



3rd trimester pregnancy: What to expect

The third trimester of pregnancy can be tiring and uncomfortable. Here's help relieving symptoms — and anxiety — as your due date approaches.

The third trimester of pregnancy can be physically and emotionally challenging. Your baby's size and position might make it hard for you to get comfortable. You might be tired of pregnancy and eager to move on to the next stage. If you've been gearing up for your due date, you might be disappointed if it comes and goes uneventfully.

Try to remain positive as you look forward to the end of your pregnancy. Soon you'll hold your baby in your arms! Here's what to expect in the meantime.

Your body

As your baby grows, his or her movements will become more obvious. These exciting sensations are often accompanied by increasing discomfort and other signs and symptoms, including:

- **Braxton Hicks contractions.** You might feel these mild, irregular contractions as a slight tightness in your abdomen. They're more likely to occur in the afternoon or evening, after physical activity or after sex. These contractions also tend to occur more often and become stronger as you approach your due date. Contact your health care provider if the contractions become regular and steadily increase in strength.
- **Backaches.** Pregnancy hormones relax the connective tissue that holds your bones in place, especially in the pelvic area. These changes can be tough on your back, and often result in discomfort during the third trimester. When you sit, choose chairs with good back support. Get regular exercise. Wear low-heeled — but not flat — shoes with good arch support. If you have severe or persistent pain, contact your health care provider.
- **Shortness of breath.** You might get winded easily. Practice good posture to give your lungs more room to expand.
- **Heartburn.** Pregnancy hormones relaxing the valve between your stomach and esophagus can allow stomach acid to reflux into your esophagus, causing heartburn. To prevent heartburn, eat small, frequent meals and avoid fried foods, citrus fruits, chocolate, and spicy or fried foods.
- **Spider veins, varicose veins and hemorrhoids.** Increased blood circulation might cause tiny red-purplish veins (spider veins) to appear on your face, neck and arms. Redness typically fades after delivery. You might also notice swollen veins (varicose veins) on your legs. Painful, itchy varicose veins in your rectal area (hemorrhoids) are another possibility. To ease swelling, exercise and elevate your legs frequently, include plenty of fiber in your diet and drink lots of fluids. For hemorrhoid relief, soak in a warm tub or apply witch hazel pads to the area.
- **Frequent urination.** As your baby moves deeper into your pelvis, you'll feel more pressure on your bladder. You might find yourself urinating more often. This extra pressure might also cause you to leak urine — especially when you laugh, cough, sneeze, bend or lift. If this is a problem, consider using panty liners. If you think you might be leaking amniotic fluid, contact your health care provider.

Your emotions

As anticipation grows, fears about childbirth might become more persistent. How much will it hurt? How long will it last? How will I cope? If you haven't done so already, consider taking childbirth classes. You'll learn what to expect — and meet others who share your excitement and concerns. Talk with others who've had positive birth experiences, and ask your health care provider about options for pain relief.

The reality of parenthood might begin to sink in as well. You might feel anxious, especially if this is your first baby. To stay calm, write your thoughts in a journal. It's also helpful to plan ahead. If you'll be breast-feeding, you might get a nursing bra or a breast pump. If you're expecting a boy — or you don't know your baby's sex — think about what's right for your family regarding circumcision.

Prenatal care

During the third trimester, your health care provider might ask you to come in for more frequent checkups — perhaps every two weeks beginning at week 32 and every week beginning at week 36.

Like previous visits, your health care provider will check your weight and blood pressure and ask about any signs or symptoms you're experiencing. Regardless of your vaccination status, one dose of tetanus toxoid, reduced diphtheria toxoid and acellular pertussis (Tdap) vaccine is recommended during each pregnancy — ideally during the third trimester, between weeks 27 and 36 of pregnancy. This can help protect your baby from whooping cough before he or she can be vaccinated. You will also need screening tests for various conditions, including:

- **Gestational diabetes.** This is a type of diabetes that sometimes develops during pregnancy. Prompt treatment and healthy lifestyle choices can help you manage your blood sugar level and deliver a healthy baby.
- **Iron deficiency anemia.** Iron deficiency anemia occurs when you don't have enough healthy red blood cells to carry adequate oxygen to your body's tissues. Anemia might cause you to feel very tired. To treat anemia, you might need to take iron supplements.
- **Group B strep.** Group B strep is a type of bacteria that can live in your vagina or rectum. It can cause a serious infection for your baby if there is exposure during birth. If you test positive for group B strep, your health care provider will recommend antibiotics while you're in labor.

Your health care provider will also check your baby's size and heart rate. Near the end of your pregnancy, your health care provider will also check your baby's position and ask about your baby's movements. He or she might also ask about your preferences regarding labor and pain management as you get ready for delivery. If you have specific preferences for labor and birth — such as laboring in water or avoiding medication — define your wishes in a birth plan. Review the plan with your health care provider but keep in mind that pregnancy problems might cause plans to change.

As your due date approaches, keep asking questions. Knowing what to expect can help you have the most positive birth experience.

When You Visit Your Doctor - Pregnancy: 3rd Trimester

Questions to Discuss With Your Doctor:

- Do you have adequate support at home from family or friends?
- How do you feel? Have you had any problems since your last visit?
- Have you had any vaginal bleeding or spotting?
- Have you had any pain or uterine cramping?
- Have you had any discharge or leakage of fluid from your vagina?

- Have you noticed swelling of your face or ankles?
- Have you had any problems with your vision?
- Are you getting frequent headaches?
- Have you noticed a change in the frequency or intensity of fetal movement?
- Are you planning to breast-feed or bottle-feed?
- Have you selected a pediatrician for your baby?
- Are you taking classes on labor and delivery?
- Have you added health insurance coverage for your new baby?
- Have you purchased a special car seat to hold your baby when riding in your car?
- Have you decided on whether the baby will have a circumcision, if a boy?
- Have you talked with your doctor about the length of your stay in the hospital?
- Do you know the signs of going into labor so that you can call your doctor when labor begins? (These include uterine contractions and rupture of the membranes).

Your Doctor Might Examine the Following Body Structures or Functions:

- Breasts (to see if your nipples are inverted)
- Abdominal exam, including measurement of the height of your fundus (top of the uterus)

Your Doctor Might Order the Following Lab Tests or Studies:

- Culture of the vagina and rectum for Group B streptococcus bacteria
- Fetal ultrasound