



So you've been trying and trying and—finally!—those two tiny pink lines have appeared on the pregnancy test. After grilling your new ob about whether your baby is developing as expected, you probably have one more lingering question: now that the deed is done, can you...um...still have sex?

Absolutely, obstetricians say. If your pregnancy is uncomplicated, and you feel up to it, you can dance in the sheets until your water breaks. "Men often feel a little ignored because everything is so centered on the baby, so we encourage couples to have sex because it helps keep them bonded," says Terry Hoffman, MD, an ob-gyn at Mercy Medical Center in Baltimore.

some like it hot...

...but many like it NOT! Here's what you need to know about pregnancy sex.



Actually, sex may be more fun during pregnancy precisely because the pressure is off. If sex had begun to seem like a chore because you were working overtime to get pregnant, now it's all fun and games. And if you've spent most of your reproductive years trying not to get pregnant, well, you're out of the woods there too. "It was really freeing," says Michele, of San Francisco, mom to 8-month-old Kai. (Last names have been omitted throughout for privacy.) "My husband used to pull out or stop to put on a condom. Once I got pregnant, we didn't have that extra stress."

■ CH-CH-CH-CHANGES...

As your body changes, sex will be different too. During pregnancy, your blood volume increases by about 40 percent. That not only swells your breasts to the size of a Vegas showgirl's, but it also heightens sensitivity throughout all your erogenous zones. And that can mean more intense, even *multiple*, orgasms.

You'll probably find that your sex drive fluctuates throughout

pregnancy—evaporating during your first trimester when you're tired and nauseated; getting livelier in the second trimester when high levels of hormones can send your libido through the stratosphere; then tapering off as your due date approaches and you feel achy, unwieldy, and maybe even nervous about impending parenthood. "At seven weeks, I felt like crap, and I was not going there," recalls Jennifer, of Downey, California, whose daughter, Megan, is now 2. "But by the second trimester, we acted like we were still dating. I really wanted to be intimate, which was weird for me. We probably had sex six times a week."

And then there are the dreams. Robyn, of Windermere, Florida, now pregnant with her second child, has such erotic dreams that she often wakes up her husband to finish things. "At 32 weeks and huge, the sex dreams make it worth it," she gushes.

Still, the body changes that come with pregnancy can also turn fa-

By Norine
Dworkin-
McDaniel



miliar territory into terra incognita. Carla, of Milwaukee, says that when she was pregnant with her daughter Jesse, now 2, "it was like I was having sex with someone different. The fit was off, and frankly it just didn't feel that good, so we stopped." The experi-

ence was bizarre enough that Carla swore off sex for the rest of her pregnancy, something that's not uncommon. Fifty-eight percent of women in a Canadian study reported that their desire dwindled during pregnancy. Expectant dads can be affected, too, not only because you look and feel different but because as the pregnancy progresses, he'll see and feel the baby move. While he confronts the reality of impending fatherhood, concern that the baby is somehow "watching" could take the wind out of his sails.

"Most of what causes a change in sex drive is mental and emotional, rather than physiological," says Bruce Rosenzweig, MD, director of urogynecology at Rush University Medical Center, in Chicago.

Up to 80% of pregnant women fear that sex will hurt the baby. It won't!

Undoubtedly the biggest wet blanket is fear of hurting the baby, says Wendy Wilcox, MD, MPH, assistant professor of obstetrics and gynecology at Montefiore Medical Center, in New York City. Indeed, research shows that somewhere

between 50 and 80 percent of women worry about that. Dads do too. So let's just allay that concern right now: sex doesn't cause miscarriage. Even if your partner is exceptionally well endowed, his penis will never reach the baby because the baby's not in your vagina. She is cocooned in her own little impenetrable vault, within the strong walls of the uterus, behind the cervix and well cushioned by amniotic fluid. If she "notices" anything at all, it's probably just a soothing, rocking motion that may even lull her to sleep. Still, you do want to be sensible. "This isn't the time to have the most vigorous sex because you don't want to cause trauma to the vagina or cervix," Dr. Rosenzweig says.

Getting Your Groove Back

If your delivery goes smoothly, your ob-gyn will likely green-light intercourse after your six-week postpartum checkup. You do want to wait until then to prevent infection, allow your uterus to shrink back to normal, and give your episiotomy or c-section incisions time to heal.

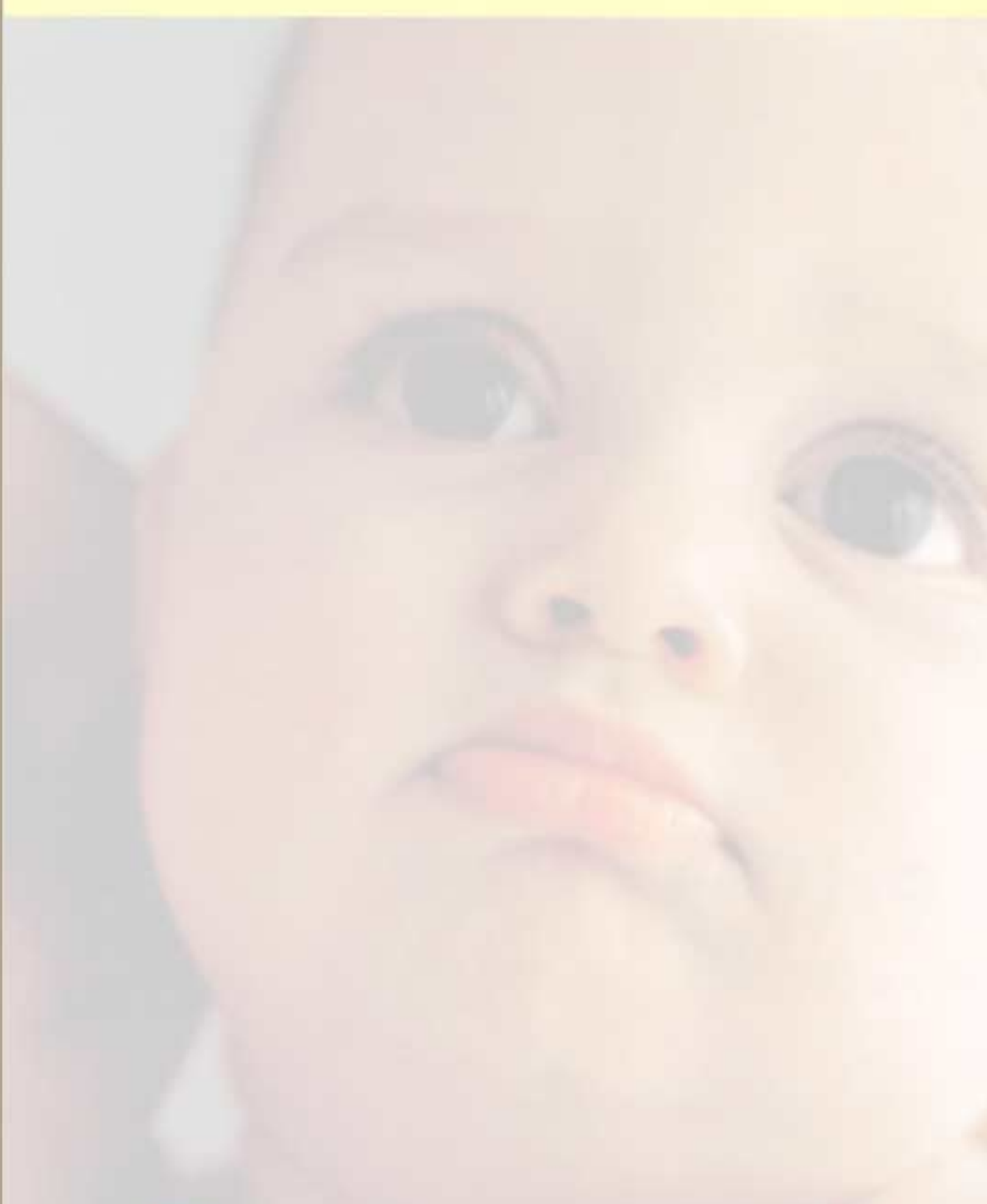
Of course, whether you'll want to have sex at this point is another matter. Research shows that couples typically resume relations anywhere from seven weeks to six months after their baby is born. But other studies suggest that while the

body can be coaxed, the libido lags. And that's hardly surprising. First, there's the fear that postbaby sex will hurt. And if you had a rough delivery, you're going to be sore for a while. Plus, breastfeeding reduces estrogen, which can dry your vagina and make sex uncomfortable (though topical estrogen cream can help). Then again, you may simply be exhausted from the stress and sleeplessness that come with caring for a newborn. Swedish researchers who questioned 820 first-time parents found that in the six months after their

babies were born, most managed to muster the energy for sex only once or twice a month.

Still, if your libido seems on permanent hiatus, say something to your ob because low desire can be a sign of postpartum depression. But if you're generally feeling good, don't fret too much. Eventually, sex will seem appealing again. And it may even be hotter. Jessica, of Highlands Ranch, Colorado, says that labor rearranged her vaginal interior—but in a good way. "My G-spot is more accessible now. Sex is actually better postbaby."

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■ SO, WHAT'S THE BEST WAY TO HAVE SEX?

You may have to experiment a bit to figure out what works. But rest assured, using lube or toys such as dildos and vibrators is perfectly safe, says Dr. Hoffman. Just don't push anything too deep or too hard into your vagina, and keep the toys clean to prevent infection.

Oral sex is okay too. But consider this: as you get closer to D-day, pregnancy hormones and thinning cervical mucus can make things very messy, Dr. Hoffman says. If that doesn't bother your partner, have at it. Just don't let him blow into your vagina because that can cause a fatal air embolism. (Frankly, we don't know anyone who does this, but it's standard advice, so we're passing it on.) A couple of caveats here: you should not receive oral sex if your ob has put you on "pelvic rest" because orgasms may trigger uterine contractions. Ditto if your partner has a cold sore (aka oral herpes) or feels one erupting. And if your partner has *ever* had a cold sore, oral sex is completely out in the third trimester because even if your man has no symptoms, you can still get infected, and then you'd need a c-section to avoid infecting your baby. If you're the "giver" and your partner is STD free, it's perfectly safe to swallow, Dr. Hoffman says.

When it comes to actual intercourse, doctors and pregnant women often tout woman-on-top, side-by-side, and doggie-style (on all fours or leaning over the bed) positions. Some of these positions may support your belly; others may let you control the depth of penetration, since going deep may not feel good as your pregnancy continues. By your third trimester, you'll want to skip the missionary position, not only because your belly will get in the way, but also because doctors don't want you on your back. "When you're on your back, the uterus can press on the aorta and the vena cava [the big vein that returns blood to the heart], which can elevate blood pressure and decrease the amount of blood getting to the heart, which then decreases the amount of blood going to the baby," Dr. Rosenzweig explains.

If you start cramping after sex, don't freak out. An hour or two of mild cramps isn't unusual because both orgasm and the prostaglandins in semen can cause uterine contractions. "Put your feet up, and drink three large glasses of water," Dr. Hoffman advises. "If the cramping gets worse, call your ob." The same goes for spotting. Increased blood flow makes blood

vessels more fragile on the cervix surface, and they may bleed a bit if your partner's penis rubs against the cervix. However, menstrual-period-like bleeding warrants an immediate call to your ob because the placenta could be breaking away from the uterus. Call, too, if there's fluid discharge, because your

Heightened
sensitivity in
pregnancy
may mean
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Experts encourage sex during pregnancy. Everything is so centered on the baby, and sex is a good way for couples to bond.

labor or placenta previa, there's no reason why she can't have orgasms," Dr. Hoffman says. "You can masturbate or have oral sex."

SEX AND LABOR

The idea that having sex around your due date will start your labor is old-time folklore that has unfortunately never been completely validated in scientific studies. Yet many obs still recommend that restless parents get busy to see if they can move things along. The theory is the same one docs use to discourage

women at risk for preterm birth—that orgasm and semen's prostaglandins can promote contractions. Does it work? Well...if you're ready to deliver, a little sex might jump-start the process. But if your baby's not ready for his debut, you can make like rabbits and nothing will come of it. "I've certainly suggested this to patients," Dr. Wilcox says. "But there are people who deliver early. And there are people who have sex and still go past their date."

Orlando-based Norine Dworkin-McDaniel is a regular contributor to American Baby.

water may have broken or may be leaking. But don't let any of this dampen your sex drive: it's all unlikely to happen.

NOT FOR THE NEXT NINE MONTHS, DEAR

If you've had preterm labor or birth in a previous pregnancy or if you're at risk for preterm labor with your current pregnancy, your ob may restrict sex. That's because anything that can lead to uterine contractions (such as nipple stimulation, orgasm, and semen's prostaglandins) also boosts the risk for early labor. "When we need to induce labor, we put prostaglandins in the vagina," Dr. Hoffman explains. "Sex puts them there naturally."

Your ob will also forbid sex if you have placenta previa, where the placenta covers the opening to the cervix, or placenta abruption, where the placenta actually separates from the uterus. And the No Sex Rule applies if your cervix dilates prematurely, since your baby would be at risk for infection from bacteria that can be pushed up into the uterus from the vagina. Certainly your water breaking is another time to abstain, though chances are sex will be the last thing on your mind at that moment.

If your obstetrician says *no sex*, ask if that means no intercourse or no orgasms, period. "As long as a woman isn't on pelvic rest because she has preterm

ab Still not satisfied? Get ten additional pregnancy-sex secrets (shh!) at americanbaby.com/pregnancysex

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