Being pregnant and giving birth at the Jan Yperman Hospital



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1 Introduction of our team

During your pregnancy and your stay in the maternity unit, several doctors and staff are there to look after the well-being of you and your baby.

GYNAECOLOGISTS



Dr. Olivier Brouckaert



Dr. Lieselot Deblaere



Dr. Ludwig Verhulst



Dr. Jan Quintelier



Dr. Ilse Vanderbeke

PAEDIATRICIANS



Dr. Judith Baert



Dr. Hilde Boens



Dr. Ilse De Henau



Dr. Evelien Monbailliu



Dr. Els Sercu



Dr. Tine Van Ackere

HEAD MIDWIFE MATERNITY







- A dedicated team of gynaecologists and midwives provide support during labour and delivery. They are also in charge of the day-to-day care at the maternity unit.
- Physiotherapists guide you through pre- and postnatal exercises.
- The social assistant can help you apply for all kinds of social services (growth package, family assistance, maternity care, etc.).
- If you are struggling emotionally during your pregnancy or maternity period, a consultation with a psychologist at the hospital can be scheduled.
- A dietician will visit you in the maternity unit to register your meals.
 You can contact her with your questions about healthy eating or certain diets.

USEFUL TELEPHONE NUMBERS

maternity unit 057 35 60 61 ym1@yperman.net - birth centre 057 35 60 81

Secretariat: Schedule an (extra) appointment or an (urgent) question? The people at the secretariat will try to help you as soon as possible.

Contact: 057 35 75 75 - secgynaeco@yperman.net



emotionally during your pregnancy? Can't see the wood for the administrative trees? Feel free to ask for an appointment - through your gynaecologist or the secretariat - with the hospital's social service or psychologist. Contact: 057 35 67 20

2 Course of the pregnancy

A Pregnancy follow-up with gynaecologist

To assist you in the best possible way during your pregnancy, your gynaecologist will gather a lot of information about you, your partner and your family to help you during pregnancy and childbirth.

You will usually come for a check-up once a month. This will be a bit more often towards the end of the pregnancy. During these prenatal consultations, we always check your blood pressure and weight and detect abnormal changes. In this way, pregnancy complications can be detected in time.

The baby's development and well-being are also closely monitored.

Your body undergoes a lot of changes during pregnancy. It is important to find a new balance. If you have any doubts or questions about this, don't hesitate to ask them during these prenatal consultations!

The schedule below is an example for a healthy woman who is pregnant for the first This schedule may look different depending on your personal situation.



SPECIAL FO	OCUS ON	
8-9 weeks	Collecting info (additional) blood sampling Determining gestational age by ultrasound (Flu vaccination)	Gynaecologist
	Completing the medical record Extended information session	Midwife
12 weeks	First trimester ultrasound Down syndrome screening: NIPT	Gynaecologist
15-16 weeks	Ultrasound examination of baby's growth and structures	Gynaecologist
20 weeks	2nd trimester ultrasound	Gynaecologist
24-26 weeks	Sugar test Certificate for growth package Completing the further administration	Gynaecologist
28-30 weeks	Monitoring baby's growth Checking position of baby and placenta Whooping cough vaccination Anti-rhesus D antibodies(in rhesus negative woman)	Gynaecologist
	Extended information session	Midwife
32-34 weeks	Monitoring baby's growth and position	Gynaecologist
35-37 weeks	GBS test (looking up streptococci in the vagina)	Gynaecologist
39 weeks		Gynaecologist
From 40 weeks	2x per week CTG (monitor), more frequent in case of problems	Birth centre
6-8 weeks after birth	Clinical and ultrasound monitoring Discussion about contraception	Gynaecologist

If you have an urgent problem: always come via our hospital's emergency department. When in doubt, call the secretariat first: (057 35 75 75) or the birth centre: (057 35 60 81). Our midwives are there for you day and night!

NIPT

NIPT is a non-invasive screening test performed on a pregnant woman's blood sample from the 12th week of pregnancy (after the first-trimester ultrasound). The test is used for:

- detecting trisomy 21 (Down syndrome), trisomy 18 and trisomy 13
- · determining the sex of the foetus

The pregnant woman's blood contains small pieces of DNA originating from the placenta. By examining these small pieces of DNA, the risk of chromosomal problems in the foetus can be estimated. In exceptional cases, the genetic material of the placenta may differ from that of the foetus. As a result, an abnormal NIPT result does not provide certainty about a condition in the foetus and must always be confirmed by amniocentesis.

In case of a normal result, the chance that the foetus still has trisomy 21, 18 or 13 (false negative result) is very small, but not completely excluded. However, a normal result does not guarantee that the foetus does not have chromosomal abnormalities. Some chromosomal abnormalities cannot be detected by NIPT (e.g. triploidy). Diseases caused by small errors in the genetic material (e.g. cystic fibrosis) cannot be detected with this analysis either.

NIPT can determine the sex of the foetus with high probability. However, ultrasound confirmation of gender is always indicated.

The NIPT may give an inconclusive result. In this case, the NIPT can be repeated once free of charge. It is recommended to do this no earlier than 14 days after the first test.

The sugar test and gestational diabetes

Gestational diabetes is a disorder of sugar regulation that can be detected during pregnancy. Being pregnant, you don't feel you have this disorder, but it can still pose significant health risks, both for you and your baby. That is why it is important to detect gestational diabetes on time.



This screening consists of 2 steps:

- 1 Early in pregnancy, a fasting blood sample is taken to determine your sugar levels.
- 2 Depending on the value of the fasting sugar level and any other risk factors, a sugar test will be scheduled around week 24. You need to make this appointment yourself. For this test, you need to be fasting. After drinking a sugar drink (75 grams of sugar), do not make major efforts for two hours and do not eat or smoke. After that, we will collect blood. If the test is abnormal, we will refer you to the diabetes centre.

Contact: Ypres lab: 057 35 73 20 - Poperinge: 057 35 72 50



Healthy lifestyle

Of course, it is helpful to maintain a healthy lifestyle from the beginning of pregnancy. That means a healthy and varied diet, in addition to regular and appropriate exercise and controlled weight gain.

A half-hour of light exercise (walk, shopping by bike) affects your sugar regulation in a positive way and has the greatest effect half an hour after breakfast. Limit intake of quick sugars such as soft drinks, sweets, pastries, sugared milk products.

If you have questions about gestational diabetes or other topics, do not hesitate to ask your GP, gynaecologist or midwife for advice.

More information is also available on www.zoetzwanger.be and on gezondzwangerworden.be

Infections

During pregnancy, you and your baby are susceptible to infections.

CMV:

CMV is a virus that spreads mainly through saliva and urine of young children. However, your partner can also pass the virus to you! This infection can cause abnormalities in your baby such as hearing or vision problems, growth retardation, mental retardation or other neurological problems. Even if you have antibodies, you and your partner should continue to pay attention during pregnancy.

- So always wash your hands carefully, especially when in contact with bodily fluids (saliva, tears, urine).
- Don't share eating utensils (with your toddler).
- Avoid kissing young children near the mouth.

Toxoplasmosis:

Toxoplasmosis is an infectious disease caused by a parasite. You can get infected through contaminated food, cat faeces or contact with contaminated soil or water. This infection can cause abnormalities in your baby such as blindness and mental retardation. When you have antibodies, you are immune for life. If you are not immune, it is recommended to:

- avoid raw (red) meat and raw eggs (meat frozen for 3 days may be consumed raw).
- · wash fruit and raw vegetables carefully.
- not clean the cat's litter box, or at least use gloves for this.
- · wear gloves when working in the garden.

Listeriosis:

Listeriosis is an infectious disease caused by the intestinal bacterium Listeria monocytogenes. It often presents as a flu-like illness. The consequences of listeria infection during pregnancy can be serious for the foetus. You can prevent listeriosis by:

- keeping food that needs to be kept chilled actually in the fridge.
- · consuming food products as soon as possible after purchase.
- being careful with smoked fish, such as salmon and mackerel. The closer to the expiry date, the higher the risk of contamination.
- avoiding raw milk and soft cheeses (e.g. brie, camembert).



B Prenatal midwife consultation

During pregnancy, we will invite you twice to an information session with one of our midwives at the hospital. The first appointment will be scheduled after the first pregnancy check-up with your gynaecologist. The second appointment takes place between 26 and 32 weeks. The midwife prepares an obstetric file for you, gives info on the pregnancy and birth, and discusses your stay at the maternity unit.

These consultations are fully reimbursed by your health insurance fund. A prenatal consultation with the midwife is available every Tuesday and Thursday from 13:00 to 21:00 by appointment.

Make an appointment via the Gynaecology department by calling 057 35 75 75. Bring your identity card.



Website JYZ

Read all the latest information about our maternity and delivery centre on the website www.yperman.net



3 Preparing for labour and birth

A Prenatal physiotherapy

Prenatal sessions primarily focus on prevention of back pain, mastering breathing techniques (teaching abdominal, flank and top breathing), awareness of pelvic floor muscles, teaching posture to handle contractions (with or without a "body ball"), pushing techniques and relaxation exercises (relaxation and massage). Postures and exercises against pelvic pain and pelvic instability are also covered. Under the health insurance scheme, you will be reimbursed for 9 sessions of perinatal physiotherapy. You can divide these freely between the prenatal (during pregnancy) and postnatal (after delivery) periods. Prenatal exercises are best given by a physiotherapist who specialises in pregnancy and pelvic floor physiotherapy. You can contact a physiotherapist in your area yourself.



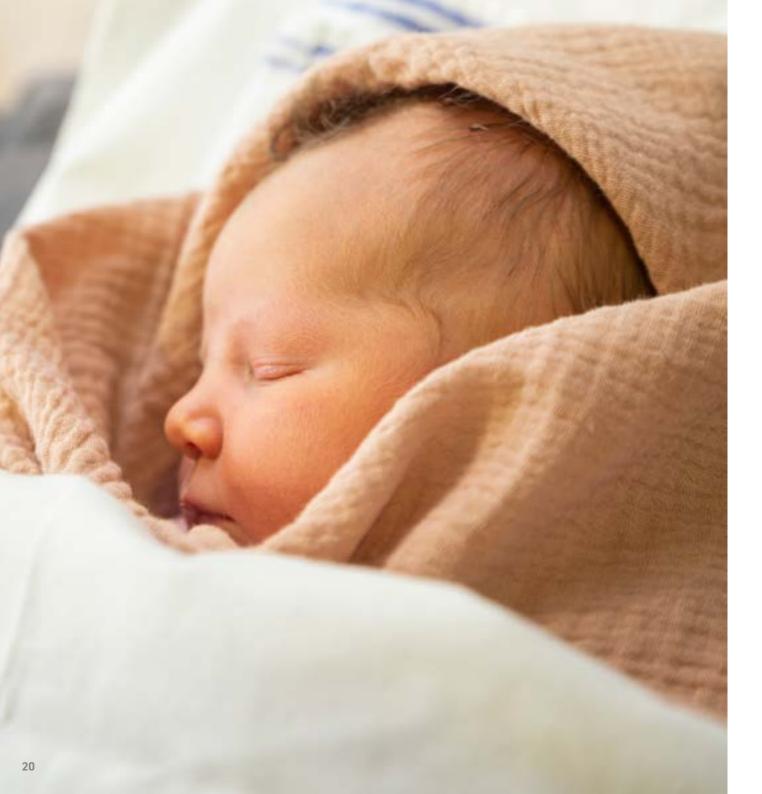
B Preparing your admission

Prac	Practical arrangements:				
	your identity card				
	hospitalisation insurance details				
	your marriage certificate, if you have one,				
	telephone number of the printer of your birth announcement				
	cards				
	phone number of your suikerbonen shop (sugar-coated choco-				
	late given on the occasion of a child's birth)				
	room selection (info on room selection available at general hospital reception)				
For	yourself:				
For	yourself: an easy dress or T-shirt to give birth in				
For					
For	an easy dress or T-shirt to give birth in				
For	an easy dress or T-shirt to give birth in personal toiletries ¹				
For	an easy dress or T-shirt to give birth in personal toiletries¹ towels, flannel and soap				
For	an easy dress or T-shirt to give birth in personal toiletries¹ towels, flannel and soap sufficient pyjamas and underwear				
For	an easy dress or T-shirt to give birth in personal toiletries¹ towels, flannel and soap sufficient pyjamas and underwear slippers				
For	an easy dress or T-shirt to give birth in personal toiletries¹ towels, flannel and soap sufficient pyjamas and underwear slippers breastfeeding bra if you want to breastfeed				
For	an easy dress or T-shirt to give birth in personal toiletries¹ towels, flannel and soap sufficient pyjamas and underwear slippers breastfeeding bra if you want to breastfeed breastfeeding pillow if you want to breastfeed				

For	the baby:
	bodysuits
	baby clothes
	hat
	socks
	bibs
	cuddly toy
	dummy
	a set of careproducts² (washing lotion, bath oil, thermometer, comb and brush)
For	your visitors:
	drinks and refreshments
	glasses
	washing-up liquid and kitchen towel
	bottle opener
Whe	en you go home:
	portable car seat
	blankets

¹ Sanitary pads will be provided on the ward

You can also purchase this care kit at the hospital. The nappies and nappy wipes are available in the room at the maternity unit.



c When to come to the hospital?

- When contractions occur every 5 to 10 minutes
- In case of amniotic fluid loss (usually odourless, with small flakes, uncontrolled loss)
- In case of blood loss (brown loss after checking with the gynaecologist is normal, bright red blood loss should always be checked)
- When the baby's movements change. If you have the impression that your baby is moving less, it is best to eat or drink something high in sugar such as a sugar wafer or a cola. Afterwards, you do well to rest for a while on the left side. After 15 to 20 minutes, movements should increase.
- In the event of a fall or blow to your abdomen
- In case of sudden complaints such as severe headache and/or pain in the stomach area

If any of these symptoms occur to you, it is best to visit the obstetrics department.

In doubt? Do not hesitate to call the secretariat or the maternity unit.

4 Labour and birth

A Registration at the hospital

If you have a scheduled appointment at the birth centre (for monitoring or a scheduled daytime induction), park at the visitor car park and come to the birth centre (route 20).

In case of a non-scheduled appointment, both during the day and night, come through the emergency department. If you are worried, call the maternity unit first on 057 35 60 61.

At the delivery centre, an admission interview is held and the midwife will apply the monitor to check the baby's heartbeat and the contractions. Through an internal examination, she also checks the dilation of your cervix. If you are clearly in labour, you will also be administered an enema. If you are a carrier of group B streptococci, we will start antibiotics to protect your baby.

The gynaecologist will be informed about your admission. If your own gynaecologist is not present, the gynaecologist on duty will be notified. At weekends and during the night, there is a strict waiting system.







that even highly motivated women need additional pain relief. Epidural pain relief is undoubtedly the most effective way to manage pain during labour and delivery. That technique has been used for years. It is a safe and reliable method of pain relief.

Still, contractions can be so painful

Would you like epidural anaesthesia? Then you need to fill in the 'agree after info on epidural anaesthesia for delivery' form.

Read our information leaflet on epidural pain management.
Ask about it during your prenatal consultation with the midwife.

B Relaxation and pain control during labour

Giving birth hurts. Fortunately, there are a lot of methods such as relaxation and breathing exercises that can help you control the situation.

- Changing positions regularly increases comfort and ensures proper relaxation of the pelvic floor. You can alternate following postures:
 - Lateral
 - Seated position: in bed, on a chair or armchair, on the toilet, on a situp ball
 - On hands and knees
- Massage by the partner or the midwife can be very relaxing and help you
 cope with the pain during contractions. Massaging is best done in a firm
 and calm manner and with warm hands. The midwife will be happy to
 help you with it.
- · Relaxation in the bath has a pleasant and soothing effect.

C Giving birth

During labour, dilation is monitored by vaginal examination. Sometimes it is necessary to optimise labour by breaking the membranes or giving a contractions stimulant.

During labour, the gynaecologist may apply a cut and administer a local anaesthetic if there is no or insufficient epidural anaesthesia. Sometimes an artificial delivery (with a suction cup or the forceps) has to be decided. In case of foreseeable problems, the paediatrician is also asked to attend the delivery as a precaution.

Immediately after birth, the baby is laid on mum's belly (skin-to-skin contact); if possible, a minute is waited before the umbilical cord is cut (by the partner). Skin-to-skin contact is as important to your baby as eating and drinking. It is a wonderful way of parent-child bonding and works soothing for baby's heart and breathing. It ensures a better breastfeeding start-up. Moreover, the baby stays nice and warm.

A birth in a bath is generally more relaxed and less stressful. The prerequisite is that labour is spontaneous and you have approval from the supervising gynaecologist.

Hot water acts as natural pain relief. In warm water, you produce endorphins more easily. These are a kind of natural painkillers. You can also relax better in the warm water. As a result, you produce fewer stress hormones. This makes you tolerate contractions better. And you will need fewer painkillers. Other benefits of a bath birth include:

- The warm water improves circulation. As a result, you produce more oxytocin. This is a childbirth hormone that ensures good, powerful contractions.
- You are weightless in the water. This allows you to move better. And adopt a birthing position that you like and provide more space in the your pelvis. This allows the baby to descend properly.
- The heat improves blood flow to the area between your vagina and anus. As a result, this area stretches more easily. As a result, cutting is needed less often.

Your pelvic area is softer and better supplied with blood. As a result, giving birth in the bath can be less painful for women with pelvic pain.

Doubts about your baby's condition may arise during your labour. Sometimes it is then necessary for you and your unborn baby to be checked further outside the bath. If you have set yourself up for a bath birth, this can be a disappointment.



Unexpected situations can also arise during childbirth. In that case, immediate action must be taken. This is not always possible in the bath. The obstetrician or gynaecologist may then decide that you should move to the delivery bed.

E Caesarean section

Planned caesarean section

A caesarean section is a procedure which delivers the child through the abdominal wall. The operation takes about 45 minutes. The baby is usually born within 15 minutes of the start of the operation. After that the abdomen is closed back in several layers.

As with any other planned surgery, you should visit the pre-operative consultation in advance (route 79). Solid food may be taken up to 6 hours before the procedure. Transparent fluids may be drunk up to 2 hours before the procedure (water, coffee and tea WITHOUT milk, isotonic sports drink, apple juice (max 400ml)).

Thanks to a multidisciplinary collaboration between anaesthetists, gynaecologists, midwives, nurses and the itZORG service, a new planned caesarean section care pathway has been set up.

The stay of mum, partner and baby(s) on Recovery is kept as short as possible and the midwives take over some of the postoperative checks at Maternity. The brand-new mum will be released from her IV line and bladder tube as soon as possible.

There are also some adjustments during the procedure: we postpone the umbilical clamping for a minute. This way, some blood still pushes to the baby, which is beneficial. Afterwards, the baby is checked by the paediatrician and if everything turns out fine, the baby can enjoy skin-to-skin contact on mum's chest for the rest of the procedure. Mother and child basically stay together all the time: from the operating theatre over the recovery room and into the maternity unit room.

Thanks to this new care pathway that also optimised pain relief during and after surgery, our mums are mobile and pain-free much faster.





5 Staying at the maternity unit

A Room

After a vaginal delivery, you usually stay at the maternity unit for 3 nights after delivery. After a caesarean section, that's four nights. In consultation with your gynaecologist and/or your paediatrician, you can be discharged earlier. In case of medical necessity, the stay can be extended.

Pre-registration

From 30-32 weeks of pregnancy, we ask you to complete necessary documents for your admission to the maternity unit at the reception. That way, this is already taken care of and everything will go much smoother when the time to give birth has arrived.

You will also be explained the options for choice of room, supplements, insurance... when you pre-register.

Practical information

- Sign up via the registration columns for admission.
- Your ticket will direct you to the waiting room.



Room choice

Upon your admission, we will ask about your room choice: a double room, a single room or a deluxe room are among the options. Each room has a telephone, television, separate baby box, bathroom with shower, washbasin and toilet. Of course, there is no difference in terms of care. treatment or meals between the different room types.

When you stay in a luxury room or a single room, all doctors-specialists who treat you may charge additional fees (although this is limited to a maximum of 120%).

Your partner's stay

During your maternity stay, your partner is always welcome. They can also, if desired, stay the night. However, this is only possible in a single or deluxe room.

In both single and double rooms, your partner can enjoy lunch and dinner in the room with you. We will settle your partner's meals afterwards via the hospital bill.



Visiting hours

Visiting hours at the maternity are from 15:00 to 19:30. It is important not to have too many visitors during the first few days. You and your baby can usually do with some rest.

B Parking

 Loading and unloadingLoading and unloading is possible in the small car park near the maternity unit. This is only possible from 8:00 to 20:00. You can use this service twice during the admission and will receive 2 tokens for this.

Parking

The hospital has a private car park. Parking is charged (only €2) each time you enter.

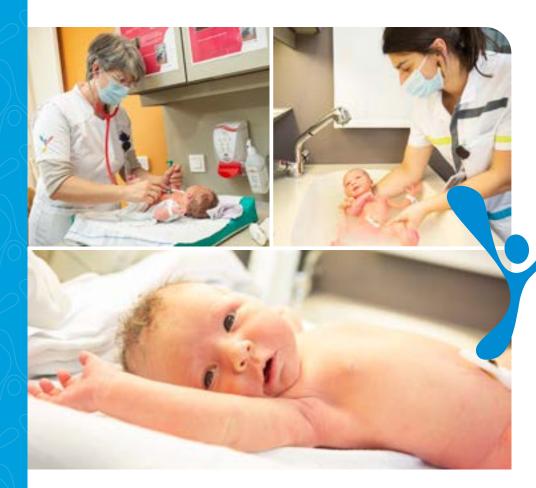
- At the entrance barriers to the hospital, press the green button for a parking ticket. Please bring this ticket with you to the hospital.
- When leaving the hospital, you will have to validate this ticket at the parking ticket payment machine at the entrance of the hospital.
- After payment, the ticket machine will return the ticket which will open the barriers when leaving the car park.
- For frequent visitors, discounted weekly passes (€5) are available at the reception desk.



C My baby

Baby care

The baby is immediately dried after birth and he/she is given a hat. After skin-to-skin contact with mum or dad, the baby is weighed and measured. Then he/she will also get his/her first shot, with vitamin K. Only the day after birth is the baby washed. This is also when he/she normally gets his/her first full examination by the paediatrician.



Bottle or breastfeeding

If you are breastfeeding, the baby will be latched on within the hour of delivery.

Breastfeeding is a conscious, healthy and personal choice. Therefore, during your pregnancy, take the time to inform yourself. Also, give yourself and your baby time to 'practice' and don't be too quick to think that breastfeeding won't work. During your stay at the maternity unit, ask for help from the midwives for latching on.

The power of breast milk

- Extensive research has shown that breastfeeding has many benefits for the baby and for you. The longer you breastfeed, the greater the health benefits for you and your baby.
- Breast milk is the most natural food you can give your baby. It
 is tailored to your baby's needs, growth, immune system and
 environment throughout the breastfeeding period and at each
 feeding.
- Shortly after birth, your breasts produce a yellowish milk called colostrum. That small amount of milk contains lots of nutrients and antibodies that protect your baby from infections.
- Gradually, colostrum turns into mature breast milk. It contains more fats and sugars and a lower amount of antibodies but its protective effect is still important.

You can get even more information via Kind en Gezin's "breastfeeding" brochure.



If you bottle-feed, your baby will get the first bottle after about an hour. The type of bottle feeding is chosen in consultation with the paediatrician the first day after delivery.

Artificial formula contains all the nutrients necessary for baby's growth and development. The natural protection that breast milk provides against infections is lacking in formula feeding. Therefore, good hygiene while preparing and storing formula is necessary.

Bring your own bottle and teat to see if your baby can drink smoothly from this too.



· My baby is in the neonatal unit

The neonatology service specialises in the care of premature babies and sick newborns. Each baby receives expert care and the necessary attention. Parents are involved as much as possible. For them, the neonatology department is accessible 24/7. You are always welcome.

More practical information (on feeding, care, visiting siblings,) will be given to you on the ward.











Baptism

The church prefers that children are baptised at their parish. If you are interested, but do not know how, please contact the Pastoral Service (057 35 66 44 or via email). They will help you make the necessary contacts.

Those who wish can also have their child baptised while being admitted to hospital. It is best to let the head midwife know as soon as possible after the birth so that she can make the necessary arrangements with the Pastoral Service. If you would like coffee and cake in the bistro after the ceremony, it is best to reserve this in advance (maximum of 20 people, payable on site).

Declaration

When?

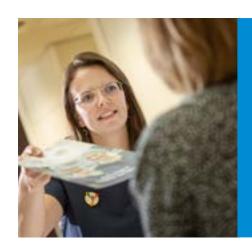
The birth of your child must be registered within 15 days, either in the entrance hall of the Jan Yperman Hospital at counter 4 (on Tuesday and Friday mornings) or at the Civil Registry Office of the City of Ypres.

These 15 days include Saturdays, Sundays and public holidays. The day of the birth itself is not counted in those $\,$

15 days. If the 15th day is a Saturday, a Sunday or a public holiday, the period is extended to the next working day.

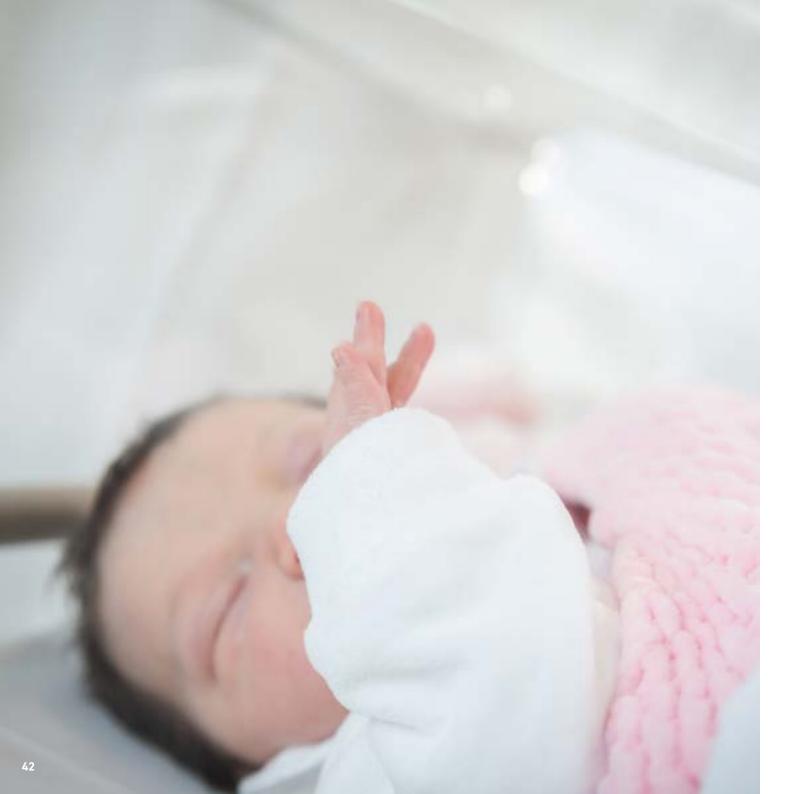
And the timely declaration of your child is very important. The registration is necessary for receiving a child benefit.

Registration at the hospital? For this, it is best to make your appointment no earlier than day 2 of your stay so that you have all the necessary documents at the time of your appointment.



Counter 4 JYZ
Only on Tuesday and Friday
mornings
Between 10:00 and 12:00

Ypres Registry Office
AC Auris
Ter Waarde 1,
8900 Ypres
057 23 92 12



By whom?

The declaration is made by the father, the mother, or both parents together. No witnesses are needed.

What do you need?

- Identity card of both parents
- The registration form available at the maternity unit.
- The marriage certificate
- Non-married people living together are best to visit the civil registry during pregnancy to arrange recognition. A certificate from the gynaecologist with the probable delivery date is required for this.
- A second name and any subsequent names are requested but are not obligatory.

What documents do you receive at the time of registration?

- A certificate to apply for maternity and child benefits.
- A certificate intended for the health insurance fund.
- · Additional birth certificates
- A 'polio vaccination' form. This vaccination is required by law. After the complete vaccination, the form must be filled in by the doctor and returned to the health service of your municipality or city.

6 Back home

A Home care

· Midwife at home

During the stay at the maternity unit, 2 home visits are immediately scheduled following your discharge from the hospital. In case of a vaginal birth, a midwife will visit on day 4 and day 5. In case of a caesarean section, a midwife will visit on day 5 and day 7. The midwife removes the stitches 1 week after the caesarean section. At the second home visit, you can indicate whether you want any further follow-up. You are entitled to 6 home visits, spread over the first 6 weeks after birth. After that, Kind en Gezin or an independent midwife takes over.

If you already had an independent midwife before you gave birth, they can of course take care of the first home visits. Notify your independent midwife no later than on the day you leave the maternity unit.

You can find a list of independent midwives in your area via:

https://www.vroedvrouwen.be/zoek-een-vroedvrouw

What can the midwife do at home?

- The legally required blood sampling for metabolic diseases
- Wound care after caesarean section
- Breastfeeding assistance
- Provide assistance with bottle feeding and help with preparation if necessary
- Teaching how to bathe the baby and helping with umbilical cord care
- Caring for the psychological and physical well-being of the woman giving birth
- Educating the parents on the physical and emotional needs of the baby
- Giving advice on the organisation within the family
- Refer to other authorities, if necessary





Kind en Gezin

The nurses/midwives of Kind en Gezin no longer come to the room, but will contact you by telephone within 14 days of the birth to fix the first appointments (hearing test and first vaccinations). For questions, you can always call the national number and/or visit their website.

www.kindengezin.be 078 150 100

Maternity help

A maternity nurse helps you take care of your baby and also does some light housework. This can be up to 12 weeks after you return home. That way, you can enjoy the time with your baby more or you can unwind a little more yourself. This tailored professional help can make a difference for you.

If you wish to make use of these services, contact an agency in your area. Most health insurance funds intervene in (part of) the costs.

B Baby blues or postnatal depression

Detecting Postpartum Depression

Having a baby is a very special event. It is the start of a new phase in your life. As with any new phase, this can bring unexpected issues and sometimes challenges. Moreover, during pregnancy, as after giving birth, many changes take place in your body. This can have an impact on how you feel.

1 in 5 women experience emotional symptoms during or after pregnancy. From the hospital, we are aware of the often emotional period that follows childbirth. 50-70% of women suffer from baby blues in the first week after giving birth. Baby blues usually start 3 days after delivery and can last up to 2 weeks. During this period, you may feel emotional or cry a lot. You may feel confused by this. Baby blues arise because of the big changes your body experiences in a short period of time. Hormonal changes, lack of sleep, childbirth, milk production, insecurity, fear of failure can cause you to feel down as a mum for a while. For some mums, however, these feelings do not disappear. If so, it might be postnatal depression.

Postnatal depression is an emotional state that persists for more than 2/3 weeks, and in which gloomy feelings and/or feelings of anxiety become more intense. The symptoms you may experience are gloomy mood, lack of interest, little enjoyment of the baby, irritability, guilt, insomnia, 1 in 10 women experience this. Scientific research has shown that 1 in 10 fathers also struggle with postnatal depression.

If you continue to suffer from these symptoms, it is best to contact your GP or your midwife. They can help you arrange the right care for you.







Jan Yperman Ziekenhuis, Briekestraat 12, 8900 Ypres info@yperman.net 057 35 35 35www.yperman.net