



Preconception Planning

1 Learn about your menstrual cycle

During each cycle, a mature egg is released from one of the ovaries, available for fertilization by a male sperm – this process is known as ovulation. For women with a 28-day cycle, ovulation typically occurs around day 14. (See menstrual cycle fact sheet for more information on tracking your cycle)

Sperm can survive in the female reproductive system for up to 5 days, so having sex in the days leading up to ovulation can increase your chances of conceiving.

How will I know when I'm ovulating?

Over the counter ovulation kits test your saliva or urine for hormone levels to determine when you are most fertile.

Basal body temperature (BBT) is your body's temperature at rest, best measured in the morning before activity. BBT increases by 0.3-0.6 degrees Celsius once ovulation has occurred.

Vaginal discharge increases over the 5 to 6 days before ovulation and turns clear, thin and stretchy similar to raw egg whites.

Why is preconception planning important?

Once you decide you would like to have a baby, it's never too early to start preparing. For some people it only takes a few months to get their body ready for pregnancy, for others it may take longer. Preconception health focuses on how to optimize your health before and between pregnancies to increase your chances of having a healthy baby.

Planning for pregnancy is a very exciting first step in your journey to start or grow your family.

Your doctor can help guide you on what to do before you get pregnant to help you feel more prepared. Booking a preconception appointment with your care provider is a great opportunity to discuss your pregnancy goals, review your health, receive education, and address some of your questions. This fact sheet contains a 'preparing for pregnancy' checklist to help you get started.

2 Stop contraception

While this may seem obvious, stopping contraception is an important part of pregnancy planning. Certain forms of contraception, such as condoms and vaginal diaphragms, can be used up until the day prior to conception. Other forms, such as oral contraceptive pills and intra-uterine devices (IUDs) should be stopped/removed months before you start trying for a baby.

While it is still possible to get pregnant right after stopping all forms of contraception, for many women it takes a while for regular ovulation to resume after certain forms of contraception are stopped. Speak to your care provider to make sure your contraception plan aligns with your pregnancy timeline.

3 Start a folic acid supplement

All women should take Folic Acid 400mcg daily before and during pregnancy. Your care provider may recommend higher dosing depending on your risk factors.

Review existing medical conditions

Women with pre-existing medical conditions should aim to optimize their health before getting pregnant. Speak to your care provider about your medical history and identify any conditions that may require focused monitoring by a specialist during pregnancy.

Certain chronic conditions are greatly impacted by pregnancy and are associated with complications if not appropriately managed. Other conditions such as endometriosis and polycystic ovarian syndrome (PCOS) can impact fertility and are worth discussing during your preconception visit so your provider can outline appropriate infertility treatment options and timelines should you need them.

Diabetes

If you have diabetes and plan to have a baby, it's important to try and get your blood sugar levels within range before you become pregnant.

Risk to you and your baby: High blood sugar levels during pregnancy can be harmful to both you and your growing baby. Birth defects, premature birth, and delivery complications are all risks associated with poorly controlled diabetes during pregnancy.

Hormone fluctuations during pregnancy can also worsen blood sugar control and your medication may need further adjusting once you become pregnant. Your preconception visit is the perfect time to discuss your blood sugar control and diabetes medication as well as gain a better understanding of how your diabetes will be monitored throughout pregnancy.

Autoimmune conditions

Certain autoimmune conditions respond differently to pregnancy, rheumatoid arthritis and systemic lupus erythematosus (Lupus) for example, tend to improve during pregnancy whereas myasthenia gravis can worsen. It's important to optimize your medication and symptom control prior to pregnancy as well as discuss a formal plan with your doctor should flare-ups occur.

Risk to you and your baby: Many of the medications used to treat autoimmune conditions (see below) can be toxic to your baby and should be switched months before you plan to become pregnant.

Thyroid disease

For women with an under or overactive thyroid, it's important to establish good control prior to becoming pregnant. Thyroid hormones play a very important role in your baby's brain development. For the first 3 months of pregnancy your baby relies on your supply of thyroid hormones delivered through the placenta.

Risk to you and your baby: If your thyroid hormones are too high or too low during pregnancy, it can result in serious complications such as miscarriage, premature birth, low birth weight and pre-eclampsia.

Thyroid hormone levels can fluctuate during pregnancy, and you may need to further adjust your medication once you become pregnant.

27% of all pregnancies in Canada are affected by a chronic condition.¹

High blood pressure

It's important to talk to your care provider about your high blood pressure. As with diabetes and thyroid disease, high blood pressure can worsen during pregnancy, so it's best to make sure your blood pressure is within range before becoming pregnant.

Risk to you and your baby: Women with pre-existing high blood pressure are at an increased risk of pre-eclampsia, eclampsia and stroke during pregnancy. These conditions often result in complications for your baby such as preterm delivery and low birth weights.

5

Review medication

It is always important to discuss your medication with your healthcare provider prior to becoming pregnant. This includes prescription medication, over-the-counter medication, and natural supplements.

The following list outlines some medications to avoid during pregnancy as per Health Canada guidelines:

- ACE inhibitors
- Carbamazepine
- Coumarin derivatives
- Folic acid antagonist (ie: methotrexate)
- Lithium
- Misoprostol
- Mycophenolate Mofetil
- Retinoids
- Tetracyclines
- Thalidomide
- Valproic acid

Some of the medications listed above are not recommended during specific trimesters, when in doubt ask your healthcare provider for guidance.

6

Review mental health

It is just as important to optimize your mental health before pregnancy as it is to address any physical health concerns. Maternal depression and anxiety significantly impact fetal health increasing risk premature birth, low birth weight and adverse cognitive and developmental outcomes later in life.

Depression affects up to 10% of women at some point during their pregnancy and close to 25% during the post-partum period.¹

For women with a history of anxiety and/or depression, it's important to weigh up the risks and benefits of antidepressant medication use during pregnancy. Antidepressants are safe to use in pregnancy yet the research into fetal exposure to these medications is still ongoing.

It's important to discuss your mental health with your care provider before, during and after your pregnancy and decide which support mechanisms are best for you and your baby.

7

Get up to date on vaccinations & screening

Immunization is an essential component of pre-conception care. There are certain infections that pose serious risks to you and your baby during pregnancy, many of which are preventable through vaccination.

Screening for sexually transmitted infections and making sure your pap smear is up to date are also routine aspects of preconception care. Health Canada recommends all women planning pregnancy should be screened for chlamydia, gonorrhea, syphilis and HIV.

All women should be offered the following vaccinations if they are not already up to date:

- MMR vaccine
- Chicken pox vaccine
- Flu shot
- Hepatitis B vaccine
- COVID-19 vaccine
- Tdap vaccine

*Additional vaccines may be recommended based on personal risk factors

Make healthy lifestyle changes

The healthier you are before you become pregnant, the higher your chances for a healthy pregnancy and baby-to-be. Lifestyle plays a very important role in optimizing your health before you become pregnant.

Healthy eating

Your nutritional needs will change throughout pregnancy and a pre-existing pattern of healthy eating helps set your body up for success.

Focus on a diet that incorporated lots of vegetables and fruit, low-fat milk products, whole grains, lean meats, fish and nuts. Try to avoid refined and processed foods, instead prioritize nutrient dense, fibre-rich, plant-based options.

Calcium, vitamin D, iron and folic acid are all essential vitamins and mineral that promote a healthy pregnancy and baby.

Stop drinking

Most women will be aware of the harmful effects of alcohol during pregnancy, however Canadian guidelines recommend all women who are considering pregnancy stop drinking while trying for a baby.

Alcohol is known to cause birth defects that affect the development of your baby's body and brain leading to lifelong physical and cognitive disabilities.

If you feel you need extra support to stop drinking, speak to your care provider about your options and work together to set realistic goals that help you work towards abstinence.

Maintain a healthy weight

The preconception period is the ideal time to work towards a healthy weight with a body mass index (BMI) between 18.5 and 24.9. Women who are over or underweight are at an increased risk of pregnancy complications and adverse health outcomes for themselves and their baby.

For women with a body mass index (BMI) over 30kg/m², weight loss of as little as 5-10% of their current body weight can improve their chances of conceiving.¹

Exercise is an important method of maintaining a healthy weight while boosting mental well-being. In Canada, guidance on physical activity recommends 150 minutes of moderate to vigorous exercise per week. Moderate exercise (ie: walking, cycling, swimming) does not negatively impact fertility or pregnancy and should be continued while pregnant.

It's important to note that hyperthermic environments (ie: hot yoga studios) are not the safest choice for your growing baby and are associated with an increased risk of birth defects.

Stop smoking

Smoking is another lifestyle factor that is widely known to have a negative impact on fetal health and pregnancy. Smoking has been linked with birth defects, low birth weight, premature birth and increased risk of spontaneous abortion. Smoking is also a known factor affecting infertility in both men and women.

It's important to note that cannabis (whether smoked or consumed orally) should be avoided before and during pregnancy as it poses a similar risk to your growing baby as cigarettes.

9

Learn about your family history

Learning more about your family history before you get pregnant can allow you time to address any concerns. If anyone in you or your partners family has a birth defect, developmental disability, or genetic condition, you might be more likely to have a baby with a similar health concern.

If possible, it's also worth discussing your mother's experience of pregnancy. While not all pregnancy-related conditions are genetic, sometimes a family history of certain conditions such as pre-eclampsia or diabetes may increase your own risk. Once you discuss your family history with your provider, they may recommend further genetic counselling.

10

Discuss your previous pregnancies

This will only apply to women who have previously been pregnant. It's important to discuss your previous pregnancy outcomes with your care provider – previous miscarriage, premature birth and other adverse health events may increase your risk of similar complications in future pregnancies.

Here is a list of details to have ready for your care provider at your pre-conception visit:

- Length of pregnancy (gestation)
- Type of delivery (vaginal, forceps, C-section)
- Birth weight
- Complications
- Assisted fertility treatments

How can Teladoc Health help?

"I'm looking for a doctor to book a preconception appointment." [Find a Doctor](#)

"I'm looking for additional resources on pregnancy planning and community support." [Personal Health Navigator](#)

"I'm looking for a second opinion on a new diagnosis that may impact my future pregnancy." [Expert Medical Opinion](#)

"I want to optimize my mental health before I get pregnant." [Mental Health Navigator](#)

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About Teladoc Health: Teladoc Health is empowering all people everywhere to live healthier lives by transforming the healthcare experience. Recognized as the world leader in whole-person virtual care, Teladoc Health leverages clinical expertise, advanced technology and actionable data insights to meet the evolving needs of consumers and healthcare professionals.

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