Adoption: Sharing the Journey

“Sometimes I forget I am adopted,” exclaims my amazing son as he grabs his backpack to head off to college. I had just let him know that his birthday this year falls on National Adoption Day. “So cool! We will need to do something special this year on my birthday, to celebrate both my birthday and my adoption! See ya, mom!” To Shaun, adoption is as easy as one, two, three, and just a part of everyday life. As anyone who’s been through adoption knows, this is simply not the case much of the time. While adoption helped us complete our family, the process can be exciting, thrilling and scary all at the same time! When another woman is carrying the baby that will become your child, you worry. Was she drinking alcohol? Taking a pain killer? What if she was using illegal drugs?! It can literally lead to countless anxious days and sleepless nights. I understand these concerns as I shared the same worries.

National Adoption Day, started in the United States in 1999, is celebrated each year on the Saturday before Thanksgiving. This year it happens to fall on Shaun’s birthday and reminds me of when we adopted him, many years ago. That time in my life was so powerful, but it was easier for me than it is for others as I was part of MotherToBaby and already knew where to find the answers to my pregnancy exposure questions.

My adoption journey has helped shape who I am today – a genetic counselor and a teratogen information expert who specializes in understanding exposures that can cause birth defects. The non-profit I work for provides this crucial service all across North America and I’m proud that my journey has brought me into a position to ease the minds of other prospective parents starting down the wonderful path of adoption. It reminds me of Austin and Drew, a prospective adoptive couple whom I helped in their adoption journey, “My partner and I did a lot of research as we started exploring adoption. After we started working with an agency, there were lots of questions about prenatal exposures, birth parent medical histories, etc. A lot of the information we found on these topics seemed to be contradictory and some of it was downright scary.” My job allows me to be on the other end of the line talking to this couple, and others like them, helping fill out intake forms and providing evidence-based answers to some of their questions. “Luckily for us, our adoption agency suggested we reach out to Lori. After our conversation we felt much more at ease, and we felt like we had the information we needed to make informed decisions.”

My own journey has come full circle, utilizing my training to help those going through what I went through years ago. MotherToBaby specialists are here to help you too! As Rory Hall, Executive Director of Adoption Advocates, states, “couples approach the adoption process with so many myths about prenatal exposures and health concerns that might affect a baby. MotherToBaby experts help them approach adoption with relevant, scientific backed information so they can make informed decisions about the children they are hoping to adopt.”

Just before Shaun shuts the door to drive to school, he pauses. Sometimes wise beyond his years, he turns and says, “Mom, adoption is so wonderful because your birth parents gave you up so you could have a better life. Love you!” And just like that, the anxiety, and struggle during the adoption process go back to their place of being a very distant memory. #WorthIt.

More about National Adoption Day

National Adoption Day has been celebrated across the United States since 1999, helping to raise the awareness of the more than 100,000 children who are in foster care each year in the U.S. waiting for permanent families. For more information, see www.nationaladoptionday.org. And when you are going through your adoption journey, and have questions about exposures during pregnancy, contact an expert at MotherToBaby. You can reach us by phone at 866-626-6847 or by text at 855-999-3525.

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Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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Adoption: Sharing the Journey

Spring break is often associated with young college students flocking to the beaches to take a break from their studies. However, it is now embraced by a diverse crowd, including families with pregnant and breastfeeding women. Spring break typically takes place between March and April each year, leading to masses of people traveling by planes, trains, and automobiles. Fun times are possible for everyone, and we have guidance to increase the chances that your travels and experiences will be comfortable and safe for you and your baby.

Check-In with Your Doctor

For most pregnant women, traveling by airline, train, car, or bus is generally safe until close to their due date. Regardless of your trimester, a quick check-in with your doctor is essential to ensure you are cleared to travel.

- **First Trimester**: If you are experiencing pregnancy-related nausea, prepare ahead with needed medications and a plan to stay hydrated.
- **Second Trimester**: If you are healthy, this is a great time to travel.
- **Third Trimester**: You should be fine to travel, but keep in mind that if you go into early labor, you don't want to be far from high-quality obstetrical care. Check for hospital locations at your destination.

Check for Infectious Disease Warnings

If you are traveling outside of the U.S., check for disease warnings or recommended vaccines for your destination on the CDC Travelers' Health page. Additionally, if your destination has mosquitoes, use insect repellants to reduce the

risk of exposure to infectious diseases.

Sun Exposure and Heat

Prolonged sun exposure can lead to overheating and dehydration, and in severe cases, heat stroke. High fever is a potential concern for pregnant individuals in any trimester. Prevention is key:

- Keep hydrated.
- Protect against direct sun for prolonged periods (sit under an umbrella or go indoors).
- Use sunscreen.
- Drink plenty of water.
- Avoid alcohol and limit caffeine, as they can increase dehydration.

Sunscreen

Everyone, including pregnant and breastfeeding women, should use sunscreen year-round. While there is some evidence that chemical sunscreens can penetrate the body in very small amounts, the American College of Obstetricians and Gynecologists (ACOG) recommends the use of effective sunscreen. For breastfeeding women, remember that sun exposure does not provide enough vitamin D for your baby; the American Academy of Pediatrics recommends 400 IU of vitamin D daily for breastfed babies.

Dietary Concerns

One of the highlights of travel is enjoying local food. For pregnant women, the risks from food-borne illnesses remain the same whether at home or on vacation. Avoid unpasteurized milk products, undercooked meats, and fish from risky categories.

Alcohol

Alcoholic beverages may be a destination goal for many, but pregnant and breastfeeding women are urged to continue following the warnings:

- **Pregnant Women**: It is crucial to avoid alcohol, as there is no known safe amount to drink. The risks to the developing baby are significant and can be devastating. Increasingly, restaurants are creating delicious and inviting mocktails (non-alcohol) and other beverages, offering an alternative that does not single out a person from the crowd.
- **Breastfeeding Women**: Limiting alcohol is beneficial as it can decrease the amount of breastmilk produced. It is recommended to breastfeed after two hours per drink to reduce the risk of exposure to the baby and developing brain.

Following these recommendations and reminders can help prevent exposures and experiences that could later cause grief and anxiety. Prepare well and enjoy your holiday! Ideally, a well-planned spring break will lift your spirits, provide a mental health break, allow you to enjoy new or favored foods, and create new and wonderful memories.

References and Additional Information:

CDC:

https://wwwnc.cdc.gov/travel/page/sun-exposure

https://www.cdc.gov/niosh/heat-stress/about/illnesses.html

https://wwwnc.cdc.gov/travel/page/sun-exposure

https://www.cdc.gov/breastfeeding-special-circumstances/hcp/diet-micronutrients/vitamin-d.html

https://wwwnc.cdc.gov/travel

ACOG

https://www.acog.org/womens-health/faqs/travel-during-pregnancy

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Adoption: Sharing the Journey

Emily called MotherToBaby and confided, “My husband and I are thinking about getting pregnant…I am so excited but scared, too. I am wondering what I can do to make it more likely we will have a healthy pregnancy and baby.”

I assured Emily that we ***love*** it when people call ahead of their pregnancy and ask these questions. Preconception health is a topic that does not receive as much attention as it deserves, and it is important for both Emily and her husband. Good preconception health care can impact fertility and make it easier to conceive, and also helps to improve pregnancy outcomes and the health of the baby.

Here is a preconception prep guide– because if you are ready to have a baby, you want to take steps now to keep you and your baby as healthy as possible:

- **Make a pre-conception checkup appointment:** Begin by making an appointment about three months in advance with your obstetrical care provider. At that appointment you can confirm you are in good health. If you have any chronic conditions such as high blood pressure, thyroid disease, depression or diabetes you and your provider can make sure the condition is being managed effectively and confirm that any prescription or over-the-counter medications you are taking can be continued in the pregnancy. If you have a question about medications during pregnancy, MotherToBaby can help by providing you with information to bring to your appointment.

- **Begin taking a prenatal vitamin:** If you are not already taking a vitamin with folic acid this is a great time to start. The Centers for Disease Control and Prevention (CDC) recommend that all women who can become pregnant take a vitamin containing 400 micrograms of folic acid; this helps reduce the chances for certain birth defects such as spina bifida (when the spinal cord does not form properly).

- **Review your vaccine status**: During your preconception checkup, make sure that you are up to date on vaccinations such as the MMR (measles, mumps, rubella), Tdap (tetanus, diphtheria, whooping cough), influenza, and COVID. Planning ahead makes it more likely you will not get ill during pregnancy and helps protect the baby from getting infections from parents after birth.

- **Get your body fit for pregnancy:** Get regular exercise and consider whether you and your partner are at your preferred weight. If not, make plans to remedy that prior to attempting to get pregnant. You can also learn more about a healthy diet and nutrition. This is something that may improve fertility in both parents and lay the groundwork for a healthy pregnancy.

- **Eliminate harmful exposures:** It goes without saying that this is a great time to make lifestyle changes such as reducing use of alcohol, tobacco, and recreational drugs. Addressing stress and mental health concerns up front can improve fertility, make the whole pregnancy experience better, and prepare you for the excitement and hard work of parenthood.

- **Evaluate your home and work environment:** If you and your partner are exposed to toxic substances like lead in your work or home environment, working to reduce those exposures is very effective when done ahead of the pregnancy.

MotherToBaby has many resources for Emily and her husband – and you! We have fact sheets on medications, herbal agents and supplements, diabetes and other health conditions, illnesses and vaccinations, occupations such as veterinarian and dental, exercise, paternal exposures, and cosmetics (sunscreen, skin creams, nail polish, hair dye). There are also useful blogs and podcasts, and whole web pages on various conditions, and if you have questions, our information specialists are here to help.

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Adoption: Sharing the Journey

Holiday festivities sometimes include eating foods and drinks that might not be part of our everyday diet. During pregnancy and breastfeeding, we need to give a little more thought to what we should eat and drink. “Is it ok for the baby?” often goes through our minds during these times. As a teratogen information specialist at MotherToBaby who answers a lot of the questions we get via our texting service (855-999-3525), these types of questions ramp up during this time of year! So, here’s some insight…

Popular Holiday Food & Drinks

Eggnog & Other Holiday Beverages

Eggnog seems to be a part of many holiday parties. Always be sure to check if the eggnog is homemade or not. Does it contain raw eggs, which can carry bacteria such as salmonella? If the eggnog was commercially made and packaged, then usually the eggs have been pasteurized, and the product may even have been heated prior to packaging. Also, always remember to check if the eggnog contains a little “holiday cheer” (i.e., alcohol) or not. It is common to add rum to eggnog, and we want to avoid alcohol when pregnant or breastfeeding (see our Alcohol Fact Sheet for more info). Other common holiday beverages include mulled wine, wassail, hot buttered rum, and of course wine and champagne. All of these contain alcohol as well, so it is best to avoid them and just stick with mocktails and non-alcoholic punch.

Smoked Salmon & Fruit

“Smoked salmon tastes wonderful on crackers with cream cheese! But is it ok during pregnancy?” one woman texted me. Here’s what I told her. Smoked salmon is still considered raw fish as it is cured rather than cooked, so should be avoided during pregnancy due to the risk of foodborne illnesses. If the salmon has been heated to steaming, any concern for bacteria has been reduced. See our Fact Sheet on Eating Raw, Undercooked, or Cold Meats and Seafood for more info. Sometimes you will find foods that contain meats that have been dried, such as beef jerky. Although beef jerky is high in salt, there are not any other known risks to eating this tasty food during pregnancy.

“What about a fruit plate containing papaya and pineapple? Are there some worries about eating those fruits during pregnancy?” another texter wrote. Both fruits do contain enzymes that have been thought to induce labor. Papaya contains papain, while pineapple contains bromelain. Yet when eaten at normal levels (not daily!), these delicious

fruits have not been shown to have any negative effect on a pregnancy. Of course, we hope the fruit has been well-washed before cutting and serving!

Eggplant Parmesan

"When the main dish is served, can we enjoy the amazing eggplant parmesan? Or what about eggplant ratatouille?" Eggplant is low in calories and high in fiber. Do avoid eating it raw, but cooked eggplant can be an occasional part of your diet. The concern is that eggplant is part of the Nightshade family and contains alkaloids in the leaves and tubers that can be toxic. But eating the fruit alone has not been shown to have any risks during pregnancy, especially when cooked.

Tiramisu

"Will rounding out our holiday meal with a delicious dessert such as tiramisu need to wait until after pregnancy and breastfeeding?" Traditional tiramisu contains two forms of alcohol, both Marsala wine and rum. Plus, liberal amounts of caffeine in the form of coffee and espresso. We have already mentioned that alcohol should be avoided if pregnant or breastfeeding, but what about the caffeine? Low to moderate levels of caffeine use (200 to 300 mg per day) has not been shown to increase any risks during pregnancy. See our Caffeine Fact Sheet for more info.

Who knew that holiday menus could need extra thought and consideration during pregnancy and breastfeeding?! Plus, with the added stress of COVID-19 this year, and the warnings to avoid large gatherings, you may have even more questions now than ever. Hopefully, this information will equip you to sit back, relax, and enjoy the festivities!

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Tanya called in on a Monday morning. “I’m getting married in a few months and we want to start trying to get pregnant right away. What should I be doing now to have the best chance of a healthy baby?”

Preconception health and pregnancy planning present a terrific opportunity to assess a wide range of factors that can give your baby the best start. This blog will outline the things to consider, as I relayed to Tanya:

Your Personal Health

Are you generally healthy? If you already get headaches or have acid reflux, know that pregnancy can make these more frequent. Ask your doctor if the way you treat these common conditions should change once you are pregnant. Ask about your current exercise routine and if you need to alter it during pregnancy. Get checked for sexually transmitted infections because some may not show symptoms. Also discuss your medications – some should be stopped before you start trying to conceive, such as Valproic acid, leflunomide (e.g. Arava®), teriflunomide (Aubagio®), methotrexate, and isotretinoin (e.g. Accutane®) to name just a few. For others, you’ll want to weigh the risks vs. the benefits with your health provider before you conceive. Talk with your doctors now to make a plan.

Caffeine

Do you drink caffeinated coffee, tea, or soda? What about energy drinks, protein powders, or Kombucha? MotherToBaby’s fact sheet on caffeine may put your mind at ease and encourage you to think about all your beverage options.

Body Weight

Is your weight a concern? One of the best things you can do before conception is to get to a healthy weight. Women who are overweight or obese have increased risks for miscarriage, birth defects, gestational diabetes, high blood pressure and preeclampsia, and unplanned cesarean birth. Now is a good time to meet with a nutritionist or go on a sensible diet to get to a healthy weight in anticipation of pregnancy. Once you are pregnant, continue to watch what you eat but don’t try to lose weight. Weight gain is inevitable during pregnancy but guidelines from the American College of Obstetricians and Gynecologists (or ACOG, the leading professional society for OB/GYNs) advise women to gain anywhere from 11-40 pounds, depending on your pre-pregnancy weight. It’s a myth that you need to “eat for two,” so don’t set yourself up for postpartum weight gain by eating more than you should. After delivery of an average 7-8 lb. baby, you may lose 2 lbs. in amniotic fluid, 1.5 lbs. of placenta, 5-7 lbs. in blood volume, and 2 lbs. as the uterus returns to its normal size. That could still leave you with 10 pounds of excess weight, or more if you gained more weight during the pregnancy. Some women never take off those extra pounds, and their weight creeps up with successive pregnancies and age, which can lead to pregnancy complications and chronic health problems later on. See our exercise fact sheet for more information.

Chronic Health Conditions

Do you have chronic health conditions like diabetes, high blood pressure, migraines, asthma, high cholesterol, heart conditions, varicose veins, or anemia? Do you have an autoimmune disease like Crohn's or ulcerative colitis, lupus, rheumatoid arthritis, ankylosing spondylitis, multiple sclerosis, psoriasis or psoriatic arthritis? Meet with your obstetrician for a "preconception" appointment to discuss how a pregnancy might impact your health, and how your health might affect a future pregnancy. Your specialist can provide an important opinion too. A maternal-fetal medicine specialist (MFM) is a doctor who specializes in high-risk pregnancies, and consulting with a MFM once you are pregnant could help you learn how to optimize your and your baby's health.

Mental Health

What about your mental health? If you have a history of anxiety or depression, ADHD or other conditions, ask your psychiatrist and OB about treatment, and don't make changes before you do. Many medications can be continued during pregnancy and while breastfeeding. In fact, mental health is incredibly important – for example, when a woman doesn't treat her mood disorder or inadequately treats it, some studies suggest risks for miscarriage, premature birth, low birth weight, and preeclampsia. Talk therapy is vitally important too. And if you struggle with mental health concerns during the pregnancy, you are at risk for postpartum depression. Let's face it – pregnancy and caring for a new baby is stressful, so now is the time to marshal your helpers – friends, relatives, therapists and doctors – to ensure you have enough support. Your obstetrician should ask about mental health but if not, speak up. Your doctor can be your ally here, helping you get treatment and addressing concerns related to pregnancy and postpartum mental health. And MotherToBaby can give you an overview of the research related to any prescriptions you might choose to take.

Dental Health

Have you seen a dentist lately? Oral health can impact a pregnancy, meaning that if you have swollen or bleeding gums, a toothache or an infection, it can increase risks to the pregnancy. If you need to have a dental x-ray, take antibiotics, or have local anesthesia for a dental procedure, these are generally acceptable during pregnancy, but best to complete before you get pregnant. Contact MotherToBaby for more details.

Your Workplace

Where do you work? MotherToBaby can give you information to minimize exposures in a veterinarian office, dry cleaners, salon, laboratory/hospital, imaging center, pest control service, or other business. Your occupational safety department can recommend personal protective equipment (PPE) and tell you about ventilation that may be in place to ensure workplace safety. Safety data sheets (SDS) give an overview of chemicals used in industry and are available online or at work.

Food Safety

Read up on food safety and learn how to minimize your exposure to foods that have commonly been associated with foodborne illness such as E. coli or listeria. Get in the habit of washing your fresh fruits and vegetables well. Check out other blogs on our website too.

Vitamins and Supplements

Have you started taking a prenatal vitamin? Are you getting enough folic acid? ACOG recommends that women take at least 400 mcg of folic acid before getting pregnant and at least 600-800 mcg/day once they are pregnant. This can help prevent birth defects of the brain and spinal cord. Call MotherToBaby if you want to learn the recommended daily intake for specific vitamins or minerals. In general, taking more than what is recommended is not advisable – we haven't studied how mega-doses of vitamins may impact a pregnancy. Other supplements beyond taking a prenatal vitamin are not advisable either – the Food & Drug Administration (FDA) doesn't supervise their manufacturing plants and past surveys have shown some supplements actually contain contaminants. Furthermore, we've seen instances where the label didn't match the contents of the bottle and could cause ill effects. Pregnant and breastfeeding women should avoid herbal supplements unless specifically recommended by your doctor.

Alcohol, Cannabis, and Tobacco

Do you smoke cigarettes? Do you use cannabis for medicinal or recreational purposes? Do you drink alcohol? Recent research has demonstrated that marijuana use very early in pregnancy causes changes in brain development, which could result in behavioral or learning challenges we see later in the child's life. Cigarettes increase risks for pregnancy loss, among other things. And alcohol is known to cause a variety of birth defects known as fetal alcohol spectrum disorder (FASD). We don't believe that there is a "safe" amount of alcohol which when consumed doesn't cause issues for a developing child. Now is the time to quit smoking, drinking, and using cannabis – your baby will be heathier for it. MotherToBaby can provide resources, or check with your doctor.

Vaccinations

Are you up to date on all your vaccines? Did you get a flu shot this past season? You don't want a vaccine-preventable illness to have an impact on your pregnancy. Flu infection can increase risks for more severe symptoms, longer-lasting illness, pregnancy loss and premature delivery, which can have a lifelong impact on your baby. Flu vaccine helps prevent infection. Another benefit to vaccinating during pregnancy? Studies show the protection extends to your baby, and gives them a little extra immunity from birth until they can receive vaccines. Also good to know: some vaccines can be given and are recommended during pregnancy, like a flu shot or TDAP, but others are best given before you conceive to avoid a small risk of spreading the illness to the fetus (e.g. the measles, mumps, and rubella (MMR) vaccine, as well as the Varicella (chicken pox) vaccine) – so try to get these done at least a month before trying to conceive. Check your medical records to see the last time you received any of these vaccinations. If you don't know if you were previously vaccinated, your doctor can draw blood to check if you have immunity.

Your Pets

Do you have a cat? There is some concern in pregnancy about an infection called toxoplasmosis, which is caused by a parasite that can be found in cat feces. Read our blog for more info on what you can do to prevent this infection if you have a fur baby at home.

Other Illnesses

Do your upcoming travel plans involve travel to a warm tropical place? Check out our Zika fact sheet to learn more before you book nonrefundable tickets. In general, women will want to wait to try to conceive for eight weeks from the time of your return home; the wait time is three months if your male partner travels with you. COVID-19 is also spreading around the globe and our fact sheet can give you the latest information on whether and how it could affect a pregnancy.

Finally, your obstetrician or primary care doctor would be glad to see you for a Preconception consultation. Make an appointment to discuss your personal history and health. It's a great way to get you and your baby off to the best start.

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