

The Centre for Reproductive Medicine
PO Box 20559
Nimbin NSW 2480
Australia

Maxwell Brinsmead MB BS PhD MRCOG FRANZCOG
Retired Obstetrician & Gynaecologist

Phone +61 409 870 346
E-mail max@brinsmead.net.au
Website www.brinsmead.net.au

Emotions and Pregnancy

Although each pregnancy is unique, certain changes are common to all normal pregnancies. A basic understanding of physical and emotional changes of pregnancy helps a woman and her partner to understand some inevitable changes and have a positive experience.

First 3 months

During the first trimester evidence of pregnancy is limited to missing a period and learning that the pregnancy test is positive. Some physical changes are apparent, such as nausea, vomiting and breast tenderness. These symptoms are common and vary in intensity.

Fatigue is very common and does not represent any state of impaired health, vitamins, minerals or nutritional deficiency. It represents, in fact, a normal response to the increased concentrations of the pregnancy hormone called progesterone. Some impairment of mental functioning may also occur. Others respond by becoming calm and placid. This is Nature's way of slowing down the body and turning some of its energies into the growth of the pregnancy and baby. Take advantage of these feelings and make time for some extra bedtime in your life!

Emotions are often unstable and feelings of depression are not uncommon, often for no apparent reason. A woman's emotions are characterized by mood swings, which can range from great joy to deep despair. Frequently a woman will become tearful with little cause. When asked why she is crying, she may find it difficult or impossible to give a reason.

This situation is very unsettling for the husband or partner, causing him to feel confused and inadequate. Because the partner may feel unable to handle the woman's tears, he often reacts by withdrawing and ignoring the problem. Since the pregnant woman needs increased love and affection she may perceive her partner as unloving and nonsupportive. Once the couple understands that this behaviour is normal in pregnancy it becomes easier for them to deal with although it will be a source of stress to some extent throughout the pregnancy.

Initially, even if the pregnancy is planned, there is an element of surprise that conception has occurred. The woman may experience some uncertainty about the pregnancy. Feelings that timing is wrong, that career or long-term goals may need to be delayed and/or financial stresses are common. Uncertain feelings may also be related to excitement about assuming the new role of mother, fears about carrying the pregnancy as well as labour and delivery. The pregnancy may not seem real until about the 12th week when the baby's heartbeat can be heard with a Doppler.

Second 3 months

The second trimester is somewhat tranquil. Morning sickness generally passes. The threat of miscarriage lessens. The highlight of the second trimester is feeling the baby move, called quickening, which generally occurs during the 4th or 5th month of pregnancy. Perception of fetal movement often leads to dramatic changes in a woman. She now perceives the baby



as a real person and becomes excited about the pregnancy even if she was not prior to this time. Emotional instability however, can still occur and a few unlucky women are sick throughout pregnancy.

Women sometimes have more energy and feel better during the second trimester, commonly known as the "glow of pregnancy". Many women begin wearing maternity clothes during this time. She may ask her friends and family about pregnancy, childbirth and may attend childbirth preparation classes.

Third 3 months

The third trimester combines a sense of pride with anxiety about what is to come in order for the baby to be born. As her protruding abdomen proclaims her advanced pregnancy the woman may find that people become more attentive and feel compelled to comment about the obvious. Often this takes the form of observation about the size and its appropriateness for the stage of pregnancy. This may lead to anxiety about being "too small" or "too big". The standard answer to these comments should be: "Well, my doctor says you can't tell by looking and that's why he/she measures!"

During the final weeks of pregnancy a woman's anxieties and fears may increase along with physical discomfort. She may experience sleeplessness because she is not able to find a comfortable position. Periodic contractions may cause discomfort as well as the position of the baby inside the uterus. The woman may feel very vulnerable to rejection, loss or insult at this time. She may feel unattractive and undesirable to her partner. Many of the nurturing and sexual needs of the pregnant woman can be satisfied by cuddling, kissing and being held by her partner.

A woman is eager for the discomforts of pregnancy to end, but also is concerned about the reality of becoming a mother and the changes in marital and family relationships, especially how a baby may affect other siblings. She may be concerned about the pain of labour, especially if she has had a previous unpleasant experience or has never experienced labour and has no idea what to expect.

Can't sleep?

When you lie down, babies finally have room to stretch and move around. These movements are fascinating, but can interrupt your sleep, especially if the baby has hiccups. Toward the end of pregnancy is when sleep problems are most common. Your body's metabolism increases, causing insomnia. Frequent trips to the bathroom, leg cramps and the normal anxieties about being a new mother can make for a tough night. There are no easy answers but remember, this is temporary:

- Gentle exercise may help relieve stress and improve sleep.
- Avoid eating large meals three hours before going to bed.
- Discuss your concerns with your partner or a close friend.
- Keep a journal of your thoughts.
- Read or engage in a quiet activity if you absolutely cannot sleep.
- Don't try and do as much during the day if you have had a bad night.
- Short daytime naps are okay, but long ones may interfere with your night's sleep.
- Gentle and caring sexual activity or massage may help.
- A warm soothing drink before bedtime and a gentle ritual of decreasing activities is recommended.
- Check with your doctor before using any prescribed or non prescribed medication or "natural remedies".

Above all don't stress about it! Just regard it as training for those hours and nights ahead when you will be required for nursing duty after the birth of the baby.

Revised MB June 2015

