geschaeftsstelle@afs-stillen.de)  
[www.afs-stillen.de](http://www.afs-stillen.de)

Berufsverband Deutscher Laktationsberaterinnen IBCLC e. V.  
Telephone: +49 511 87649860  
Email: [sekretariat@bdl-stillen.de](mailto:sekretariat@bdl-stillen.de)  
[www.bdl-stillen.de](http://www.bdl-stillen.de)

La Leche Liga Deutschland e. V.  
Telephone: +49 2241 1453996  
Email: [info@lalecheliga.de](mailto:info@lalecheliga.de)  
[www.lalecheliga.de](http://www.lalecheliga.de)

### Online services:

[www.stillen-info.de](http://www.stillen-info.de)  
Joint page operated by the Deutsche Liga für das Kind in Familie und Gesellschaft e. V. and the National Breastfeeding Committee at the Federal Institute for Risk Assessment; it also contains links to a number of breastfeeding organisations.

## For questions about allergies

Interested persons can find the addresses of allergy experts close by at:

German Allergy and Asthma Society  
Telephone: +49 2161 814940  
Email: [info@daab.de](mailto:info@daab.de)  
[www.daab.de](http://www.daab.de)

Arbeitskreis Diätetik in der Allergologie  
Telephone: +49 89 33995732  
Email: [info@ernaehrung-allergologie.de](mailto:info@ernaehrung-allergologie.de)  
[www.ak-dida.de](http://www.ak-dida.de)

### Online counselling:

[info@pina-infoline.de](mailto:info@pina-infoline.de)  
Präventions- und Informationsnetzwerk Allergie/Asthma e. V.

[info@daab.de](mailto:info@daab.de)  
German Allergy and Asthma Society

[info@allum.de](mailto:info@allum.de)  
Information on allergies, the environment and health



## For questions about exercise

### Online counselling:

[www.sportundschwangerschaft.de](http://www.sportundschwangerschaft.de)  
A coaching team at the Sport University Cologne posts online answers to questions about sport and pregnancy.

## For questions about alcohol and smoking

Federal Centre for Health Education  
Telephone: +49 221 89920  
Email: [poststelle@bzga.de](mailto:poststelle@bzga.de)  
[www.bzga.de](http://www.bzga.de)

### Online counselling:

[www.rauchfrei-info.de](http://www.rauchfrei-info.de)  
Counselling services to help people quit smoking from the Federal Centre for Health Education

[www.iris-plattform.de](http://www.iris-plattform.de)  
Help for expectant mothers seeking to do without alcohol and tobacco. Internet portal funded by the Federal Ministry of Health.

Interested persons will find more information and counselling services at:  
**[www.gesund-ins-leben.de](http://www.gesund-ins-leben.de)**



# Pregnancy information materials



**Recommendations for action:  
Diet during pregnancy.**  
Specialist information  
for health professionals<sup>1</sup>  
Order no.: 3589



**Breastfeeding – what else?**  
A1 poster for parent counselling<sup>1</sup>  
Order no.: 3466



Flyer for parent counselling<sup>2</sup>  
Order no.: 340



**Staying fit while pregnant**  
A1 poster for parent counselling<sup>1</sup>  
Order no.: 3607



Flyer for parent counselling<sup>2</sup>  
Order no.: 348



**Mummy, this is what I want  
from you!**  
Sticker for the maternity record<sup>2</sup>  
Order no.: 3330

**Advanced courses  
for specialists:  
'Diet and exercise  
during pregnancy'**  
[www.gesund-ins-leben.de/  
fuer-fachkraefte/fortbildungen/](http://www.gesund-ins-leben.de/fuer-fachkraefte/fortbildungen/)

[www.gesund-ins-leben.de](http://www.gesund-ins-leben.de)

**Order now:**  
[bestellung@aid.de](mailto:bestellung@aid.de)  
[www.aid-medienshop.de](http://www.aid-medienshop.de)

<sup>1</sup> free for up to 10 units  
<sup>2</sup> free for up to 100 units  
<sup>1,2</sup> larger orders upon request