

Nutrition and Weight Gain in Pregnancy with Ali Shapiro – Insatiable Season 9, Episode 5

[INTRO]

[0:00:08.9] AS: When you're fed up with fighting food and your body, join us here. I'm Ali Shapiro, creator of the Truce with Food Program and your host for Insatiable; where we explore the hidden aspects of fighting our food, our weight and our bodies and dive deep into efficient science and true whole health.

Fair warning, this is not your parents' healthcare. This is a big rebel yell to those who crave meaning, hunger for truth and whose lust for life is truly insatiable. Believe me, freedom awaits.

[EPISODE]

[0:00:47.5] AS: Welcome to season 9 of Insatiable. Our season theme is fertility. This topic often gets reduced to periods, for pregnancy, without regard to the physical, emotional and soul process involved with our hormones, menstrual cycles, bodies and identities, regardless if we choose to have children or not.

In this season, we will take a holistic and integrated look at fertility to reveal you of more choices that most of us have been led to believe. Being in my eighth month of pregnancy, I'm now surprised, I thought that Western medicine would be authoritative on fertility as it is just as fraught with fear tactics, outdated science and siloed thinking as nutrition, weight loss and wellness.



My hope is we fill the gaps you might not know are missing, have better questions to ask and are able to get the results you want on your terms for your period, hormonal health, conception, pregnancy, birth and the fourth trimester.

This fertility theme is also the theme of our Insatiable membership community. We will spend this fall; September, October and November taking a deep dive into the physical, emotional and soul aspects of fertility cravings for your current life stage, whether you're menstrual, perimenopause and menopause or post-menopause, and how to sync nutrition lifestyle, including exercise and work in creativity to in sync with our fertility. More details on how to join on alishapiro.com 2019.

Welcome everybody to episode 5 today, nutrition and weight gain and pregnancy with mwah. Today, I'm going to do a solo episode. This one was really inspired by a client session I had last week, and tell you a little bit about her, and she's given me permission to talk about this, obviously anonymously.

I just want to say I'm not a prenatal nutrition expert, but the big secret that I found is you actually don't need to complicate prenatal nutrition. We'll get into that today. I wanted to do this episode, again inspired by this pregnant, this client. She recently got pregnant, much faster than she thought she would. This is in her first trimester, actually almost coming out of it at this point. She has come so far with her food and body image.

She told me because of the work we've done together, she's in a place where food – her relationship with food feels like a fantasy. It's a dream she never thought she could actually get to. She never thought she could be in a place of how she just eats with her hunger cue and she has no emotional attachment to food, still able to enjoy it and yet she has. She's like, "I came into pregnancy eating when I was hungry, enjoying the food."



She's also had next-level emotional growth from us changing the emotional patterns that there – the reasons we turn to food, right? She feels confident in herself that weight loss just can't give us. We were joking that her – how she feels about food really feels like a miracle, except she did a lot of work to get here. It was rewarding work. It was fun. It was challenging. It was all the feels, but she's done the work. She wants to continue to eat healthy and tune into her body, but one of the things that she's coming up against is she does have nausea in her first trimester and hormones obviously make you feel different about your body, and will alter how and what you eat.

She also has a lot of friends who are in the – I would call it the conventional world, or have mainstream ideas about pregnancy. If you're an Insatiable listener, or if you're one of my clients, you start to realize that what we consider mainstream or normal is actually crazy. She had a session with me about around how do I tune into my body, because I can't really tune into normal, right? Because for example, her friends were like, “Well, you get to eat all – if you're nauseous, you get to eat all the bagels. Anything you want that's carby, just to satisfy it.” She said, “But I don't want to eat that stuff.”

The irony is her friends have never really had to pay attention to nutrition or food in terms of weight. She has all this understanding of her body and what works for her and what she really wants out of this, in a way that sometimes people who haven't had to struggle have ever had to look at. We were talking about how struggling with food is so hard and it's very hellacious. If you work through it, it actually gives you so many gifts. I know I've been so grateful for here, I'm actually – at the day of this recording, it's my 41st birthday and I am 37 weeks pregnant, so I'm full-term nine months. I'm also going to share a little bit about my own experiences today with this.

Getting back to my client, so the place that she's in right now in the first trimester is she can't stomach a lot of healthy food that she's used to eating. Again, her friends are telling her to eat whatever. People are telling her to eat every hour and she's to deal with this nausea, or that's



what you “get to do in pregnancy.” She is no longer a grazer. She's used to only eating meals and she doesn't love to snack. This is very common with a lot of my clients, as once they really worked through the emotional stuff, food it isn't as important if they still want to eat healthfully, but they don't want food to be complicated. They don't always want to be packing snacks, or always have to think about food.

Really today, I want to talk about – confused about what is normal and what its conventional normal that isn't really normal, right? Very matrix. In other words, if you want to have a healthy relationship with nutrition and weight during pregnancy, how do you figure out what works for you and your body is undergoing such rapid changes? Especially if it's your first pregnancy, you want to have some standards to know what is truly normal, versus conventional crazy, so that you feel safe with your baby's health and your own, correct, right?

Again, I call it conventional crazy, because we often – what we often hear is normal pregnancy, food symptoms and weight gain expectations out here isn't necessarily healthy. It's a lot to navigate. I mean, I will be honest with you and you'll hear some of my pregnancy has been very easy. I've had no cravings. I've had no swelling. I've had no symptoms, but these last couple weeks, I've had a couple issues come up, which I'll share later and I'm just with discernment fatigue right now. I can only imagine if you don't really know your body well, or you're not sure what foods work for you, how overwhelming pregnancy can be with everything that's bombarding you.

I'm hoping that today's episode will help simplify prenatal nutrition and weight gain and help you support your relationship with both of them. This is going to be how to listen to your body around food and weight gain and pregnancy. It's the moderate place between listening to your body and not everyone else and what is normal for them, because again, normal is a little crazy. Also without being a fanatical about being the perfectly healthy person, you may be were aspired to be when you weren't pregnant, right?



Like my client, she was eating super healthy and now she's dealing with nausea. How do you navigate that? I want to look at what's more evidence-based versus convention. As I said, well I've shared on social media and a little bit throughout the season here is I've really learned how much of our pregnancy care is fear-based and lawsuit, like cover your ass base, versus what will make us well and thrive.

I'm going to discuss how to eat well for your changing body and look at the psychology of eating and weight gain and pregnancy. Tuning into your body is easier, because often, we have these beliefs about in terms of eat every hour, or you're eating for two that make it harder to tune into what you actually need. Before we get started, I want you to understand where I was coming from when I got pregnant, because obviously, this episode I'm doing it, you're getting my viewpoint. I always try to separate my lens on the world.

However, it's still my lens on the world and some of this is informed by my own experience, some of it is informed by my expertise over 12 years of navigating what is evidence-based versus what really works in terms of weight loss, health, hormonal balance, all that stuff.

I was coming into pregnancy and I really assumed I knew nothing about it. I never knew if I wanted to be a parent. It really wasn't until I was 39 and diagnosed with infertility that I was clear that I didn't want to be one. Fertility wasn't a health area I was interested or well-versed in. I wasn't someone who really understood the magic of this process. I always admired the people who always knew, or didn't know clear-cut that they wanted to be a mother or not be a mother, because I was just like, "Maybe." That wishy-washiness was like, "Ah!"

Yet, many of us fall into this pattern, right? If I don't know everything, I don't know anything, right? That's how I came into this. What I discovered is that's totally wrong. What I discovered was just because I didn't know a lot about pregnancy, didn't mean I didn't know my body. I want to repeat this, because it came up with this client that this episode is inspired by, because that was really helpful for her to hear. Just because you don't know a lot about pregnancy, you



can still know your body, or you can learn to know what works for your body if you don't already.

If you don't know what foods work for you, I highly recommend doing that ideally before you get pregnant. Again, you always have time. A lot of people come to pregnancy and that's when they get into nutrition. When your baby is born, only 35% of their brain is developed, their immune system isn't fully developed. You still have a couple years after pregnancy postpartum to still have nutrition, have a very important role in your child's life. Realize that while it's important how we eat in pregnancy, nature has a lot of backup systems, and so we have a lot more – that's why we don't have to be perfect, etc.

I really recommend working on knowing what foods work best for you and really knowing your body, because you will bring a level of self-trust and self-awareness that is invaluable in pregnancy. As I'll share, I had my own self-trust tested with a gestational diabetes experience which I'll share later in this episode. Overall, like I alluded to earlier, I've had a really easy pregnancy; no cravings, no heartburn, no major swelling or major mood swings. I did get a cankle. I got one cankle. Isn't that hilarious? The other day. I've been putting my feet up and using Epsom salt baths and they're going down, which is great.

All the work that I've done with my own truce with process – truce with food process and where my weight means, I've also haven't had stress about them. I think I'm up to 35 pounds of weight I've gained and I'll get into how they told me to only gain between 15 and 25 and why I don't stress about going above those numbers. Because of my baseline self-trust, I've come quite far in my initial fear around labor and birth. I want to share my positive pregnancy experience, because I understand how warped and fear-based the USA's narrative is around the female body, fertility and pregnancy.

Like I said, I've done a ton of learning myself. I can't believe how much I learned in terms of how powerful and wondrous our bodies are. I thought I was already on that path. I was and this



experience just amped that up. I also want to note that yes, I've done the work to make healthy choices consistently. I am proud of the radical responsibility I took to arrive here. Really proud. The fact that I'm even pregnant is a testament to all the work I've done, right? To sift through and not take Western medicine's diagnosis and handle setbacks. I mean, I'm really proud of myself. That's not the whole story.

There's two other prongs that help us get results. One is I had access to prenatal resources. We often refer to this as privilege, or people who aren't quite as aware of privilege, call it luck. Good luck as often privilege and bad luck is often systemic injustice. I hate that we live in a world where I'm working with midwives, or I am choosing organic food and I filter and clean my water. That is a privilege. I don't think it should be a privilege, I think we all can have access. There's not a scarcity of this, if we were to change how our systems in America, at least I can speak here, but also around the world. Since I have clients around the world, I know that other countries have similar problems that we do here in the US.

There are systemic issues that make it easier to access this care. Some people don't – many people don't have access to that. We have to acknowledge that it's not all about effort, right? It's about access to care as well. Then there's also a third prong and I call this the great mystery. A lot of people might refer to it as God, or the universe. To me, it's that which we can't ever know. It will leave us curious as to why things happen, right?

I feel great today at 37 weeks pregnant. I could have something happen in birth, or labor, or some people could take great care of themselves and still not have the same experience that I've had. I think life is ultimately a grand mystery. I even think about my client, she's super healthy and she's struggling with more nausea than I did, right? I don't think that's an effort issue. That's just her body versus my body and the great mystery.

We really need to have compassion for ourselves in each other when we are struggling with our health and weight and life and not judgment. I think, especially in the coaching world, it's so



quick to well, how do you take responsibility or whatever? There is a mysterious part to life and the wellness world often leaves out these last two prongs in the fork. That go on to results and they're equally as important as the choices that we make.

I want to preface that with these are – I'm going to give you guidelines that help, hopefully support you. It's also, life is ultimately a mystery and pregnancy, if anything, will teach you that. I mean, I love how Alisa Vitti said, “My body is – and when you're pregnant, is literally 3D printing another human being.” I mean, that's wild.

There will always be things we won't be able to control. For me, the question that always keeps me insatiably curious is what is the great mystery and what can we control, right? Because at the same time, a lot of people have told me to just accept certain things around my health; from my depression, to my acne, to wanting to lose weight. Accepting those things meant exploring them, not just resigning myself to a life of antidepressants and rotating between various acne creams, or binging because those things.

That wasn't the right path for me. Some people, it can be. Getting curious about my symptoms has led me to a level of power and health and even getting pregnant in the first place, that I wouldn't have known is possible if I didn't stay curious. We will never know where that line is for us, right, between the great mystery and what we can control. My philosophy is to do the best we can and see where that takes us, knowing each time we can learn more about how our bodies work and the level of choice we do have. Holding that sometimes we cannot explain things.

I have a couple of clients going through some really rough things right now. They've tried really hard. It's in their life. It's not around health stuff. They couldn't have done anything else, right? It's just sometimes the way the cards fall. I just want to make sure that everyone understands this advice and recommendation comes under this idea that to try to follow this and see how it goes. I think it'll give you a best shot at feeling great.



Let's get started on what is actually healthy eating in pregnancy, versus what mainstream offer used to do. First, I just want to preface with what you eat does matter. It's not the only thing that matters, but prenatal nutrition influences your pregnancy experience. It will influence how you experience labor and recovery and health. Of course, it influences the baby's health. There's lots of studies on this and it seems like common sense.

Again, after birth, baby's brain is only 35% developed, the immune system is very immature. Those first couple of years, nutrition also matters. Here's the big secret that I learned about prenatal nutrition; it's pretty much the same as when you aren't pregnant. It's a whole foods nutrient-dense diet. When it comes to fats, proteins and carbs, it's still about balancing your blood sugar and it's even more important in pregnancy, because of the hormonal shifts. What's good for you is good for your baby. You two are a team. If you listen to episode three of this season, we talked about getting pregnant as a side effect of being healthy. Part of why my client got pregnant so fast was her nutrition and emotional health is solid. Her body felt really safe. She's really strong. She works out and a lot of the stress that was turning her to food has turned into a lot more meaningful of a life and a much more supportive life. She of course, still has stress. We all do, but she's learning to make more fulfilling choices.

For me when it comes to food, for me, I've basically eaten the same way I eat in my normal life, except I had to add an extra egg at breakfast, instead of two. I used to eat two eggs with kale and onions, now I eat three eggs. I found myself exhausted an hour after breakfast, if I didn't add in a piece of fruit. That was added to my breakfast. Sometimes I do need to snack in the afternoon, but I ate the same snack I would if I wasn't pregnant.

It's just a little bit more food, but the same fat, protein and carb combinations that will balance my blood sugar. I don't have cravings, or mood swings associated with blood sugar in my normal life, because of this, and so I didn't get crazy cravings, or crazy mood swings in



pregnancy, I believe because of this. Did I eat chocolate? Yes, but I wasn't actually craving it. It was because I wanted it.

I had moments where I have just cried, because of how much I'm trying to manage as a business owner in a country that has no paid maternity leave off. Yes. It's not a chronic anxiety. I want to be clear that it doesn't mean I haven't had to make some adjustments with my food. It's just I'm not experiencing the extremes that I was anticipating. You don't have to be perfect with your prenatal nutrition, much as I think is really important.

I was joking, I think the first time I ate “unhealthy,” we had – Carlos's cousin was getting married in New Jersey and we took the Pennsylvania Turnpike. I don't know if anyone's been on the Pennsylvania Turnpike here, but there's literally no healthy food at all. I joked that that our Bambino got turnpiked, because I didn't prepare ahead of time. I just didn't think about it. On the way there, I think I had – I ate Roy Rogers roast beef without the bun, which by the way, it was \$7. People say healthy food is expensive. I couldn't believe how expensive it was for roast beef. I mean, it's ultimately what I ate there, because I didn't trust the Starbucks salad. It was during the romaine e-coli breakout, or salmonella something. I wanted something cooked.

Yeah. I felt guilty. I did feel guilty about – I'm like, “Oh, my God. This poor baby's gotten turnpiked,” because there's no healthy choices there. Then we had – Carlos and I had a joint shower that was also an open house, because we moved into a new house in February. We got a bunch of gluten-free desserts and barely got to eat any at the shower, because I was Chatty-Cathy with everyone. We have him sitting around for a week and I ate them, right? They were the really sweet gluten-free treats. I had them, right? I didn't feel the need to be perfect.

Some weeks, my energy was just dragging and I had to skip workouts. I wasn't even working out a ton. I started out about five days a week and solely four, and now I'm down to three, in addition to walking coffee every morning. I just had to adjust with my energy, but it wasn't these extreme swings that I used to do when I was binging and stuff.



Now the conventional media and I've gotten them, because you sign up for a baby registry, or you sign up for a list and they tell you. They send you these ideas. I was getting recommendations from my house for low-fat, or no fat milk, or highly fortified products, like orange juice and breakfast cereal, or dairy for string cheese and protein, but barely any whole food recommendations.

I got this 10 foods to eat and I was like, "Fortified breakfast cereal, a low-fat yogurt for my calcium," right? I get my calcium through leafy greens and nuts and seeds, because they also have magnesium which help you absorb the calcium. As I was reading this, I was like, "No wonder people talk about pregnancy cravings and fatigue." I would feel this way if I eat like this normally in my life, let alone when the hormonal symphony is even more sensitive and changing.

Another alarm bow for me with conventional nutrition advice is no acknowledgement of food sensitivities or allergies. One of the things I was really worried about that are common pregnancy symptoms that again, I wonder if they are – really have to be there, or if it's because people's sensitivities come out in the pregnancy. They talked about heartburn, hemorrhoids and constipation. I was really worried about all that, because I had irritable bowel syndrome in my early 20s and struggled with all of that. I was like, "Oh, is that stuff going to come back when I'm pregnant?"

I had some dairy early on in my pregnancy and I did have trouble with constipation. I removed it and I haven't even had heartburn yet here at 37 weeks, which was a constant for me in my irritable bowel syndrome days. I was taking so much, so many antacids, like it's crazy when I think about it now. Some people get heartburn from lots of processed fats and sugars together. That's a sensitive combination.



The big food groups I would look at that can cause typical pregnancy symptoms are dairy gluten and soy. Of course, if you go into pregnancy knowing you have food sensitivities or allergies, stay away from those as well. I also want to acknowledge a lot of these digestive issues are stress-related, right? Stress really influences heartburn and add GI trouble.

Now I have a very different type of stress being a business owner and yet, I'm in a place where it's really self-chosen stress. When I'm having a lot of stress, I'm like, you chose this and you're empowered by my stress. Took me a while to get here and some days are still better than others, because life hands you lots of curveballs of things you're not choosing. Because of my own truce with food process, I'm pretty resilient and can pivot pretty easily.

A lot of this stuff, I want to acknowledge that I – the stress that I know some of my friends have had to deal with, like going into an office, commuting, having other kids, having a ton of travel. I was really able to choose that I wasn't going to travel a lot. I don't have any other kids. I don't have a commute and I don't go into an office, so I do want to acknowledge that while I worked really hard to get here and I've also been helped by privilege and now I can look at my experience and recognize that other people have stresses that that I just don't have to deal with, so I want to acknowledge that.

When you want to look for when you start getting common pregnancy complaints, are they symptoms, right? Are they things you really have to live with that nutrition and adjustments can help with you – can help you with, rather than accepting you have to live with them. Again, I don't know that line between the great mystery and our choices, but I think it's worth exploring. In general, you can simplify prenatal nutrition and to stick with the whole food diet with the right combinations of fats, proteins and carbs that will work for you and you will be 80% of the way there with your nutrition.

As far as adjusting for pregnancy, I use these generals of thumb to help me know if I need more carbs, proteins or fats, both in my regular life and in pregnancy life. If you're still hungry after



you eat, you probably need more protein, especially animal protein. There's a lot of research that shows being vegan in pregnancy isn't the best. Now I have one of my best friends from college is a vegetarian, been vegetarian through two healthy pregnancies, but you do need to really focus on protein. If you're still hungry after, you probably need more of that.

When my baby was going through a growth spurt in the early second trimester, which didn't match the general guidelines, by the way, when they told me my appetite would be surging, I would wake up at 4 a.m. and just be starving. I'd go down and eat chicken to fall back asleep. It was not fun, because I was like, "I love my sleep and I have to go up." I would eat cold chicken, because I'm lazy. I wouldn't heat it up.

If you have sugar cravings after a meal, you most likely are not getting enough fat. You're probably only dipping your fork in your dressing, instead of getting enough healthy fats at your meals. If you're having sugar cravings while you're pregnant, try adding more fat until you don't have sugar cravings to know you're getting enough fat. Again, healthy fats, right? Not the oils, like cottonseed and soybean, but avocados, olive oil, nut seeds, all that good stuff.

Then if you feel really tired about an hour after eating, remember I was saying after my breakfast, I felt like I just hit a wall, you probably need to add more carbs into your diet. For me, fruit worked really well. I actually started to crave it. Whereas in my everyday life, I never really felt like fruit. My body, that was the simple adjustment it needed was just to add a carbohydrate at breakfast. Nothing major.

If you find yourself really tired about an hour after eating, you're probably going to have to add in more complex carbs, like fruit, your squashes, your sweet potatoes, things like that. Again, your general prenatal nutrition guidelines are going to be out of date if you're following low-fat fortified food products and you want to shift to whole foods as much as possible. As a baseline, stick to whole foods and strongly consider avoiding foods that trigger inflammation, which can feel like swelling and pregnancy heartburn and constipation and other GI issues.



Now there's a lot – I mean, there's so much to talk about in terms of vitamins and supplements and that's not really my jam, or I think what this episode is about. If you want to look at more detailed studies on the importance of whole foods during pregnancy including vitamins and supplements, I highly recommend the book *Real Food for Pregnancy* by Lily Nichols. I read it and I found it confirmed what I already knew. A couple of clients who asked me for book recommendations who were also pregnant, I recommended it to them and they found it validating, or how they now eat. It was again, just confirming what worked for them in their everyday life that they learned through our work together.

If you're someone who isn't familiar with blood sugar control, or need more information to challenge the typical guidelines that are out there, totally get the book. If you're interested in, there's a whole other piece to this of food safety, like how much caffeine can I drink? How much wine? South cheese's, listeria?

I recommend the book *Why The Conventional Pregnancy Wisdom Is Wrong -- and What You Really Need to do* by Emily Oster. It's a really great book. She's has a PhD in economics, but she really again, dives into the evidence, versus I want to call it old patriarchal tales. It's not even old wives tales. It's all patriarchy or tales of what we think happens in pregnancies. Her book looks up the evidence around food topics and a lot of other topics, and gives you the risk benefit analysis.

Why I love this book, because again, there's no black and white answers, only choices that have variable risks that you need to discern what works best for you. This will go for the decisions you make around your pregnancy birth and that of your child. Learning discernment around your body and your health is all practice for the bodily choices you're going to be making for you and your new baby. An example of what I found helpful at Emily's book was she talked about coffee. Most people, it's safe to have up to two cups. That's what's deemed safe for most people. I know for me, coffee makes me anxious and crash.



However, there were times I was craving it. I would do a half-decaf, half-regular at home. For those of you who are concerned about chemicals, I do Swiss Process decaf, which it naturally decaffeinates coffee, instead of using a chemical process. I felt really good and safe knowing that I was having half-decaf, half-regular and that I was fulfilling this craving that I was having, which was for totally for energy, but I wasn't putting the baby at risk, or she'll talk about alcohol. I think it's after the second trimester, or during the second trimester, they've actually found that up to 4 ounces are safe.

I'm not a drinker, so that doesn't apply to me. For some people who do like it, you can now know that maybe once in a while, it's safe to have 4 ounces one night. That's the interesting information that you can see there. Although, it will also show you – the guidelines aren't as clear-cut as you think.

My client who was feeling nauseous and wanted to nourish her baby, at first tried what her friends told her about bagels. She ate a few and felt awful and that's why she booked the session with me and said, “What do I do?” At first, she found – she's like, “The trouble is I am finding only these pretzels were working.” What we broke down in her session to help her see was it wasn't the pretzel itself, it was the pretzel, it's that people recommend pretzels and saltines and bagels, because they're easy to digest carbs, right?

They don't require a lot of energy on the body. Your blood sugar does drop very low in the beginning, which is part of the nausea. It has to do that. It's on this software program. You'll learn more about it, or if you've been pregnant, you probably already know about it.

We met and she decided to try getting an easy to digest carbs that were more whole foods and a little healthy fats to keep her satiated, so she wouldn't feel more nauseous. She's super creative and she does like to cook, but she tried – she made waffles from bananas and



avocados, or she made pancakes with sweet potatoes and eggs. She found that those were just as great as the pretzels and even better and she feels so much better now.

It's a great example that if you do have a lot of nausea, whole foods that that are easy to digest carbs, like fruit or squashes can work. Now again, for some people they may not, but you don't have to assume pretzels and bagels are your only choices. I found with my little bit of nausea that happened, I only had it for about four weeks and it was only mild. In the morning, I would eat some gluten-free bread in the morning, because it's pretty much the same as saltines and yet, I could eat my normal, healthy food at other times.

Looking back, now that I understand so much more, I would have probably just had fruit and been fine. I might have even done applesauce, which is already digested. The fiber starting to break down in cooked applesauce, so I might have even tried that. The big takeaway here is the whole foods diet is still the way to go. Not Whole Foods the store, because they don't even have a lot of whole foods left anymore, but real, unprocessed foods.

It doesn't have to be wildly different than your non-pregnant days, or super complicated. You will have to adjust portion sizes and add in more carbs, proteins, or fats. Remember the rule of thumb. Of course, you have to adjust based on your nausea, that is body feedback. Remember, if you're still hungry, you probably need more protein. If you're craving sweets, you probably need more fat, or you might need a nap, because sometimes we crave sweets when we just need energy. If you are just feeling really exhausted, you may need to add some more complex carbs.

Remember that you have 40 weeks and the body is pulling from before you were even pregnant too. You don't have to be perfect. Like I said, I felt so guilty that first time that I joked our Bambini got turnpiked. My sister is like, "He's going to need to learn resilience." I was like, "Okay." You don't have to be perfect.



I want to talk a little bit now moving onto the psychology of nutrition at this time. One thing that can make nutrition tricky is that this time, is if you spent a lifetime over restriction and dieting and haven't really worked through your relationship with food, or what my client was experiencing – again, many of her friends didn't have a challenging past with their bodies and they were actually struggling, because this was the first time their bodies felt out of their control. They were coming from a different experience with her and they really believed in a lot of conventional ideas like, “Well, we're eating for two.”

Again, here she is in a different place with really knowing her body, valuing nutrition, and so how can she be in a healthy place without ignoring nutrition and again, also hanging with the great mystery, which pregnancy is a very mysterious time. What I want to just go under is a little bit of conventional ideas we hear around the psychology of nutrition and give you some alternative choices or points of view. The first trimester, nausea is a big one, right? Everyone is you have to listen to your body.

This is so true. You might not be able to keep anything down and that's okay, right? You just have to trust that. If you're hungry and you're craving some things, look for easy to digest energy, like pureed fruits or veggies, and see how that works besides just having to accept that you only have saltines as a choice. Another thing in terms of the psychology of this, one of the things that was interesting to my clients is she was so used to enjoying with her food and connecting it to feeling how great. Especially, I mean, things again, or shifting once she got these easy to digest carbs in, but she was finding now that she would eat and just still didn't feel well. That was just such a foreign – I mean, it wasn't foreign in the beginning, but since our work together and for a couple of years, she'd been used to feeling great from her food.

We had to adjust what her goal was with the nausea. It was to survive. It wasn't to have this wonderful food experience. Knowing that it'll change and checked, right? We talked about experimenting and giving her more control, which feels more choices and it's turned out



beautifully for her. She's feeling so much better. She feels she's eating well. The nausea is going down and she's getting some nutrition for her baby and herself.

Again, you have to listen to your body. I do want to point out that some people have its hyperemesis gravidarum. I don't even if I pronounced that right, but Amy Schumer had it, Kate from Will and Kate in England, right? Totally different story; it's genetic that we know. You often do need medical support. Obviously, if you're having that condition, you got to work closely with your medical team. You should always be checking with your medical team. Everything in this episode, our guidelines and to get to the guideposts that work for you, you need to work with your medical provider. This episode does not take the place of any type of medical intervention at all. I think that's clear. These days, you have to say it again just to be clear.

Again, that condition, there's a strong genetic component we don't know yet why it happens. Maybe in 30, 40 years we will. It's important to get medical support. I think that's where Western medicine really shines in those really acute conditions. Another conventional advice we get is eat smaller meals. I just want to say depends. Often, people have to eat smaller meals or snacks, because they have poor blood sugar balance. Again, that's why it happens in real life and that's often why it hits in pregnancy.

I found with me, I could mostly stick to three meals a day, except when my baby was having a growth spurt. I wouldn't eat an afternoon snack, or like I shared earlier, I was waking up at 4:00 a.m. starving, so I would have to have a little snack before bed. I caught on to that not until the 30th week of pregnancy, which I'll explain why. It's great if smaller meals do work for you. right? I found with a lot of my clients who know how to balance their blood sugar, they don't like eating all the time. When pregnant, they were fine with eating like they always have, especially after if they had first time, not trimester nauseas. Some didn't.



I have found here at the end that I split up my dinner basically into dinner and a mini-meal before bed. That has been hugely helpful in staying asleep. I didn't even need to experiment with these mini-meals for dinner and at night, way until the second trimester around – he's week 25 or 26. Obviously, we're all different. You can experiment to see if you can stick with three meals a day, if that's what you prefer and was working for you in your non-pregnant life.

If you have to adjust and you need an extra snack, do that. Always trust your hunger cues. It's basically what this episode comes down to. The second nutrition psychology that goes into pregnancy is well, you're eating for two, right? You've got to eat so much more food. Then we actually aren't eating for two. In the beginning, you only need about 300 extra calories. Then as the baby gets bigger, often only need 400 to 500 more.

When I was binging, I could easily eat an extra 3,000 calories without feeding another person. 300 calories is a little extra egg and fruit with an afternoon snack. What's interesting is a lot of people, and I've talked some of my friends actually who have felt like this, is that they feel pregnancy was the first time in their life that were allowed to be big. They were allowed to have a stomach. They felt this was the first time that they had permission not to watch their weight, or worry about their stomach and that release gave them a sense to eat whatever.

It was this chronic restriction and tension that comes from monitoring food for years and decades was unleashed during pregnancy, right? You may go through times where you genuinely are insatiably hungry. It's important to check in with yourself if it's because you're truly hungry, or you feel you have emotional permission. Knowing that difference is really important. I recommend working in your relationship to food pre-pregnancy, because you will have enough to focus on while pregnant. I also realize how much extra food you actually need can be helpful.

I had so many distorted ideas about pregnancy and labor and birth and learning the science really helped guide a lot of my choices; again, evidence-based science. We're really not eating



for two. It's okay if you're not insatiably hungry. If there are times that you are, again stick with balancing your blood sugar to keep hunger, so that you're actually getting nourished and not just hungry because your blood sugar is out of whack.

The other nutrition psychology I want to talk about is managing nutrition in the context of weight gain estimates. Weight gain estimates really go off the BMI. If you get my bi-weekly newsletter well-rounded, we did a whole segment, a whole little paragraph about BMI and how it's basically bunk. It was created by a mathematician, not even a physician. Not that I would trust a physician these days anyways, but it doesn't take into context your bones, how heavy your bones are, how much fat to muscle ratio you have. We know that's so important in terms of inflammation and we know all these things influence your health.

Anyways, you're going to come into pregnancy and they're going to give you a chart, or you're in it now and you're pregnant now and you know, they tell you how much you should – how much weight you should gain in relation to this BMI. I'm 5'5' and I came into pregnancy weighing about a 150 pounds. I think my beginning BMI was 25 point something or other. I know there was a decimal after that. Basically, I was put in the overweight category. Because of all the work I've done with my weight, I know I'm not overweight. I wear a size 6-8, not that you wear different sizes all the time, but I'm completely comfortable with my body. It doesn't really mean anything to me, that category.

If it had and I'll tell you if it really – if I had put a lot of weight in the overweight comment, that could have really turned my gestational diabetes experience into a different direction. I'll explain quickly in a bit here. I've done so much work around my weight to know that I actually have very different metrics to know if I'm healthy or not. I was recommended to gain 15 to 25 pounds. Now if I had been a 145 pounds, they would have recommended that I gain 25 to 35 pounds, right?



There's a 10 – let's see. There's as much of a spread of 10 to 20 pounds difference based on being 5 pounds over. Just showing you the math is interesting. At the time of this recording, again 37 weeks, I've gained 35 pounds and it is all in my stomach. I've got a big stomach.

Comments lately as I've been walking my dog around my neighborhood about how big I am and I'm not going to go to my due date, I also got this at my shower. I've said to my doula, “Do you think I'm going to go early?” She said, “No, everyone tells everyone this stage. Everyone tells every pregnant woman this latent that you're big and you're going early,” which I thought was hilarious.

I'm also starting retain water here. In my 37th week, my rings don't fit. If I don't put up my feet, they get swollen. I'm probably going to gain a couple more pounds and water weight alone.

What I loved about the midwives that I'm working with is they're like, “If you're exercising and eating well, they're not concerned.” They're like, the body can do its thing. That's how I feel.

I've talked to a couple of health pros I know and who were very thin actually going into pregnancy and they gained 50 to 60 pounds and have had multiple pregnancies. Because they've had multiple, they know that's just what their body does.

I talked with a client who got pregnant, a lot of my clients are pregnant this year, and had of higher BMI. She was told not to gain any weight, or to gain too much weight. Then she was staying the same, which can happen to – based on your weight, some people actually lose weight in pregnancy. Everyone's so different. Then when she was staying the same, they told her that was bad. The doctors gave her so many different opinions. She had since had a healthy baby boy and she's just learned to listen to her body and make healthy choices. I'm so glad she has that trust to do that.

Then my client who is nauseous, she is almost through the first trimester and has only gained a pound and they say, “You should gain 3 to 4 pounds in the first trimester,” right? She's like, “Is it enough?” Now again, obviously checking with your provider, because they will do heartrate tests and all this stuff, but recognize babies don't grow in a linear fashion, right? I think, this is



so challenging for us, because when we think about weight loss, we assume we should be losing 1 to 2 pounds a week, but that's not how sustainable weight loss often works. That means that's not how weight gain works. It's not this linear, gradual thing.

I gained more weight in my second trimester and my baby had a bunch of growth spurts. In fact, when I was at 24 weeks, I measured at 28 and had to go into for an ultrasound, because they just wanted to make sure everything was okay. Then I leveled off. Then I think 35 and a half weeks, I was measuring at 38 weeks, or no, 37 weeks. My point is that babies don't grow according to how all the other babies grow. That's not how nature works. It's not linear.

Of course, you want to stay within the guidelines. Again, for me, I felt safe doing the ultrasound to confirm it was okay, but then I found it was fascinating how basically in the next 10 weeks I leveled out and was normal again. Then I went up again and now I'm normal again. To me, that's much more indicative of nature versus thinking that I'm going to have the same hunger levels, the same weight gain every week. Again, the general mental frame of the world of medicine doesn't really match how nature really works.

We don't want to throw the baby out with the bathwater, so please hold these guidelines and remember they are guideposts. They can give us a place to start, but we need to bring context of our own bodies and experiences into pregnancy, whether it's nutrition or weight gain, to truly know if we are on the right track for us. Much like our weight in our non-pregnant lives is a side effect of our food, emotional health, hormonal health, stress and environmental toxins, our weight gain and pregnancy isn't to be feared if we are eating healthy and staying active.

By active, I mean, walking, gentle movement or whatever works for your body. It's such a mysterious process and all of what I've talked about today are guidelines and really learn to tune into yourself and trust yourself. It's not a one-and-done process. It's continual learning, right? Science itself is a process, not a destination. If you think back to 30 years ago, we weren't even talking about the gut biome and we thought antibiotics just were wonderful. Now we



have antibiotic resistance and we know there's good bacteria, right? Not to let alone, I look at what they did in psychiatry, right? Electric shock therapy.

I mean, it's easier to just trust people. I get this, these experts. The truth is science is a process, not a destination; same with learning about ourselves. I just want to put in a little asterisk here about trusting ourselves. I know that this can be so challenging. I wanted to share my own gestational diabetes experience. I had a really – maybe some people wouldn't have been as stressed, but for me, it was really stressful. Basically, gestational diabetes is when you become insulin resistant, or sensitive and it only happens in pregnancy. They give you a traditional test where you drink this basically a 24 ounce soda, an hour later they see how high your blood sugar is.

A lot of healthy people and this is one big thing I learned in Lily's book is a lot of healthy people tend to fail it, because their bodies aren't used to going that – through that much sugar. Also, I knew coming into this that with my blood sugar goes that out of whack, first of all, I haven't drank a soda probably since – who's drinking rum and coke in college or something like that. I didn't want to do that test. I chose to do home monitoring, which you can do.

Now I wonder if it caused me more problems than not. I did the whole home monitoring and my after meal numbers came back beautiful. They were healthy and stellar, but my fasting glucose was a little bit high. That's one metric, right? These are all screening tests and there's not an agreement about what the official threshold is for fasting glucose to be considered pre-diabetic. Basically, I had three doctors at the hospital here, because I had to do the home monitoring through maternal fetal medicine. One doctor saw my numbers after I did – got more data on my fasting glucose and he's like, “Oh, you're good to go. You're fine.” I stopped monitoring.

Then I got a call two weeks later and the Midwife Center said the doctor they were working with wanted me to continue monitoring. Then another doctor called me from the hospital and



was like, “You're probably fine, but let's just do one week of monitoring, or whatever.” She was, “But I don't think you have gestational diabetes.” The doctor at the Midwife Center, because I was measuring at 91% in terms of baby size at 24 weeks and they didn't take the traditional test, wanted to assume that I had gestational diabetes. I don't know, this really upset me, because I felt like, I don't have this. There's no agreed-upon definition by after.

When I would talk to the Midwife Center and this doctor, they just have this philosophical belief that they're like, “It's nothing you did, Ali. It's just the body. The placenta puts off all these hormones. Because your levels are so healthy after meals and it's only at fasting, the body just can't keep up sometimes.” They put together this whole story using two pieces of data. Part of it is cover – they're trying to avoid malpractice, which I get. We need to be safe. There's a cost to that, right? It really stressed me out.

They asked me to monitor for another week, which I did. I sent in my numbers. A third doctor at the hospital told me that I'm fine and they just want me to monitor till the end. I just share this, because it was me having to trust myself here and trust my body. The funny thing is and not believe that my body just would poop out here at the end, because the consequence of gestational diabetes is they're worried about a very large baby, which is considered over 10 pounds and then head to a shorter ratio with delivery, which can be very traumatic for the baby, also for the mother.

I am going for another growth scan, because of this assumed diagnosis with one doctor out of four tomorrow, because again, I do want to be safe. Really, I mean, I had some breakdowns over this. I would joke in the morning. Carlos and I would be having breakfast I'm like, “Okay, one more gestational diabetes obsession.” He's like, “Okay, this is not going to be the last one.” Even though I've come so far with my health, right? These health scare is still a – they're not as traumatic as they would have been had I never done my truce with food healing work, but they still trip me up, because again, having had cancer at 13, that wasn't likely to happen.



I will never fully be able to relax. I shouldn't never say never, but I'm less likely to be able to relax, especially when my whole pregnancy has been so easy and wonderful. I just share all of this. I mean, I was on PubMed researching this. I was doing my own research, because I wanted to know what my choices were and if I was really at risk or putting my baby at risk. Again, I probably won't officially know until he's born, because the later on in pregnancies, the less accurate ultrasounds are. I just shared that, because it was a really hard experience and I was really worried about it.

I ultimately had to do a bunch of research and then tune into myself. A lot of times when we talk about listening to yourself, often we're listening to the fear-based, or the overly optimistic side of ourselves. Discernment involves, I think for, me getting as much information as you can. I learned a lot about a lot of people who are diagnosed with gestational diabetes were actually pre-diabetic and it was overlooked coming into pregnancy. That wasn't the fact for me, that my doctors tried to tell me, "Well you –" Or the doctor and the midwife who I was working with said, "You are 40," but I don't believe that. I don't believe that my body would just quit.

What was interesting is I met with one of the dieticians who called me, because she was confused as to why I was still monitoring. I told her the situation and she said – she recommended having a snack before bed, which is why I said I just caught on to this a couple weeks ago, and she told me to add more carbs into my diet. At night, I had a carb plus protein snack and that's really brought my numbers down, which was really interesting to me, because even though I know sometimes we need carbs.

Again, her advice was so reassuring and the number started to come down in too much – I mean, they weren't really all high to begin with, but they were consistently lower, which was great. It confirmed my idea that the body doesn't just poop out, right? I was able to get more and more data as things went on that I'm okay in terms of this diagnosis. Well, this doctor believes I have it, I don't believe I have it. Ultimately, it's under control enough with how I eat,



because then I was looking at medication choices that they sometimes want to give you. There's a lot of controversy around those as well, of metformin and even insulin.

It's very interesting. You think, "Oh, just solve that with that." If you do the research, you realize there's controversy everywhere. I just want to share that, because I know often on this podcast, we say you have to trust yourself. As someone who's not used to being having regular interaction with Western medicine and how defensive – I mean, they play cautious medicine, right? It's not defensive, like they're trying out to get you, but they just are very protective of not getting sued and also not wanting things to go wrong, which I get. It's really well-intentioned people in this system that has created a certain type of education, a certain type of lens on the world.

I just want you to know that it's a process and you don't arrive at this place where you just trust yourself. You can always learn more. Again, I learned a carbon, a protein at night lowers my fasting glucose. I also learned I can advocate for myself a lot more than I thought I would ever have to and be okay with there not being a definite answer for right now, and doing what I deem is safe and precautionary to get as much data as possible, so we know the answer.

I just want to share that we can learn to listen to ourselves. We do that day-by-day step-by-step. Why it was so important for me to really I think have done the work around my weight gain, because again, I could have built on the story that this doctor has built upon of well, I gained even more weight than I should have and my numbers are high. Maybe I do have it and panic, right? I really, so confident about that I've taken great care of myself and the weight gain is just, it is what it is. It doesn't say anything about me.

I wanted to share that. The big takeaway here is do as much work around your relationship to food in your body before you get pregnant and you will learn new things in pregnancy. No matter how solid your relationship to your body is in, that's part of the plan is to open you up. If you're someone who's just getting into nutrition, it's a great time too. Getting into nutrition



while you're pregnant, that's wonderful too. The meaning of it changes, right? It's no longer about calories and weight loss. It can be really about health and nutrition.

The important thing is no matter where you are in your path is to make it your own with your own choices, so you can create your own experience. Really take an active role in your nutrition and health choices will make the whole experience easier. Again, it's never too late to get started with nutrition, our relationship to food or our bodies.

Don't assume that what is normal, or all your friends have done is the right way. There is no one way. I hope you remember above all, remember in these times, rebellion is quite healthy. Take that, trusting yourself and listening to your body one day at a time. I hope this episode was helpful and we'll continue on with the season next week.

[END OF EPISODE]

[0:53:30.7] AS: Thank you, health rebels for tuning in today. Have a reaction, question, or want the transcript from today's episode? Find me at alishapiro.com. I'd love if you leave a review on Apple Podcast and tell your friends and family about Insatiable. It helps us grow our community and share a new way of approaching health and our bodies.

Thanks for engaging in a different kind of conversation. Remember always, your body truths are unique, profound, real and liberating.

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