

## Mother Dietary Consumption During Pregnancy and its Relationship to Newborns' Nutritional Status

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### DESCRIPTION

The terms "nutrition and pregnancy" refer to the planning of a person's diet before, during, and after becoming pregnant. The fetus begins to receive nutrition at fertilization. Because of this, the mother's nutrition is crucial from far before conception—probably months earlier—as well as during pregnancy and breastfeeding. Many studies have demonstrated that the mother's diet has an impact on the child's health, including the chance of developing cancer, cardiovascular disease, hypertension, and diabetes later in life. Due to inadequate nutrition, an estimated 24% of new-borns worldwide are born with birth weights that are below ideal. In the early stages of pregnancy, the baby's growth can be badly and permanently impacted by personal behaviours such as excessive caffeine or alcohol intake. Using caffeine when pregnant is linked to a higher chance of miscarriage. The evidence favours the idea that eating fish while pregnant has more advantages than disadvantages, but the kind of fish matters. The nutrient floater's synthetic version, folic acid, is essential before and during pregnancy.

### Nutrition before pregnancy

Along with other diets, there is a possibility of over-supplementing; nonetheless, as general guidance, both governmental and medical recommendations urge women to heed the directions on each vitamin packages regarding the correct or suggested daily dosage (RDA). Iron supplementation daily throughout pregnancy significantly increases birth weight, potentially lowering the risk of low birth weight. Prior to conception, folic acid intake is advised to stop the development of spinal bifida and other neural tube defects. In addition to eating foods high in folic acid, such as green leafy vegetables, it should be consumed as at least 0.4 mg/day during the first trimester of pregnancy, 0.6 mg/day throughout the pregnancy, and 0.5 mg/day while nursing. Pregnant women usually have insufficient iodine levels, and iodine is essential. Iodine-containing prenatal vitamins should be taken by expectant mothers. The amount of solar exposure affects vitamin D levels.

While it was once believed that supplements were only required in high-latitude regions, new investigations of vitamin D levels

across the United States and many other nations have revealed that many women had low levels. A increasing body of research supports the idea that pregnant women should take 1000 IU of vitamin D daily as a supplement. Despite the fact that supplementation has not yet been proven to improve pregnancy outcomes or the health of the unborn child, it has been discovered that many pregnant women have low levels of vitamin B12. Docosa Hexaenoic Acid (DHA) and Eicosa Pentaenoic Acid (EPA), two long-chain polyunsaturated fatty acids, are advantageous for embryonic development. Studies have revealed that mothers who consume more have a lower risk of preterm birth and low birth weight. Especially in the second and third trimesters, the fetus and placenta require iron for proper growth.

It is advised to keep concentrations over 11 grams per deciliter in the first and third trimesters and above 10.5 grams per deciliter in the second. Moreover, it is necessary for the hemoglobin to be produced prior to conception. Although there is no proof that hemoglobin levels of 7 grams/100 ml or greater are harmful to pregnancy, it must be acknowledged that maternal hemorrhage is a major cause of maternal mortality globally and that having a reserve capacity to carry oxygen is advantageous.

The results of the Cochrane analysis show that iron supplementation reduces the risk of maternal anemia and iron deficiency during pregnancy, but the advantages for other mother and child outcomes are less clear.

### Nutrition during pregnancy

Vitamin and mineral guidelines for pregnancy and breastfeeding have been set by the European Union and the United States, respectively. The higher of the two amounts is shown in the table below. Recommendations for nursing and pregnancy are listed separately in the citations. In order to accommodate women who have above-average demands, recommendations (RDAs Recommended Dietary Allowances; PRIs (Population Reference Intakes) are set higher than what has been proven to be the average requirement. Because there isn't enough data on some nutrients to provide recommendations, the phrase "Adequate Intake" (AI) is used to refer to what seems to be enough.

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