

YOU ARE EXPECTING **A BABY**

A guide on pregnancy and childbirth



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Congratulations, **you are pregnant**

Pregnancy is an incredible adventure in a woman's life and must be shared with her partner, family and friends. But these nine months admittedly also cause major changes.

Thank you for choosing to give birth at the HUG Maternity. Our medical and healthcare team is there to monitor your pregnancy and prepare you both for childbirth and parenthood. We will make every effort to reduce your stress during this period and ease your return home.



Monitoring your pregnancy

+ DID YOU KNOW?

You can access your medical file online at any time by registering at www.mondossiermedical.ch

Physiological pregnancy

Our midwives and doctors ensure the monitoring of “physiological” pregnancies, that is without risk factors. Any occurrence of complications during these nine months will require the monitoring procedures to be adjusted and the intervention of a doctor.

If your private gynaecologist is monitoring your pregnancy and you plan on giving birth at the Maternity, we will be expecting you for a first appointment around week 36. We recommend you book your appointment in advance and bring a copy of your pregnancy record.

To book an appointment call ☎ 022 372 44 00




High-risk pregnancies

Pregnancies with potential complications require special monitoring. Depending on the risk factors, monitoring will be conducted by specialized teams comprising doctors and midwives.

The Maternity offers out-patient consultations depending on the problems presented by the mother (obesity, diabetes, hypertension, multiple pregnancies, infectious diseases, prematurity, etc.).

High-risk obstetrics unit

 022 372 44 00

More information on specialized consultations:

 www.hug-ge.ch/obstetrique/notre-expertise

Your appointment calendar

Monitoring of a physiological pregnancy comprises seven prenatal medical appointments and at least two ultrasounds (at weeks 12 and 20).

The first check-up can be done as early as week 9. You are seen to by a doctor and a midwife. Medical appointments are generally on a monthly basis. Monitoring of a high-risk pregnancy may require additional appointments and check-ups.

More information on monitoring and appointments:

 www.hug-ge.ch/obstetrique/suivi-votre-grossesse



DID YOU KNOW?

HUG Maternity is the main reference in Geneva for monitoring of high-risk pregnancies. The most complex medical cases are therefore referred to the service due to its combination of high professional skills and high-tech equipment. One third of the 4,000 pregnancies monitored each year at the HUG are high-risk.



“We wanted a boy for my first pregnancy. When the gynaecologist confirmed at the ultrasound it was a boy, my husband and I both cried a lot. Because of the difficult relationship I have with my mother, I would have needed therapy had this baby been a girl. For my second pregnancy, my husband also wanted a boy. As for me, I was thinking a girl would also be fantastic. And then Olivia was born...”

Elise, mother-of-two

Check-ups

During these nine months, various check-ups are proposed in order to eliminate potential complications. These include clinical OGT examinations, weight, blood pressure and fundal height measurements, blood tests, urine samples, auscultation of the baby's heart, etc.

Ultrasounds are used to determine the term of the pregnancy and exclude of a certain number of complications related to the baby (deformities, growth problems). They can also be used to determine the size of the baby at the end of the pregnancy.

Fundal height is used to assess fetal and uterine growth as well as the quantity of amniotic fluid, and is measured with a tape measure.

Prenatal screening for Down's Syndrome

All pregnant women are offered the opportunity to do the first trimester screening test, but it is not mandatory. It assesses your of bearing a fetus with a genetic anomaly such as Trisomy 21 (or Down's Syndrome) This probability calculation results from the mapping of three different parameters: your age, the presence of certain markers in your blood and nuchal translucency namely the measures taken by ultrasound of the thickness of the baby's nape (between weeks 11 and 14). Based on the risk level, further tests for diagnostic purposes are proposed (generally when the risk is above 1 in 1,000).

+ INFO

Remember that 97 to 98% of children are born healthy.

Non-invasive screening (Genatest®)

This test is offered as early as week 11 to detect the presence of Down's Syndrome (Trisomy 21, 18 and 13) in the fetus when prenatal screening shows a result greater than 1 in 1,000. The foetus's genetic material flowing in your blood through the placenta is analyzed by way of a simple blood test. This test does not pose any danger for unborn child. If the result is abnormal (strong suspicion of Down's Syndrome), this must be confirmed by an invasive diagnostic examination (chorionic villus sampling or amniocentesis).

This test is covered by the national health insurance for pregnant women with a fetus presenting a moderate to high risk of Down's Syndrome as the outcome of the first trimester screening. However, all pregnant women who wish to can undertake this test, but it will not be reimbursed by the national health insurance if the risk is below 1 in 1,000.



+ FIND OUT MORE

Are you sad, depressed, worried? This questionnaire assesses the risk of perinatal depression. Take it:

➤ www.hug-ge.ch/depression-perinatale/comment-depister-depression-perinatale-quizz-epds

Prenatal consultation

The Maternity offers a one-to-one consultation with a midwife to all pregnant women from the 4th month onwards. The prenatal consultation is not a medical appointment nor a childbirth preparation session. The purpose is to listen to and discuss your questions and doubts on pregnancy and parenthood. It may also bring to light any potential personal difficulties (for example the risk of perinatal depression) and aims to reinforce the mother-child bond.

For more information and to book an appointment:

📞 022 372 44 00

➤ www.hug-ge.ch/depression-perinatale/entretien-prenatal

This consultation can also be conducted at the family planning centre:

📞 022 372 55 00

➤ www.hug-ge.ch/sante-sexuelle-planning-familial

Monitoring by a senior doctor

If you have private or semi-private insurance, you can choose your obstetrician from our team of senior doctors. Your chosen doctor monitors you during pregnancy, childbirth and the post-partum period. This also applies to physiological and high-risk pregnancies.

Further information on these special services is available in the brochure dedicated to private and semi-private patients.

Contact:

📞 022 372 20 22

Comprehensive support programme

The Maternity offers a comprehensive support programme to future mothers presenting no obstetrical risk in particular. The aim is to establish a close and trusted relationship with members of the medical team. From your first appointment to the moment you go back home, you are under the care of a group of midwives. A referent midwife is assigned to you. You will, therefore, be in a familiar environment, conducive to reduce apprehensions related to childbirth.

The midwives who are part of the comprehensive support programme are available 24/7.

Comprehensive support programme contact:

📞 079 553 50 86

Global.accompagnement@hcuge.ch

Birth plan

The Maternity provides you with the option to lay down in writing your wishes and expectations for the birth of your child. On the day, every effort is made to respect your wishes. But, changes to the birth plan sometimes occur for your safety and that of your child. The team of midwives remains available for a one-to-one consultation throughout the pregnancy.

To book a birth plan appointment:

📞 022 372 44 00



Formalities

Your pregnancy has started. You can now start all the formalities related to your pregnancy and the upcoming birth of your child.

Inform your employer

Announcing your pregnancy to your employer enables him/her to take all necessary measures to adjust your working hours (night shifts) or your work station in order to protect your health and that of your baby's.

Don't forget to ask your midwife or doctor for the OProMA form that helps your employer assess your professional tasks.

For any question on working when pregnant, please read "Useful Links" (page 36).

Contact a midwife

At the end of your second trimester (6 months), we recommend you choose the midwife who will provide you with home support after the birth and to communicate her details to the medical team at HUG.

To find an independent midwife:

➤ www.sagesfemmesgeneve.ch

Contact a paediatrician

Contact your child's future paediatrician as early as the end of the second trimester. When your child is born, book an appointment as soon as possible, but no later than the end of the first month.

To find a paediatrician:

➤ www.amge.ch

Insure your child

Parents have a period of three months after the birth of their child to register their baby with the national health insurance. The child will be retroactively insured from the day he/she is born. Nevertheless, you can start formalities with an insurance company during your pregnancy.

Find a childcare solution

You work and plan on having your child looked after at the end of your maternity leave? Nurseries and day-care centres are very much sought after. We therefore recommend you start registration formalities as early as possible. To enrol, contact your local council or, if you reside in Geneva, the Geneva Infant Information Bureau (BIPE - Bureau d'Information Petite Enfance).

BIPE Geneva City:

➤ www.ville-geneve.ch/plan-ville/institutions-petite-enfance/bureau-information-petite-enfance/

Day-care centres:

➤ www.accueilfamilial-geneve.ch/d1/



Your health

A healthy lifestyle is important both for you and your baby. Here are a few essential precautions you can take.

Alcohol

Consuming alcohol, even on an occasional or moderate basis, carries high risks for the baby. “Zero” consumption is recommended during pregnancy and when breastfeeding.

Tobacco

Tobacco is toxic both for you and your baby. Quitting smoking at any stage of the pregnancy is beneficial and reduces the risk of complications both for the fetus and the new-born baby.

Drugs

Consuming drugs can have severe consequences on the development of your baby and may also require specific medical monitoring.

Medication

The use of medication during the pregnancy or when breastfeeding must be prescribed by a doctor or approved by a midwife or pharmacist. This also applies to alternative treatments (homeopathy, herbal medicine, etc.).



CAUTION

Avoid self-medication, even medicaments that would have been prescribed prior to your pregnancy or over-the-counter medication.



INFO

People in your inner-circle (father, brothers, sisters, grand-parents, baby-sitter, etc.) in close contact with you and later with the new-born baby should get vaccinated against influenza and whooping cough.

Vaccination and pregnancy

It is always better to prevent than to treat. Some infectious diseases can be avoided through vaccination. Influenza and whooping cough are particularly dangerous during pregnancy. Vaccination against these two diseases remains possible during the pregnancy and even during the post-partum period. The vaccine is useful as it avoids maternal and fetal complications while preserving your baby's health up to a few weeks after his/her birth.

Recommended vaccination

We recommend vaccination against whooping cough during your pregnancy in order to protect your baby during the first months of his/her life until he/she can be vaccinated. Vaccination against influenza is offered at the start of autumn and until the end of winter in order to protect the mother, the pregnancy, the fetus and the new-born. If you are not immune against chicken pox, measles or rubella, you can be vaccinated but only after the birth. This will avoid complications in the event of future pregnancy. Depending on the situation, vaccination against hepatitis B can also be recommended.

Ask any question you may have on vaccination during your prenatal medical appointments.



INFO

Tobacco, alcohol and drugs: if your consumption is problematic or if you are seeking help to stop:

- ▶ ask your friends or family for advice
- ▶ talk to your doctor or midwife
- ▶ contact a specialized HUG consultation for appropriate treatments.

Discomfort

during your pregnancy

Pregnancy leads to physiological changes and to certain discomforts that disappear after birth for most women. To be in good condition, ensure you stay physically active during the day and continue to exercise (soft sports) if your condition permits. Eat a balanced diet and ensure good sleep hygiene, as much for you as for your baby.

Here are a few tips on how to limit discomfort during pregnancy. If these inconveniences persist despite these measures, talk to your doctor or your midwife.

Nausea and vomiting

- ▶ In case of morning sickness, have breakfast in bed.
- ▶ Split your meals (5-6 meals a day).
- ▶ Avoid food that is difficult to digest.
- ▶ Sit upright when eating.

Heartburn

- ▶ Split your meals.
- ▶ Limit greasy, acid, spicy food and sodas. Consume coffee, black tea, mint-based products (herbal teas, sweets) and chocolate with moderation.
- ▶ Avoid lying down immediately after a meal.
- ▶ Sleep in a slightly upright position.

Constipation

- ▶ Drink a lot of water (1.5 to 2l a day).
- ▶ Increase your fibre intake (vegetables, fruit, brown bread, pulses, whole grain).
- ▶ Listen to your body and take the time to go to the toilet.

Haemorrhoids

If you experience this problem, try to overcome constipation issues (see above) and check with your doctor. There are treatments.

Water retention (oedema) and heavy legs

- ▶ Avoid excessive weight gain.
- ▶ Raise your legs when resting, do pelvic movement exercises.
- ▶ Spray your legs from top to bottom with cold water or have cold water foot baths.
- ▶ Wear compression stockings.
- ▶ Have massages.

Sometimes, numbness and tingling in the hands may occur during the last trimester. Talk to your doctor, especially if the symptoms worsen or if you experience loss of sensitivity.

Contractions

Your stomach hardens and you feel pain similar to period pain or cramps. Your womb may occasionally contract at any time during your pregnancy. In this case, these contractions involve little or no pain and are very different to the contractions that occur at the end of the pregnancy.



CAUTION

If before week 37 the contractions increase in intensity and frequency and you have a history of premature birth, contact your midwife or doctor.

Light dizzy spells

When lying down, the vena cava (located in the abdomen) may be compressed causing a light dizzy spell. In this case, immediately change position and turn to your left side to restore the blood flow until full recovery.

Ligament pain

During pregnancy, your body changes to accommodate your baby and allow for his/her delivery. Ligaments become lax under the effect of progesterone. This may cause instability - as your centre of gravity changes - and pain in the pubic area, at the back of the pelvis and on both sides of the spine. This type of pain is troublesome but not dangerous.

Avoid movements that increase the pain and favour mild mobilization. Massages, relaxation as well as the specific exercises shown to you during childbirth preparation classes can help

Muscle and back pain

Due to the postural changes caused by the pregnancy, intense demands are made on certain muscles, lesser on others. As a result, muscle strain is frequent. The pain sometimes radiates into the legs.

Continue to be active and favour moderate physical activities. Heat (poultices, baths), massages or physiotherapy can help.

Caution: if you experience a loss of sensitivity or strength in the legs or if you are unable to move, check with your doctor.



INFO

If you experience pain, whatever its nature (muscle, headaches), speak to your doctor or your midwife. He/she will decide on the best course of treatment as some painkillers are contraindicated during pregnancy.



INFO

For a healthy and happy pregnancy, manage your sleep, stay active and rest during the day if you feel the need to do so. If you are tired, especially if you have other children, ask your family and friends for help.

Disturbed sleep

Close to bedtime, have a light meal and avoid stimulants. Enjoy some downtime and put in place a ritual to help induce sleep. Place a cushion under your stomach or behind your back to make you more comfortable when you are lying down.

When to seek immediate medical attention

Quickly see your treating doctor, your gynaecologist or, if they are unavailable, the Gynaecology and Obstetrics Emergency Services if you experience one of the following:

- ▶ bleeding
- ▶ pain/burning when urinating
- ▶ clearly decreased baby movements
- ▶ headaches, visual disturbance, shiny spots in front of your eyes or a sudden and significant increase in weight
- ▶ fall or accident
- ▶ fever (above 38°C) or influenza symptoms
- ▶ painful or regular uterine contractions before week 37
- ▶ water breaking (amniotic fluid).

Obstetrical emergencies

They are open to all pregnant women who require immediate medical attention (see reasons above). The future mother is attended to by a midwife who assesses the problem. The doctor then intervenes if necessary.

The HUG Gynaecology and Obstetrics Emergency Services are open 24/7.

Pregnancy on a daily basis

Pregnancy is not an illness. However, certain adjustments are required to make it as easy and comfortable as possible

Physical activity

We recommend you continue to exercise regularly. Favour soft sports (swimming or walking for example) and avoid violent sports or those involving a risk of falling. Seek advice from your doctor or midwife.

Healthy diet

Energy requirements are slightly higher during pregnancy. The idea is not to eat twice as much but twice as well, for both you and your baby to be healthy. However, your intake of vitamins and mineral salts must be increased.

All these needs are covered by a varied and balanced diet.

- ▶ Give prominence to fruit and vegetables (the “five a day” rule).
- ▶ Favour food rich in iron: meat, eggs, whole grain food, pulses (chick peas, lentils, dry beans), nuts and certain vegetables (spinach, broccoli).
- ▶ Favour food rich in iodine (fish, eggs, cheese, dried fruits, food containing iodized salt) and omega-3 fatty acids (oily fish, walnuts, rapeseed oil) that help your baby grow.
- ▶ Drink enough (1.5 to 2l a day), preferably water or non-sweet or low-sweet beverages.
- ▶ Consume caffeine-based beverages (coffee, tea, sodas, etc.) with moderation.

! CAUTION

Taking nutritional supplements should not be automatic but should be discussed with your doctor or midwife. Special preparations for pregnant women exist.



FIND OUT MORE

Understanding my pregnancy, [in French] by Elodie Lavigne and the Pr Olivier Irion (Planète Santé Editions, 2016) guides pregnant women by explaining to them what happens in their bodies and minds during these nine months.

If the pregnant woman is overweight, her weight increase must be monitored closely. Ask for an appointment at the Maternity Weight Control ward for personalized and multidisciplinary monitoring (📞 022 372 97 16).

Prevention of food safety hazards

Follow a few safety precautions to protect yourself against food poisoning and diseases potentially deadly for your baby (toxoplasmosis, listeriosis).

When you eat outside from home, make sure salads, fruits and raw vegetables have been properly washed. If you have any doubts, don't eat them. Furthermore, avoid pre-cooked food as much as possible. Don't reheat food more than once.

Food to avoid

- ▶ Raw or non-pasteurized milk and food containing raw or non-pasteurized milk.
- ▶ Soft and non-pasteurized cheese; feta cheese and blue-veined cheeses (e.g., Gorgonzola).
- ▶ Raw eggs and preparations containing raw eggs (tiramisu, home-made mayonnaise).
- ▶ Raw or under-cooked meat and fish (carpaccio, tartar).
- ▶ Badly washed raw vegetables.
- ▶ Game.
- ▶ Energy drinks.
- ▶ Quinine-based beverages (tonic, bitter lemon).
- ▶ Alcohol.

Protect your skin

When pregnant, your skin is more sensitive to the sun. Apply high-index sun cream, especially on your face, to avoid the appearance of blemishes or a “pregnancy mask”. Shade, sun glasses and hats are paramount.

Take care of your teeth

Brush your teeth with care. Your gums are more sensitive and may bleed. Do not hesitate to consult your dentist if you have any concerns. Treatment is possible during pregnancy.

Travelling on a daily basis

Walking is good for you and your baby. When riding a bicycle or a scooter, we recommend wearing a helmet. In the car, always wear your seatbelt. Ensure the lap belt is placed under your stomach.

You want to travel?

- ▶ Seek advice from your gynaecologist or midwife.
- ▶ Prepare a first-aid kit containing medication compatible with pregnancy.
- ▶ Find out about sanitary conditions and access to medical care at your destination.
- ▶ Make sure your insurance covers all pregnancy-related problems abroad.
- ▶ Do not travel alone.

Travelling when pregnant

Being pregnant and travelling is possible if you take all the necessary precautions. Before you plan a trip, speak to your gynaecologist or midwife so as to exclude any contraindication and discuss preventive measures (wearing compression stockings, hydration, etc.). After seven months of pregnancy, long distance travelling is not recommended. Furthermore, the baby's weight can make walking difficult.

Long-haul destinations

Pregnancy is probably not the best time to go around the world or to distant places. Health and safety conditions are not always appropriate abroad. What's more, some mandatory vaccination and treatments are contraindicated during pregnancy.

Flying

Certain airlines sometimes ask for a medical certificate stating the stage of pregnancy as well as the absence of contraindications to fly. To avoid the risk of thrombosis (blood clot), don't forget to drink regularly, walk and wear compression stockings if required. When flying more than two hours, book an aisle seat so you can wander round freely during the flight.

Some customs authorities refuse to let pregnant women on-board when they are at the end of their pregnancy. Check before booking your flights.



CAUTION

Avoid high mountains (altitudes over 2,000-2,500 meters) and significant differences in height especially if you have a risk factor (asthma, heart failure, high blood pressure).

Emotional life and emotions

Becoming parents

Becoming parents is a major transition in life deeply affecting the future father, the future mother and the couple. Expressed through joy, sadness and apprehension, a birth can create contradictory expectations and feelings. Over and above the responsibility towards a dependant human being is an excessive fatigue in relation to the pregnancy, the birth and nights often too short. An adjustment period is necessary to accommodate the family's needs and expectations.

Perinatal depression

This can occur during the pregnancy or within one year of giving birth. Approximately 13% of mothers suffer from perinatal depression. It is important to detect perinatal depression in order to prevent consequences on the pregnancy, the mother-child bond as well as the couple.

Further information at:

➤ www.hug-ge.ch/depression-perinatale

Stay united

The arrival of a child enriches the couple but can also jeopardize the relationship. An increasing number of separations occur at the time of birth, which is why it is important to communicate, to listen to each other's needs and limitations, to support one another, to be flexible, creative and to nurture your sexuality. If you have questions or need help, contact a professional healthcare specialist.

If you are going through pregnancy alone, we recommend you choose someone in your inner-circle whom you trust to guide and support you.

Being confident

With today's access to a variety of courses or articles geared towards future parents, it appears easier to prepare for the arrival of the baby. But are we really ready? A baby brings with him/her so many surprises that it is best to accept the idea that we do not




FIND OUT MORE

The Maternity has a Perinatal Unit for patients presenting a risk due to their psychological or emotional environment. Monitoring of these pregnancies requires personalized and multidisciplinary support so as to best prepare the arrival of the baby.

have all the knowledge. A child does not need perfect parents, but parents who are “good enough”, capable of adjusting to him/her and his/her specificities and imperfections.

Couples and Families Consultation:

 022 372 33 01

Becoming a father

Becoming a father is certainly more intangible for men as they do not bear the child. But they feel all kinds of emotions and question their upcoming new role.

Future fathers are increasingly called upon. They are expected to take part in their partner’s pregnancy and childbirth. It is true that when they are present at medical appointments, it is a great support to the mother and deepens the bond with the baby. However, some men feel uncomfortable. It is therefore paramount to discuss this issue between you and respect one another’s sensitivities.



INFO

There are no particular standard figures when it comes to the amount and frequency of sexual intercourse during pregnancy. Listen to your body and talk to your partner.

Love and sexuality

During pregnancy, sexual desire varies from one woman to another, from one stage of the pregnancy to another and also depends on the discomfort experienced by the future mother (fatigue, nausea, weight gain, etc.). The body changes as well as the way it is perceived. Some women are physically distant with their partner, which can be unnerving. On an emotional level, all these changes can make women more sensitive and influence their drive. Communication is paramount.

Safe sexual intercourse

Some fathers are worried they will hurt their partner or the baby. Yet, intercourse is safe during pregnancy, unless specified otherwise by the doctor. Orgasm and penetration do not cause miscarriages or premature births.

At the end of the pregnancy, when the baby needs more space, adjustments may be required. Some couples then prefer tender moments.

Preparing for the arrival of your child

Childbirth preparation classes

Future parents are offered by the Maternity a wide array of childbirth and parenting preparation classes (including a class in a water environment). These provide the opportunity to receive quality factual information on the different stages of pregnancy and childbirth but also on the days following the birth as well as to speak with professionals.

Partners are encouraged to participate, but some sessions are for future mothers only. For this preparation programme to deliver all its benefits, we recommend starting the classes as early as the 4th month.

Descriptive video and online registration at the following address:
➤ www.hug-ge.ch/pan

INFO

Basic medical insurance covers up to 150 Swiss Francs of the costs relating to the childbirth preparation classes.





"I don't think I could have given birth without the childbirth preparation classes. The pain is what scared me the most. Fortunately, I was taught breathing techniques and knew what postures to adopt in order to manage it. My partner reminded me of the midwife's advice and also played an important part during the delivery. What's more, just after the midwife told us we were a 'great team'"

Valentine

Personal belongings for the Maternity

In order to be ready when you leave for the Maternity prepare, from the 7th month of your pregnancy, your personal belongings and those of the baby's. Below are few suggestions of what to pack.

For you:

- ▶ pyjamas and a dressing gown
- ▶ mesh underwear
- ▶ sanitary pads
- ▶ comfortable clothes
- ▶ socks and slippers
- ▶ if you are breastfeeding, nursing bras (choose one size up from your size at the end of the pregnancy) and clothes with front openings
- ▶ an outfit for when you leave the Maternity (pregnancy clothes are the most suitable)
- ▶ toiletries
- ▶ lip balm
- ▶ a water mister to refresh you.

For your baby:

- ▶ clothes that are easy to put on (bodies, vests, pyjamas, hat, slippers or socks).

+ INFO

For his/her safety, your baby must be secured, facing backwards, in a car seat suited to his/her age on every trip and also when leaving the Maternity.

Visiting the Maternity

You will soon be giving birth at the HUG. Enjoy a virtual visit of the Maternity and find out more about the consultation rooms, the delivery rooms (including the “natural” rooms), the bedrooms, the equipment, the nursery, etc.

➤ http://hug.plus/maternite_visite

Breastfeeding or bottle feeding?

The World Health Organization recommends exclusive breastfeeding during the first six months of the baby’s life. Between 6 months and 2 years and more if you wish, breastfeeding must be supplemented by solids. The HUG undertakes to promote maternal breastfeeding among new mothers in order to deepen the bond between mother and child while reducing the risks of diseases.

But breastfeeding is a personal and intimate choice that you must be comfortable with. Feeding your child, whatever the chosen method, is a way of being in contact with him/her. If you have questions or doubts, do not hesitate to share them with healthcare professionals. The Maternity has a special breastfeeding consultation.

Maternal breastfeeding consultation: ☎ 022 372 44 00

Preparing to breastfeed

The body prepares for breastfeeding from the early stages of pregnancy: the volume of the breast increases, the areolas darken and the nipples harden. But breastfeeding raises many questions and concerns, therefore receiving factual information is crucial to your decision. We recommend you attend the childbirth preparation classes. Your partner’s support is important.



DID YOU KNOW?

Breast milk covers all your baby’s needs depending on his/her age. Even if it is short lived, breastfeeding is beneficial to your child.

Preparing your baby's room

The desire to prepare your baby's room becomes increasingly stronger. Whether a small corner or real room, at the start your baby only needs a cot or a bed with bars, bedding that makes him/her feel safe as well as a place to store nappies and care products (a changing table for example). If you are planning on painting his/her bedroom, make sure you use non-toxic paint and air the room on a regular basis.

Organizing the first days back home

To reduce the stress related to your return home, anticipate and buy everything you need to care for your baby. If you have other children, organise for them to be looked after when you are staying at the Maternity. After giving birth, ask your partner or friends or family to help you (shopping, cooking, clothes washing). All help is precious, do not turn it down.



Giving birth

At the Maternity, a team of healthcare professionals (midwives, gynaecologists, obstetricians, anaesthetists, paediatricians, nursing auxiliaries) are available 24/7.

When to leave for the Maternity?

The following signs indicate the delivery is imminent and that you must now go to the Maternity.

- ▶ contractions are increasingly frequent, close together and regular
- ▶ contractions are increasingly painful
- ▶ your waters have broken.

Your admission

An admissions team, located at the main entrance, helps you register Mondays to Fridays 7.30 am to 5 pm. Outside of these hours, Reception is available until 8 pm. If labor has already started, admission is conducted at the Gynaecology and Obstetrics Emergency Services (24/7).

When you arrive, you are attended to by a midwife who will assist at every stage of the birth. As soon as you arrive, she monitors the uterine contractions and assesses the well-being of your baby by recording his/her heart rate.

Mobile phones

To avoid disturbing other patients and the care being provided, please turn your mobile phone off in the delivery room, the continuous care and prenatal rooms. Its use is tolerated in other areas but remain discrete.



INFO

All bedrooms have locked wardrobes. Avoid bringing significant amounts of money and valuables. The HUG assumes no responsibility in the event of theft or loss.

The delivery rooms

The Maternity has twelve delivery rooms, two of which are “natural” rooms. All the rooms are equipped with a bed, a private shower, a locked wardrobe and a changing table to provide initial care for your baby.

In addition to the standard bed, the “natural” rooms have a parental bed allowing for natural delivery (without anesthesia) and on which you can move as you wish. It can also be used to rest after the birth. A bath is also available for you to relax during the early stages of labor or the dilation stage, but not for the entire delivery.

One person of your choice (partner, family member or friend) is allowed to attend. When you are admitted, this person receives a badge allowing him/her to freely access the service.

Pain during labor

Pain during labor is what pregnant women fear most as the term approaches. Rest assured that in addition to support and attention, the Maternity has various methods to help you manage pain throughout the delivery such as massages, pre-labor baths, positions, use of nitrogen oxide (or “laughing gas”), etc. And of course, the epidural which is chosen by most women and is the most effective method.

Epidural

An epidural minimises pain during delivery. This anesthesia acts locally and the product can be dosed during labor. In addition to being a safe and well-controlled technique, it preserves the perception of contractions, the pushing reflex and, in certain cases, your mobility. It is without danger for the baby and complications are rare. In the event of contraindications, alternatives are proposed.

You can choose to have an epidural (rachi-epidural or simple epidural). It is sometimes chosen for medical reasons.

+ INFO

The anesthesiology team is available 24/7. Over 80% of women giving birth at the Maternity choose the epidural.

To find out more:

The Division of Anesthesiology organises a class on the epidural that you should attend before week 38 of your pregnancy. Information and registration on the Website:

➤ www.hug-ge.ch/en/information-about-epidurals-7th-month-pregnancy

➤ www.hug-ge.ch/anesthesiologie/peridurale

Delivery complications

In most cases, childbirth via vaginal delivery runs smoothly. Certain situations require the use of instruments (forceps, vacuum extractor) or an emergency caesarean section to deliver the baby or prevent maternal or fetal distress. Caesarean sections may also be programmed in certain maternal or fetal indications.

Despite a high proportion of high-risk pregnancies, the Maternity's caesarean section rate is low compared to the Swiss average. It was 28% in 2015 whereas the national average was 33%. A class in "giving birth differently" is organised for women for whom a caesarean section has been planned.

➤ www.hug-ge.ch/pan



After giving birth

After the birth, you remain for two hours in the delivery room to allow the medical team to deliver care and monitor both your health and that of your baby. If you wish, you can breastfeed your baby for the first time.

“Skin to skin”

“Skin to skin” helps your baby adjust to his/her new environment and helps you both bond. Placed naked on your chest, he/she receives heat and comfort, which will sooth his/her cries. Your baby recognizes your heart beat, your voice and your smell. In the event of a caesarean section, the father carries out the “skin to skin”.

Breastfeeding is made easier with this technique as the new-born instinctively looks for his/her mother’s breast. We encourage you to pursue this technique when you are back home.

Rooming-in

Sometimes the mother and the new-born are momentarily separated for medical or safety reasons. Rooming-in means you are authorized to have your baby with you if you have to remain in hospital for continuous care. This proximity deepens the bond at an early stage. Our team cares for you and your baby.

BBvision

BBvision is a system that allows you to be in regular visual contact with your baby when he/she is somewhere else, for example in the Neonatal Unit. The device is easy and quick to use. Thanks to Scopia, a free to download mobile application, you can even see your baby when you are not in the hospital, which is particularly useful to the father

The Neonatal Unit

Some babies require increased monitoring and specific care after birth. HUG’s Neonatal Unit has 17 beds. A team of caregivers, nurses and doctors specialized in neonatology and intensive care provide babies with care 24/7. If needed, they work in conjunction

+ INFO

To encourage proximity, the Maternity has hospitality rooms (with a kitchen area) for the mothers of newborn babies hospitalized in the Neonatal Unit even if they are no longer hospitalized. A maximum of 30 Swiss Francs per day is requested.

with other specialized doctors to ensure the best possible care is provided to your child and guarantee your support.

Virtual visit:

➤ http://hug.plus/neonatologie_visite

Donation of feto-placental blood

Feto-placental blood is the blood contained in the umbilical cord and the placenta. It is an incredible source of cells for the treatment, by way of transplantation, of child leukemia and severe blood diseases. If you authorise the donation, the feto-placental blood is frozen, placed in a bank within the HUG and, if required, given anonymously to a sick child in Geneva, in Switzerland or anywhere in the world.

For further information:

📞 079 553 23 68

➤ www.hug-ge.ch/sites/interhug/files/documents/don_cordon.pdf

Returning home

For a complication-free delivery, hospitalization is generally two to three days. An early return home within 48 hours is also possible with the help and support at home of an independent midwife. For a birth by caesarean section, hospitalization is generally four to five days.

Your discharge from the Maternity is set in agreement with the midwife, gynaecologist and paediatrician. It is scheduled for the morning, before 11 am. Beforehand ask your partner, a family member or friend to come and pick you up. The caregivers looking after you contact the independent midwife that you have chosen and they may have already met during your pregnancy. They pass on any information useful to your return home.

Administrative formalities




INFO

If you do not have a residence permit or medical insurance, please contact the Maternity's Social Services.

Declaration to the registration office

All births must be registered with the Geneva registration office. To help register births, an office is located within the Maternity.

HUG birth registration office:

 022 372 63 92

The Maternity may also carry out this formality providing you supply all the required documents. An envelope containing all relevant information is given to you at your first appointment.

Declaration of paternity

Father-child filiation is automatically established when the parents are married. If this is not the case, a father can acknowledge his child through a declaration before the registrar of the place of origin or residence of the father or the mother or the place of birth of the child. This declaration can be done during the pregnancy.



Financial aspects

Coverage of costs associated with pregnancy

Pregnant women are not required to contribute (excess and deductible) to the costs of maternity-related services. This concerns check-ups during and after the pregnancy and childbirth, breastfeeding support and the care provided to new-born babies in good health as well as the mother's hospitalization.

Other medical services provided due to pregnancy-related complications or illnesses unrelated to the pregnancy are also covered without any required contributions to the costs as early as week 13 of the pregnancy and up to 8 weeks after the birth.

Home monitoring after the birth

After the birth, a midwife continues your monitoring at home. For a period of 56 days after the birth, 10 visits are programmed without medical prescription, 16 visits in certain cases (first child, caesarean section, multiple births, new-born baby presenting medical complications). Additional visits after the 56th day are possible but with a medical prescription. During the breastfeeding period, a maximum of three breastfeeding-related appointments are covered. These services are reimbursed by the basic medical insurance without payment of an excess or a contribution to the costs.



DID YOU KNOW?

If your new-born baby is ill, the cost of treatment is covered by the child's medical insurance or disability insurance that covers the costs generated by certain disorders present at birth (prematurity or genetic diseases for example).

Maternity leave

If you are in employment you are entitled to maternity leave. You will receive an allowance for loss of income equivalent to 80% of your average income before the birth but of a maximum of 196 Swiss Francs per day. Allowance entitlement starts on the day of the child's birth and terminates at the end of the 14th week after the birth. To find out more about the precise conditions under which is granted the maternity allowance:

Maternity allowance (AVS):

➤ www.ahv-iv.ch/p/6.02.f

Cantonal office for social insurance (Geneva):

➤ www.ocas.ch/particuliers/allocations-pour-perde-de-gain-de-maternite-et-dadoption/allocations-pour-perde-de-gain-app

📞 022 327 27 27

Childbirth allowance

A childbirth allowance of 2,000 Swiss Francs is granted to every child provided the pregnancy lasted at least 23 weeks.

For precise conditions:

➤ www.ocas.ch/particuliers/allocations-familiales/salaries

Family allowance

The birth of a child gives rise to the granting of monthly family allowances. Governed by Cantonal laws, they amount to 300 Swiss Francs in Geneva. Your employer or the Cantonal office for social insurance can provide you with information.



INFO

If you are experiencing financial difficulties after the birth of your child, do not hesitate to contact your local social services or those of the Maternity.

Useful links

Addiction

Division of Addiction

➤ www.hug-ge.ch/addictologie

Dependency Unit

➤ www.hug-ge.ch/medecine-premier-recours/unite-dependances

Smoking Issues

➤ www.hug-ge.ch/direction-soins/tabacologie

Addiction suisse

“Alcohol during pregnancy” brochure
➤ www.addictionsuisse.ch

Breastfeeding

Swiss Foundation for the Promotion of Breastfeeding

➤ www.allaiter.ch

Professional Association of Swiss Breastfeeding Consultants

➤ www.allaitement.ch

The Leche League

➤ www.llfrance.org

Food

Federal Office for Food Safety and Veterinary Affairs (OSAV)

Brochure: “Eating during pregnancy and the breastfeeding period”

➤ www.blv.admin.ch

Relationships and family

Protestant Office for Marriage and Family Counselling

➤ www.opccf.ch

Registration office

Registration office

Rue de la Mairie 37, 1211 Genève 6

📞 022 418 66 31

(registrations of births)

📞 022 418 66 32

(acknowledgement of paternity)

Work

State Secretariat for Economic Affairs (SECO)

Brochure “Maternity - Protecting workers”

➤ www.seco.admin.ch

Vaccination

Federal Office of Public Health (OFSP)

Download the brochure

“Vaccinations recommended before, during and after a pregnancy”

➤ www.bag.admin.ch

InfoVac

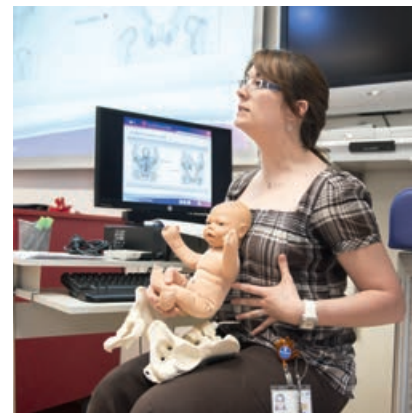
Swiss information Website on vaccinations

➤ www.infovac.ch

This brochure was tested on patients and was developed by a multidisciplinary workgroup in conjunction with the GIPP (information group for patients and family members).

Childbirth preparation classes

Childbirth preparation



+ INFO

Will you soon be giving birth at Geneva University Hospitals (HUG)? Enjoy a virtual visit of the Maternity and find out more about the delivery rooms, the bedrooms, the equipment, etc.
http://hug.plus/maternite_visite

Active pregnancy



+ INFO

Future parents are offered by the Maternity a wide array of childbirth and parenting preparation classes. Descriptive video and online registration at the following address:
www.hug-ge.ch/pan

Returning home



CALENDAR FOR MY PREGNANCY

DGO • Vous attendez un bébé • Août 2017



My baby's development throughout my pregnancy.

Limbs are under development and first movements. The embryo becomes a fetus; it measures approximately 3 cm and weighs approximately 9 g.

Facial features, nose and ears are under development. Start of fetal movements. The fetus measures 6 to 7 cm and weighs approximately 90 g. He can suck his thumb as early as 14 weeks.

The fetus measures approximately 13/14 cm and weighs around 200 g. Fetal movements are rarely observed during first pregnancies. More so in subsequent pregnancies.

The fetus measures 20 to 22 cm and weighs 450 g to 550 g. Movements are more and more perceptible to the mother. He moves his fingers and mouth, reacts to tactile stimulation and perceives outside sounds.

The fetus measures approximately 28 to 35 cm and weighs 700 to 800 g. He is covered in a creamy substance called vernix that protects his skin. Around weeks 26/28 he reacts to intense noises and perceives the taste of the food eaten by the mother.

The fetus weighs approximately 1,500 g to 1,800 g and measures around 37 cm. He opens his eyes and can make out shadows.

The fetus weighs approximately 2,800 to 3,100 g and measures 40 to 45 cm. He has finally developed his sense of smell through the mother's food. He can distinguish various smells.

The fetus weighs from 3,500 to 3,700 g and can measure more than 48 to 52 cm. He opens and closes his eyes and reacts to light.

Appointments

1st appointment
Laboratory tests
Start of the pregnancy
Sequential Prenatal screening

Ultrasound
Dating
Prenatal screening (addition)

2nd appointment
Laboratory tests
Proposed vaccination
Prenatal consultation

Morphology Ultrasound

3rd appointment
Laboratory tests
Proposed vaccination
Childbirth preparation

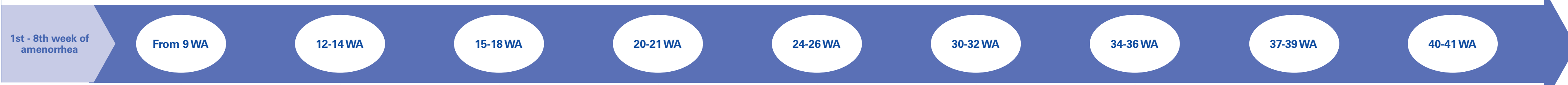
4th appointment
Laboratory tests
Proposed vaccination

5th appointment
Laboratory tests
Proposed vaccination

6th appointment
Laboratory tests
Proposed vaccination

7th appointment
Laboratory tests
Proposed vaccination

Last menstrual period



WA: Week of Amenorrhea

Month 2
Notes

Month 3
Notes

Month 4
Notes

Month 5
Notes

Month 6
Notes

Month 7
Notes

Month 8
Notes

Month 9
Notes

22 to 26 WA Extremely premature
27 to 31 WA Severely premature
32 to 34 WA Moderately premature
35 to 37 WA Slightly premature
> 37 WA Full-term