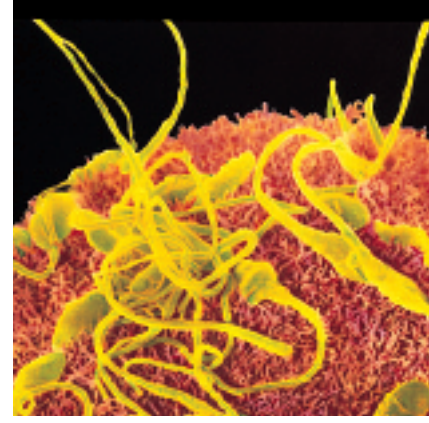


2 Conception



To understand about conception and pregnancy, it helps to know about the male and female sexual organs. This information is useful in pregnancy too, when you want to ask questions and be clear about what you are told.

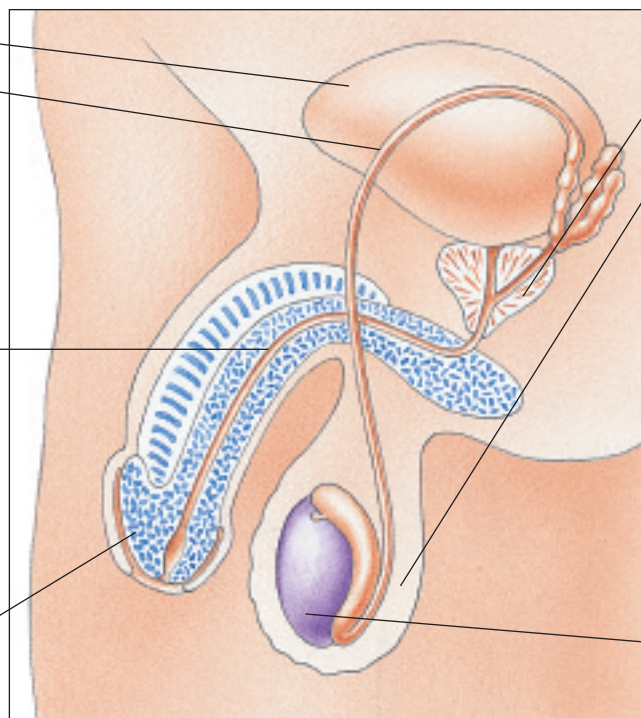
THE MAN'S SEXUAL ORGANS

Bladder

Vas deferens This tube carries sperm from the testes to the prostate and other glands. These glands add secretions which are ejaculated along with the sperm.

Urethra The urethra is a tube running down the length of the penis from the bladder, through the prostate gland to an opening at the tip of the penis. Sperm travel down the urethra to be ejaculated.

Penis The penis is made of erectile tissue. This tissue acts like a sponge and, when it becomes filled with blood, the penis becomes hard and erect.

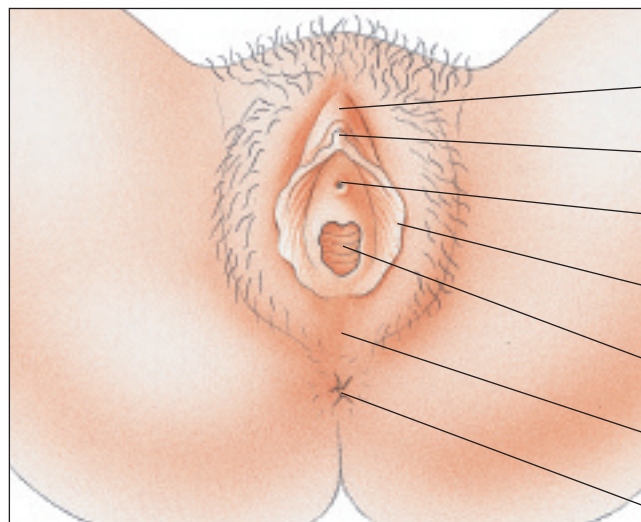


Prostate gland

Scrotum This is the bag of skin which hangs outside the body and contains the testes. It helps to keep the testes at a constant temperature, just below the temperature of the rest of the body. This is necessary for sperm to be produced. In heat, the scrotum hangs down, away from the body, to keep the testes cool. When it is cold, the scrotum draws up closer to the body for warmth.

Testes There are two testes. These are where sperm are made.

THE WOMAN'S SEXUAL ORGANS



Hood of clitoris

Clitoris

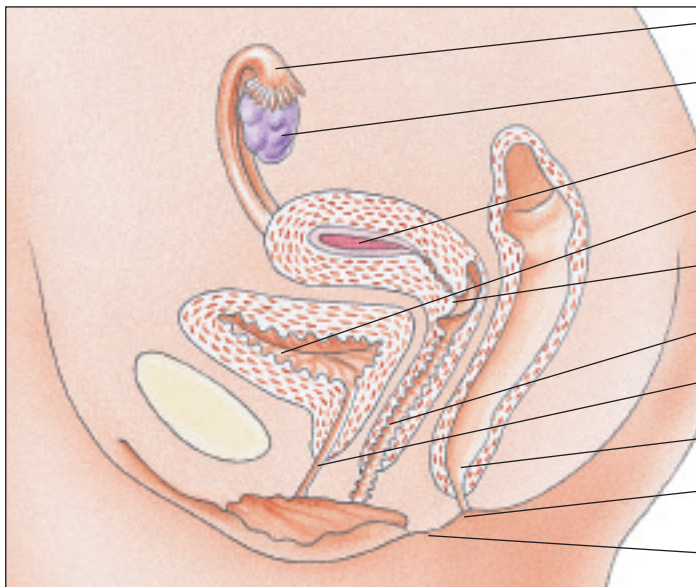
Urinary opening

Vulva

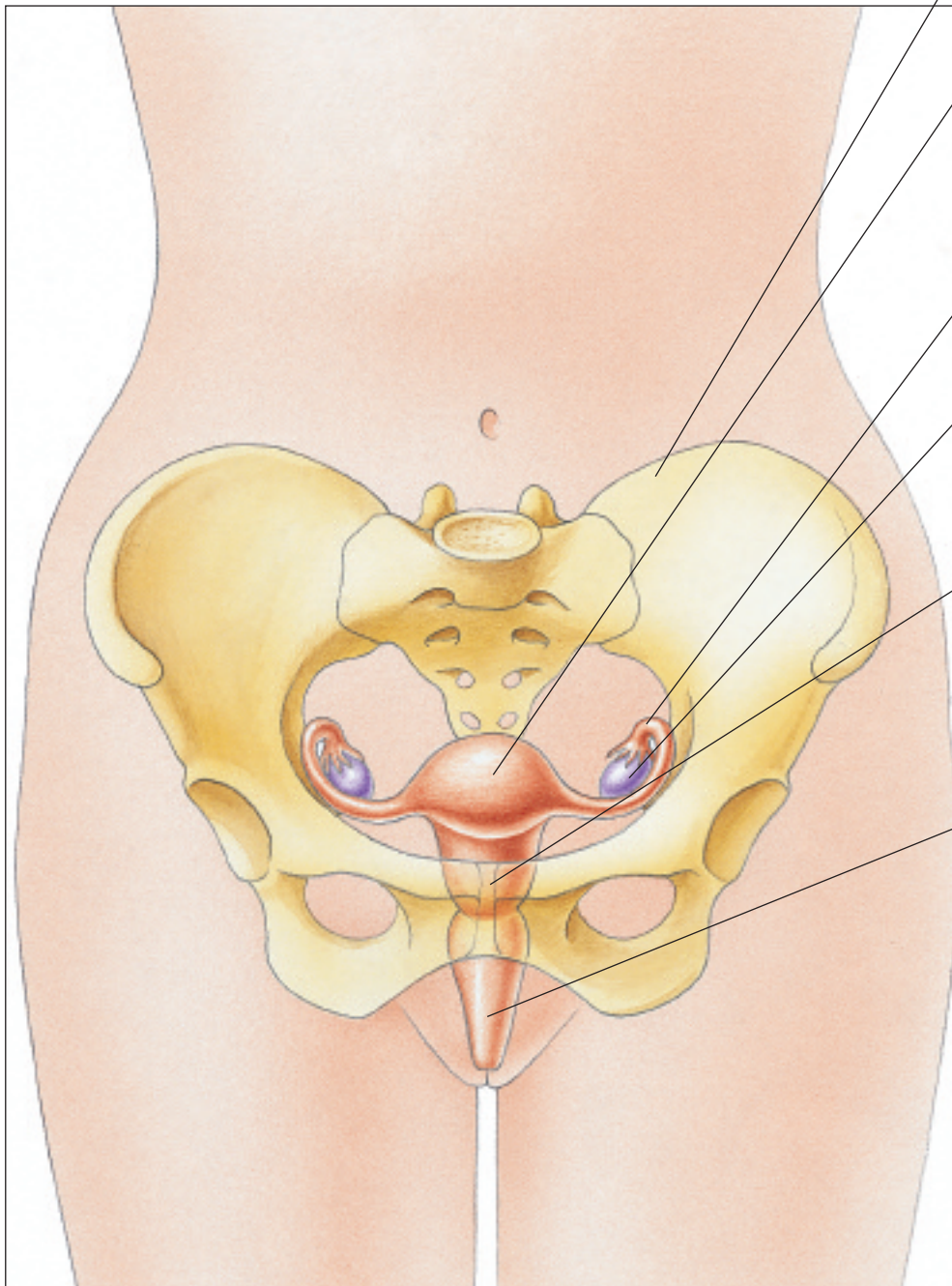
Opening of vagina

Perineum

Anus



- Fallopian tube**
- Ovary**
- Womb or uterus**
- Bladder**
- Cervix**
- Vagina**
- Urethra or water passage**
- Rectum**
- Anus**
- Perineum**



Pelvis The baby will pass through the pelvis when he or she is born.

Womb or uterus The womb is about the size and shape of a small upside down pear. It is made of muscle. It grows in size as the baby grows.

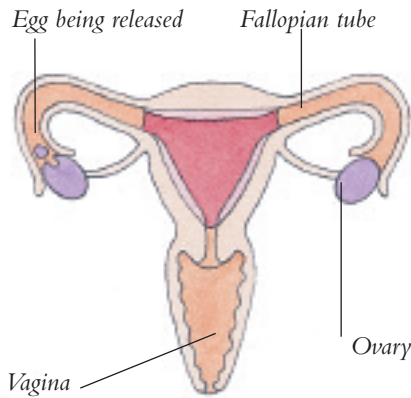
Fallopian tubes These lead from the ovaries to the womb.

Ovaries There are two ovaries, each about the size of an almond. They produce the eggs, or ova.

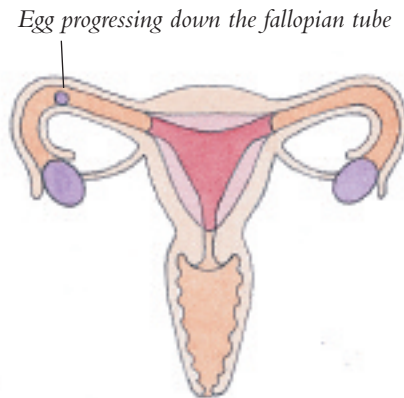
Cervix This is the neck of the womb. It is normally all but closed, with just a small opening through which blood passes during the monthly period.

Vagina The vagina is a tube about 8 cm (3 ins) long. It leads from the cervix down to the vulva, where it opens between the legs. The vagina is very elastic so it can easily stretch around a man's penis, or around a baby during labour.

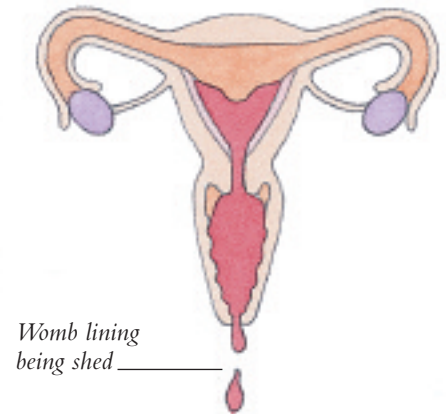
THE WOMAN'S MONTHLY CYCLE



1. Each month a ripe egg or ovum (occasionally two) is released from one of the ovaries. This is called ovulation. The 'fingers' at the end of the fallopian tube help to direct the egg down into the tube. At the same time, the lining of the womb begins to thicken and the mucus in the cervix becomes thinner so that sperm can swim through it more easily.



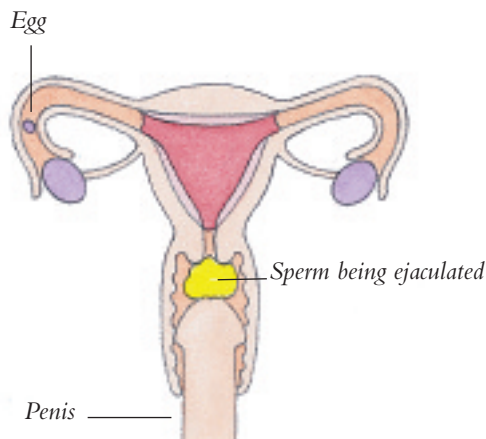
2. The ripe egg begins to travel down the fallopian tube. It is here that it may be fertilised by a man's sperm if a couple have intercourse at this time. By now the lining of the womb is thick enough for the egg, if it is fertilised, to be implanted in it.



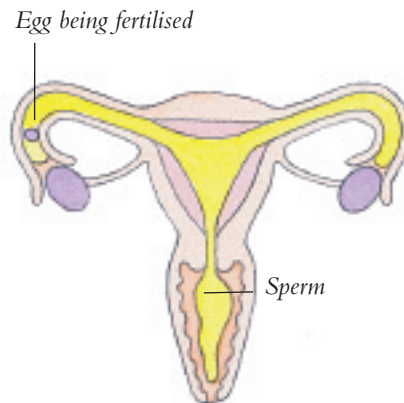
Womb lining being shed

3. If the egg is not fertilised by a sperm, it passes out of the body through the vagina. It is so small that it cannot be seen. The lining of the womb is also shed in the monthly period of bleeding.

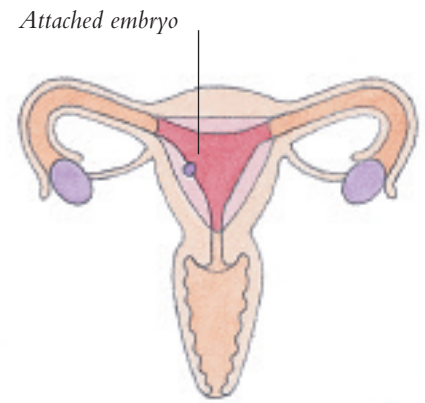
CONCEPTION



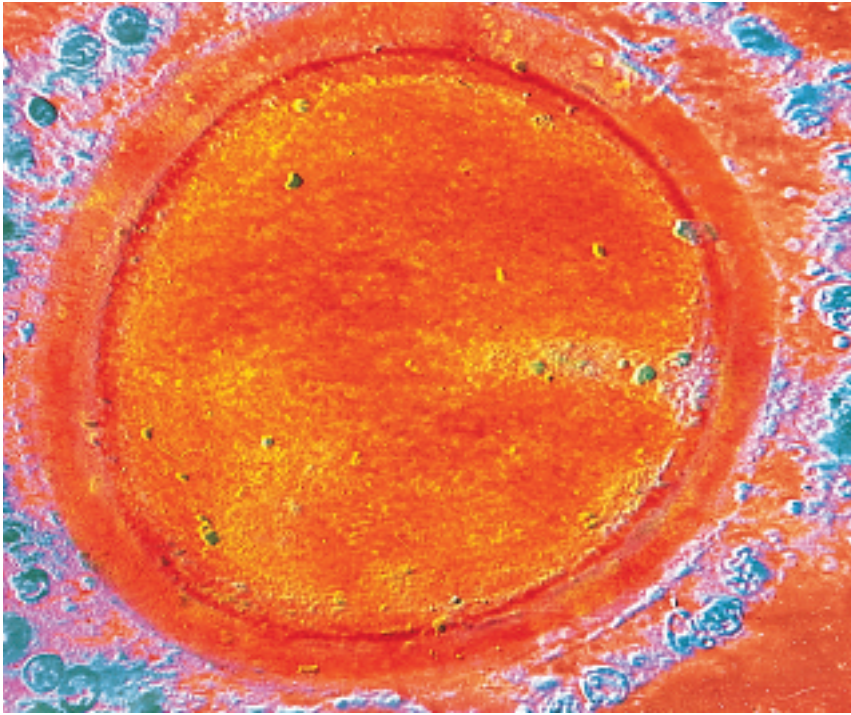
1. A woman is most likely to conceive just after the time when she ovulates – when an egg has been released from one of her ovaries. During sexual intercourse, sperm are ejaculated from a man's penis into the woman's vagina. In one ejaculation, there may be more than 300 million sperm.



2. Most of the sperm leak out of the vagina again, but some begin to swim up through the cervix. At the time of ovulation the mucus in the cervix is thinner than usual to let the sperm pass through more easily. The sperm swim into the womb and so into the fallopian tube. One sperm may then join with the egg and fertilise it. Conception is said to have taken place.



3. During the week after fertilisation, the fertilised egg, or embryo, moves slowly down the fallopian tube and into the womb. It is already growing. The embryo attaches itself firmly to the specially thickened womb lining. Hormones released by the embryo and by the woman's ovary prevent shedding of the womb lining. The woman 'misses' her period.



One ripe egg or ovum (occasionally two) is released from one of the woman's ovaries every month. It moves down into the fallopian tube where it may be fertilised by a man's sperm.

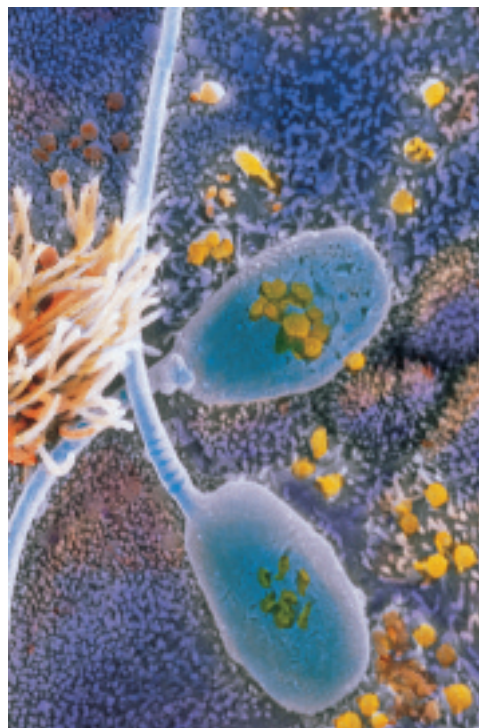
the events of the monthly cycle, such as the release of the egg from the ovary and the thickening of the womb lining.

Once conception has occurred, the amount of oestrogen and progesterone increases. This causes the womb lining to build up, the blood supply to the womb and breasts to increase, and the muscles of the womb to relax to make room for the growing baby.

HORMONES

Hormones are chemicals which circulate in the blood of both men and women. They carry messages to different parts of the body, regulating certain activities and causing certain changes to take place. The female hormones, which include oestrogen and progesterone, control many of

A sperm is about 1/25th of a millimetre long and has a head, neck and tail. The tail moves from side to side so that the sperm can swim up the vagina into the womb and fallopian tubes.



HEREDITY

Every normal human cell contains 46 chromosomes, except for the male sperm and female eggs. They contain 23 chromosomes each. When the sperm fuses with the egg and fertilisation takes place, the 23 chromosomes from the father pair with the 23 from the mother, making 46 in all.

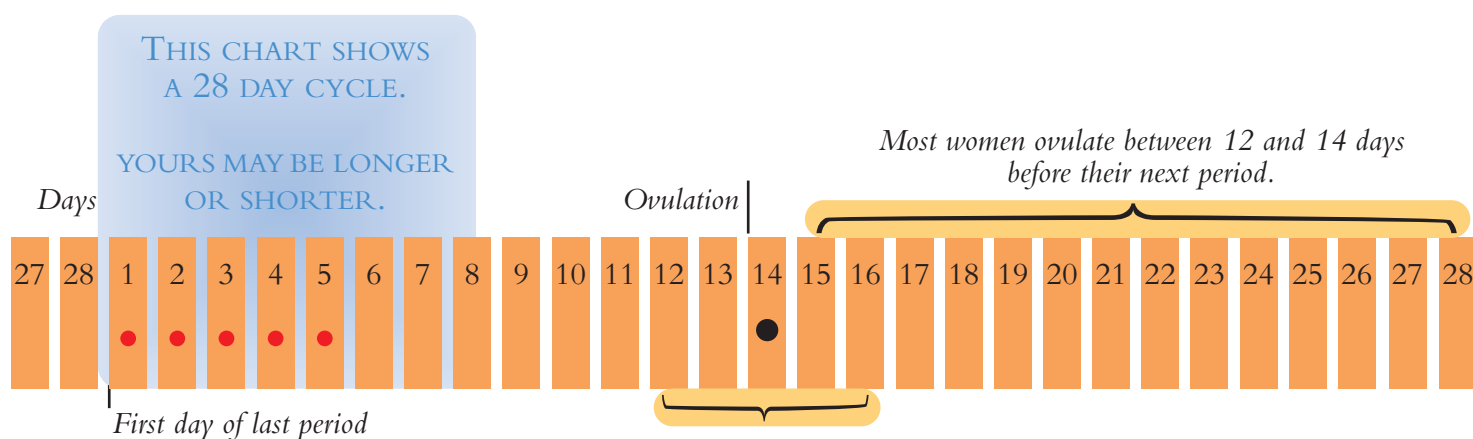
The chromosomes are tiny thread-like structures which each carry about 2000 genes. It is the genes that determine the baby's inherited characteristics, such as hair and eye colour, blood group, height and build.

The fertilised egg contains one sex chromosome from the mother and one from the father. The sex chromosome from the mother's egg is always the same and is known as the X chromosome. But the sex chromosome from the father's sperm may be an X or a Y chromosome. If the egg is fertilised by a sperm containing an X chromosome, the baby will be a girl (XX). If the sperm contains a Y chromosome, then the baby will be a boy (XY).

THE BEST TIME TO GET PREGNANT

An egg lives for about 12–24 hours after it is released from the ovary. If conception is to take place it must be fertilised within this time. Sperm can live for several days inside the woman's body. If you make love

a day or so before ovulation, the sperm will have time to travel up the fallopian tubes and will be waiting when the egg is released. So the chances are highest if you make love on the day before ovulation (see chart).



TWINS

Identical twins are the result of one fertilised egg splitting into two separate cells. Each cell grows into a baby. Because they originally came from the same cell, the babies have the same genes – they are the same sex and look very like each other. Non-identical twins are common. They are one result of two eggs being fertilised by two sperm at the same time. The babies may not be the same sex and will probably look no more alike than any other brothers and sisters.

Twins happen about once in every 80 pregnancies. A couple is more likely to have twins if there are twins in the woman's family. Triplets are much more rare and quads rarer still, although nowadays the use of drugs in the treatment of infertility has made multiple births more common. You may suspect that you are carrying twins if you are very sick in early pregnancy, seem bigger than your 'dates', they run in your family or you have had fertility treatment. It is usually possible

to find out by about the end of the second month of your pregnancy. An ultrasound scan is needed (see page 56) to make the diagnosis at this stage. You should be told at this point whether the babies are in separate sacs or offered a further scan to determine this. Twin and other multiple pregnancies (e.g. triplets) carry a higher risk of most of the complications associated with pregnancy, particularly premature birth. You will probably be encouraged to have regular scans during your pregnancy to check the babies' growth. You may be advised to have a Caesarean section. Discuss this with your doctor. You can still breastfeed with twins. With triplets, or more, this may be more difficult.

It is a good idea to contact support groups like TAMBA (Twins and Multiple Births Association) and the Multiple Births Foundation (see pages 147 and 148) before the babies are born.

FINDING OUT IF YOU'RE PREGNANT

SEE YOUR DOCTOR

Whether or not you have had a pregnancy test, you should see your doctor as soon as you think you are pregnant. Being pregnant may affect your GP's treatment of any current or future illness. Your pregnancy will be treated confidentially, even if you are under 16.

Your GP will advise you about antenatal care in your area and put you directly in touch with a midwife if you wish. The chapters on **Deciding where to have your baby** and **Antenatal care and antenatal classes** (see pages 33 and 51) give information about the services available.

THE SIGNS OF PREGNANCY

The earliest and most reliable sign of pregnancy, for women who have a regular monthly cycle, is a missed period. Sometimes women who are pregnant have a very light period, losing only a little blood. Other signs of pregnancy are listed below.

- **Feeling sick** – you may feel sick, or even be sick, not necessarily in the morning, but at any time. If you are being sick all the time and can't keep anything down, tell your doctor.
- **Changes in your breasts** – often the breasts become larger and feel tender, rather as they may do before a period. They may tingle. The veins may show up more and the nipples may darken and stand out.
- **Needing to pass water more often.** You may find that you have to get up in the night to do so.
- **Being constipated.**
- **An increased vaginal discharge** without any soreness or irritation.
- **Feeling tired.**
- **Having a strange taste in your mouth** – many women describe it as metallic.
- **'Going off' certain things** like tea or coffee, tobacco smoke or fatty food, for example.

Some women don't even need these signs. They just 'know' that they are pregnant.



PREGNANCY TESTS

Pregnancy tests can be carried out on a sample of urine from the first day of a missed period, that is, about two weeks after conception.

You can collect urine at any time of the day. Use a clean, soap-free, well-rinsed container to collect it. You can get pregnancy tests free or for a small charge from your GP or family planning clinic. Many pharmacists and most pregnancy advisory services also offer tests, usually for a small fee. You can also buy do-it-yourself pregnancy testing kits from pharmacists. They can be expensive but give you a quick result and you can do the test in private. Follow the instructions to be sure of a reliable result.

THE RESULTS OF THE TEST

A positive test result is almost certainly correct. A negative result is less reliable. You could wait a week and try again, or go straight to your doctor.



KNOWING THAT YOU'RE PREGNANT

You may feel very happy or excited when you discover that you are pregnant, but you shouldn't worry if you don't. Even if you have been looking forward to pregnancy, it is not unusual for your feelings to take you by surprise. And if your pregnancy was unplanned, then you may feel quite confused. Give yourself a little time to adjust to the idea of being pregnant. Even though you may feel rather anxious and uncertain now, this does not mean that you won't come to enjoy your pregnancy or to welcome the idea of the baby. Discuss your feelings with your midwife or doctor who will help you to adjust to your

pregnancy, or, in England and Wales, will give you advice if you are not happy to continue with it. You may want to share the news with family and friends immediately or wait a while until you've sorted out how you feel. Others in your family/extended family may have mixed feelings. You'll need to talk about these feelings. But do begin to think about your antenatal care (that is, the care you'll receive leading up to the birth of your baby) and where you would like to have your baby. The earlier you begin to organise this, the more chance you will have of getting what you want.

'I thought when I first got pregnant, "This is fantastic, it's really different, it's never happened to me before."'

'I wasn't very pleased at first. I was a bit shocked, I think, more than anything, and it took me about three months to get used to the idea that I was pregnant. I don't think I could believe it at first.'

HELP AND ADVICE FOR TEENAGERS

Life as a young mother can be difficult, especially if your partner or family are unable to give much help. However, there are a wide range of services you can draw on.

If you think you may be pregnant, you can get confidential advice from the Sexwise helpline on 0800 282930 and further information from the website www.ruthinking.co.uk

In your area there will be a range of services available for young parents. Your midwife or health visitor will be able to provide details of these services.

All teenagers in England can get help and advice from the Connexions service. You have the offer of support from a personal adviser to help deal with the variety of issues you face, so that you can make choices and realise your full potential for the future. You can find Connexions advisers in a variety of places, including schools, colleges, one-stop shops and through youth and community projects.

For confidential personal advice, practical help or details of your local Connexions service phone

Connexions Direct, on 080 800 13219 or text 07766 4 13219 or visit the website on www.connexions.gov.uk

CARRYING ON WITH YOUR EDUCATION

Becoming a teenage mother need not mean the end of your education. If you become pregnant while still at school, your school will not exclude you on grounds of pregnancy, and should keep you in learning even if you are unable to attend for a while.

If you decide to return to school or college after you have your baby, the Care to Learn scheme will be able to help pay any childcare costs. For further information about Care to Learn ring 0845 600 2809 or see the website www.dfes.gov.uk/caretolearn

SOMEWHERE TO LIVE

Many young mothers want to carry on living with their own family until they are ready to move on. If you are unable to do so, your local authority will take responsibility for housing you. In some cases it may be possible to provide specialised accommodation where young mothers can live independently while getting support and advice from trained workers. Seek advice from your local authority.

For information on sex and contraception, see the section on page 117.



From Conception to Your New Baby - Healthy the Natural Way

During both the conception process and throughout pregnancy it is important that hopeful moms maintain their physical wellbeing and as well as their psychological health.

This broad field of women's health includes psychological issues surrounding mood, stress and relaxation, as well as physical areas such as infertility, nutrition, morning sickness, labor and delivery and more.

After a baby is delivered, it is important that new moms maintain their physical and psychological health, as well as that of their newborn.

Addressing the health of mothers includes psychological issues surrounding mood, stress and relaxation, as well as physical areas such as healing, breast-feeding and energy levels. Baby's health issues include sleep and relaxation, cradle-cap, teething and much more.

At Native Remedies you will find a comprehensive set of herbal remedies to help you manage and optimize your body and weight health – naturally and safely.

View Natural Products for Pregnancy & Conception

- Conception Support
- Labor and Delivery Aids

- Pregnancy Support

View Natural Products for Mom & Baby

- [Infant Comfort & Health Aids](#)
- [Post-Partum Support](#)

Two Important Differences in Native Remedies Products

We use the **Full Spectrum Method** of extraction to create our products. Many *so-called natural remedies* are manufactured using standardized extractions which – although often cited as being more scientific method – is not approved by the manufacturers of holistic medicines.

To us, it makes little sense for companies to go the natural route, while being unable to guarantee that their product is free of contamination with chemicals known to be harmful to health! Using the Full Spectrum Method helps us to maintain the integrity, balance and therapeutic effect of herbs with the least risk of side effects or harm to your health!

Read more about the our [*Manufacturing & Full Spectrum Approach*](#) »

We utilize a unique **dual-modality approach** to complete holistic wellness because we know that natural medicine works best in combination (herbal, homeopathic, flower essences and tissue salts) for fast relief and long-term care. Our approach provides a complete solution by offering OTC homeopathic remedies for relief of symptoms as well as compound herbal remedies for complete support of your physical, emotional and mental well-being.

While each of our natural remedies works well on its own to address a specific body function or relieve a particular symptom, we believe that by combining our herbal and homeopathic remedies you will find a complete solution that is safe and highly effective.

Read more about the our [*Dual-Modality Approach*](#) »