



Baby Steps

Conception to first year of life

The doctors from IMC and our trusted partners have created this helpful guide to help you through your journey to becoming a parent.



International
Medical Clinic

International Doctors
Caring for You

Having a baby in Singapore

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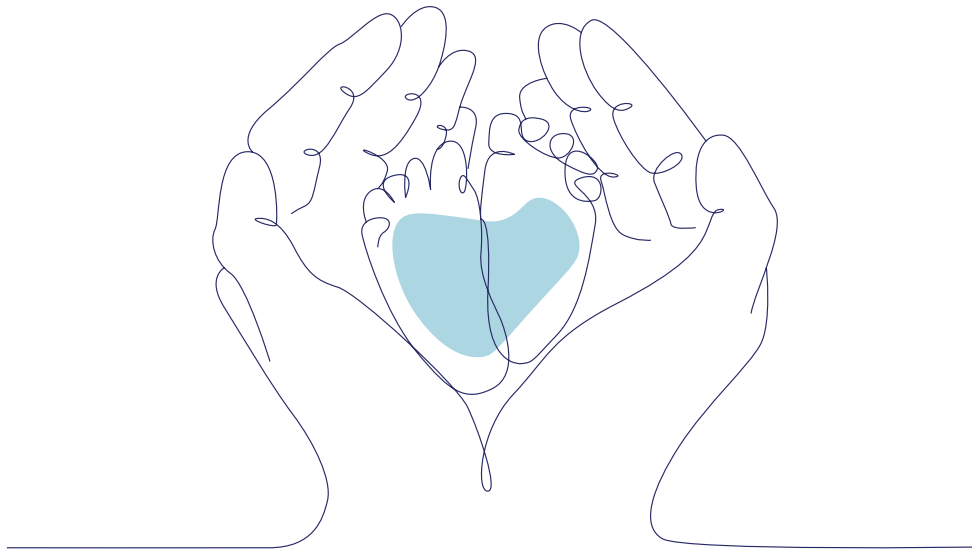
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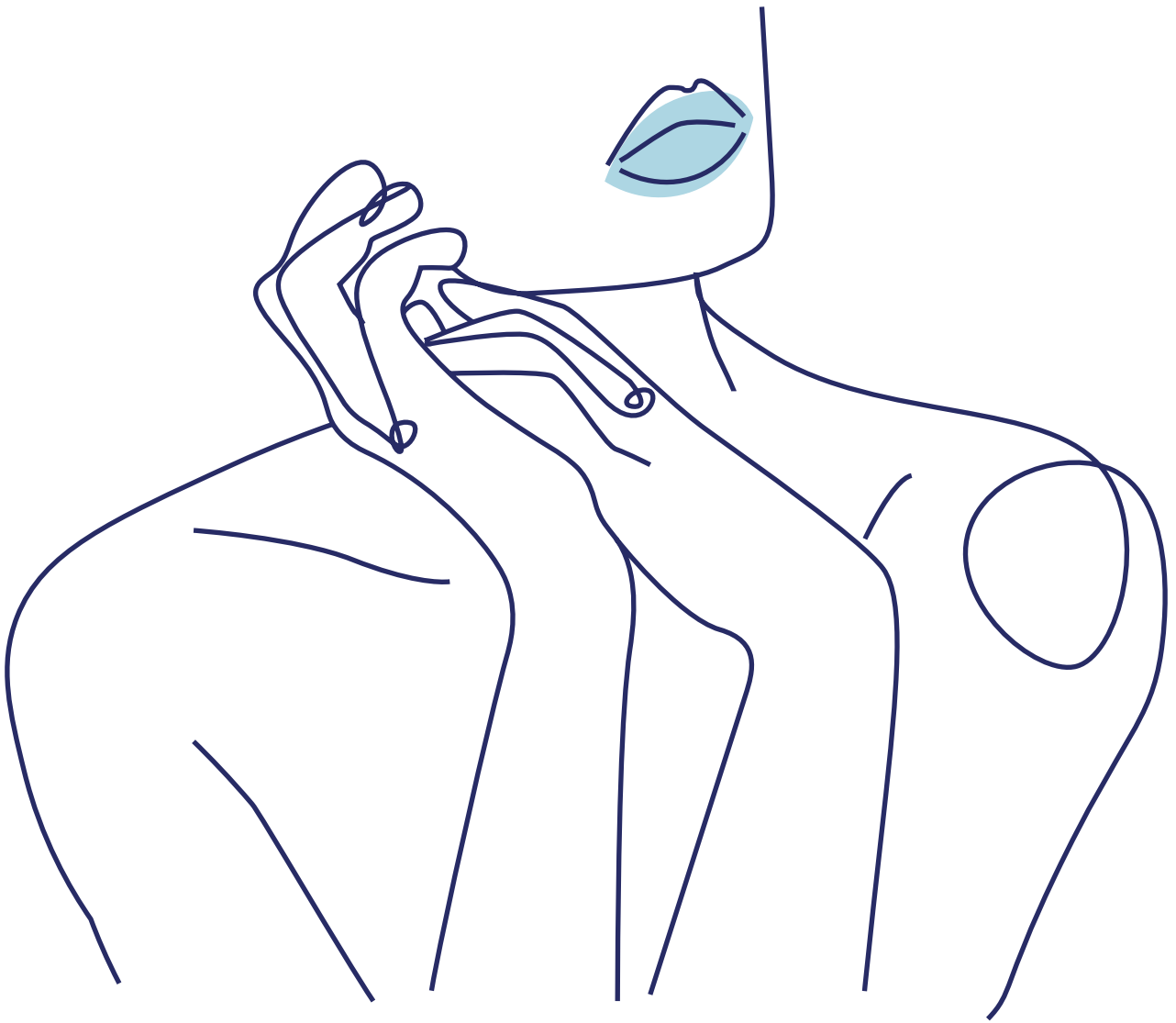




Baby Steps

We understand the struggles new parents can face being away from family and loved ones. The lack of support locally can be daunting for first-time parents. We also recognize that there is a lot of information to consider when deciding to start a family in Singapore, therefore we have created a 'Baby Steps' guide that covers everything from preconception to the first year of life. We have collaborated with talented individuals to create this guide for you. So wherever you're on your journey to parenthood, we're here to help guide you along the way.

International Medical Clinic (IMC) has been looking after patients and families in the Singapore community for over 23 years. Our team of internationally trained doctors and support staff create an inclusive, approachable and caring environment. For more than twenty years, we have established a rapport with trusted, passionate partners and share the common goal of health promotion and patient-centered care.



Preconception

— PLANNING YOUR PREGNANCY —



There is evidence that optimising your health prior to conceiving improves pregnancy outcomes and establishes the foundation for your child's health throughout their life.

Indeed, your lifetime risk of diabetes and cardiovascular disease is influenced by your mother's health status before you are conceived! Couples planning a pregnancy have a window of opportunity to evaluate their health, to promote a safer and healthier pregnancy for mum and baby.

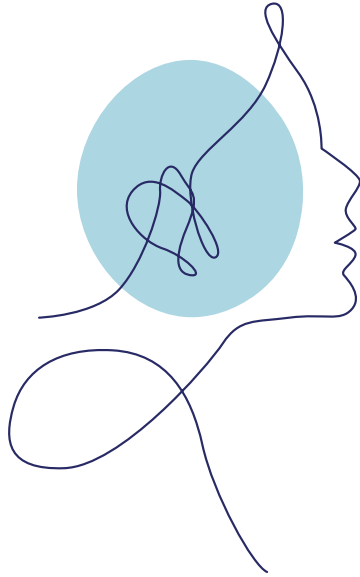


Dr. Rebecca Daly

MBCHB (Liverpool, UK), MRCGP (UK), DRCOG (UK)



Preconception



What is a PRECONCEPTION CHECK-UP?

Preconception care involves identifying and modifying medical, psychological, behavioural and environmental risks to both women and men. Your doctor will ask questions about your reproductive history.

This includes previous pregnancies, details regarding your periods and other gynaecology concerns. For men, any conditions affecting the testicles or known fertility issues.

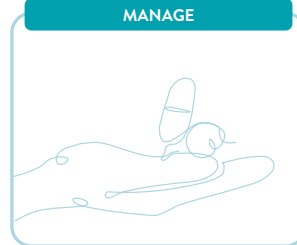
Here are a few tips if you suffer from any long-term medical conditions (eg. asthma, diabetes, thyroid problems) :

EVALUATE



It is important to have an evaluation of how this might impact on pregnancy and vice versa.

MANAGE



Disease management should be optimised before you conceive.

DISCUSS WITH YOUR DOCTOR



Discuss any medication you are taking, both prescribed and over the counter, including vitamins, herbal medications and supplements.

It is important not to stop any prescribed medication without prior consultation with your doctor, as this could lead to worsening of underlying disease and can negatively affect pregnancy outcome. Some medications are continued in pregnancy, based upon a decision regarding potential risk versus benefit.

Planning

YOUR PREGNANCY



If you have suffered...

with mental health issues in the past, it is useful to talk to your doctor about perinatal management.

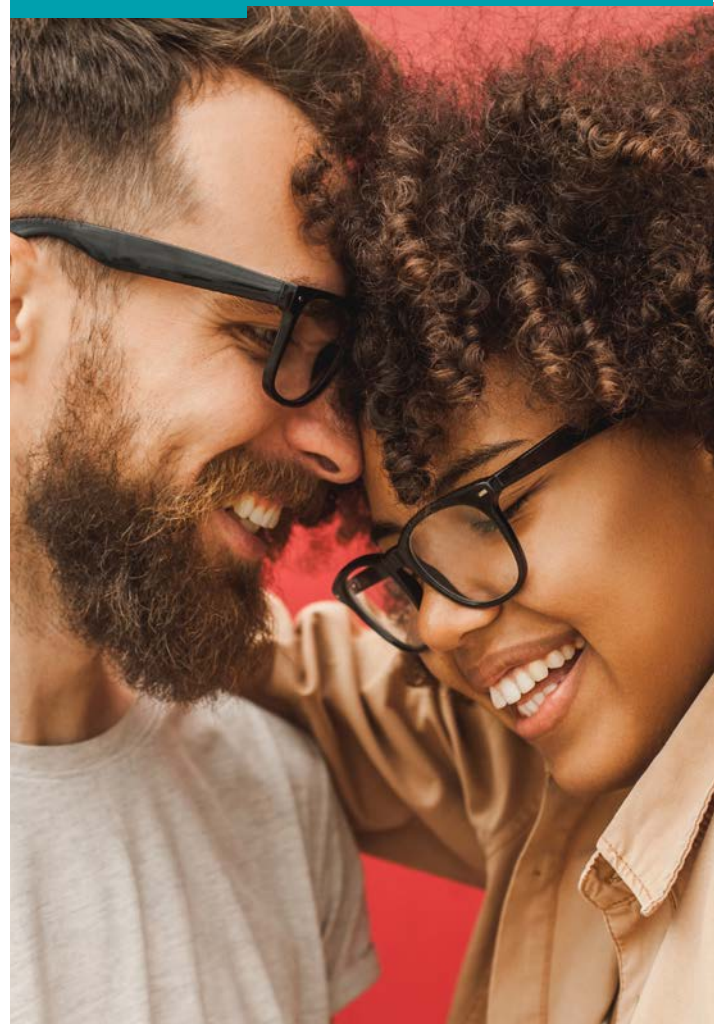
You may consider additional psychological support in pregnancy and postpartum.

Untreated mental illness is associated with worse foetal outcomes so it is better to plan ahead. Antidepressants can be taken during pregnancy and when breastfeeding after an open discussion with your doctor.

Some mood stabilisers are harmful in pregnancy and you should be offered alternative medication prior to trying to conceive.

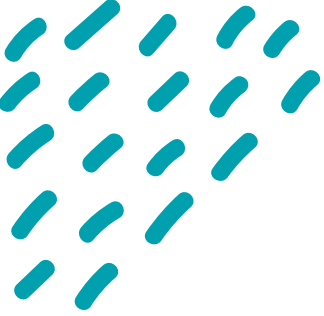
Some couples may be at higher risk of genetic conditions, such as thalassaemia, cystic fibrosis and sickle cell disease. Inform your doctor of any significant family history. Pre-conception screening may be considered.

Ensure your immunizations are up to date, in particular chickenpox, hepatitis B and the MMR.



If you are unsure of your vaccination status, your doctor can run a blood test to check your immunity.

If you are not immune, it is advisable to delay pregnancy until you have undertaken the vaccination as such infections can be harmful to your baby if exposed during pregnancy.



Preconception



Women should take folic acid (0.4mg) for at least 12 weeks before pregnancy, as this reduces the chances of spina bifida by 50-70%.

Some women may require a higher dose (5mg) if they have certain underlying medical conditions and your doctor can advise you. All women should be taking 10mcg of vitamin D once a day.

Ensure you are up to date with your cervical screening as this is usually avoided once pregnant.

You should also undertake an STI screen if there has been any risk.



MAINTAIN A HEALTHY WEIGHT

aiming for a BMI between 19-25.

Being overly thin or overweight can affect fertility by suppressing ovulation.



OBESITY

in pregnancy leads to a higher risk of gestational diabetes, high blood pressure in pregnancy, preterm delivery, miscarriage and stillbirth.



BEING UNDERWEIGHT

can cause preterm delivery, low birth weight and miscarriage.

Smoking reduces fertility for both men and women and is harmful to the unborn child. Stopping is advised. It can be challenging to quit, but talking through your options with a doctor can help.

Planning

YOUR PREGNANCY

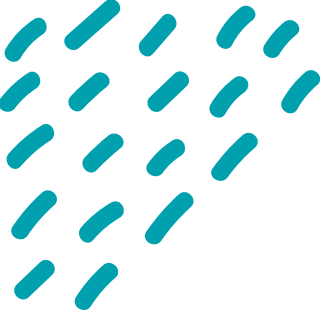


For men, drinking over the recommended units of alcohol limits can affect sperm quality.

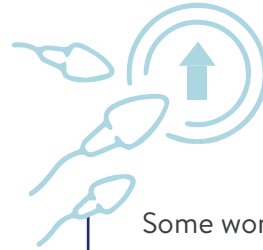
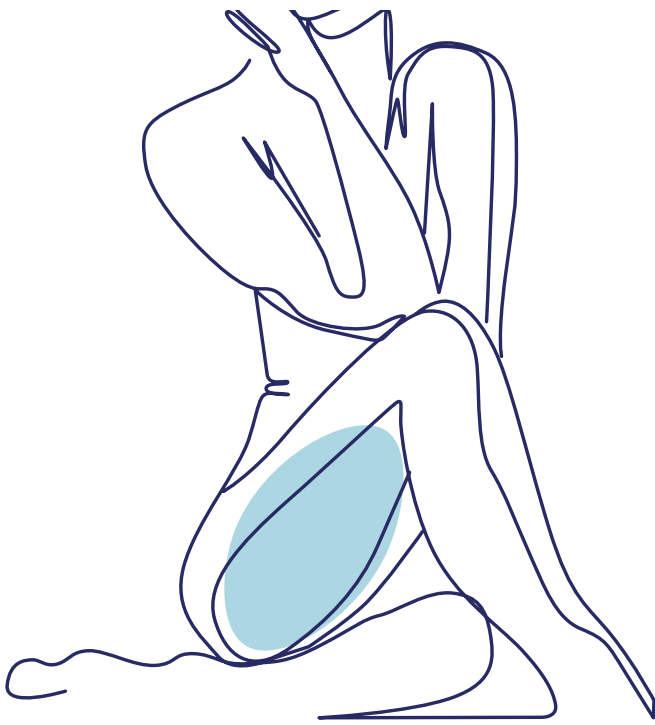


For women, drinking more than 1 or 2 units of alcohol twice a week or becoming intoxicated reduces the chances of conceiving and increases the risk of foetal harm.

Some evidence suggests limiting consumption of caffeine helps with fertility too.



Preconception



Some women note a delayed return to fertility after stopping the depo injection, which should be kept in mind. You may switch to an alternative method for 12-18 months before you wish to start trying for a baby.

The combined contraceptive pill can also delay fertility in a minority of women but in most cases, fertility will return within 2 months.

STOPPING CONTRACEPTION

As soon as any form of contraception is stopped you may become pregnant if sexually active. Some people advise delaying getting pregnant until you have had one normal period off contraception. This is not essential, but does allow you to calculate how pregnant you are based on your last menstrual period.

Fertility levels return very quickly when you remove the contraceptive implant or the coil.



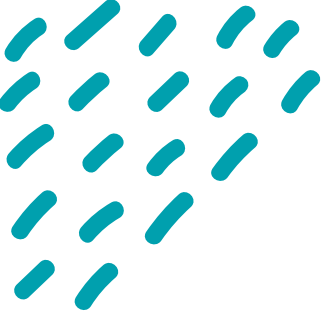
Planning

YOUR PREGNANCY

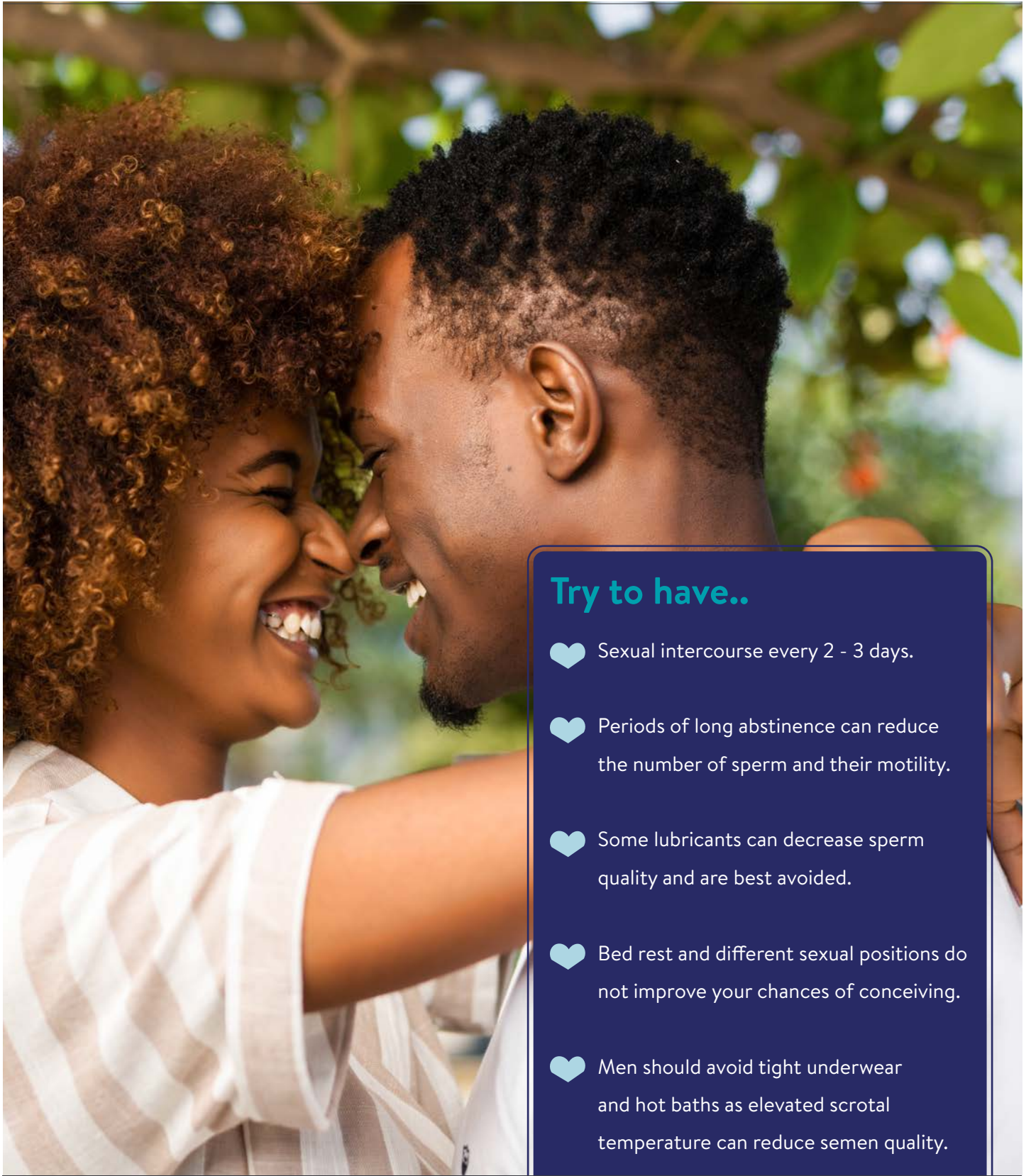


TOP TIP FOR CONTRACEPTION

The “fertile window” is usually 6 days prior to ovulation. Ovulation usually happens 14 days before your period, but this can vary between cycles, even if you have regular periods. Monitoring temperature, vaginal mucus and using urine ovulation tests can help estimate ovulation, but timing sex to coincide perfectly with ovulation does not always improve success and can cause undue stress. Once you ovulate, the egg will only survive for 12-24 hours, but sperm can survive in the female for 5-6 days so you really want to have sex well before you ovulate. Waiting for the urine stick to predict ovulation means you could miss the opportunity.



Preconception

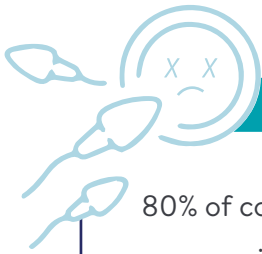


Try to have..

- ♥ Sexual intercourse every 2 - 3 days.
- ♥ Periods of long abstinence can reduce the number of sperm and their motility.
- ♥ Some lubricants can decrease sperm quality and are best avoided.
- ♥ Bed rest and different sexual positions do not improve your chances of conceiving.
- ♥ Men should avoid tight underwear and hot baths as elevated scrotal temperature can reduce semen quality.

Planning

YOUR PREGNANCY



Trouble conceiving?

80% of couples will conceive within one year if:

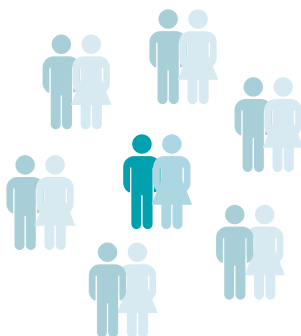


They are having regular intercourse without contraception.

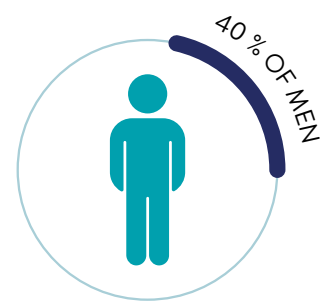
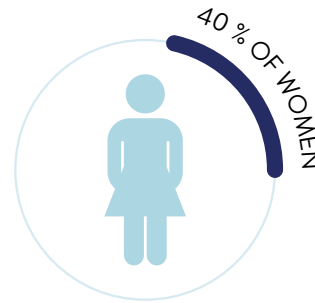


The woman is less than 40 years old.

In those who do not conceive in the first year, half will conceive in the second year.



One in seven couples will face difficulty conceiving, which can cause a great deal of stress. Causes of infertility are many and varied.



In about **40% of cases disorders are found in both the man and the woman.**

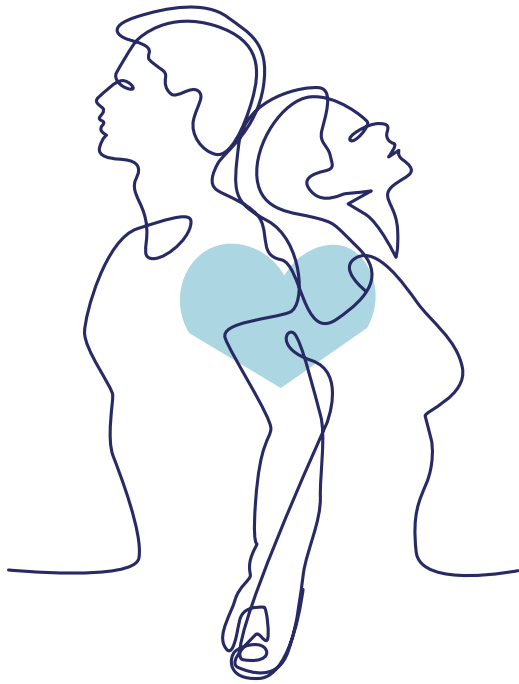
The biggest determinant of fertility is the woman's age, followed closely by sperm related causes in the male. In 25% of couples no cause will be found.

If you have not conceived after one year of unprotected vaginal sexual intercourse, start a discussion with your GP for a clinical assessment and investigation.

If you are 36 or older or have known underlying conditions that could affect fertility (such as endometriosis or polycystic ovaries) then an earlier assessment can be offered after 6 months.



Preconception



Your GP can start with relatively simple, non-invasive tests. Semen analysis is the most important male fertility test and measures the number of sperm and their quality.

Female tests of fertility include a pelvic ultrasound scan and blood tests. The level of progesterone on a blood test taken seven days prior to menses (e.g. day 21 of 28 day cycle) can confirm if you are ovulating. Other hormonal causes of infertility can be identified with blood tests on day 3,4 or 5 of the cycle.

These include LH, FSH, thyroid function, testosterone, sex hormone binding globulin and prolactin.



AMH (Anti-Mullerian Hormone)



Levels in the blood accurately reflect the ovarian follicular reserve.



This provides you with information regarding the quantity of your eggs remaining and is a sensitive marker of ovarian reserve.

However, do note it does not tell you about the quality of the eggs.

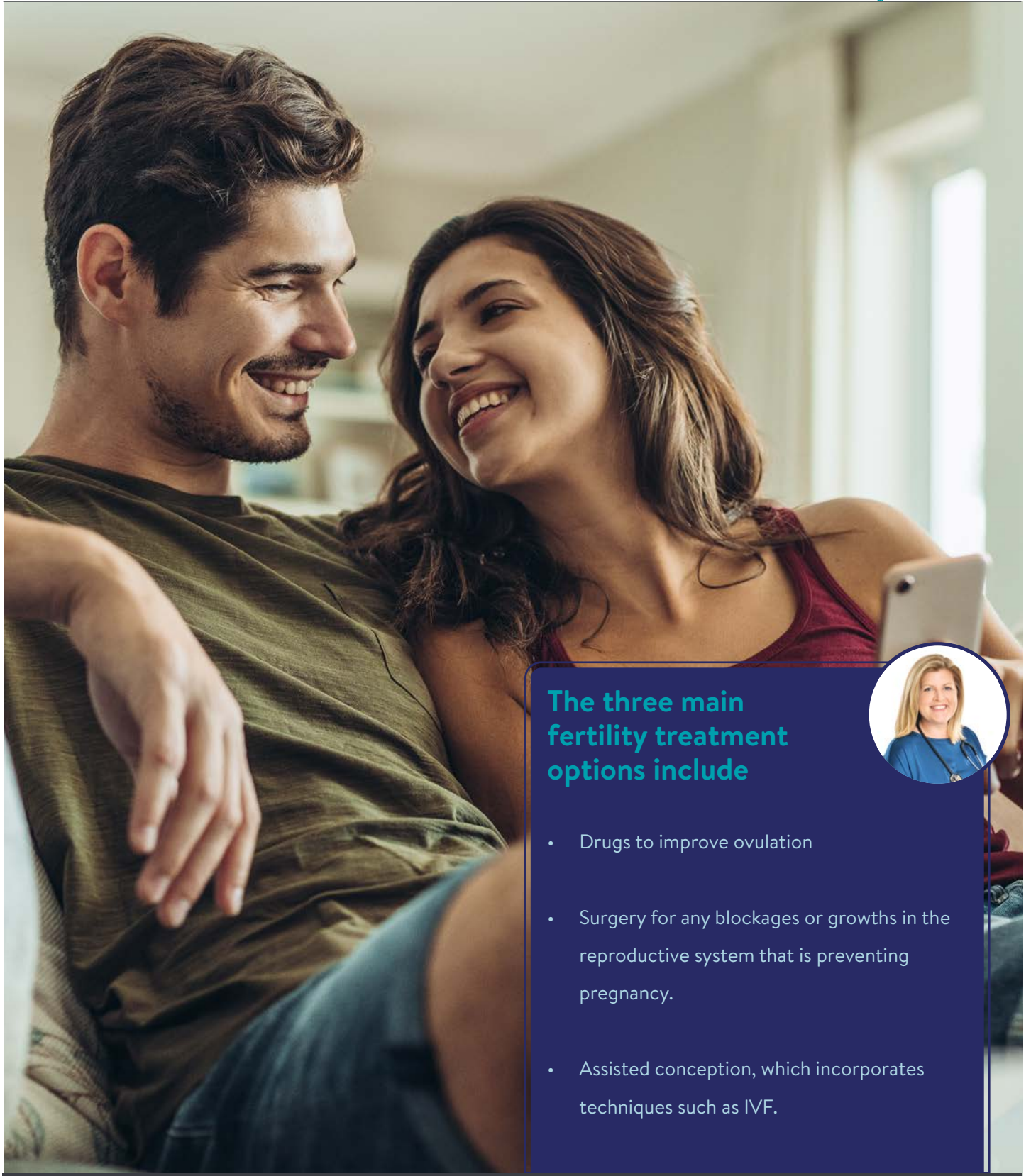


The results should be interpreted based on your age. AMH can also be used in predicting the success of in-vitro fertilization (IVF).

Further assessment with a specialist may then be required. This can include more invasive tests to look at the health of the fallopian tubes, ovaries and womb (Hysterosalpingography, laparoscopy and hysteroscopy).

Planning

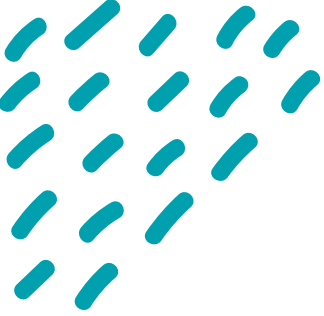
YOUR PREGNANCY



The three main fertility treatment options include



- Drugs to improve ovulation
- Surgery for any blockages or growths in the reproductive system that is preventing pregnancy.
- Assisted conception, which incorporates techniques such as IVF.



Preconception



Planning

YOUR PREGNANCY



The Pre-conception Nutrition

Vanessa McNamara, The Travelling Dietitian
Masters in Nutrition & Dietetics from The University of Sydney in 2000.

Making healthy food choices when you are pregnant or planning a pregnancy is not only beneficial for the growth of your baby but will help to keep you as healthy and energetic as possible during your pregnancy and beyond. The basic principles of healthy eating apply when you are planning a pregnancy as well as while you are pregnant and post-delivery.

There are some additional requirements, however, that are worth taking note of. It is important to be eating a well-balanced diet for both men and women who are planning a pregnancy.



Taking a folic acid supplement of 400µg/day is highly recommended for women as it is required pre-conception to reduce the risk of neural tube defects and to promote healthy cell growth in your baby.

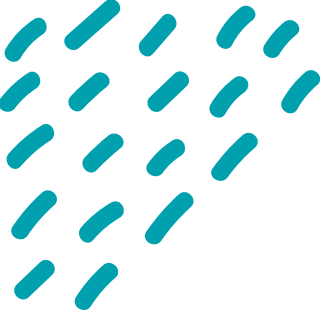


Now is a great time to be including as many folate-rich foods as you can, such as leafy greens, broccoli, whole grains and fortified breakfast cereals.



Maternal pre-pregnancy weight can be a strong predictor of fertility so having a low or high body weight can influence menstrual cycles, hormone balance and pregnancy outcomes.





Preconception



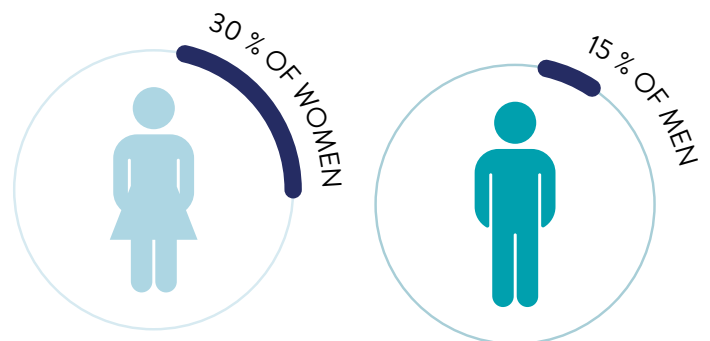
Psychology Support

Pru Jones, Counselling Connectz
Masters in Counselling (Monash University)

Our patients often describe their conception journey as a rollercoaster ride of emotions. Each month there is rising expectation and hope, followed by a plummet to despair and disappointment if another cycle or treatment does not yield that longed-for positive result. It's difficult to balance hope and realism; work and medical appointments; and internal and external pressures to build your family. Many lose faith in their body, blame themselves for past lifestyle choices and report disruption in their couple intimacy, both physical and emotional.

These areas are often core to how we define ourselves and, in that vulnerability, past hurts can re-emerge.

On top of this, patients often put huge pressure on themselves to 'be positive', because we all know stress impacts our chances of pregnancy! Unfortunately, this often goodwilled 'just relax!' mentality can tip patients into isolating shame and self-doubt.



If you can relate to any of this, you are not alone. **30% of women and 15% of men beginning IVF treatments meet the criteria for a depressive disorder.**

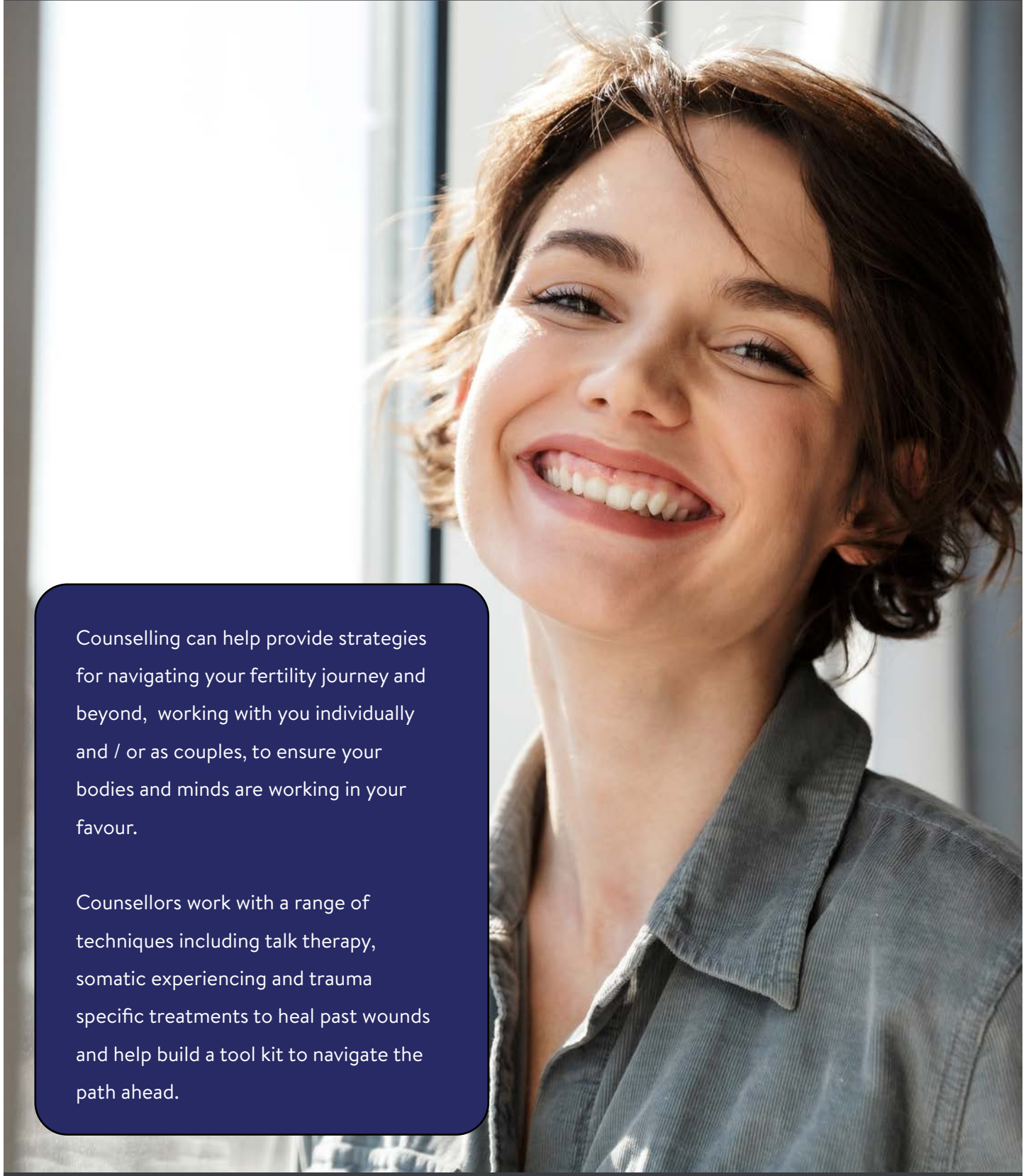
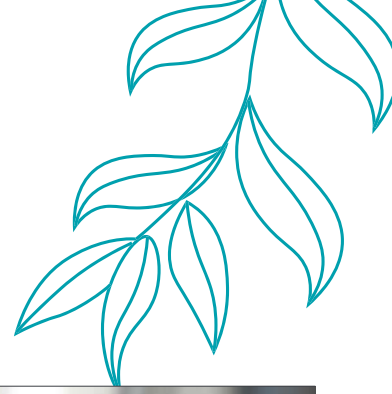
The stress of fertility treatments has been shown to be comparable with that associated with heart disease, cancer and HIV.



The journey to parenthood needs the right science, a healthy body and a healthy mind.

Planning

YOUR PREGNANCY



Counselling can help provide strategies for navigating your fertility journey and beyond, working with you individually and / or as couples, to ensure your bodies and minds are working in your favour.

Counsellors work with a range of techniques including talk therapy, somatic experiencing and trauma specific treatments to heal past wounds and help build a tool kit to navigate the path ahead.



Pregnancy

WHAT TO EXPECT WHEN
YOU'RE EXPECTING

What to expect

WHEN YOU'RE EXPECTING



What to expect at your first Obstetric appointment?

Natasha Cullen, Beloved Bumps
UK Certified Midwife, Doula & Hypnobirthing Practitioner

Obstetric Appointments

You will first see your obstetrician when you have found out that you are pregnant - this can be as early as 6 weeks, but any time before 10 weeks is ideal.

At this appointment you can expect an ultrasound scan to confirm and date your pregnancy.

You will have blood tests taken and be given some information on screening tests for your next appointment. Your Doctor can discuss your diet, exercise and taking supplements at this appointment.

10-12weeks

At this appointment you will be offered screening. There are different types of screening tests available such as the Harmony test, OSCAR and NIPT. If you decide to go ahead with these tests, they will come back with a risk factor for different chromosomal abnormalities.

If this risk factor is 'high risk', you will be offered further screening tests such as an amniocentesis which will give you an accurate result as to whether your baby has a chromosomal abnormality.

You will then have appointments every 4 weeks until you are around 30 weeks pregnant, when they bring you in a bit more frequently (2-3 weeks).



Pregnancy

20 weeks

At this appointment you will have another big scan where they will be checking the anatomy of your baby. This will be looking in detail at the baby's bones, heart, brain, spinal cord, face, kidneys and abdomen and they will look out for around 11 different conditions.

28 weeks

You will be offered a screening test at this appointment for Gestational Diabetes - this involves fasting, drinking a sugary drink and 3 blood tests an hour apart. You will also be offered your Anti-D injection if your blood group is Rhesus negative.

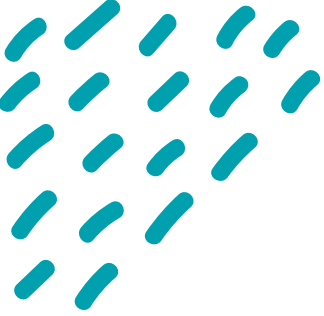
In Singapore, you tend to have an ultrasound at most appointments with your Doctor.



What to expect

WHEN YOU'RE EXPECTING





Pregnancy



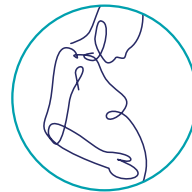
Antenatal Classes

Natasha Cullen, Beloved Bumps
UK Certified Midwife, Doula & Hypnobirthing Practitioner

When you are around 12 weeks pregnant onwards, its time to start thinking about your antenatal classes.

These are a great way to not only learn about what to expect from your labour, birth and baby, but also to connect with like-minded parents who are having a baby at the same time. Beloved Bumps provides Singapore's most popular Prenatal and Postnatal services – a one stop shop for all your needs. Their classes are taught by midwives from the UK and France who have a wealth of knowledge about all types of birth, as well as the Singapore system and hospitals.

THEIR ANTENATAL CLASSES will cover:



Normal Labour and Birth



Induction of labour



Caesarean Section



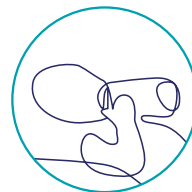
Instrumental birth



How to care for you baby



Postnatal recovery for mum



Bottle feeding



Breastfeeding

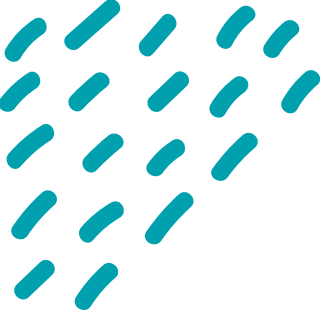
What to expect

WHEN YOU'RE EXPECTING

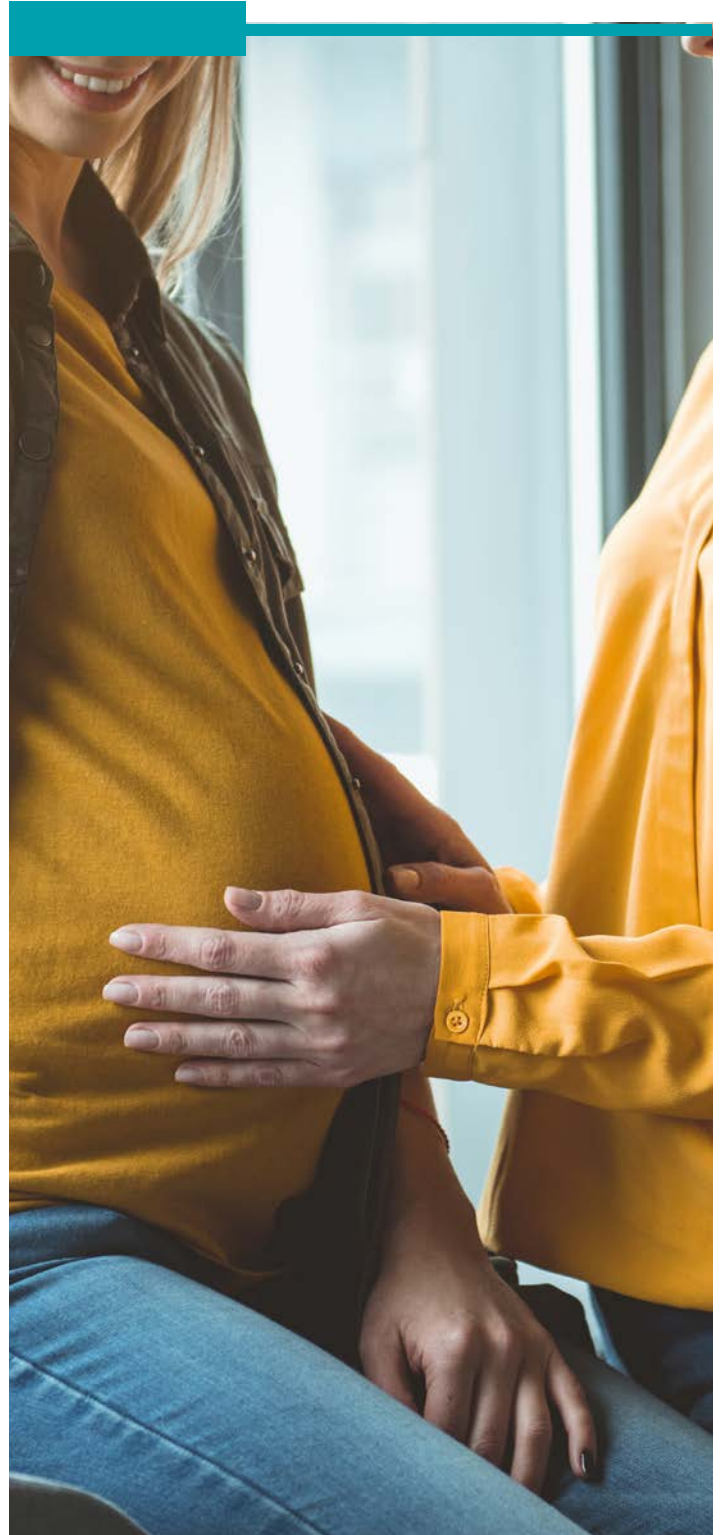


Doula

A doula is someone who supports you during your pregnancy, labour, birth and postnatally. You may want to have a doula during your birth if you want to have extra support, and have someone to help guide you, especially if you are hoping to have a natural birth. In Singapore, it isn't uncommon to be left in the delivery room with just yourself and your partner, but you can opt to have a doula with you to support you in early labour at home, accompany you in hospital and support you, and then visit you at home to help with feeding and baby care.



Pregnancy



Sassy Mama Singapore

Parenting/Lifestyle Website

<https://www.sassymamasg.com/>

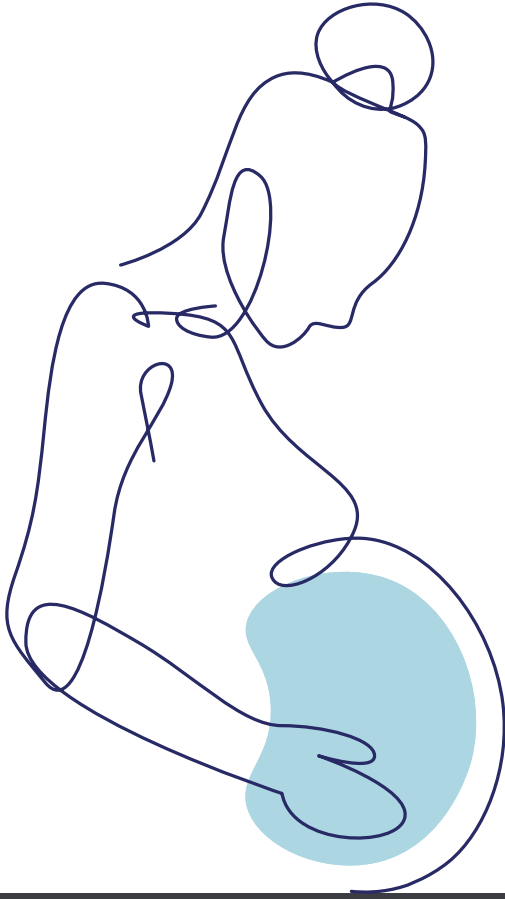
There's plenty to think about if you're planning on having a baby.

If you're opting for a hospital birth. The latter is typically driven by your choice of OBGYN and while maternity care in Singapore has a very high international standards, the hospital you choose can have significantly different costs.

As such, you should carefully consider the various costs, maternity packages and types of services and offerings many public and private hospitals in Singapore have.

What to expect

WHEN YOU'RE EXPECTING



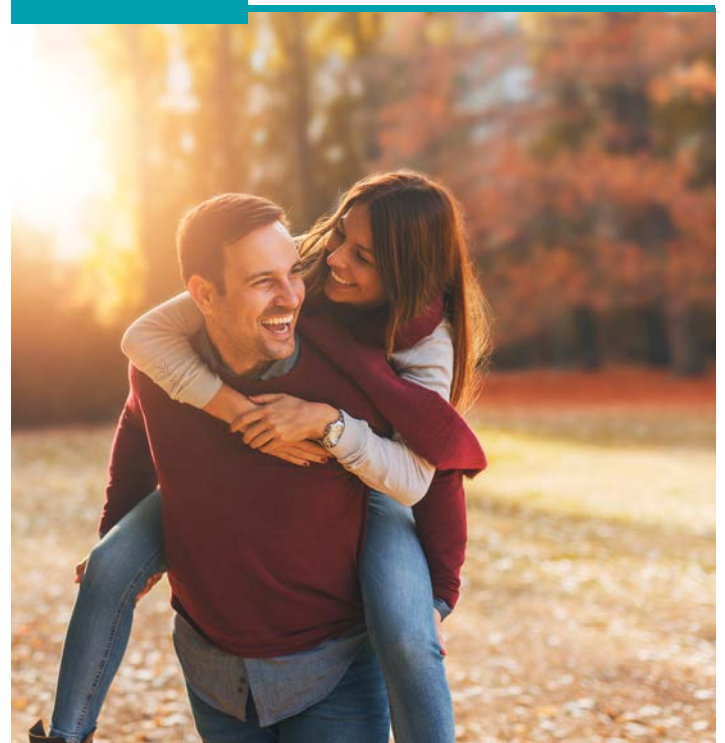
To get started, scroll to the bottom of the page, and key in the word 'birth' in the search box. This will display several different options (normal birth, assisted birth, C-section, etc).

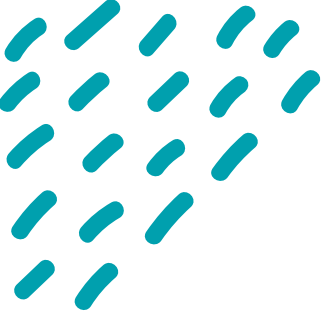
Click on the option you're interested in and the estimator will display a cost benchmark for your reference. And while these estimates are always handy when you're trying to decide what's best for you when giving birth in Singapore, it's also important to remember that the actual bill size may vary depending on the type of treatment required, pre-existing medical conditions, the type of maternity packages you choose and the length of your stay.

How to Estimate the COST OF GIVING BIRTH IN SINGAPORE

Hospital rates may vary depending on what you need, and often, it can be frustrating if you don't have easy access to this information.

One solution to getting an estimate is the [MOH Bill Estimator](#) function, which allows you to search for the expected cost of a hospital stay depending on your needs.





Pregnancy

Deciding Between

PUBLIC AND PRIVATE HOSPITALS IN SINGAPORE



PROS & CONS ...

Birthing at a public hospital in Singapore

Pros:

- Lower cost – you can also opt to be a private patient at a public hospital to access better grades of room and choose your OBGYN.
- If there are any unexpected complications you have access to Neonatal Intensive Care Units (NICU) and other specialist facilities.
- You are more likely to have a midwife-led birth if this is what you want.
- NUH, in particular, is at the forefront of the natural birth movement in Singapore.

Cons:

- Admin and wait times tend to be longer
- Stricter visiting hours
- Unlike private hospitals which will help to process insurance claims, with public hospitals you'll have to handle the paperwork yourself.
- You might need to wait longer for pain relief



PROS & CONS ...

Birthing at private hospitals in Singapore

Pros:

- Smoother check-in and billing
- More luxurious surroundings and private rooms on demand
- Less time pressure as they're not trying to process as many people
- Guaranteed OB-GYN of choice
- Amusing perks like cocktail parties, head massages and parking spots!
- The cost difference between public and private is sometimes not as large as you might expect.

Cons:

- More expensive
- If there is an emergency you might need to get you or your baby transferred to a public hospital with a larger NICU or more specialist expertise.
- More OB-GYN led, slightly less active midwife support

What to expect

WHEN YOU'RE EXPECTING



Top Tip on Reading Maternity Hospital Reviews

For a list of the hospital in Singapore and what each hospital offers click the link below to access SassyMama's full rundown.

<https://www.sassymamasg.com/pregnancy/where-to-give-birth-in-singapore-public-vs-private-maternity-hospitals/>



So how do you choose which hospital?

'If you are looking for a particular type of birth, I would highly recommend you choose the OBGYN over the hospital – all hospitals have similar facilities, but your Doctor really makes a difference. They will be the person managing your care, and so if you are after a natural birth, then ask around/ contact us to find out which Doctors are more 'expectant' management than 'active' management.

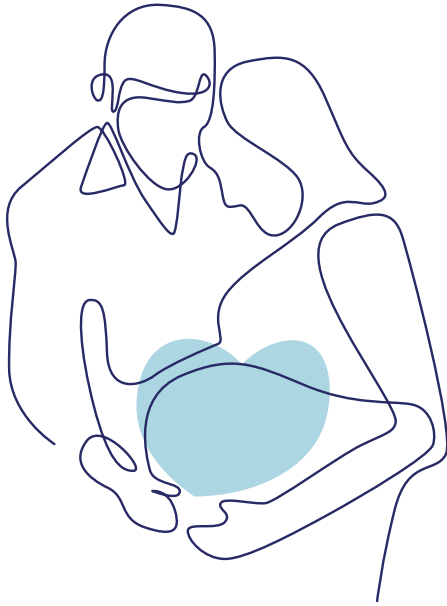
There are a lot of great Doctors in Singapore so its up to you to find them so you can have the birth you want!'



Natasha Cullen

What to expect

WHEN YOU'RE EXPECTING



Nutrition During Pregnancy

Vanessa McNamara, The Travelling Dietitian
Masters in Nutrition & Dietetics from The University of Sydney in 2000.

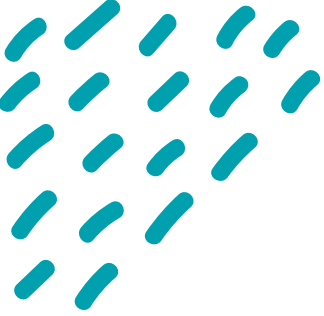
Nutrients

When you are pregnant, you need double the amount of iron than usual. This will help your body to make more blood which will then supply enough oxygen to your baby. Try to choose iron-rich foods such as lean red meat, chicken, fish, dried beans and lentils, tofu, nuts and seeds and iron-fortified cereals. Including vitamin-C rich foods such as citrus fruits and tomatoes with these foods will also help to increase iron absorption.

Iodine is a nutrient often overlooked during pregnancy, but many countries are now recommending pregnant women and those planning a pregnancy take an iodine supplement of 150µg/day. Iodine is important in the development of a baby's brain and nervous system. Iodine-rich foods such as dairy products, seafood, seaweed and iodine-fortified bread can also be included but these alone don't usually provide enough iodine to meet requirements during pregnancy.


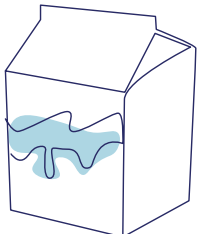

It is important you are eating enough protein and calcium during your pregnancy to support the growth of your baby and to keep your bones strong and healthy. Try to include a variety of lean meat, chicken, fish, tofu, lentils, nuts, seeds and dairy products as part of your daily intake.





Pregnancy


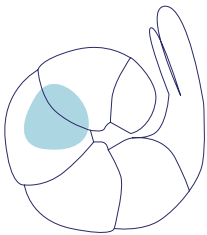
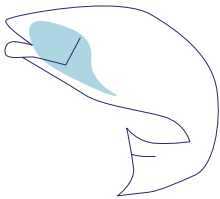
NUTRIENTS DURING PREGNANCY

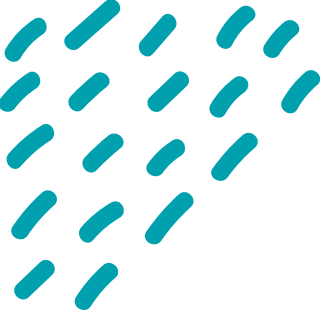
Nutrient	Role in pregnancy	Dietary sources	Amount required daily during pregnancy (minimum)
 <p>Folate</p>	<p>Reduces the risk of neural tube defects and promotes healthy cell growth in your baby.</p>	<p>Leafy green vegetables (broccoli, spinach, choy sum, gai lan), whole grains and fortified breakfast cereals</p>	<p>400mcg supplement</p>
 <p>Calcium</p>	<p>Supports the growth of your baby but also keeps your bones strong and healthy.</p>	<p>Milk, cheese, yoghurt, fortified plant milks, tofu, green leafy vegetables, almonds, canned fish with edible bones (salmon, sardines)</p>	<p>1000mg</p>
 <p>Vitamin D</p>	<p>Supports immune function and helps your body make the most of the calcium you eat.</p>	<p>Egg yolk, salmon, fortified milk and breakfast cereals</p>	<p>10mcg (400IU) supplement</p>

What to expect

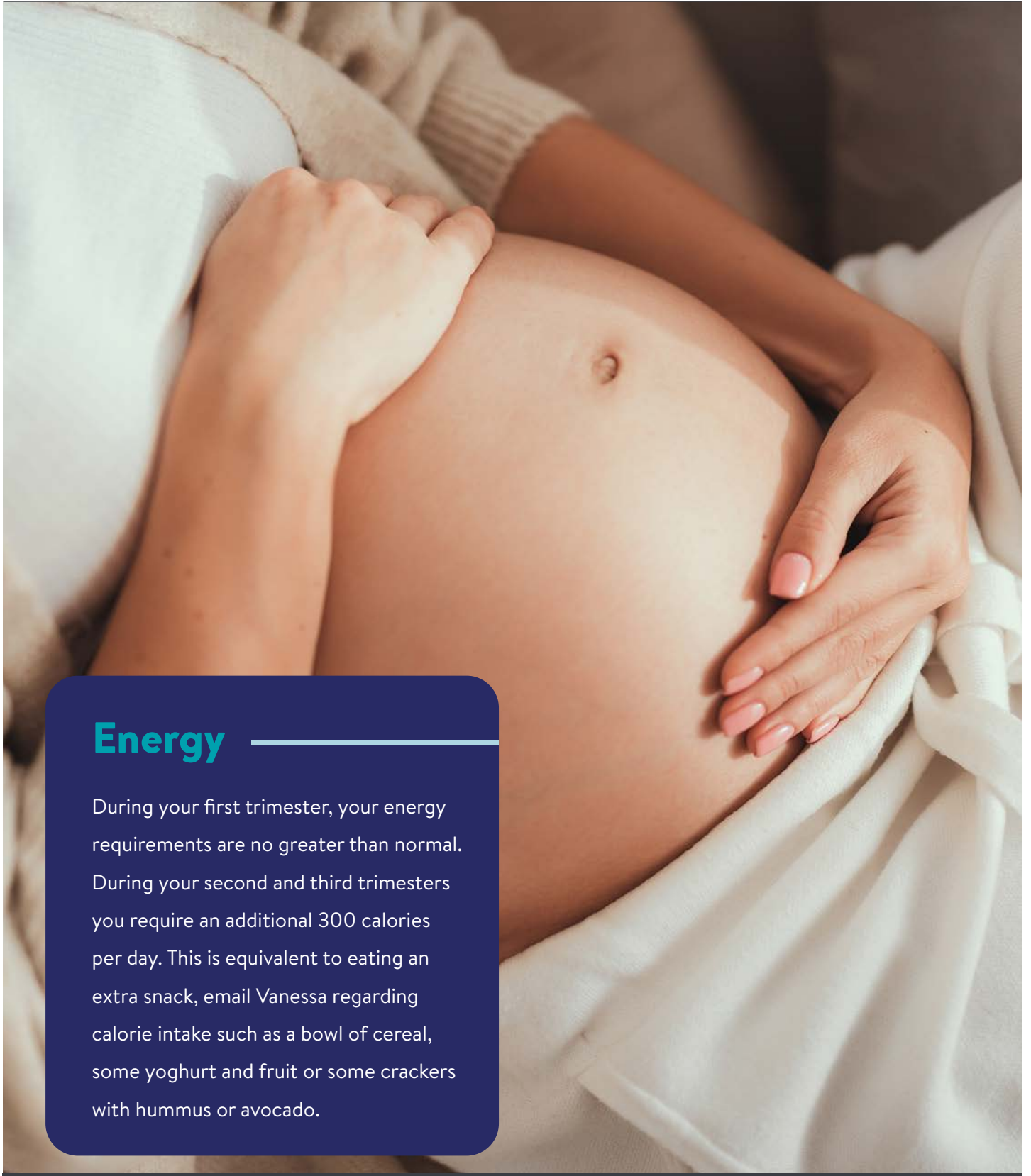
WHEN YOU'RE EXPECTING



Nutrient	Role in pregnancy	Dietary sources	Amount required daily during pregnancy (minimum)
 <p>Iron</p>	<p>Needed to form the red blood cells for you and your baby. Helps to carry oxygen around your blood and is needed for your baby to grow.</p>	<p>Beef, pork, lamb, fish, chicken, eggs, beans, lentils, tofu, nuts, seeds, green leafy vegetables, fortified breakfast cereals</p>	<p>27mg</p>
 <p>Iodine</p>	<p>Is used to produce thyroid hormones which ensure normal development of the brain and nervous system before birth.</p>	<p>Seafood, seaweed, dairy products. Most foods only contain small amounts, so a supplement is recommended</p>	<p>150mcg supplement</p>
 <p>Omega-3 fatty acids</p>	<p>Reduce the risk of pre-term birth and help baby grow to a healthy weight in the womb. May also support brain and eye development.</p>	<p>Oily fish such as salmon, sardines and mackerel. Walnuts, chia seeds and flaxseeds.</p>	<p>500mg DHA</p>



Pregnancy

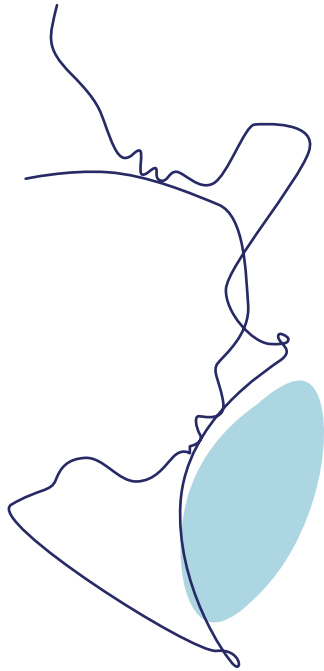


Energy

During your first trimester, your energy requirements are no greater than normal. During your second and third trimesters you require an additional 300 calories per day. This is equivalent to eating an extra snack, email Vanessa regarding calorie intake such as a bowl of cereal, some yoghurt and fruit or some crackers with hummus or avocado.

What to expect

WHEN YOU'RE EXPECTING



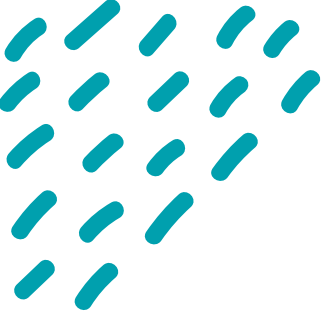
Food Safety

Hormonal changes during pregnancy may weaken your immune system, which makes it harder to fight infections. Foods are sometimes a source of infection so protecting yourself from food poisoning is important.

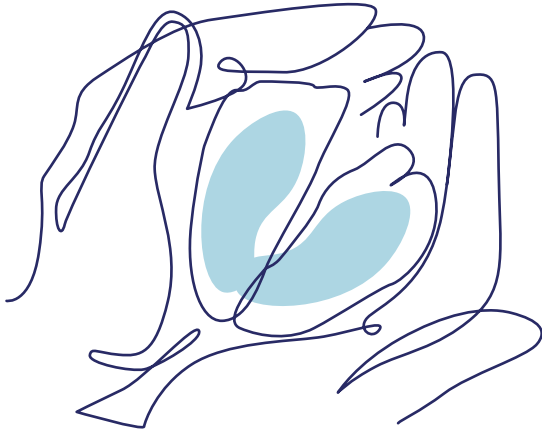
Listeria is a bug that can lead to miscarriage or severe illness in a newborn. Foods such as soft cheeses, pate, raw or smoked seafood, pre-prepared salads, raw bean sprouts and soft serve ice cream can all increase your risk of developing the infection called listeriosis, so it is best to avoid these during pregnancy.

Tips on how to prepare your food safely

- Choose freshly cooked and freshly prepared food.
- Thaw food in the fridge or defrost food in the microwave.
- Cool left-over food in the fridge rather than on the bench.
- Wash your hands, chopping boards and knives after handling raw foods.
- Make sure hot foods are hot (above 60°C) and cold foods are cold (below 5°C), both at home and when eating out.
- Make sure all food is fresh and used within the use-by date.
- Eat leftovers within 24 hours and reheat foods to steaming hot (above 74°C for over 2 minutes). Only reheat food once.
- Cook all meat, chicken, fish, and eggs thoroughly.
- Never re-freeze food once it has been thawed. Always check in the supermarket if your meat or chicken has been frozen – if so, it should not be frozen again.



Pregnancy



Caffeine

It is recommended that pregnant women, or women trying to become pregnant, limit their caffeine intake to 200mg per day.



This could be:

- 2 mugs of instant coffee (100mg each)
- 1 mug brewed coffee (140mg each)
- 2 mugs tea (75mg each)
- 5 cans of cola (up to 40mg each)
- 2 cans of 'energy' drink (up to 80mg each)
- 4 (50g) bars of chocolate (up to 50mg each)

If your pre-pregnancy BMI was:	You should gain:
Less than 18.5 kg/m ²	12.5 to 18kg
18.5 to 24.9 kg/m²	11.5 to 16kg
25 to 29.9 kg/m ²	7 to 11.5kg
Above 30 kg/m ²	5 to 9kg

It is important to try to keep your weight gain in this range for both your health and the health of your baby. Not gaining enough weight means your baby may miss out on some important nutrients which could cause problems later in life. Insufficient weight gain is also linked with preterm birth. Gaining too much weight during pregnancy can cause problems such as high blood pressure, gestational diabetes, complications in delivery, and longer hospital stays for you or your baby. These problems can be harmful to the both of you.

What to expect

WHEN YOU'RE EXPECTING



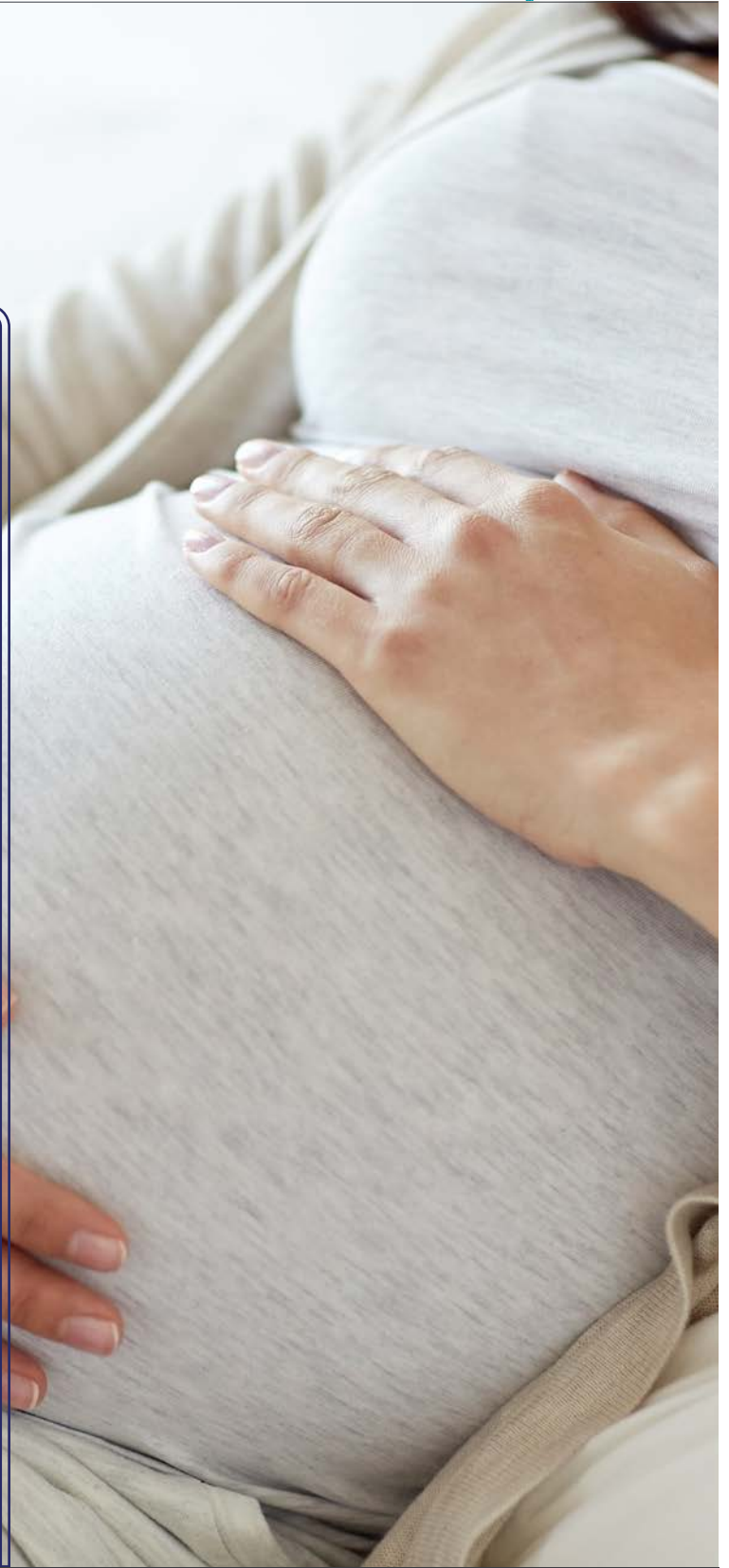
Physiotherapy in pregnancy

Preet Singh, Embrace Physiotherapy
Senior Women's Health Physiotherapist

Pregnancy is a time of immense change biomechanically, physiologically, and emotionally. Whilst your body is strong and adaptable, you may notice changes during this time that affect your levels of comfort, daily routines and wellbeing.

During pregnancy, you could experience:

- Abdominal wall lengthening
- Rib cage expanding
- Pelvis widening
- Pelvic floor muscles, ligaments and tissues are under more pressure and strain – so you may experience leaking
- The bladder is more elastic and compressed (thank you frequent night wakings!)
- Slowing down of your bowel movements





Pregnancy



The essential changes you experience may give rise to common discomforts and inconveniences, but you can benefit from working with a women's health physiotherapist for a more comfortable pregnancy and recovery.

A physiotherapist can help you manage:

- Neck and rib/thoracic pain
- Lower back pain
- Pregnancy related pelvic girdle pain including discomfort in the pelvic area or buttocks, that may or may not radiate to the thigh
- Constipation
- Incontinence
- Prolapse
- And help you with strategies that train your inner core and pelvic floor to work optimally

Working with a physiotherapist will also help you stay active during pregnancy.

When is a good time to book an appointment with a women's health physiotherapist during pregnancy?

Any time is a suitable time to make that appointment with your women's health physiotherapist and in fact sooner the better, particularly if you are in pain or are suffering from changes to your bladder and bowel habits. FYI, we will not perform an internal vaginal exam until the second trimester.

Why is it important to see a women's health physiotherapist during pregnancy for my pelvic floor?

Most women know of the benefits of doing their Kegel exercises during pregnancy. But research tells us that up to 50% of women who receive verbal or written instructions alone on how to perform a pelvic floor contraction do it incorrectly. A further 25% will bear down or put pressure through the pelvic floor, which puts unnecessary strain on already strained pelvic floor support systems. A women's health physio is well placed to assess and teach you the correct way to optimise your pelvic health during pregnancy, and through life.

What to expect

WHEN YOU'RE EXPECTING



Your pelvic floor needs to be able to contract and lift, to protect your pelvic organs and maintain continence – your ability to control your bladder and bowel movements.

But it also needs to be able to open and relax. During a vaginal delivery the pelvic floor needs to stretch up to 300% to allow your baby to pass through the birth canal. So needless to say, pregnancy is a great time to get on top of your pelvic health and also help prepare your pelvic floor for birth.

Having an optimally functioning pelvic floor means you're less likely to sustain a perineal tear, and more likely to experience a shorter labour and recovery time.

If you are pregnant now and are not experiencing incontinence or leaking you will be 56% less likely to experience incontinence in late pregnancy. You will also have a 30% lower risk of developing urinary incontinence six months post-birth. But this is only if you do regular pelvic floor exercises during pregnancy (and do them well!).

I'm having a C-section – should I still visit a women's health physiotherapist during pregnancy?



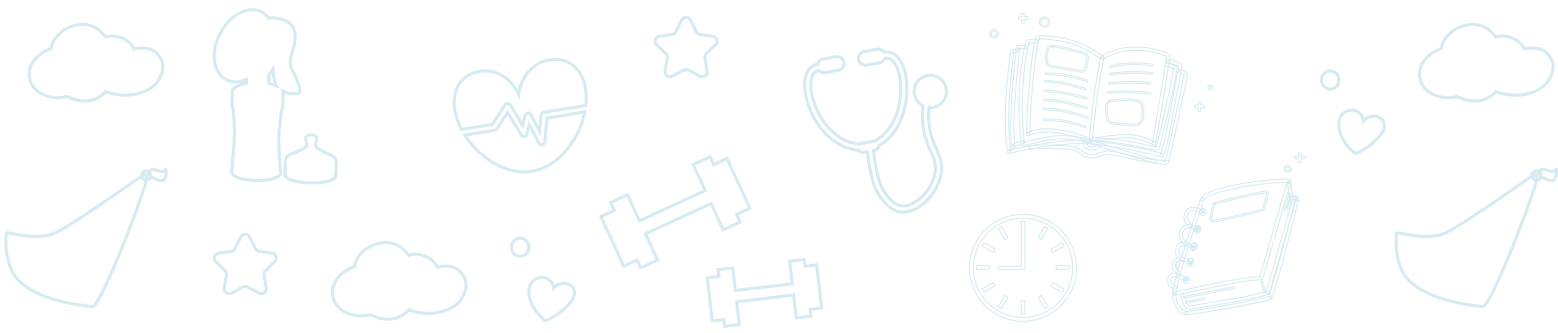
Urinary incontinence during pregnancy is a strong risk factor for postpartum urinary incontinence, regardless of mode of delivery. Did you know that your pelvic floor weakens due to pregnancy itself – regardless of mode of delivery? There is a misconception that C-sections protect against incontinence and prolapse. However, by the time we reach 50 years of age, there is little difference in the rates for urinary incontinence for vaginal delivery mums and C-section mums.

It's also important to know that there are several non-obstetric risk factors too for pelvic floor dysfunction or changes including incontinence and prolapse, from hormones, genetics to persistent heavy lifting and even excessive coughing. The most important thing to know is that help is available.



Post Pregnancy

FOR MUMMY



Postnatal Care for Mother

Dr Charu Narayanan

MBBS (Jipmer, India), MRCPCH (Paed) (UK), MRCPGP (UK), Dip Pract Derm (UK)

At IMC, we recognise the need to address the physical and mental health of the mother after giving birth. Most confident women can find the postnatal period challenging; having gone through the stress of labour and a hospital stay, they are faced with caring for a newborn baby. Furthermore, many of their concerns may be overlooked as the baby is at the forefront of attention.

Usually the mother sees her obstetrician or general practitioner at around 6 weeks for a check up of her physical and mental health.

We offer New Mummy appointments at IMC which are allocated longer appointment times (30 minutes or longer) depending on the specific needs of the mother. We aim to look at the mother's physical as well as mental health at this point of contact.

Areas of health which are looked at include:

- Ensuring the uterus has contracted; healing of episiotomy and caesarian section wounds; complaints linked to the pelvic floor (urine or bowel control).
- Cervical screening (pap smear) if required.
- Concerns around breastfeeding are addressed. Mastitis and nipple thrush are common medical complaints we encounter.
- Exploration of nutritional deficiencies: Pregnancy and breastfeeding places an extra demand for certain nutrients namely iron, Vitamin B12, Vitamin D and calcium. Blood tests and appropriate supplementation may be needed.
- Advice regarding sleep for mum and baby. Sleep is paramount for the mother's recovery and the baby's growth.

Post pregnancy - Mum

- Review of pre-existing medical conditions such as hypertension, thyroid disease or gestational diabetes.
- Certain conditions, such as varicose veins or haemorrhoids (piles), may flare up during or after pregnancy.
- Exploration of mood and emotional wellbeing (screening for postnatal depression) and advice on management.
- Status of vaccinations – Whooping Cough, Hepatitis B and Influenza vaccines are some recommended shots.
- Sexual health and contraception.

Arming women with information is important at this stage to avoid unintended pregnancy and too short an interval between pregnancies.

Each individual may have different needs and preferences when it comes to contraception. We at IMC offer an open approach, seeking to arm our patients with all the information to help them make a suitable choice.



The two main methods of birth control are hormonal and non-hormonal. Most are offered under one roof at our clinic (including the implant and coil / intrauterine device). Our clinic stocks 'Cerazette', the progesterone-only pill suitable for breastfeeding mums.

Contraception

A hectic routine that consists of demand feeding routines and inconsistent sleep means that sex may not be a priority for sleep-deprived couples. Who even wants to talk contraception at this time! However, fertility returns quicker than many people think.

METHOD A:



Lactational amenorrhoea method: Works well if mother is exclusively breastfeeding 8-12 times a day and overnight as well. Effective till 6 months of age.



METHOD B:



If breastfeeding, suitable methods include the progesterone-only pill, Mirena (intra-uterine device containing progesterone suitable for 5 years) and Nexplanon (a small hormonal implant) inserted under the skin of the inner upper arm, which provides contraceptive cover for 3 years.

METHOD C:



Combined contraceptive pill may be an option after 6 weeks of birth for breastfeeding mums and from 3 weeks if not breastfeeding in healthy women (a check for other health conditions is needed with their family doctor or gynaecologist).

Postnatal Blues and Depression

Postnatal blues are extremely common with over three quarters of women feeling sad, anxious and irritable about 3-4 days after birth and settling down by 2 weeks. This mental state resolves without treatment and with good family support.

Postnatal depression is marked by a persistent low mood for at least 2 weeks and can occur at any time in the weeks and months after giving birth. About 10-15 out of 1000 new mothers may experience this. In some women, it may start in pregnancy and continue after birth.

Symptoms can be very variable and often women realise in retrospect that they may have suffered with this.



Post pregnancy - Mum

The following symptoms may indicate a need to seek help:

- Lack of enjoyment of the experience of your baby or usual things you loved to do.
- Being anxious or irritable.
- Poor motivation or concentration affecting your ability to carry on daily tasks including caring for your baby.
- Disrupted sleep (waking too early or oversleeping) or poor appetite.
- A sense of hopelessness.
- Negative and guilty thoughts.
- Loss of interest in sex.
- Thoughts of self harm or harming your baby. Even though the latter is not something most women would do, it creates a huge amount of guilt. Some women worry about the baby being taken away. It is really important to seek help if you feel this way.

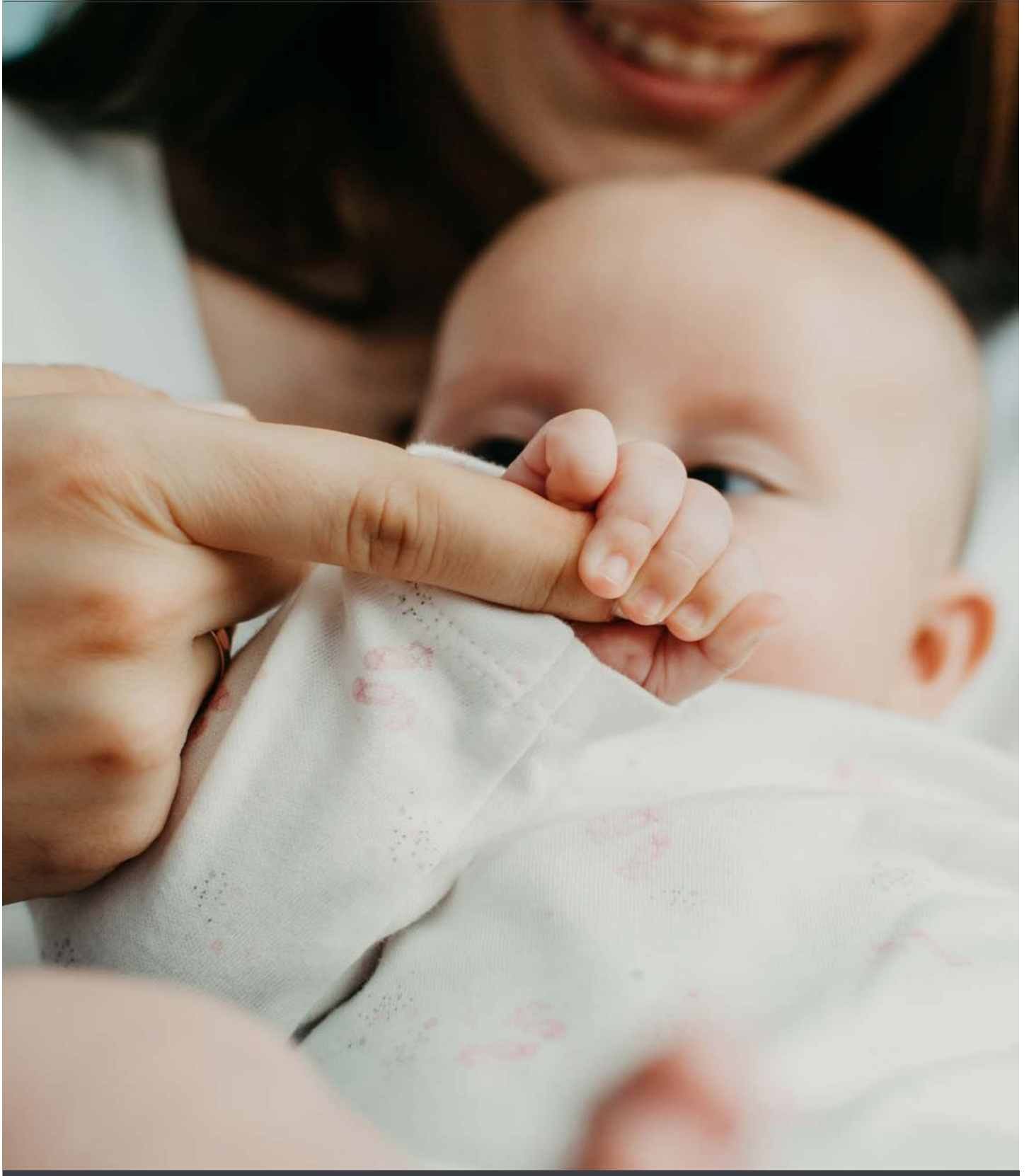
Some of the risk factors for postnatal depression are a lack of family support, previous history of postnatal depression, a difficult pregnancy and labour. As family physicians, we often know the entire family in the context of their social circumstances. This places us in a unique position to detect this condition early on.

How can your family doctor help you through this

A pro-active approach to screening has been adopted at IMC during the postnatal appointment. A simple questionnaire will be administered to the mother during the interview. A more detailed 'Edinburgh Postnatal Depression Score' may be used subsequently if there is a concern.

Mild depression responds well to Cognitive Behavioural Therapy (CBT) and a referral will be made to mental health professionals (psychologists/ psychotherapists) who have extensive experience in dealing with the condition. Moderate to severe cases may require medication in addition to CBT. A shared decision is made with the new mother, and certain areas such as safety in breastfeeding and interaction with other medication is kept in mind.

Postnatal psychosis is a rare but severe mental health condition marked by delusional thinking, confusion and suicidal thoughts necessitating urgent hospital admission.

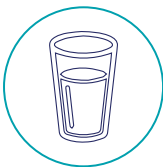


Post pregnancy - Mum

Post Partum Nutrition

Vanessa McNamara, The Travelling Dietitian
Masters in Nutrition & Dietetics from The University of Sydney in 2000.

Mothers require an additional 350 - 600 calories while they are breastfeeding due to the extra energy required to produce adequate milk. Some need more than others so it is important to follow your hunger and try to eat a varied, balanced diet to meet all of your nutrient, fluid and energy needs. Eating little and often can be helpful, so choose nutrient-dense snacks as an easy way to meet your energy requirements when you are juggling the demands of an infant and looking after yourself.



1. Fluid

When you are breastfeeding you need to drink more fluids to replace those that are contained in breast milk (~700mL/day). It is a good habit to have a drink, such as a glass of water, every time your baby feeds. You will also need to make sure you are drinking more fluid at other times during the day with water, milk, soups and fruit smoothies being fluids of choice. Aim for your urine to be light in colour to avoid becoming dehydrated.



2. Avoiding certain foods

It is commonly believed that it's best to avoid certain foods while breastfeeding. There is no evidence to support these claims, however do note that either colic or allergic reactions in infants can be triggered by the mother's diet. Allergic reactions are rare in breast fed babies. If this does occur, the mother's diet should only be modified in consultation with a doctor or dietitian.



3. Constipation

Constipation can be common during breastfeeding due to hormone changes.

It is important to have enough fibre, fluid and exercise to avoid constipation. Good sources of dietary fibre include vegetables, fruit, whole grains, high fibre breakfast cereals, nuts, seeds and legumes. Water is the best drink.



Post pregnancy - Mum



Postnatal Physiotherapy

Preet Singh, Embrace Physiotherapy
Senior Women's Health Physiotherapist

“ I've seen my gynaecologist for the six-weeks check up and I've been given the all clear to exercise. When is the right time to start exercising? ”

Being given the green light sounds wonderful but is also a bit vague. Where to start, what to do? The first 12 weeks postpartum should be viewed as an opportunity to work on breath, abdominal wall and pelvic floor connection, full body stretches, walking and body weight exercises, whilst gradually introducing impact. Keep in mind that everyone is different: some women may be able to run or return to HIIT exercises within weeks;

others may not until six months or even a year. It's always best to get professional advice on what works for you as an individual – and do what feels right for you.

What is a postnatal physiotherapy assessment?

It is a one-hour long discussion ABOUT YOU. Firstly, we want to learn of your pregnancy journey, birth story and what your goals are. Secondly, we will ask a number of questions (read: interrogation) about your past medical history, aches and pains, pelvic health status, sex, sleep, feeding and exercise. Thirdly, depending on your symptoms and goals, we will move on to a deeper assessment and necessary support.

Thirdly, depending on your symptoms and goals, we will move onto assessment of:

- Posture
- Movement
- Sore muscles, joints or spine
- Breathing
- Diastasis recti and core function
- Perineal tear/episiotomy or C-section scar
- Pelvic floor, which includes assessing strength/weakness of the pelvic floor muscle, level of support provided by ligaments and fascia, prolapse and pain
- Return to exercise testing



Post pregnancy - Mum

When can I book in for a postnatal physiotherapy assessment?

After your six weeks check up with your obstetrician/gynaecologist is a great time to book in, though not essential. Waiting until then allows for the body to do what it's designed to do best – heal with time. If you are experiencing changes that bother you, please book your appointment sooner. And if life has gotten in the way, just remember it's never too late.

See your physiotherapist if you experience any of the following:

- Bowel changes: constipation/straining, incontinence- wind or faeces, haemorrhoids, urgency, incomplete defecation, pain
- Bladder changes: incontinence, hesitancy, frequency, urgency, retention, incomplete emptying, pain
- Pelvic pressure or heaviness, visualisation or a lump or bulge in the vagina

- Perineal trauma: pain from your tear or episiotomy
- Pain anywhere: tailbone, pelvic girdle, neck, back or wrists, or C-section scar
- Third or fourth degree tear or if you have undergone a forceps or vacuum delivery

It's also a good idea to see your physiotherapist for guidance if you would like to return to exercise ASAP.

In these cases, getting care sooner rather than later can allow for assessment, education and equip you with the skills necessary to optimise your recovery and give you the reassurance you need.

“ I'm worried about abdominal separation. I've read that it can cause back pain and incontinence. How do I know if I have this, and what can be done? ”

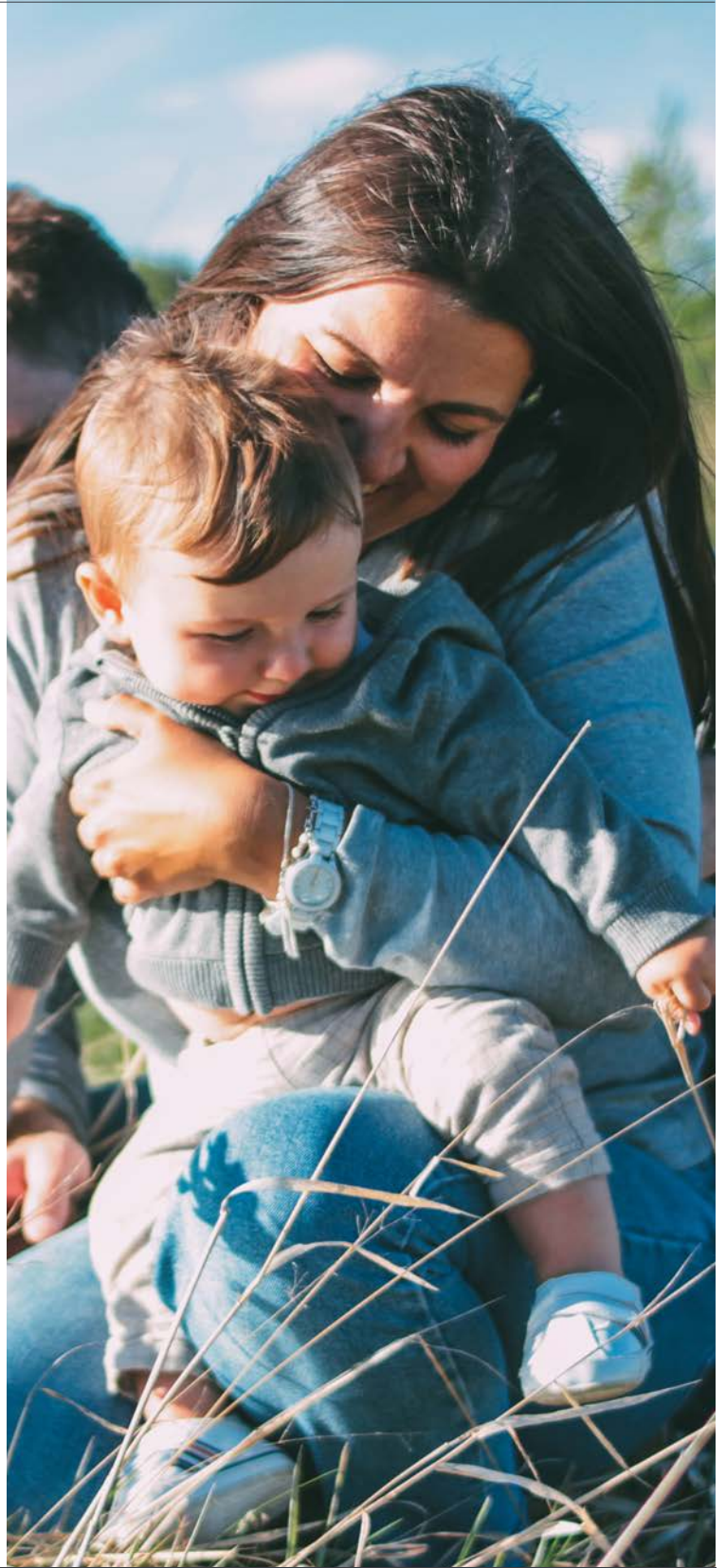
You'll be pleased to know that research tells us abdominal separation, otherwise known as diastasis recti abdominus, correlates but is not causative

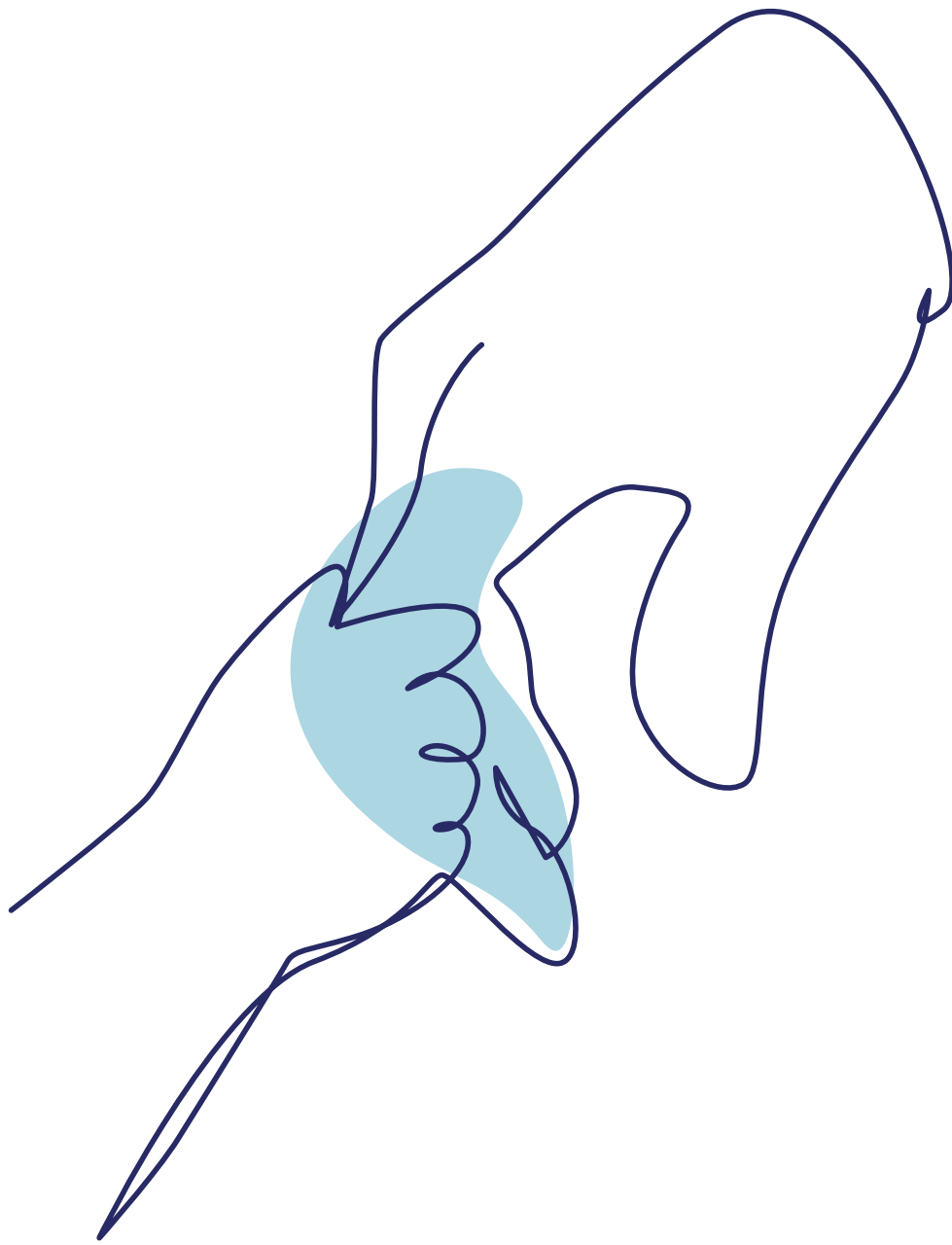


of concerns such as back pain, prolapse or incontinence. As women's health physiotherapists we can use hands-on and ultrasound imaging techniques to measure and train the right muscles, alongside prescribing exercises to help with your abdominal wall recovery.

When can I start to **perform pelvic floor exercises postpartum?**

As soon as comfortable and when your urinary catheter is removed. In the instance of birth trauma such as obstetric anal sphincter injuries (3rd and 4th degree tears) or fistulas, it is best to contact your medical team for guidance.





Post Pregnancy

FOR MY BABY



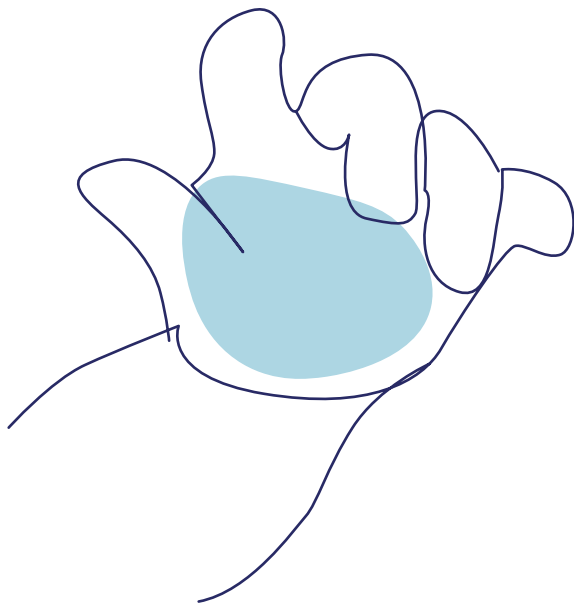
Post pregnancy – baby

Congratulations, your baby is finally here! The first few days and months can be an absolute blur especially whilst your body is busy recovering and sleep deprivation kicks in. In this section we will take you through all the important things you will need to get sorted for baby and discuss those essential health checks and vaccinations needed to keep your baby healthy and safe.



Dr. Gina Dahel,
MBChB (UK), MRCPCH (UK)

Post pregnancy - Baby



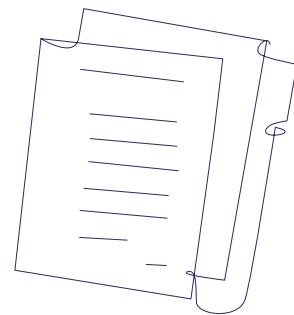
Registering Baby's Birth and other Official Documents

Dr Gina Dahel
MBChB (UK), MRCPCH (UK)

Once your baby is born, there are several documents you will need to apply for. Your baby's birth certificate and Dependent's pass (if required) are time critical so ensure you have all the documentation required.

01

Birth certificate



All births in Singapore must be registered within 14 calendar days from the date of birth. Registration can be done by the child's parent, or by a proxy on behalf of the parent with a letter of authorisation. Once registered, a birth certificate will be issued.

Any delay beyond 42 days from the date of birth will require a letter from the parents on the reason for late registration and subjected to approval. Late birth registration can only be done at the Registry of Births and Deaths at ICA Building.

For walk-in registration, you will need to produce the following original documents:

- Notification of Live Birth issued by the hospital/doctor/midwife (if any)
- Identity Cards of the child's parents
- Marriage certificate of the child's parents (if parents are married)
- Letter of authorisation from the child's parents (if a proxy is registering the birth)

Foreigners (non Singaporean citizens, non PR) will need to produce the following additional original documents:

- Passports of the child's parents
- Long-Term Pass cards of the child's parents (if any).

You can register the birth via the following modes:

- Online registration via LifeSG app;
- ICA Registry of Births and Deaths.
- Walk-in registration at any designated birth registration centre located at:
 - Gleneagles Hospital
 - KK Women's and Children's Hospital
 - Mount Alvernia Hospital
 - Mount Elizabeth Hospital
 - Mount Elizabeth Novena Hospital
 - National University Hospital
 - Parkway East Hospital
 - Raffles Hospital
 - Singapore General Hospital
 - Thomson Medical Centre

Alternatively, you can register the birth at:

- ▶ Registry of Births and Deaths
Citizen Services Centre
- 📍 ICA Building
10 Kallang Road, Level 3
Singapore 208718
- 🌐 <https://www.ica.gov.sg/>



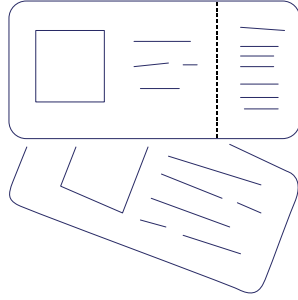
Post pregnancy - Baby





02

Applying for a Dependant's Pass



If you're in Singapore on an Employment Pass or S-pass, you will need to submit an application for your baby's dependent pass within 42 days from the date of birth.

After the baby is born, the hospital will give you a Notification of Live Birth and Advisory Note from the Immigration and Checkpoints Authority (ICA). Within 2 weeks, use these documents to register for a birth certificate.

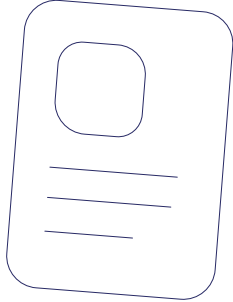
The advisory note is also a Special Pass that allows your newborn to stay in Singapore for 6 weeks. During this time, you should get a passport for the baby from your embassy or high commission.

Once the passport is ready, ask your employer to apply for a Dependant's Pass through EP Online.

If your baby's passport is not ready in time, you may need to request for extra time <https://www.mom.gov.sg/>

03

Applying for a Passport



It is worth submitting an application for your baby's passport soon after birth, as the process can take several weeks. If you require a dependant's pass, see above, you will need to submit an application within 2 weeks.

Each country will have their own recommendations and guidelines. Check out your country's embassy or high commission for more information.

Post pregnancy - Baby





Choosing a doctor for your newborn

Dr Arti Jaiswal
MD (New York, US), Board Cert (Paed) (US)

The Obstetrician will likely have a Paediatrician who works alongside them, which is relatively standard in Singapore. The Paediatrician will visit you and the baby in the hospital, and this is a primary assessment from head to toe. It may be more in-depth depending on the complexity of birth. Once discharged from the hospital, you can decide which doctor you'd like to see. The Children's doctors at IMC are trained to prevent and manage health problems in newborns, infants, children, teens and young adults. We are registered Paediatricians in the countries we have trained, with special training to deal with the vast array of complexities found in infancy, childhood and adolescence, including minor health problems

and more serious illnesses. In comparison to your General Practitioner, we have over ten years of specialist child and adolescent training.

One of the most important steps parents can take is choosing the right doctor. Often, this is someone that parents and children feel comfortable with and can share concerns. The relationship is based on trust, especially when the doctor is assessing your precious newborn.

At IMC, we allow enough time for questions and work to establish an open dialogue with our patients and their parents.

10 Top tips for your baby's first visit:

- Schedule early in the morning if you can.
- Bring baby's hospital paperwork or take a photo of it.
- Bring another caregiver if possible
- Bring a list of questions and don't worry about them being "silly"
- Ask about lactation services
- Let the healthcare team do their job
- Bring a blanket and an extra outfit
- Try to be early
- Be patient
- Don't worry about being emotional - we're here for support!

Post pregnancy - Baby





Baby Checks and Developmental Assessments

Dr Gina Dahel
MBChB (UK), MRCPCH (UK)

WHEN SHOULD I VISIT THE PAEDIATRICIAN?

Knowing when and how often your baby should be reviewed and assessed can be daunting and overwhelming. In Singapore, the onus is on parents to ensure your baby receives vaccinations and medical checks. At IMC we provide comprehensive and detailed check ups for you and your baby.

The initial check will take place in hospital and will be done by the designated paediatrician or a pre-allocated one.

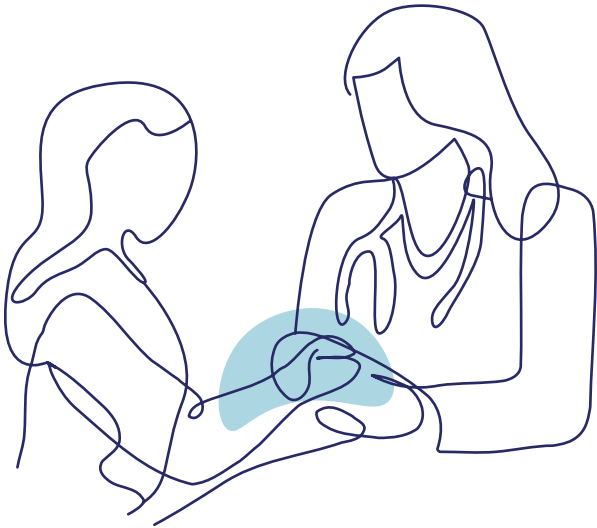
After you and your baby are discharged from hospital, you can choose any paediatrician for on going follow-up. We recommend the first visit to take place between days 5-7 of life to pick up key issues early.

At IMC, Children's clinic, all of our doctors are fully trained and certified paediatricians in their country of training. We have extensive training and experience in dealing with new born babies all the way throughout childhood to late adolescence.



Post pregnancy - Baby





Medical Checks and Developmental Assessments for Baby

Dr Gina Dahel
MBChB (UK), MRCPCH (UK)

After the initial review, your baby will be offered regular check ups and developmental assessments starting from 4 weeks of age.

What are **DEVELOPMENTAL ASSESSMENTS?**

Throughout the first few years of life, the brain develops and learns at an exponential rate. 80% of our brain's physical development happens by age 3 years. We know that these formative years are essential in laying the foundation for optimal health, growth and neurodevelopment .

There are many factors that can positively affect your child's development. Factors like optimal nutrition, positive family relationships and a positive environment, all play a key role in maximising your child's development by stimulating and protecting the brain.

The first 2 years are a critical time for development and it is especially important that any delay during this time is identified as early as possible. Studies show that early identification and intervention positively alters the child's long term development trajectory. Early diagnosis has a positive impact on a child's school performance and IQ. It can help to improve their physical health and reduce the risk of mental health issues.

Ensuring your child is regularly assessed by a doctor, is the best way of ensuring your child is achieving critical skills at expected times. We call these 'milestones'. Delays in milestones can help us identify which children need further evaluation and help.

Each visit also provides an opportunity to discuss any concerns you may have as well as providing evidence based advice on weaning, feeding, and caring for your baby.

Post pregnancy - Baby

MOST VISITS

will coincide with vaccinations. At IMC, we are flexible and will tailor your child's vaccination schedule to ensure adequate coverage for Singapore, your home country's recommendations and travel circumstances.

We offer consultations for your child at the following ages over the first 2 years:

NEW BORN TO TWO YEARS Developmental Assessment and vaccine schedule





A baby develops rapidly in the first few years of life. Regular checks are essential to check your baby is progressing and meeting development milestones.

At each visit,

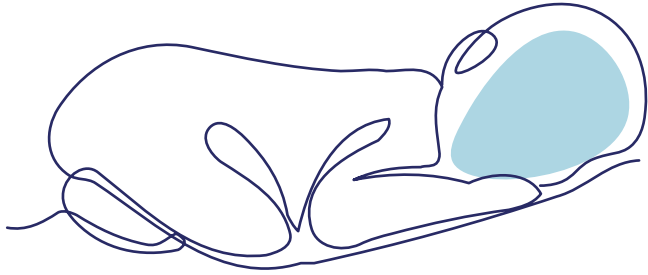
Each consult with your doctor will take 30 minutes, or longer if requested, and will cover the following:

- Discussion of ongoing medical issues
- Identification and discussion of new issues
- You child's routine including feeding, diet, toileting and sleeping
- Developmental Screening and Assessment
- Growth Screening including height, weight, head circumference and BMI
- Physical Examination
- Vaccine review and update
- Referrals if necessary and follow-up if required



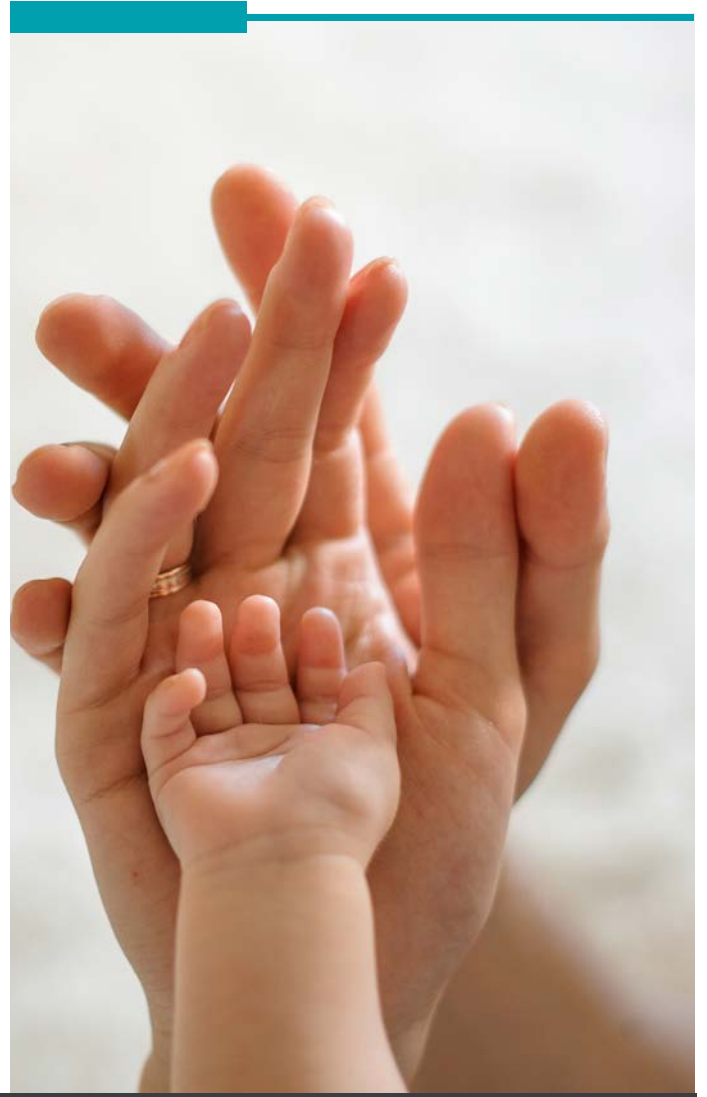
Post pregnancy - Baby





LACTATION SUPPORT

If you are having issues specifically with breastfeeding, our lactation specialist will come to your house and support you with this – breastfeeding can be really tough when you have a newborn, and sometimes you need not only patience and practice, but a helping hand too.



Lactation and Home Support for your Family

Natasha Cullen
UK Certified Midwife, Doula & Hypnobirthing Practitioner

AT HOME

Singapore doesn't have a midwife or postnatal care system as in other countries; however Beloved Bumps provides this if you need assistance at home.

A midwife will come to your home to check that you are recovering well from the birth, as well as answering any questions you may have about your experience. We will help with baby cares if you need, such as bathing, and also check that baby is feeding well and gaining weight. If there are any concerns, we will discuss with and refer in to the Children's Doctors team at IMC.

Post pregnancy - Baby





Common Newborn Concerns

Dr Shivani Paliwal
MBBS (Aligarh, India), Board Cert (US)

The early new-born or the neonatal period is the first four weeks of an infant's life. It's the period when there are the most risk for post-birth complications or when birth defects or congenital conditions may first be detected. Here are some conditions to look out for and seek medical attention accordingl.

BIRTH DEFECTS

- Cleft lip, palate, lip tie and tongue tie.
- At IMC we can monitor, advice and arrange for further management.

JAUNDICE

- Keep in mind not every jaundice needs phototherapy.
- At IMC we have a facility to do blood tests for diagnosis of bilirubin levels and also can arrange for phototherapy in the comfort of patients' homes if needed.

WEIGHT LOSS / WEIGHT GAIN

- Crucial and hence close monitoring is needed.
- We can provide evaluation and further diagnostics if needed for any concerns.

FEVER

- Temp 38C and 100.4 F or more needs evaluation as immunity low in newborn period.
- We can provide evaluation and further diagnostics if needed.

VOMITING

- If painful needs evaluation.
- At IMC we provide evaluation of reflux and help diagnose other causes of vomiting.

UMBILICAL CORD CARE

- Needs to check if healing well after cord falls off.
- We can provide treatment for non healing Umbilical cord granuloma with non-invasive Silver Nitrate.

Post pregnancy - Baby



Vaccinations

Dr Bernadeta Wibisono
MD (Netherlands, Antililles), Board Cert (Paed) (US)

Recommended Childhood Vaccinations in Singapore

Childhood vaccines or immunizations can seem overwhelming when you are a new parent.

Vaccinations not only protect your child from deadly diseases, such as polio, tetanus, and diphtheria, but they also keep other children safe by eliminating or greatly decreasing dangerous diseases that used to spread from child to child.

It is also important to keep your child vaccination up to date, as these vaccinations may be required to register to day care or primary school in Singapore.

At IMC, we follow Singapore vaccination schedule along with the parents preferred country's schedule. We can accommodate all other countries vaccination schedules which are usually pretty similar to the Singapore schedule with minor differences.





National Childhood Immunisation Schedule (NCIS)

(from birth to age 17 years, effective from 1 November 2020)

Vaccine	Birth	2 months	4 months	6 months	12 months	15 months	18 months	2-4 years	5-9 years	10-11 years	12-13 years	13-14 years	15-17 years	
Bacillus Calmette-Guérin (BCG)	D1													
Hepatitis B (HepB)	D1	D2		D3										
Diphtheria, tetanus and acellular pertussis (paediatric) (CTaP)		D1	D2	D3			B1							
Tetanus, reduced diphtheria and acellular pertussis (Tdap)										B2				
Inactivated poliovirus (IPV)		D1	D2	D3			B1			B2				
Hemophilus influenzae type b (Hib)		D1	D2	D3			B1							
Pneumococcal conjugate (PCV10 or PCV13)			D1	D2	B1									
Pneumococcal polysaccharide (PPSV23)								One or two doses for children and adolescents age 2-17 years with specific medical condition or indication.						
Measles, mumps and rubella (MMR)					D1	D2								
Varicella (VAR)					D1	D2								
Human papillomavirus (HPV2 or HPV4)											D1 (Females)	D2 (Females)		
Influenza (INF)				Annual vaccination or per season for all children age 6 months to <5 years (6-59 months).					Annual vaccination or per season for children and adolescents age 5-17 years with specific medical condition or indication.					

Recommended ages and doses for all children

Recommended for persons with specific medical condition or indication

FOOTNOTES:

- D1, D2, D3:** Dose 1, dose 2, dose 3
- B1, B2:** Booster 1, booster 2
- 10-11, 12-13, 13-14 years:** Primary 5, Secondary 1, Secondary 2 (Tdap, IPV, HPV (for females) and MMR (as catch-up) vaccines are provided as part of Health Promotion Board’s school-based vaccination programme)
- HepB:** Doses 2 and 3 are recommended to be given as part of the 6-in-1 vaccine at 2 and 6 months, respectively
- MMR:** Only the dose 2 is recommended to be given as part of the MMRV vaccine

Post pregnancy - Baby

At IMC, we follow Singapore vaccination schedule (Page 64) along with the parents preferred country's schedule. We can accommodate all other countries vaccination schedules which are usually pretty similar to the Singapore schedule with minor differences.

Meningococcal vaccine is one of the additional vaccines that our clinic provides to accommodate most European's countries or Australia's immunization schedule. Meningococcal disease can cause meningitis (infection of the lining of the brain and spinal cord) and infections of the blood.

There are two types of meningococcal vaccines, one is Meningococcal B vaccine and Meningococcal A,C,W,Y. Meningococcal B vaccine protects against meningococcal disease caused by serogroup B, This vaccine is normally given at 2 month, and 4 months of age and a booster at 12 months of age. Meningococcal A,C,W,Y vaccine protects against serogroups A, C, W, and Y. This vaccine is normally given at 12 months of age.

Travel Vaccines to Consider

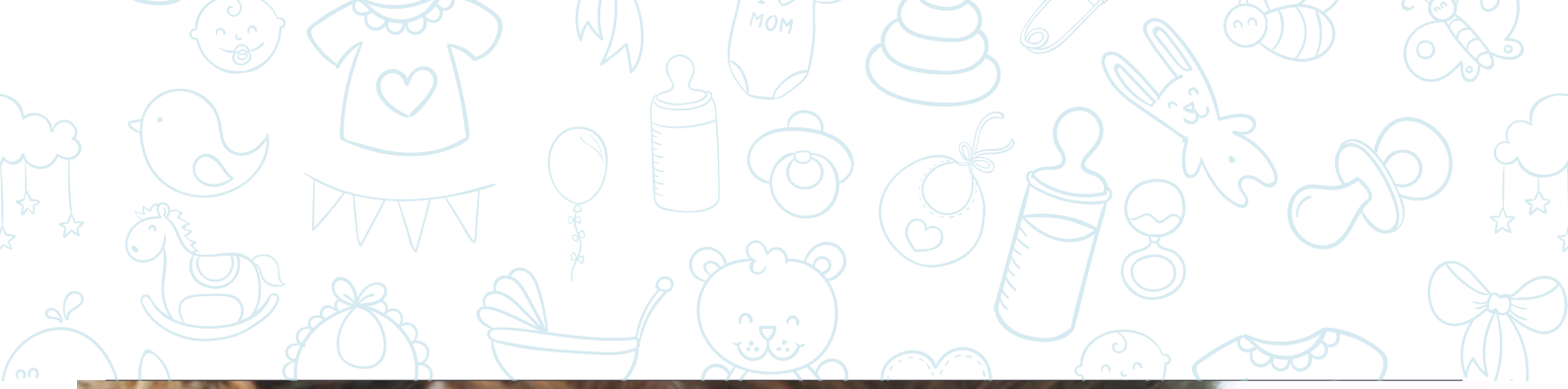
Two vaccines that are normally recommended for those who are going to travel around the Southeast Asian countries are hepatitis A and typhoid vaccines.

Hepatitis A is an infectious disease of the liver caused by the hepatitis A virus. It is usually spread by eating contaminated food or drinking water.

Typhoid vaccine is a vaccine to protect against Salmonella typhi. Salmonella can lead to a high fever, diarrhea, and vomiting. Salmonella is spread by eating or drinking food or water contaminated with the feces of an infected person.

Rabies vaccination is also recommended for international travelers who are likely to come in contact with animals in parts of the world where rabies is common. Three doses of pre-exposure rabies vaccines are recommended. Make sure to start the first dose of Rabies vaccine 1 month prior to travel to ensure that you have completed the three doses prior to your travel.

Another vaccination to be considered when travelling in Asia is Japanese encephalitis (JE). JE is a disease transmitted through mosquitoes that may cause swelling around the brain. You are at higher risk if you are traveling to rural areas (especially near rice paddies), will be outside frequently, or will be traveling for a long period of time.



Post pregnancy - Baby



TIPS

For New Dads

By Dr Dex Khor

The impending arrival of a baby is always an exciting and somewhat stressful time. Here are a few tips from experienced dads who have been there:

Prepare the home: besides the fun of preparing baby's room and cot, make time to prepare the main work areas, namely the changing station, bath area and the sterilizing station (for breast pump equipment and bottles). You will be spending many days and nights at these areas, so make sure everything is laid out, safe to use and properly lit.

Be fighting fit: the first few weeks and months will be extremely tiring and sap your strength. Take care of yourself, eat properly and exercise in the time leading up to the birth. See your doctor and get a tune up. These reserves will stand you in good stead when you're exhausted.

Be hands on: don't be afraid to carry and hold baby even from Day One. Offer to help whenever you can. Even without any prior experience, you can very quickly learn to feed, bathe, change and play with baby.

With enough hands-on time, you will become very confident with baby, and also start to pick up on the cues of what baby's needs might be. This is needless to say a great help to your partner, especially if you can take some night feeds.

Look after your partner: new mums can often feel thrown in at the deep end, providing 24 hour care to a little human being and recovering from childbirth at the same time. Ask her how she is, and not just what needs done (though that's important too!).

Enjoy it: the great paradox of the first year is, even as you long for quieter nights and long lie-ins in the mornings, blink and you'll miss the big moments in your baby's life. Best of luck!



Dr. Dex Khor
MBBS (London), MRCPCH (UK)



The journey to parenthood is an exciting and joyous time for a young family. We believe in a holistic approach to physical, social and psychological wellbeing. Having a baby in Singapore can pose many challenges and we hope Baby Steps has provided you with some insightful tips to help you on your journey. We wish you the best of luck and we're all here to help support you along the way.

All the best,
IMC and Partners






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