Things to Look Out For con’t:

- **Blood Clots**
  - The initial manifestation of blood clots may present as shortness of breath, due to clots traveling to your lungs. Women with SCI have an increased risk of developing blood clots during pregnancy and should be monitored for this problem regularly.

- **Spasticity**
  - Some women report an increase in spasms during pregnancy. However, if spasms are not a normal occurrence for you, they may be a sign that something is wrong. If you begin to have spasms and suspect they are a sign of a bigger problem, contact your doctor.

- **Low Blood Pressure (Hypotension)**
  - Pregnant women with SCI frequently experience hypotension accompanied by dizziness or lightheadedness. During early pregnancy, women’s blood pressure tends to drop slightly. Depending on the level of injury, risk for hypotension may be greater. Women with tetraplegia should especially monitor themselves for signs of low blood pressure. Additionally lying flat on your back is not recommended for any pregnant woman, as it may put pressure on your blood flow and thus heighten the risk of developing hypotension. Remember especially to prepare for the possibility of feeling dizzy when doing transfers to avoid a potential fall. Staying well hydrated is also a good way to help ease potential complications.

For more information, please go to:
www.sci-pregnancy.org
Wheelchair Adjustments:

As you begin to gain weight and your abdomen gets bigger, your seated center of gravity begins to shift. If your chair starts to feel too tippy or you start to sit hunched over, then it might be time to adjust your chair. This can be done by increasing the angle of the seat and back of your chair a little bit at a time. However, it is also important to maintain a vertical position for your back and tilt the seat down, rather than tilting the backrest back. If you are not comfortable with adjusting your own chair, talk to a therapist about your specific needs for these alterations.

These adjustments will become especially important for the baby as you approach the end of your pregnancy because at this time the baby will be shifting into birth position (head down). If the baby is not able to rearrange him/herself into the proper position for birth, the delivery may become more complicated or may require a c-section. Frequently taking time out of your chair to lie down – Avoid lying flat on your back as it may interfere with blood flow to the baby! – may maximize the baby’s room for movement.

Bladder and Bowel Management:

Intermittent catheters may need to be replaced by indwelling catheters to help avoid potential development of a urinary tract infection (UTI). To minimize transfers, using a straight catheter that is longer while lying down in bed may be a convenient option while you are pregnant. You can hook up the long, 14-inch French catheter to a leg bag for easy cathing and you don’t have to get up until morning to empty it. You may have to be a bit more creative in managing your bladder during pregnancy, and do a little advanced work, but it can be done successfully. Whatever your setup, make sure that the clean technique is always available for you and consult your doctor.

Even if you have never used any type of pad for leakage, you may find that pads come in handy during pregnancy and keep you from changing your clothes often. Save energy where you can.

Difficulties with catheters and dehydration can result in UTIs during pregnancy. It might be hard to figure out if you have a bladder infection. Signs and symptoms include, urinary urgency, leakage, fever, chills and sweating. Increasing your fluid intake during pregnancy can help prevent bladder infections. Remember that UTIs put you at risk for autonomic dysreflexia (if your injury is at T6 or above).

Respiratory Needs During Pregnancy:

You may experience changes in respiratory function when you are pregnant. If your injury has affected your breathing in the past, you might find it is harder to breathe once the baby starts to grow and press against your diaphragm. As is the case in women without SCI, asthmatic symptoms may get worse during pregnancy. Consult your doctor if you are feeling short of breath, you get a respiratory infection or feel changes in your breathing.

Things to Look Out For:

- **Pressure Sores**
  - Weight gain and increased difficulty with mobility increase your risk for developing pressure sores. It is even more important than usual to check your skin during pregnancy.

- **Nausea**
  - Many women, with or without SCI, experience nausea during pregnancy. Taking prenatal vitamins may also upset your stomach. Taking them at night before bed may help avoid the nausea while you sleep. It is important to remember that a sufficiently large and balanced diet is necessary for your baby to grow. Tell your doctor if nausea persists.