

PREGNANCY AND DELIVERY

4 June 2003, 4 June 04, 2 June 2006
Campbell's 6th: 992-1009, 7th: 979-984, 987-1001

Fertilization (p 991) nucleus enters, flagellum and mitochondria do not.

Cleavage (p 992 & 979)

Implantation (p 1000) triggers formation of chorionic gonadotropin, acts like luteinizing hormone, maintains the corpus luteum so that estrogen and progesterone continue to be released.

First trimester: an embryo, major developmental processes:
Second week: ecto and endoderm form
Third week:
gastrulation: formation of mesoderm (p 997)
neurulation: formation of neural tube (p 1001)
organs formed

Note that **teratogens** are especially potent in first trimester, smoking, drinking, drugs

Second trimester (p 980) placenta begins to function (releases estrogen and progesterone). Now a fetus.
organs continue to develop
hands and feet form by apoptosis

Third trimester primarily one of growth, preparation for birth, maturation of respiratory system

Nagele's rule: subtract 3 months add 7 days to day of start of last menses (10% on day, 50% week)

Stages of Labor, initiated by oxytocin (p 981)
position of fetus, occipital versus breech
perineum, distance between ischial tuberosities

see stages on p 981:

- 1) **Dilation of cervix** effacement and dilation (about 20 hours), 10 cm dilation
- 2) **delivery of baby** descent thru birth canal, crowning, head, arm, body
- 3) **delivery of placenta**

Apgar scores, score 0-2 for each: color, respiration, heart rate, reflexes, activity
7-10 at 5 minutes is normal, 0-3 is a problem.

colostrum and health passive immunity by absorbing antibodies from mother
Established emotional bond, sense of security

breast feeding

constant stimulation, interaction.