

The use of multivitamin supplements containing more than 700 mcg of vitamin A is strongly discouraged, as this is associated with an increased risk of fetal malformations. If your diet is low in iodine-rich foods (such as fish, legumes, vegetables, and dairy products), you should take a daily supplement of 200 mcg of **potassium iodide**.

Qual o aumento de peso ideal na gravidez?

It is normal for women to gain weight during pregnancy, which is due to the growth of several components: baby, placenta, amniotic fluid, uterus, circulating blood, breast tissue, and fluid retention (oedema). The **ideal weight gain** depends on a woman's height and weight before pregnancy. These measurements are used to calculate the so-called **body mass index** (BMI). BMI is calculated by dividing weight (in kilograms) by height squared (in metres). International recommendations for weight gain in singleton pregnancies are displayed in Figure 1.

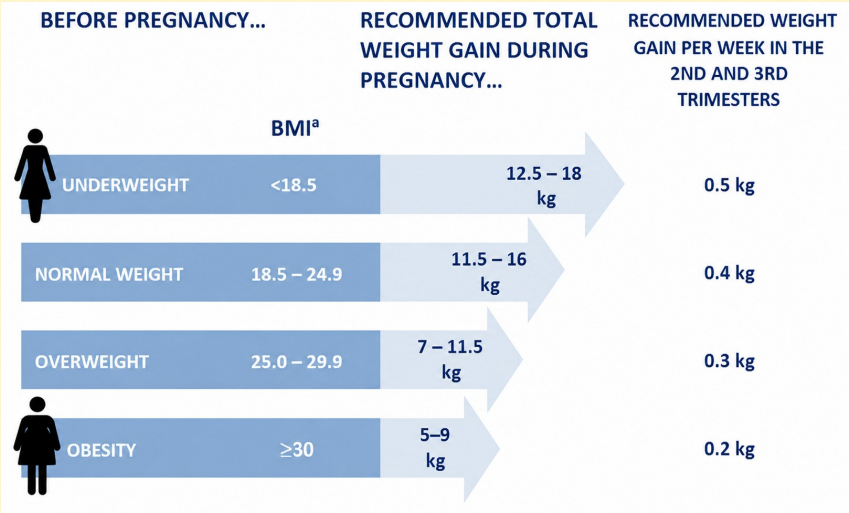


Figure 1— Recommended weight gain during pregnancy according to pre-pregnancy body mass index (BMI)

Inadequate weight gain during pregnancy, whether by default or excess, is associated with increased risks for both the mother and the baby. If you need help achieving the recommended weight gain, do not hesitate to ask your healthcare provider, who can provide guidance and, if necessary, request an appointment with a Nutritionist.

References:

1. World Health Organization. WHO recommendations on antenatal care for a positive pregnancy experience, Geneva 2016. http://www.who.int/reproductivehealth/publications/maternal_perinatal_health/anc-positive-pregnancy-experience/en/

2. Direção Geral de Saúde. Alimentação e nutrição na gravidez. Lisboa 2015. https://www.alimentacaosaudavel.dgs.pt/activeapp/wp-content/files_mf/1444899925Alimentacaoenutricaoonagravidez.pdf

3. Institute of Medicine. Weight gain during pregnancy: reexamining the guidelines. Washington, D.C: The National Academies Press; 2009



**NUTRITION IN
PREGNANCY**

During pregnancy, special attention should be paid to what you eat and drink. If you already have a healthy diet before becoming pregnant, you will probably not need to make major changes. However, some adjustments and precautions are important to meet the increased nutritional demands of pregnancy and to ensure that your baby receives all the nutrients needed for healthy growth and development.

Healthy eating during pregnancy

The principles of healthy eating during pregnancy are similar to those recommended for the general population. Eating habits should be balanced, varied, and safe. You should try to:

- **Have 5–6 meals per day**, avoiding intervals that exceed **3 hours** during the daytime.
- **Prioritize eating vegetables**, ideally starting your meals with a **vegetable soup**.
- **Limit consumption of red meats to 2–3 times per week**.
- **Prefer whole grain cereals** whenever possible (e.g., wholemeal bread, rye bread, whole oats).
- **Prefer low-fat or semi-skimmed dairy products**.
- **Moderate your salt intake**, using herbs and spices as an alternative to enhance the flavour of foods.
- **Use iodized salt** to provide additional iodine to the baby.
- **Choose healthy plant-based fats**, such as olive oil.
- **Store and reheat food in glass containers or in BPA-free plastic containers** (these are free of bisphenol A, a chemical found in some plastics that may leach into food when heated)



Eating habits should be adapted to the stage of pregnancy, as well as to individual tastes and preferences. Up to 12 weeks of pregnancy, follow the recommendations outlined in Table 1. During the 2nd and 3rd trimesters, depending on appetite and weight gain, you may consider adding, for example, one daily serving of dairy products, one daily serving of vegetables/fruit, and one daily serving of cereals, tubers, and related products.

Food Group / Servings		Example for 1 Serving		Food Group / Servings		Example for 1 Serving	
Cereals, tubers and derivatives	6–8	• 1 slice of mixed wheat/rye bread or cereals (50 g) • 1 slice of cornbread (70 g) • 1½ medium potatoes (125 g) • 5 tablespoons of breakfast cereal (35 g) • 6 plain sweet or savoury crackers (35 g) • 4 tablespoons of cooked rice/pasta (110 g)		Meat, poultry, fish and eggs	2.5–4	• Meat, fish or poultry, cooked (25 g) • 1 Egg – medium size	
Vegetables	3–5	• 2 cups of raw vegetables (180 g) • 1 cup of cooked vegetables (140 g)		Legumes (pulses)	1–2	• 3 tablespoons of cooked dried legumes (80 g) (e.g., beans, chickpeas, lentils) • 6 tablespoons of fresh legumes (160 g) (e.g., peas, broad beans)	
Fruit	3–5	• 1 piece of fruit – medium size (160 g)		Fats	2	• 1 tablespoon of olive oil (10 g) • 1 dessert spoon of margarine or butter (5 g)	
Dairy products	2–3	• 1 cup of milk (250 ml) • 1 liquid yogurt • 2 thin slices of cheese (40 g)		Water	1.8–2 L	• 8–10 cups of water	

Table 1 — Recommended daily servings by food group during pregnancy (Adapted from: www.alimentacao.inteligente.dgs.pt).

What foods should I avoid?

- **Unpasteurized milk and soft cheese** (such as Camembert, Brie, and Feta), as well as mould-ripened cheeses (such as Roquefort, Gorgonzola, Stilton), pâté, and cured sausages. All of these increase the risk of listeriosis. Pasteurized cheeses do not pose any danger during pregnancy.
- **Undercooked meat/fish/seafood** also increase the risk of **listeriosis**.
- **Raw or undercooked eggs** and **mayonnaise** increase the risk of **salmonella** infection.
- You should not **drink alcoholic beverages** during pregnancy, even when only occasionally. Alcohol passes to the baby and can cause birth defects and developmental delays. There is no amount of alcohol that is considered safe during pregnancy.
- **Raw vegetables and unpeeled fruits, when you are not sure if they have been adequately washed**. It is preferable to prepare these foods yourself, washing them carefully under running water or disinfecting them with products based on sodium hypochlorite (bleach) or acetic acid (vinegar).
- **Foods that have been mechanically sliced in shops** (e.g. ham), that may be contaminated by other unsafe foods.
- If **you are not immune to toxoplasmosis**, or if you're unsure whether you are, you should avoid eating **undercooked meat**, you should **wash your hands carefully** before and after handling food, and only eat **raw vegetables and unpeeled fruits** when you are certain that they have been carefully washed.

What foods should I have in restricted amounts during pregnancy?

- **Liver** and liver-derived products may contain high levels of **vitamin A**, which is associated with an increased risk of fetal malformations.
- **Tuna, swordfish, and monkfish** may contain high concentrations of mercury, which is associated with an increased risk of birth defects. The consumption of other types of fish is considered safe during pregnancy.
- **Coffee, tea, and cola** drinks should be consumed in moderation, as a daily intake of more than 300 mg of caffeine/theophylline is associated with a higher risk of miscarriage and low birth weight. One cup of coffee may contain between 60–150 mg of caffeine, while tea contains approximately 50 mg per 250 ml. Most herbal infusions (such as chamomile, linden, and orange blossom tea) do not contain these substances and are considered safe during pregnancy.
- **Sugar and sweet foods** (soft drinks, cakes, chocolate, jams, sweets, and ice cream) should only be consumed occasionally and preferably at the end of meals.

Should I take vitamins during pregnancy?

- All pregnant women (and women planning to become pregnant) should take **400 mcg of folic acid** (vitamin B9) **daily**. This vitamin helps reduce the risk of the baby developing malformations of the brain and spinal cord. Although folic acid is found in green vegetables with dark leaves, bread, broccoli, and legumes, supplementation is recommended by most national and international scientific societies.
- Daily supplementation of **30–60 mg of elemental iron** is also recommended for all pregnant women from **16 weeks of pregnancy onwards**, as it helps reduce the risk of maternal anaemia, postpartum infection, low birth weight, and preterm birth.
- Supplementation with **calcium, fluoride, magnesium, and multivitamin complexes** is not necessary for all pregnant women, but may be appropriate in specific cases, such as when the diet is unbalanced, or when pregnancy blood tests indicate nutritional deficiencies.

