### Prenatal Development

From Conception to Birth

Getting from fertilized Egg to baby.

Influences on Prenatal Development



### Goals & Objectives

- Learn the facts!
  - Zygote, Embryo, Fetus, oh my!
  - Teratogens!
- Apply what you learn!
- The baby game!
- Evaluate



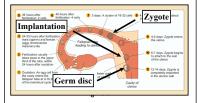
# From Conception to Birth

- Period of the Zygote
- Period of the Embryo
- Period of the Fetus
- Not trimesters!!

### Period of the Zygote

- Begins when egg is fertilized in the fallopian tube.
- Ends 2 weeks later when the zygote is implanted in the wall of the uterus.

### The long long journey



### Period of the Embryo

- If it sticks, it is an embryo.
- Three layers of cells
- $-\,$   $\mathbf{Ectoderm};$  hair, skin, and nervous system.
- Mesoderm: muscles, bones, and circulatory system.
- $-\ \mathbf{Endoderm};$  digestive system, and lungs.

# Period of the Embryo Cephalocaudal principle From Conce Body during



## Influences on Prenatal Development

- General Risk Factors
- Teratogens: Diseases, Drugs, and Environmental Hazards
- How Teratogens Influence Prenatal Development
- Prenatal Diagnosis and Treatment

### General Risk Factors

- Nutrition
- Increase eating by 10-20%.
- Gain 25-30 lbs (1/3 baby, 1/3 fat, 1/3 more blood).
- Specific tastes (pickles & ice cream)
- Nausea (linked to teratogens)
- Not junk food!
- Folic acid (otherwise spina bifida)

### General Risk Factors

- Stress
- Can prolonged stress create problems?
- Well, if we shock rats or overcrowd them, their kids are underweight.
- And correlation says this is true for humans, too.

### General Risk Factors

- Mother's Age
- 40 and up: higher risk of Downs.
- If adequate care, pregnancy can be normal from teens till late 30's.
- But teens less likely to get adequate
   care
- And older = less likely to get pregnant.

### **Teratogens** • Teratogen: any substance (agent) that causes abnormal prenatal development. Diseases • Drugs • Environmental Hazards Teratogens: Diseases, Drugs, and Environmental Hazards Many diseases pass through the placenta directly and attack the fetus. • AIDS (infections, neurological disorders, death) • Cytomegalovirus (deafness, blindness, retardation) Genital herpes (Encephalitis, enlarged spleen, improper blood clotting) • Rubella (Mental retardation, eyes ears and heart) • Syphilis (CNS damage, teeth, bones) Teratogens: Diseases, Drugs, and Environmental Hazards Potentially dangerous drugs (pg 86): • Alcohol (fetal alcohol syndrome) • Asprin (lower IQ, attention and motor skill) • Caffeine (low birth weight, low tone: controversial) • Cocaine (retarded growth) • Marijuana ( low birth weight, less motor control) • Nicotine (retarded growth, cognitive impairments) Fetal Alcohol Syndrome Causes • mental retardation · learning disabilities • serious behavioral problems. **Environmental Hazards** Environmental hazards are treacherous because we're often unaware of their presence (pg 87). • Lead. (Mental retardation) Mercury. (Retarded growth, cerebral palsy, mental retardation) X-Rays. (Retarded growth, leukemia, mental retardation): but not VDT's. But your body is! Nausea (linked to teratogens and healthier babies) How Teratogens Influence Development

- I. Depends on the genotype.
- 2. Influence changes over development (Fig 4-6, pg. 90).
- 3. Affects specific aspects of development.
- 4. Depends on the dose.
- 5. Not always evident at birth.

### Goals & Objectives

- Learn the facts.
- Stages of labor
- Newborn states, cries, and reflexes
- APGAR
- Apply what learn
- Case study set close to home.
- Evaluate infant reflexes.



### Happy Birthday!

- Labor and Delivery
- Approaches to Childbirth
- Postpartum Depression
- Birth Complications

### But when is it?

- Signs that Labor is near: week or so (Grubb,2001).
- Vaginal discharge, engagement (lightening, dropping), increased Braxton Hicks, lose a few pounds, dull backache, frequent loose bowel movements and cramping, "nesting," softening, thinning, or minor dilation of cervix.

### But when is it?

- Signs that Labor is imminent: day or so (Grubb,2001).
- A:Water breaks (amniotic sac): 10-15% before. (Watch for crap! Merconium)
- B: "Bloody show (i.e., blood-tinged mucus draining from the vagina)."
- C:Regular contractions: more frequent, more intense, and longer.

### Labor and Delivery

- Stage 1 (12-24 hours): starts when the muscles of the uterus contract and ends when the cervix is fully enlarged (about 10 cm).
- Stage 2 (1 hour): baby is pushed down the birth canal.

### Key terms

- Crowning see the top of the baby's head
- Breech presentation feet first.
- Afterbirth 10 15 short minutes.

### Natural Childbirth Advantages. • If can't feel, can't push. • If can't push, get the forceps. • Do you really want your child on drugs? • Emphasis is no drugs Instead Relax by deep breathing, picturing a happy place, and squeezing someone's hand. (Preferably a coach or doula). Birth Complications • Lack of Oxygen (hypoxia). • Placental abruption - placenta detaches. Often leads to surgical removal of the fetus (Csection 25%). Prematurity and Low Birth Weight • Prematurity - less than 38 weeks. Less serious than low birth weight. • Small-for-date • Born to mothers who drink or don't eat. • Less than 3.3 pounds at 9mo, not good. • But quality care is critical. Low Birth Weight Infants with low birth weight who grew up in stable homes are indistinguishable from normal babies. (two supportive, healthy parents). In contrast, divorce, alcoholism (the parent's not the baby), or mental illness amplfied the problem. • Thus, good prenatal care is critical. And we don't get it. US has more low birth weight babies than any other industrialized nation. Low Birth Weight Number one risk factor!! • Leads to our infant mortality rate of 9/1000. · What causes it, besides no prenatal care? • Hypertension, rubella (1st 16 wks), urogenital infections, diabetes, 4+ pregnancies, teen moms or over 35, mom is underweight, malnourished, cigarette or marijuana smoking, 2+ abortions, anemia, teratogens, maternal stress. Postpartum Depression • 10-15% of mothers have persistent irritability, disturbed sleep, and apathy. • Environmental & biological factors. • Could be passed on to baby.

### 4.4 The Newborn

- Assessing the Newborn
- The Newborn's Reflexes
- Newborn States
- Perception and Learning in the Newborn

### Is this child healthy? (0, 1, 2)



Appearance: blue, body pink, pink Pulse: none, fewer than 100, more than 100 Grimace: no response, grimace, cries (loud) Activity Level: flaccid, weak, strong Respiratory Effort: Absent, irregular, good

### Reflexes (Table 4-6, p105)

- Babinski
- Stepping
- Blink
- Sucking
- Moro (hands up!) Withdrawal
- Palmar
- Swallowing
- Rooting
- Swimming

### **Newborn States**

- 4 primary states:
- sleeping
- alert inactivity
- waking activity
- crying



### 3 types of cries

•2-3

### •Ty

### How do you stop the crying?

- If cries because hungry, wet, or in pain.
- Feed, change diapers, remove the mousetrap from finger.
- Rocking, Stroking, Singing
- 45% less crying if held more. We have 25% contact.
- Swaddling.
- Sucking.
- Home remedies??
- The baby tamer: SHHHHHHH

3 Hours a day!	
pes -Basic Cry : soft first, then	
nore insistent later.	
-Mad Cry: sudden onset, rapid conclusion.	
-Pain Cry:AHHHHH! breath) AHHHHHH!	

# Sleep I to 18 hours daily. But avake I out of every 4 hours. It 20 is sleep is REM (Dreaming?, consolidating memories? We don't know.) By age I. REM drops to 25% the rest is good of regular sleep. Sudden Infant Death Syndrome It is what it says. And no one knows why (by definition). But risk factors include: Premature birth, low birth weight, smoking. Lying on stomach. Overheating. Infant perception Newborns can perceive their environment and learn from it.

• They can see, smell, hear, feel, and, of course,

• But that's for another time.

• Taste!