



University of the Philippines - Manila
 The Health Sciences Center
COLLEGE OF NURSING



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 Sotejo Hall, Pedro Gil St., Ermita, Manila

Gigataras, Joan Danielle D.

N-13 Maternal and Child Nursing

Pregnancy Myths and Discomforts

1. Interview a pregnant woman or any woman who has been pregnant (face-to-face, if possible, or via Messenger, Text, Call, etc.). Ask her on what discomforts did she feel during her entire pregnancy. List the discomforts she identified and examine if she did it right and what intervention could've been a better way of managing her discomfort.

Pregnancy Discomfort	Own Management	Proper Management
1. Nausea and vomiting	<ul style="list-style-type: none"> The client avoids pungent smells. 	<p>The client's own management is correct. The following interventions can help manage her discomfort further:</p> <ul style="list-style-type: none"> Instead of three large meals, try eating small, regular meals. Stay hydrated by drinking plenty of water and eating plenty of fresh fruits and vegetables. A high-protein, complex-carbohydrate diet (such as whole-wheat bread, bananas, and green, leafy vegetables) may also help alleviate nausea. Avoid sugar and greasy foods. <p>(Johnson, 2021)</p>
2. Back pain	<ul style="list-style-type: none"> The client applies muscle rub. The clients asks for a massage. 	<p>The client's own management is correct. The following interventions can help manage her discomfort further:</p>

		<ul style="list-style-type: none"> • Wear low-heeled shoes with sufficient arch support. • Sit in comfortable chairs with sufficient back support. Placing a small pillow behind your lower back also provides further support. • Stand tall and relaxed, with your chest up and shoulders back. • Place a pillow between the legs and sleep on the left side. A firm mattress is recommended for sleeping. • Use a heating pad on the back to ease pain. Avoid taking pain killers unless absolutely required and with doctor's prescription. <p>(Sacks, Freeborn & Trevino, 2016)</p>
<p>3. Constipation</p>	<ul style="list-style-type: none"> • The client eats fruits like papaya. 	<p>The client's own management is correct. The following interventions can help manage her discomfort further:</p> <ul style="list-style-type: none"> • Stay hydrated by drinking plenty of water. Fruit juice, particularly prune juice, can also be beneficial. • Consume high-fiber meals such as fruits, vegetables, beans, whole-grain bread and pasta, and bran cereal. • Instead of three large meals, try eating small, regular meals.

		<ul style="list-style-type: none"> Engage in some form of physical activity on a daily basis such as walking. <p>(Stanford Children’s Health, 2015)</p>
4. Varicose veins and swelling in your legs, ankles and feet	<ul style="list-style-type: none"> The client elevates the feet when resting. 	<p>The client’s own management is correct. The following interventions can help manage her discomfort further:</p> <ul style="list-style-type: none"> Wear support hose and avoid standing for extended periods of time. Sleep on the left side to relieve strain on the vein transporting blood from the lower body to the heart. Wear loose and comfortable clothing to promote circulation. Exercise regularly and monitor weight gain during the pregnancy. <p>(Johnson, 2021)</p>
5. Frequent urination	<ul style="list-style-type: none"> The client voids whenever she feels the urge. 	<p>The client’s own management is correct. The following interventions can help manage her discomfort further:</p> <ul style="list-style-type: none"> Avoid caffeine-containing beverages such as coffee, tea, soda, and other soft drinks. Perform Kegel exercises to strengthen the muscles that control urine flow. Tighten the muscles for 10 seconds before releasing them for 10 seconds. Repeat 10 times. Lean forward a little when urinating to

		thoroughly empty your bladder.
6. Shortness of breath	<ul style="list-style-type: none"> The client tries to move slowly while catching her breath. 	<p>The client's own management is correct. The following interventions can help manage her discomfort further:</p> <ul style="list-style-type: none"> Avoid smoking. Allow your lungs to expand by sitting or standing up straight. Make an effort to breathe clean air. Avoid secondhand smoke and other contaminants in the air as much as possible. Exercise regularly and monitor weight gain during the pregnancy. Sleep on the left side instead of sleeping on the back. <p>(Sacks, Freeborn & Trevino, 2016)</p>

2. Interview you mother or grandmother (whoever is available) and ask them about pregnancy myths. List all that they can identify? If one of your future clients will raise this concern, how/what answer will you give them?

Pregnancy Myth	Truth
<p>1. The physical attributes of the baby is influenced by the pregnant mother's cravings for certain types of food (<i>paglilili</i>).</p> <ul style="list-style-type: none"> Chocolate and dark-colored foods are thought to give the infant a darker complexion, whereas light-colored foods, such as milk, are thought to give the newborn a lighter complexion. 	<p>During pregnancy, hormones control the many changes that occur in the body to support the baby's safe development. The rise in estrogen may heighten a pregnant woman's sense of taste and smell and as a result, the woman develops an aversion to foods she's never enjoyed. These pregnancy cravings normally takes place during the first trimester of pregnancy, which is the most critical time for the baby's development. There is no link between food cravings and the physical characteristics of the infant, according to scientific studies. Physical characteristics are passed down through generations through</p>

	<p>the genes of one's parents' and grandparents'. Pregnant mothers should focus on being healthy and eating appropriately, whether they choose to satisfy their cravings or not, because these are the factors that have the most immediate impact on the baby in the womb (Perales, 2016).</p>
<p>2. Eating twin bananas can increase the chances of having twins.</p> <ul style="list-style-type: none"> - Other versions of this superstition include "twin" food, like eggs with twin yolks. 	<p>In reality, twins can be born in one of two ways- the first occurs when a single embryo divides into two after fertilization, giving birth to identical twins. When two independent egg cells are fertilized by distinct sperm, fraternal twins are produced. If one wants to improve chances of having twins, one should learn about genetics, family history, fertility, and procedures like In-Vitro Fertilization that all play a part. Despite the fact that twin bananas and eggs have nothing to do with conceiving twins, they are good sources of nutrition for pregnant women (Makati Medical Center, 2019)</p>
<p>3. Avoid wearing necklaces or wrapping towels around your neck since these will cause the umbilical cord to wrap around the baby's neck.</p>	<p>During the second and third trimesters, it is possible for the umbilical cord to wrap around the baby's neck. The primary cause of a nuchal cord is random fetal movement and is not affected by the actions of the pregnant women. An extra-long umbilical cord or excess amniotic fluid that allows increased fetal movement may further enhance the chance of the umbilical cord looping around the baby's neck. According to estimates, a nuchal cord is present in 20 to 30 percent of all deliveries, and the majority of them are not linked to perinatal morbidity and mortality (Horsager-Boehrer, 2018).</p>
<p>4. The pregnant woman should be eating large amounts of food since she is eating for two.</p>	<p>Eating for two does not imply consuming twice the amount of food, but rather eating food that will offer your baby with the nutrition it needs to be healthy. The amount of healthy weight gain in pregnancy varies from 10-45 pounds depending on the woman's starting weight. Pregnant women require an extra 300 calories every day but these calories must come from nutritional sources such as fruits and vegetables, low-fat dairy and protein sources. Unnecessary weight gain should be avoided because it might lead to complications during pregnancy and labor (Barnes, 2020).</p>

<p>5. The baby's sex can be predicted through the appearance of the pregnant woman.</p> <ul style="list-style-type: none">- The mother is likely to have a girl if she appears "blooming" and refreshed.- The mother is likely to have a boy if she has dark spots on her neck and armpits.	<p>At all stages of pregnancy, skin discoloration is quite common, affecting over 90% of expecting mothers. This skin darkening is thought to be caused by greater levels of estrogen, progesterone, and melanocyte-stimulating hormone. Areas that were previously darker, such as the areolae, nipples, genital skin, armpits, and inner thighs, tend to become considerably darker during pregnancy. Developing blotchy regions of darker skin, known as melasma or chloasma is more common in women with darker skin than in women with lighter skin. An ultrasound at 20 weeks into the pregnancy is the most reliable way to tell a baby's sex (O'Connor & Wu, 2020)</p>
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References

- Barnes, C. (2020). *'Eating for two' — A quick guide to nutrition during pregnancy*. University of Missouri. <https://www.muhealth.org/our-stories/eating-two-quick-guide-nutrition-during-pregnancy>
- Horsager-Boehrer, R. (2018, May 22). *What happens if the umbilical cord is around my baby's neck?* The University of Texas Southwestern Medical Center. <https://utswmed.org/medblog/nuchal-cord-during-pregnancy/>
- Johnson, T.C. (2021, April 17). *Understanding pregnancy discomforts – treatment*. WebMD. <https://www.webmd.com/baby/understanding-pregnancy-discomforts-treatment>
- Makati Medical Center. (2019). *6 Pregnancy Superstitions Debunked*. <https://www.makatimed.net.ph/newsand-exhibits/news/6-pregnancy-superstitions-debunked>
- O'Connor, A. & Wu, J. (2020, November 23). *Skin darkening and discoloration during pregnancy*. What To Expect. <https://www.whattoexpect.com/pregnancy/symptoms-and-solutions/skin-discoloration.aspx>
- Perales, K. (2016). *Understanding cravings or paglilili*. Nestle Mom and Me. <https://www.momandme.nestle.com.ph/understanding-cravings-or-paglilili>
- Sacks, D.N., Freeborn, D. & Trevino, H. (2016). *Common discomforts during pregnancy*. University of Rochester Medical Center Rochester. <https://www.urmc.rochester.edu/encyclopedia/content.aspx?contenttypeid=85&contentid=p01207>
- Silbert-Flagg, J. & Pillitteri, A. (2018). *Maternal & Child Health Nursing: Care of the Childbearing & Childrearing Family* (8th ed., pp. 515, 605-614). Wolters Kluwer.
- Stanford Children's Health. (2015). *Common discomforts during pregnancy*. <https://www.stanfordchildrens.org/en/topic/default?id=common-discomforts-during-pregnancy-85-P01207>