Pregnancy - signs and symptoms

Summary

- Symptoms of early pregnancy include missed periods, nausea and vomiting, breast changes, fatigue and frequent urination.
- Many of these symptoms can also be caused by other factors such as stress or illness.
- If you suspect you may be pregnant, see your doctor.

Significant hormonal changes take place during pregnancy. These trigger a variety of symptoms. Some women experience many of the symptoms of pregnancy, while others may have only a few.

Symptoms of early pregnancy include missed periods, breast changes, tiredness, frequent urination, and nausea and vomiting (morning sickness). However, these symptoms may be caused by other factors and do not necessarily mean that you are pregnant, so if you suspect you are pregnant take a home pregnancy test and see your GP.

A wide range of changes can occur in your body in the later stages of pregnancy, including backache, headache, leg cramps or varicose veins, itch or tingling, constipation, haemorrhoids or indigestion, vaginitis or vaginal discharge, or mood changes or depression.

If you have any concerns don’t hesitate to talk to your GP. See your GP right away if you experience symptoms like vaginal bleeding or breaking waters, chronic pain, high temperature, severe headaches or vision loss.

Signs of pregnancy

The signs of early pregnancy can include:

- missed period
- nausea and vomiting (often called ‘morning’ sickness, but it can occur at any time)
- breast tenderness and enlargement
- fatigue
- passing urine more frequently than usual, particularly at night
- cravings for some foods, distaste for foods you usually like, and a sour or metallic taste that persists even when you’re not eating (dysgeusia).

Many of the signs of pregnancy, such as a missed period (amenorrhoea), nausea (morning sickness) or tiredness can also be caused by stress or illness, so if you think you are pregnant take a home pregnancy test (urine test) or see your GP, who will administer a urine test, blood test or ultrasound scan.

Missed period

Missing a period is often the first sign of possible pregnancy. However, some women experience light bleeding around the time of their expected period.

Nausea and vomiting

‘Morning’ sickness is a condition that affects more than half of all pregnant women. The symptoms include nausea and vomiting, and loss of appetite. Most women with morning sickness don’t just get symptoms in the morning, but experience them throughout the whole day.
Morning sickness usually begins around the fourth to sixth week of pregnancy and may settle by week 12, although it can continue for longer or return at around 32 weeks.

**Breast changes**

During pregnancy, the breasts become fuller, swollen and tender. These changes are similar to those you may have noticed in the few days before your period. During pregnancy, the skin around the nipple becomes darker and the veins in the breast become more obvious.

**Fatigue**

Overwhelming tiredness is common in early pregnancy. This is most likely caused by the massive increase in the sex hormone progesterone. Progesterone is needed to maintain the pregnancy and help the baby to grow, but it also slows your metabolism.

Try to get some more sleep or rest when you can during this early stage. Your energy levels will probably rise again by around the fourth month of pregnancy when the placenta is well established.

Tiredness during pregnancy can also be caused by anaemia, which is most commonly caused by iron deficiency. Eating iron-rich foods is important in the prevention of iron deficiency anaemia during pregnancy. Medical treatment of anaemia in pregnancy involves taking iron supplements.

**Frequent urination**

Pregnancy causes an increase in levels of body fluids and greater kidney efficiency. The swelling uterus also presses against the bladder. As a result, most women start experiencing more frequent urination within the first few weeks of becoming pregnant.

**Food cravings**

Cravings for certain foods are very common in pregnancy, especially for foods that provide energy and calcium, such as milk and other dairy products. You may also notice a sudden distaste for foods you previously liked.

Some women even develop an unusual taste for non-food items such as soil or paper. This is called ‘pica’ and may indicate a nutrient deficiency. Please speak to your GP or midwife if this develops.

**Other symptoms of pregnancy**

Many of these symptoms may also be indicative of other conditions. If in doubt, see your GP.

- back ache
- breathlessness
- constipation
- haemorrhoids (piles)
- headaches
- heartburn and indigestion
- itchy skin
- leg cramps
- mood changes (such as unexplained crying)
- tingling and numbness in your hands
- vaginal discharge
- vaginitis
- varicose veins and leg oedema (swelling).

**Backache**

Back pain during pregnancy can affect more than one in three women. This is usually due to loosening of ligaments

betterhealth.vic.gov.au
and change in posture due to the growing pregnancy.

You can help reduce back pain during pregnancy by wearing flat heeled shoes, using chairs with good back support, avoiding lifting heavy objects, and doing gentle exercise. Exercising in water can reduce back pain in pregnancy, and physiotherapy and acupuncture may also help.

**Breathlessness**

At the onset of pregnancy the hormone progesterone increases your lung capacity. This enables you to carry more oxygen to your baby and get rid of waste products such as the carbon dioxide that you both produce. At each breath you breathe more deeply and the amount of air you inhale (and exhale) increases significantly. This can make you feel short of breath.

In addition, as pregnancy approaches term, the pressure of the enlarging uterus and baby on your diaphragm can make your breathing feel more laboured.

Contact your doctor or midwife if you experience sudden onset of breathlessness associated with any of the following:

- pain
- palpitations (heart pounding)
- extreme tiredness
- exercise.

**Constipation**

Constipation refers to infrequent, hard bowel movements that are difficult to pass. Constipation is a common problem in pregnancy that may be caused by pregnancy hormones slowing your gastrointestinal movement, or by the pressure of your growing uterus on your rectum.

If you experience constipation during pregnancy, you are advised to:

- Drink plenty of water every day.
- Increase your dietary fibre (such as bran, wheat and fresh fruit and vegetables).
- Do gentle, low impact exercise such as swimming, walking or yoga.

Don't take over-the-counter laxatives without first consulting your midwife or GP. If changes to your diet and lifestyle don't make a difference then your GP or midwife can prescribe a laxative that is safe to use in pregnancy.

**Haemorrhoids (piles)**

You may develop haemorrhoids (also known as piles) as a result of straining from constipation or the pressure of your baby’s head. Be reassured, symptoms usually resolve on their own soon after birth.

If you have bleeding from haemorrhoids, itching, discomfort or pain it is recommended that you:

- Alleviate or prevent constipation by increasing your daily water and fibre intake.
- Sit in warm salty water for about 15 minutes, especially after a bowel motion.
- Apply haemorrhoid cream.

If the bleeding or pain continues, talk with your GP or midwife.

**Headaches**

Contact your GP or midwife if you have a headache during pregnancy that is not relieved by paracetamol (such as Panadol), especially in the second half of pregnancy.

A persistent headache can be associated with pre-eclampsia – a condition that can affect your kidneys and thus increase blood pressure and decrease blood flow to your baby.
Heartburn and indigestion

Heartburn, reflux or indigestion is the pain and discomfort associated with acid from the stomach entering and 'burning' the oesophagus.

Indigestion is more common during pregnancy due to the pressure of the enlarging uterus on the organs of the abdomen and the action of the hormone progesterone that relaxes the muscle between the oesophagus and stomach.

If you are experiencing heartburn, reflux or indigestion, it is recommended that you:

- Eat small and more frequent meals.
- Avoid eating just before going to bed.
- Sleep with extra pillows so your head is raised.
- Wear loose-fitting clothing.
- Avoid any food or fluid that aggravates symptoms – such as fatty foods (including fried foods, fatty meats and pastry), spicy foods (including curry and chilli), alcohol and caffeine (including tea, coffee, chocolate and cola).
- Consult your doctor before taking antacids.

If these strategies do not relieve your symptoms, please consult your GP, who may prescribe a medication that will safely reduce the secretion of acid.

Itchy skin

Widespread itching over the body is not common in pregnancy. When present, it can be very distressing, interfering with sleep and enjoyment of pregnancy. There may be no apparent cause for the itching. In rare cases it may be due to serious liver disease – a blood test can be done to check for this.

Leg cramps

Leg cramps occur due to a build-up of acids that cause involuntary contractions of the affected muscles. They are experienced by up to half of pregnant women, usually at night. Leg cramps are more likely in the second and third trimesters.

If you experience leg cramps, it is recommended that during an episode you:

- Walk around.
- Stretch and massage the affected muscle(s) to disperse the build-up of acids.
- Apply a warm pack to the affected muscle(s).

If you find cramps troublesome, discuss with your GP or midwife the option of taking magnesium lactate or citrate morning and evening.

Mood changes

Some newly pregnant women experience mood changes such as irritability. Other pregnant women experience feelings of elation. It is thought that the pregnancy hormones influence chemicals in the brain, causing mood changes.

During pregnancy, one in 10 women experience depression. Depression is treatable, so if you are feeling depressed or ‘down’ during pregnancy it is extremely important to get help early. Please contact your doctor, midwife or maternal and child health nurse as soon as possible.

Tingling and numbness in your hands (carpal tunnel syndrome)

Carpal tunnel syndrome – tingling and numbness in your hands – affects up to 60 per cent of women during pregnancy. It is caused by compression of the median nerve due to an increase in the tissue fluids during
pregnancy.

Carpal tunnel syndrome may be mild, intermittently painful, or severe, which may cause partial paralysis of the thumb or loss of sensation. Symptoms usually resolve on their own soon after birth.

If you are experiencing tingling and numbness in your hands, inform your doctor or midwife. In very severe cases, your doctor may recommend corticosteroid injections or surgical treatment.

**Vaginal discharge**

An increase in vaginal discharge is a common change during pregnancy. If it is associated with itchiness, pain, a bad odour or pain on passing urine then it may be due to an infection. Seek treatment from your GP.

**Vaginitis**

Vaginitis is inflammation of the vagina, and is a distressing complaint for many women. It is more frequent during pregnancy. Some causes of vaginitis include *vaginal thrush*, *bacterial vaginosis*, *trichomoniasis* and *chlamydia*. See your GP for diagnosis and treatment

**Varicose veins and leg oedema (swelling)**

Varicose veins of the legs are very common in pregnancy due to a combination of factors, including increased volume of circulating blood during pregnancy, and pressure of the pregnant uterus on the larger veins. This increased pressure on the veins can also result in swelling of the legs (oedema) that can cause pain, feelings of heaviness, cramps (especially at night) and other unusual sensations.

If you have varicose veins, it is recommended that you:

- Wear support stockings.
- Avoid standing for long periods.
- Exercise gently and regularly (walking or swimming).
- Lie down to rest with feet elevated, when you can.
- Try massaging your legs.
- Tell your doctor or midwife at your next pregnancy visit.

**Signs and symptoms during pregnancy – when to get help**

It is recommended that you contact your hospital or carer if you are worried or if you have any of the following during pregnancy:

- vaginal bleeding
- less movement of your baby than usual
- severe stomach pain
- pain that doesn’t go away
- leaking amniotic fluid (that is, if your waters break)
- a high temperature
- vomiting that will not stop
- a headache that will not go away
- vision loss or blurred vision
- widespread itching of the skin
- sudden swelling of face, hands and feet.

Read more about [obstetric emergencies during pregnancy](betterhealth.vic.gov.au).

**Where to get help**
In an emergency, call 000 for an ambulance
Your GP
Your midwife
Your obstetrician
Your maternity hospital
Your pharmacist

**Family Planning Victoria** Tel. 1800 013 952 or (03) 9257 0100
**Family Planning Victoria Action Centre** Tel. (03) 9660 4700 or 1800 013 952

This page has been produced in consultation with and approved by:
Department of Health and Human Services - CHI - HSR&I - Maternity & Newborn Clinical Network

---

Content on this website is provided for information purposes only. Information about a therapy, service, product or treatment does not in any way endorse or support such therapy, service, product or treatment and is not intended to replace advice from your doctor or other registered health professional. The information and materials contained on this website are not intended to constitute a comprehensive guide concerning all aspects of the therapy, product or treatment described on the website. All users are urged to always seek advice from a registered health care professional for diagnosis and answers to their medical questions and to ascertain whether the particular therapy, service, product or treatment described on the website is suitable in their circumstances. The State of Victoria and the Department of Health & Human Services shall not bear any liability for reliance by any user on the materials contained on this website.

For the latest updates and more information, visit www.betterhealth.vic.gov.au

**Copyright © 1999/2020** State of Victoria. Reproduced from the Better Health Channel (www.betterhealth.vic.gov.au) at no cost with permission of the Victorian Minister for Health. Unauthorised reproduction and other uses comprised in the copyright are prohibited without permission.