Intense Exercise During Pregnancy: How Much Is Too Much?

If you are an athlete or have an active lifestyle, you may have wondered: 'Should my exercise routine change during pregnancy and breastfeeding?' As a former division 1 athlete, I sure have. You may have seen the news about athletes who compete at the highest level during or shortly after pregnancy. Serena Williams won the Australian Open while 8 weeks pregnant. Alysia Montano ran the 800-meter race at a national meet in her third trimester. Allyson Felix won a gold medal at the World Championship in track only 10 months after delivering her baby. At the same time, you may hear concerns about intense physical activity during pregnancy. So, what is the recommendation for pregnant women who have an active lifestyle?

Benefits of Exercise

Most healthcare providers recommend exercise during pregnancy as part of a healthy lifestyle. Women who are active before pregnancy can usually continue these activities during and after pregnancy. Since everyone is different with different medical histories, ALWAYS have a discussion with your healthcare providers about what exercise is best for you.

In general, exercising during pregnancy might lower the chances of preterm delivery (birth before week 37) and low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth). It might also help to lower the chance of diabetes and high blood pressure.

In addition, physical activity might help with the muscle aches of pregnancy as well as postpartum depression. Exercising in general has not been known to increase the chances of miscarriage, birth defects, or other pregnancy-related problems.

Studies looking at exercise during pregnancy have not looked at intense exercise specifically.

Level of Activity

Some changes to your routine may be needed because of normal changes in your body during pregnancy. Talk with your healthcare provider about your exercise routine. This is even more important for women who have pre-existing health conditions.

It is important to listen to your body during pregnancy. Every woman and every pregnancy is different. Your body goes through many changes during pregnancy:

- Blood volume increases

- Heart pumps harder
- Heart rate increases
- Fitness level decreases

Many women experience nausea and fatigue throughout their pregnancy making exercise more difficult and harder to maintain proper nutrition and hydration. Listen to your body, do not push it past its limits.

It is difficult to compare vigorous exercise between people. Jogging 10 miles may seem like a piece of cake for a marathon runner while it can be difficult for an Olympic lifter. For this reason, vigorous activity is most frequently defined as up to 85% of capacity. While maximum effort is difficult to measure, capacity is often described in terms of heart rate.

Another way to check your intensity level is the "talk test." If you are breathing hard but can still have a conversation easily—but you cannot sing, that is moderate intensity. An activity would be considered vigorous if you can only say a few words before pausing for a breath.

If you were in the habit of doing vigorous exercise before your pregnancy, it can be continued for most healthy women during pregnancy according to experts. However, there is limited information on individuals who exceed the accepted 85% capacity. An upper level of 'safe' exercise intensity has not been established.

In general, ACOG recommends aiming for at least 150 minutes (2 hours and 30 minutes) of moderate intensity aerobic activity spread out over a week. For most people, keeping your heart rate at or below 140 beats per minute is considered moderate intensity.

What to Consider When Exercising

Below is some general information to consider and discuss with your healthcare provider. Remember, everybody is different. Always discuss your specific exercise program with your healthcare providers, who know your specific medical history and how your pregnancy is progressing.

- Stick with what your body is used to. If you are used to long-distance running, pregnancy is not the time to turn into a power lifter.
- Stay hydrated. Drink plenty of fluids before, during and after exercising.
- Avoid overheating. Even if you are used to exercising in 90-degree heat, you may have to look for an alternative method such as air-conditioned gyms. Do not use steam rooms, hot tubs, or saunas.

- Avoid exercises lying flat on your back in the second and third trimester of pregnancy. This allows less blood flow to your womb.
- Do not engage in sports where you can fall, get injured, or get hit in the abdomen.
- Reduce weight load. Holding your breath during heavy lifts can result in baby's heart rate slowing down. Because of this, you may have to reduce the weight.
- Allow enough time for your body to recover after each training session.
- Make sure you get enough calories. If you regularly participate in intense exercise, you might have to adjust your nutrition.
- Continue to fuel your body. Long, intense exercise can result in low blood sugar. Make sure you continue to fuel your body if you plan on exercising for over 45 minutes.
- Check with your healthcare provider before continuing or starting any supplements.
- Stop exercising if you:
    - Feel dizzy
    - Have a headache
    - Develop chest pain or swelling
    - Have muscle cramps
    - Experience vaginal bleeding
    - Have leakage of fluid
    - Feel contractions
    - Have shortness of breath before exertion.
- Call your healthcare provider with any concerns.

Postpartum and Breastfeeding

Make sure you talk with your healthcare provider about when to start exercising after birth. Exercise can be resumed slowly after delivery as soon as it is medically safe. When exercise can be resumed varies among women, with some being able to start exercising within days after delivery. This may depend on if delivery was a c-section vs. vaginal birth and any additional health problems or complications.

Healthcare providers will tell you it is important to remain hydrated while breastfeeding, especially when exercising. The amount of nutrition you need may also change depending on the level of your activity during breastfeeding.

At the end of the day, all athletes have different needs during pregnancy and after the baby is born. There is no 'one-size-fits-all' for exercising during pregnancy. The best thing you can do is talk with your healthcare provider and listen to your body. For more information, see our MotherToBaby fact sheet on exercising here. You can also find more information on exercise during pregnancy here.

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Intense Exercise During Pregnancy: How

Much Is Too Much?

"I just found out I'm pregnant. Can I keep drinking my energy shake in the mornings?"
"My doctor gave me the go-ahead to work out. Okay to have a protein shake after the gym?"
"My immunity-boosting drink is a life-saver. Can I keep using it while I'm pregnant?"

These are common questions during pregnancy, and ones that we hear a lot at MotherToBaby. Perhaps you've wondered the same thing yourself. As teratogen information specialists, we provide facts about how a woman's exposure in pregnancy might affect her developing baby. So, when we get questions about shakes, powders and other nutritional supplements in pregnancy, we look to the research. And that research, or lack of it, leads us to caution women against drinking that favorite nutritional shake while they're pregnant. Here's why:

Lack of FDA approval
Nutritional shakes and powders fall under the category of "supplements." Supplements aren't approved by the U.S. Food and Drug Administration (FDA) in the way that food and medicines are. The FDA does set out safety requirements for supplements, but the manufacturers are responsible for ensuring that their own products meet those requirements (kind of like a home builder inspecting their own house.) This means that shake makers and other manufacturers can put their products on the market without proving their safety, or even showing that the products actually do what they claim they will. Once a supplement is on the market, the FDA relies mostly on consumers' reports to alert them of side effects or other problems that could lead to warnings or recalls.

This is not to say that all supplement makers are unscrupulous or careless. Many manufacturers go above and beyond the FDA requirements for safety, and stand behind the purity and efficacy of their products. But the lack of oversight has allowed supplements to wind up on shelves despite being contaminated with bacteria, pesticides or heavy metals (such as lead), or having mislabeled ingredients or amounts of those ingredients. These inconsistencies can be dangerous, especially for people who take medications that might interact with unknown ingredients, or for pregnant women who need to avoid potentially harmful additives that can affect the baby.

Lack of studies in pregnancy
Nutritional shakes often contain vitamins, herbs, plant derivatives and other goodies intended to boost energy, strengthen immunity or have other positive health effects. But these additives are often listed on the label as "herbal blends" or "proprietary blends," meaning that the individual ingredients are not revealed. And even if they are listed individually, some of those ingredients may have been studied in pregnancy, while others have not. The lack of studies means we don't know if they might have harmful effects on a developing baby or otherwise increase risks in pregnancy.

For example, some ingredients may be "generally recognized as safe (GRAS)" when eaten in the amounts usually found in food, but they could increase the risk of miscarriage when used at high concentrations in pregnancy. The concentration of a plant-derived ingredient can vary from batch to batch, depending on the growing and harvesting conditions of the plant. So in the end, you can't be sure what you and your developing baby are getting with that shake.

Nutritional needs in pregnancy
A varied, healthy diet along with a daily prenatal vitamin recommended by your healthcare provider should give you all the vitamins, minerals and other nutrients that you and your growing baby need during pregnancy. Adding the extra vitamins found in that shake to your diet might result in exceeding the daily recommended amounts for pregnancy. On the flip side, if you are using a nutritional shake as a meal substitute, you might be missing essential nutrients that you and your baby should be getting from food. Always talk to your healthcare provider about the best way to meet your specific nutritional needs during pregnancy.

So, what to do about that container of protein powder sitting in your pantry or those bottles of energy shake taking up space in the fridge? Our advice? Find a new home for them until after you've delivered and are no longer breastfeeding. After all, you want to give your pregnancy a "fair shake," right?

References:
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Intense Exercise During Pregnancy: How Much Is Too Much?

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.

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

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Intense Exercise During Pregnancy: How Much Is Too Much?

As the coronavirus that causes COVID-19 continues to spread, pregnant and breastfeeding women are understandably concerned. Many of your recent calls, chats, texts, and emails to MotherToBaby have been about the virus itself and how it might affect a developing baby or breastfed infant (more about that on our COVID-19 fact sheet). But we're also hearing related concerns about how to stay safe and healthy while pregnant or breastfeeding during the pandemic. Here, we answer some of the most common questions we're getting during this uncertain time:

FAQs

Can I use supplements to boost my immunity?

We're receiving even more inquiries than usual about using supplements such as elderberry, zinc, and vitamin C to "boost immunity." Unfortunately, there is no good data to suggest that these supplements have a protective effect against coronavirus. Additionally, the use of supplements in pregnancy and lactation comes with potential concerns.

The first concern is the lack of regulation. Dietary supplements do not require the same oversight by the Food and Drug Administration (FDA) as medications do, which means that supplement manufacturers do not have to prove the safety and effectiveness of their products before they hit the shelves. Supplements may be contaminated with other ingredients (such as prescription medications or lead), and differences may be found between the amount or ingredient listed on the label and what is actually in the product.

The second concern about supplements is that usually they are not well studied for use in pregnancy and lactation. Without good research, we just don't know how something like elderberry might affect a developing baby or breastfed infant. Mega-doses of any vitamin (like the 1000 mg of vitamin C commonly found in some supplements) are of

particular concern as they are much higher than what is recommended for pregnant or breastfeeding women in a single day. Generally speaking, if you are eating a healthy diet and taking a prenatal vitamin, you are probably covering all your vitamin and mineral needs. Taking additional supplements might present increased risks to your pregnancy or your breastfed baby, with no clear evidence that they would effectively boost your immunity. You can read more on our Herbal Products Fact Sheet.

Are cleaning products safe for me and my baby?

The Centers for Disease Control and Prevention (CDC) recommend cleaning and disinfecting high-touch surfaces as one way to help prevent exposure to the virus. This means wiping down doorknobs, light switches, desks, faucets, electronics, and more… but does all this exposure to cleaning products increase risks to a pregnancy or a breastfed baby?

Our previous Baby Blog on household cleaners explains that when you use cleaning products as directed, the actual exposure to your developing baby or breastfed infant is likely to be quite low. Even if you can smell the fumes, brief inhalation while cleaning generally won't allow for much absorption of these kinds of compounds into your blood. Likewise, your skin is a surprisingly good barrier that prevents significant absorption of cleaning products through the skin. Any chemicals that might get into your blood through inhalation or skin contact typically won't reach the developing baby or get into your breastmilk in any meaningful quantity. Working in a ventilated area and wearing gloves when using cleaning products can further reduce your exposure, and help prevent respiratory and skin irritation. And of course, wash your hands after cleaning.

Should I still go to my prenatal appointments?

You've read you should stay home as much as possible since this virus can spread easily from person to person. This is true, but your prenatal appointments are still important! These visits are vital opportunities for your provider to assess the health of your pregnancy and identify any issues that might affect you or your developing baby. Some healthcare providers are offering ***some*** appointments virtually (over the internet) or spreading out the time between appointments a bit longer than normal. But sometimes you will have be seen in person, especially for screenings, labs, and vaccines, such as the flu shot and Tdap vaccine that help protect both mom and baby against serious illness.

If you haven't already, talk to your pregnancy care provider about any changes to your upcoming appointments. For virtual visits, ask what technology (phone, laptop, etc.) you will need to connect with your provider, and write down a list of questions so you don't forget to ask anything. Just like a regular appointment, it can be helpful to have someone "come along" virtually to help make sure all your concerns are addressed. For in-person visits, your provider may ask that you come alone (no partner, no kids). While there, try to stay at least 6 feet away from other patients in the waiting room, wear a cloth face cover, and don't forget to wash your hands! For more prevention tips, check out guidance from the CDC here.

Why have they delayed my fertility procedure?

Many kinds of medical procedures are being put on hold as a way to help prevent the spread of coronavirus and reserve essential medical supplies for critical medical care. For this reason, the American Society for Reproductive Medicine has made the difficult decision to suspend initiation of new treatment cycles (intrauterine insemination or IUI

and in vitro fertilization or IVF) for the time being. We completely empathize with anyone who gets this news. When you've been trying to get pregnant and each passing month feels like another missed opportunity, a setback like this is the last thing you want. During this difficult but necessary delay, make sure to continue practicing healthy habits like staying active, avoiding alcohol, and taking a prenatal vitamin with at least 400 mcg of folic acid every day. That way, you'll be ready to go once you get the green light that IUI and IVF treatments are back on.

I still have to go to work every day. What can I do to avoid getting COVID-19?

If you aren't able to work from home, you might be worried that going in to work could increase your chance of contact with the virus. How true this is might depend on your job situation. If you have contact with the public at work and you are pregnant or breastfeeding, you could talk to your employer about being temporarily reassigned to another role that limits your contact with other people. However, not every workplace will be able to accommodate this request. CDC workplace recommendations for everyone include strategies such as not shaking hands, wiping down frequently-touched surfaces, limiting in-person meetings, maintaining at least 6 feet of distance between you and people with whom you need to interact, not sharing food, and of course, staying home if you are sick. In addition, CDC guidelines recommend wearing a cloth face covering when you may be near other people to help reduce the spread of the virus.

If you are a pregnant healthcare worker, be sure your employer knows you are pregnant before you provide any direct patient care to a person with confirmed or suspected COVID-19. When possible, and depending on staffing needs, management should consider limiting your exposure to these patients. This is especially true if you perform procedures with a higher chance of coming into contact with a patient's respiratory droplets (such as intubation). If you do provide care to a patient with confirmed or suspected COVID-19, be sure to follow the Infection Control guidelines for all healthcare personnel. Our fact sheet on Reproductive Hazards of the Workplace can answer additional questions about staying safe at work during pregnancy and while breastfeeding.

I'm stressed! Can this affect my pregnancy?

With the constant news stream about the pandemic, it can be tough not to feel anxious or depressed during this time. Plus, social distancing means that many women are separated from their support network of friends and family members. Add in trying to work from home with a partner and/or kids, and it's easy to see why many women are feeling stressed out! We discussed mental health and COVID-19 at length in our recent podcast episode, which you can listen to here.

One big takeaway from the podcast? Some studies suggest that ongoing stress and uncontrolled depression or anxiety during pregnancy can increase the chance of outcomes such as preterm birth and low birth weight. So, if you feel like your mental health is suffering because of this pandemic, we encourage you to reach out to your healthcare provider (maybe virtually!) to figure out the best approach for treatment. Some women can benefit from making simple changes in their daily habits (like watching less news and getting more fresh air), while others might need to use a medication to help manage their symptoms. If that's the case, MotherToBaby can share with you what is known about your particular antidepressant or anti-anxiety medication in pregnancy and/or lactation.

Whatever your concerns about COVID-19 or other exposures might be, please know that MotherToBaby is here for you with evidence-based answers. Please reach out to us with your questions. We're all in this together.

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