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Diet, medication use and drug intake during pregnancy: data from the Swiss Health Surveys 2007 and 2012

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The research study entitled "Diet, medication use and drug intake during pregnancy: data from the consecutive Swiss Health Surveys of 2007 and 2012" by Bornhauser et al. presents and compares dietary and behavioural attitudes between pregnant and non-pregnant women in Switzerland [1]. This is an interesting study, which presents a wide range of data for a large sample of pregnant and non-pregnant women, with adequate discussion of the results. Although the scientific soundness of the study is relatively high, its importance would have been increased if the methodology had been better in some aspects and the authors had used specific, validated questionnaires (such as FFQ or 24h recall) to investigate the women's nutritional behaviours.

The authors concluded that "During pregnancy, a considerable proportion of the women adapted their diet and seemed to refrain from using pain killers and from consuming alcohol, tobacco and illicit drugs." The data are positive for the Swiss population, given the fact that the basic guidelines for a health-promoting lifestyle before and during pregnancy include appropriate weight gain, abstinence from drugs, alcohol and smoking, appropriate physical activity and consumption of a variety of foods in accordance with dietary recommendations [2, 3]. Nevertheless, the study did not report the weight gain of the women at the end of the study. These data would be very interesting, given that a normal weight gain during pregnancy, in compliance with the relevant guidelines, is associated with a healthy pregnancy and is strongly affected by women's diet and lifestyle during pregnancy [2, 4, 5].

The study observed that "Significantly more pregnant than non-pregnant women revealed a high nutritional awareness, claiming to pay attention to what they ate. Frequent consumption of milk products and fish, and moderate consumption of meat were found more often in the pregnant group." The data show that Swiss pregnant women possibly follow a balanced diet. Several scientific publications have supported the conclusion that adoption of a balanced diet (in accordance with nutritional guidelines and with similarities to the Mediterranean diet) and, specifically, an increased consumption of fruit, vegetables and fish, and moderate consumption of red meat may be associated with healthy pregnancy and normal fetal growth. A diet with a lower glycaemic index and the adequate provision of iron, calcium, vitamins (such as vitamin B12 and folic acid) and antioxidants may also promote the health of both the pregnant woman and the fetus [6–9].

Adoption of a healthy lifestyle during pregnancy, as described in the current study, should remain a basic aim of national policies for health promotion and prevention of unexpected pregnancy outcomes.

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References

1 Bornhauser C, Quack Lötscher K, Seifert B, Simões-Wüst AP. Diet, medication use and drug intake during pregnancy: data from the consecutive Swiss Health Surveys of 2007 and 2012. Swiss Med Wkly. 2017;147:w14572. https://doi.org/10.4414/smw.2017.14572. PubMed.

2 Koutelidakis AE, Alexatou O, Kousaiti S, Gkretsi E, Vasios G, Sampani A, et al. Higher adherence to Mediterranean diet prior to pregnancy is associated with decreased risk for deviation from the maternal recommended gestational weight gain. Int J Food Sci Nutr. 2018;69(1):84–92 . http://dx.doi.org/10.1080/09637486.2017.1330403. PubMed.

3 Kaiser L, Allen LH; American Dietetic Association. Position of the American Dietetic Association: nutrition and lifestyle for a healthy pregnancy outcome. J Am Diet Assoc. 2008;108(3):553–61 . http://dx.doi.org/10.1016/j.jada.2008.01.030. PubMed.

4 Streuling I, Beyerlein A, von Kries R. Can gestational weight gain be modified by increasing physical activity and diet counseling? A meta-analysis of interventional trials. Am J Clin Nutr. 2010;92(4):678–87 . http://dx.doi.org/10.3945/ajcn.2010.29363. PubMed.

5 IOM Institute of Medicine. Weight gain during pregnancy: reexamining the guidelines. Washington, D.C., National Academy Press. 2009.

6 Chatzi L, Mendez M, Garcia R, Roumeliotaki T, Ibarluzea J, Tardón A, et al.; INMA and RHEA study groups. Mediterranean diet adherence during pregnancy and fetal growth: INMA (Spain) and RHEA (Greece) mother-child cohort studies. Br J Nutr. 2012;107(1):135–45. Published online June 29, 2011 . http://dx.doi.org/10.1017/S0007114511002625. PubMed.

7 Balcı YI, Ergin A, Karabulut A, Polat A, Doğan M, Küçüktaşcı K. Serum vitamin B12 and folate concentrations and the effect of the Mediterranean diet on vulnerable populations. Pediatr Hematol Oncol. 2014;31(1):62–7 . http://dx.doi.org/10.3109/08880018.2013.829894. PubMed.

8 Gil A, Gil F. Fish, a Mediterranean source of n-3 PUFA: benefits do not justify limiting consumption. Br J Nutr. 2015;113(S2, Suppl 2):S58–67 . http://dx.doi.org/10.1017/S0007114514003742. PubMed.

9 Koutelidakis A, Kapsokefalou M. Antioxidants in adulthood and old age. In: Antioxidants in Health and Disease: Myths or Scientific Evidence? Zabelas A (editor), Elsevier. 2015.