

# healthy pregnancy



a guide for parents-to-be



# About Tommy's, the baby charity

Tommy's, the baby charity, aims to inform and educate all parents-to-be about health in pregnancy. By providing this information we hope to ensure that every pregnancy has the best possible chance of a healthy outcome and a healthy baby.

Tommy's was set up in 1992 with the goal of making pregnancy and childbirth safer for both the expectant mother and her child, by funding a national programme of medical research into miscarriage, stillbirth and premature birth.

Every parent-to-be hopes their baby will be born healthy but every year in the UK one in five pregnancies will end in miscarriage and around 4,000 babies will be stillborn. More than 100 babies are born too small or too soon every day and two percent are severely premature, arriving six weeks before their expected birthday. Premature birth is the most common cause of baby death and one in 10 premature babies will develop a permanent disability.

As the UK's leading baby charity we want to find the answers for parents who deserve to know why their baby died or had to fight for life after being born prematurely.

Tommy's is determined to find the causes of miscarriage, stillbirth and premature birth and to save tiny lives by discovering new ways to encourage healthy pregnancy and prevent problems. We support a nationwide programme of vital research and are already improving the chances of survival for hundreds of babies through our clinical trials. We are examining the processes underlying normal and premature labour, and are finding ways to identify women who are most at risk of giving birth prematurely. We are increasing understanding of conditions such as pre-eclampsia which endanger both mother and baby, and we are making progress in discovering ways to prevent health problems in premature and low birth-weight babies.

Tommy's also provides information about pregnancy health issues for health professionals, parents and parents-to-be. We aim to ensure that information on health in pregnancy and reducing the risks of problems is available to all parents-to-be in the UK, thereby reducing the number of babies' lives lost.

# Foreword

This booklet is for you if you are planning to have a baby or you are already pregnant. Whether you're a first time mum or you've been there before, you will want to look after yourself over the next few months. This is an exciting time for you and you will have many preparations to make. Tommy's aim is to give every baby the best start in life. Part of working toward this goal is providing information to parents about health during pregnancy. The tips in this booklet aim to give you important information which will help ensure the best possible chance of a healthy pregnancy.

Other organisations which may be of help to answer specific questions are listed towards the back of this leaflet on page 13.

Unfortunately, we can't guarantee that everyone will have a problem free pregnancy, but we do know that by following our tips, you can reduce the risk of complications arising.

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## Tip 1 Watch what you eat!

A simple, balanced diet is one of the most important ways you can nurture a healthy pregnancy. Nutrients from a variety of fresh, natural foods give energy and nourishment to you and your baby.

You don't need a special diet when you're pregnant, but you should make sure you eat enough protein, carbohydrates, fruit and vegetables, and that you drink plenty of fluid.

### Good enough to eat

| Food type            | Good sources  | How many portions per day?  | Why are they important?   |
|----------------------|---|---|---|
| Protein              | Chicken; red meat; fish; nuts and pulses.   | 2-3 portions (one portion is around 50-75g of meat, poultry or fish)                    | Protein is vital for the growth of your baby as it builds new tissue for bones, muscles and organs. |
| Dairy products       | Milk; cheese and yoghurt.   | 1-2 portions (one portion is around 300ml of milk, or 30g of cheese).                   | Dairy products provide calcium and vitamin D – essential for strong bones and teeth.                |
| Carbohydrates        | Wholegrain bread; pasta; rice; potatoes; and breakfast cereals.   | 5-10 portions (one portion is around half a cup of cooked pasta, or one slice of bread) | Carbohydrates are packed with energy and provide fibre and protein.                                 |
| Fruit and vegetables | Eat a combination of differently coloured fruit and vegetables. Every pigment has different nutrients, each key to your baby's development. | 5-10 portions (one portion is half a cup of cooked vegetables or one piece of fruit)    | Fruit and vegetables provide essential vitamins, minerals and fibre.                                |
| Fluids               | Plain water and fruit juice.  | 2 litres  | Fluids keep you hydrated and help avoid constipation which is a common complaint during pregnancy.  |

## Snacking

Your appetite may increase, especially during the last three months of pregnancy, so it is important to eat regularly and snack between meals. Snacking can also help fight the nausea of morning sickness. Try snacking on nuts, raw vegetables, or fruit, throughout the day.

## Cravings

Don't be surprised if you start craving certain foods during your pregnancy. This is common, and you shouldn't worry about it. You might find that some foods taste different while you are pregnant. It's also normal to go off foods you have previously enjoyed.

## Vegetarian diet

If you are vegetarian you must be extra careful to ensure you are getting enough protein. You must replace meat products with foods from the following groups:

- grains (eg, oats, rice, wheat)
- dairy (eg, milk, cheese, yoghurt)
- fruit and vegetables
- beans and pulses (eg, chickpeas or lentils)
- nuts and seeds (eg, pine nuts or cashews)
- mycoproteins, (eg, textured Soya or vegetable protein).

It would be a good idea to check your diet with your doctor or midwife to make sure your protein intake is adequate for your baby's development.

## Weight gain

There is no required amount of weight that you need to gain over your pregnancy. You'll probably gain around 7 to 14 kgs. Don't feel that you have to eat for two. That is a myth. Your daily calorie intake should probably increase by around 100 to 150kcal in the first and second trimester, with no calorie increase in the third trimester. Quality, rather than quantity is the golden rule.

## Pregnancy super foods!

These foods are packed with vitamins, minerals and nutrients. If you can eat some of these each day, you'll be doing very well:

- bananas, oranges and other fresh fruit
- dried apricots and prunes
- broccoli and other green vegetables
- salmon and other oily fish
- wholemeal bread
- brown rice
- lean red meat
- chicken and turkey
- yoghurt
- pulses and lentils
- breakfast cereals
- nuts and seeds.





## Foods to avoid

Try to avoid salty, sugary, highly processed or fatty foods, like fast foods, or pre-packaged foods like chocolate and sweet biscuits. Large meals and highly spiced or fried foods can cause indigestion or heartburn. Drinks containing caffeine (eg, coffee, cola) and all fizzy drinks are also best left to a minimum.

High levels of vitamin A have been found to cause birth defects. Avoid

taking multi-vitamins with vitamin A, liver, liver products and other foods fortified with vitamin A.

If you or your partner have a family history of allergies you should avoid any foods that are known to trigger the allergy during pregnancy and breast-feeding to reduce the risk of your baby developing the allergy. For example, peanuts, dairy products and shellfish can each cause allergic reactions in some people.

## Foods that may cause infection or illness

| Infection  |  | Foods to avoid   |
|--|--|--|
| Listeria:  | A bacteria which causes a mild gastroenteritis or flu-like illness. It can also lead to miscarriage and stillbirth.  | Pâté, un-pasteurised dairy products and mould ripened cheeses (eg, Brie). (Cheese made from pasteurised milk is fine, including hard or creamed cheese, mozzarella, ricotta or yoghurt). Ready-cooked meals may contain Listeria, so heat thoroughly.        |
| Salmonella:  | An infection which is a common cause of food poisoning, which can cause severe symptoms during pregnancy such as vomiting, abdominal pain, diarrhoea and nausea. The infection causes harm to the unborn child and can lead to miscarriage and stillbirth. | Raw eggs or undercooked meat may carry salmonella. Cook all meat thoroughly. Ensure eggs are cooked so whites and yolk are solid. (Desserts like mousses, and sauces like mayonnaise may contain raw egg. Shop-bought, non-refrigerated mayonnaise is safe.) |
| Toxoplasmosis:<br>(See Tip 6 for more detailed information on toxoplasmosis) | An infection caused by a tiny parasite which can cause miscarriage or damage to the unborn baby if caught by the mother at any stage of pregnancy.   | Avoid raw or undercooked meat, and smoked-only or cured meat like Parma ham. Avoid unwashed vegetables and fruit, and un-pasteurised goats' milk and goats' milk products.   |



## Tip 2 Take folic acid supplement

Folic acid is essential for blood formation and the formation of the central nervous system. Lack of folic acid can lead to conditions like spina bifida. Folic acid is part of the vitamin B group and can be found in nuts and green leafy vegetables, like broccoli, spinach and Brussels sprouts. But it is unlikely that you could get as much folic acid as you need in a normal diet, so it is recommended that you take a supplement. You should take around 400mcg ( $\approx 0.4\text{mg}$ ) per day until the

12th week of pregnancy. It is a good idea to start taking folic acid supplement from the day you start trying to get pregnant.

There are many other vitamins and minerals required for the healthy growth of your baby, but as long as you are eating a balanced diet, you should not need any other supplements. Some women do need additional iron, but your doctor or midwife will advise you.

## Tip 3 Limit alcohol

Heavy drinking can severely damage your baby because alcohol passes quickly and easily across the placenta. Some alcohol from every drink you have will reach your baby's bloodstream. This is most dangerous during weeks 6 to 12 of your pregnancy when the vital organs are being formed, but each stage of pregnancy has a different risk associated with drinking alcohol.

Drinking a lot of alcohol during pregnancy puts your baby at risk of developing fetal alcohol syndrome, which can result in:

- facial abnormalities such as cleft palate or hare lip
- heart defects
- abnormal limb development
- lower than average intelligence.

The safest option is not to drink at all during pregnancy, however very light drinking is unlikely to harm your baby. Bingeing is far more harmful than drinking regular small amounts. Limit yourself to one or two units of alcohol a week. A unit is equal to a half pint of

normal strength beer, lager or cider, a single measure of spirits, or a small glass of wine. Remember, home-poured drinks are more generous than pub measures.

### Help and support

If you have been used to drinking a lot and find it hard to cut down now that you are pregnant, you may need extra help. You can call Drinkline which offers personal help and support on 0800 917 8282 (weekdays 9am to 11pm; and 24 hours at the weekend).



## Tip 4 Stop smoking

Cigarette smoke can be very harmful to your unborn baby. Smoking cigarettes reduces the oxygen level in your blood, which deprives your baby of oxygen. This can result in:

- miscarriage
- premature birth
- stillbirth
- birth defects.

Effects are reduced but breathing in someone else's smoke also poses risks.

Your baby is also at risk of low birthweight, cot death and of developing bronchitis or asthma.

The more you smoke, the greater the risk. Ideally, both you and your partner should quit smoking before trying for a baby. (Smoking can reduce fertility in both sexes, so smokers often find it difficult to conceive). But it's never too late to stop.

### Help and support

Help and support is available. Contact the NHS Pregnancy Smoking Helpline on 0800 169 9 169 (daily 1pm to 9pm). Or call the 24 hour Quit line, on 0800 169 0 169 in England and Wales, and on 0800 848 484 in Scotland and Northern Ireland.



## Tip 5 Avoid drugs

Like alcohol, drugs pass directly from the mother's bloodstream through the placenta to the baby. When pregnant, you should always consult your doctor before taking any medication, including over the counter drugs like aspirin.

### Regular medication

If you have a condition for which you take regular medication, it's best to inform your doctor that you're intending to become pregnant. Your doctor will advise you whether or not an alternative treatment plan would be suitable. You should always check with your doctor before stopping regular medication as it may do more harm to you and your baby to stop than to continue.

### Illegal drugs

All illegal drugs are harmful to you and your baby. Drugs like heroin, cannabis, cocaine, amphetamines, LSD and ecstasy can cause:

- bleeding
- birth defects
- miscarriage
- premature labour
- stillbirth
- low birth-weight.

Your baby is also likely to suffer problems after birth such as drug withdrawals, fitting, cot death and lower than average intelligence.

### Help and support

For help and support, speak to your doctor or midwife, or phone the National Drugs Helpline on 0800 77 66 00 (24 hours).



## Tip 6 Avoid toxoplasmosis

Toxoplasmosis is an infection, caused by a tiny parasite, which is passed from a mother to her unborn baby. The baby is at risk when the disease is caught by the mother during pregnancy or shortly before conception. The infection can cause the following problems with the baby:

- brain damage
- eye damage
- epilepsy
- miscarriage
- stillbirth.

Some babies born with toxoplasmosis have no obvious damage at birth but develop symptoms, usually eye damage, during childhood and sometimes adulthood.

The parasite which causes toxoplasmosis is passed to humans via infected animals, usually cats. The infection is caught by eating food contaminated with the parasite. It can be passed on via:

- undercooked meats
- smoked-only or cured meats
- unwashed fruit and vegetables
- earth soiled with cat faeces.

It is important to take the following precautions to avoid catching the toxoplasmosis infection:

- only eat meat that has been cooked through, don't eat pink or rare meat
- don't eat uncooked meat like Parma ham
- wash your hands after handling raw meat

- wash fruit and vegetables before eating
- wear gloves while gardening and wash your hands thoroughly afterwards (avoid gardening in areas soiled by cat faeces)
- if you have a cat, don't empty the cat tray yourself (if you must empty it, wear gloves and wash your hands thoroughly afterwards).

### Occupational hazards

Some women may be at increased risk of catching the toxoplasmosis infection because of their job. If your work involves farming, gardening, catering or handling animals you must take special care. The toxoplasmosis infection is also spread during lambing, so it's important to take extreme caution if you work in this field. It is advisable to avoid involvement with lambing during pregnancy if possible.

### Help and support

For further information about the Toxoplasmosis infection, contact Tommy's (which now covers the work of The Toxoplasmosis Trust) on 0870 777 3060.



## Tip 7 Keep fit

Carrying a growing baby around for nine months is hard work. Giving birth is even harder. The fitter you are, the easier it will be for you and your baby. You'll feel livelier and you'll recover more quickly after the birth. Exercise is also good for reducing stress.

### Benefits of exercise

- Increase your strength and stamina by working your heart and lungs. The increased oxygen flow is passed on to your baby.
- Feel good! When you exercise, the body releases hormones called endorphins. These make you feel more positive and better about yourself. Your growing baby feels the benefit of them too.
- Improve your circulation. Good circulation helps avoid uncomfortable but common pregnancy complaints such as cramp, piles, constipation and swelling. Regular exercise helps improve circulation.
- Sleep well. Disturbed sleep patterns are a common pregnancy complaint. Exercise can help you sleep better.

### Gentle workouts

Gentle forms of exercise such as swimming, walking and yoga are excellent ways of improving your stamina and toning your body during pregnancy without heavy impact. If you are able, join an aqua aerobics or antenatal yoga class.

### Practise caution

If you haven't been doing very much exercise, now is a good time to start

getting fit. But it's not the time to start jogging, or a heavy exercise regime. Whatever exercise you're doing, you should be able to continue talking while doing it. If you can't, slow down.

When you are pregnant, hormones released by your body make your joints more vulnerable to injury so make sure you don't overstretch. Check your planned exercise routine for safety and if you are taking part in any class, make sure your instructor knows you are pregnant. Whenever you exercise, start with a gentle warm up and end with a cool down to prevent injury. Stop exercise immediately if you experience:

- any bleeding
- back or abdominal cramps
- extreme breathlessness or dizziness.

If you do experience any of these symptoms, see your GP or midwife as soon as possible.



## Tip 8 Avoid stress

Pregnancy should be an exciting and rewarding time. However, for some women, it can also be a time of stress. Research suggests that stress leads to high blood pressure, which can be a cause of premature birth and miscarriage. It is important to manage the amount you take on during your pregnancy and to give yourself plenty of time to rest and relax.

### A working pregnancy

Most women choose to remain at work until around weeks 34 to 36 of their pregnancy. There is no reason not to work until this late in pregnancy if you have completed a risk assessment of your workplace, and if your doctor confirms there are no medical reasons for you to stop work. However you must be realistic about what you can achieve during your pregnancy. Many people report feeling extra pressure to

complete work before their maternity leave and take on more than is sensible for a healthy pregnancy. It's a good idea to meet with your manager to discuss your workload and to plan together for the coming months, to set realistic goals for the duration of your pregnancy. If your manager is not available to discuss your situation with you, consider writing your own plan.

### Tiredness

Tiredness is common during pregnancy, especially in the first three months and last few weeks. Learn to pace yourself. If you stand a lot during the day, make sure you take breaks to sit down. Rest during your break for lunch. Short breaks with your eyes closed and your feet up (don't worry if you don't actually sleep) can really help revive energy levels, so take 20 minutes out when you need to. If you can, enlist the help of your partner, family and friends with cooking, cleaning or childcare.

### Relaxation

Learning to relax during pregnancy will help relieve stress and make you feel more comfortable. It will also help you to work more effectively with contractions during labour. There are a number of techniques, like controlled breathing and gentle stretching, which can help you relax. Try a few and decide which works best for you. The most important thing is to listen to your body, make time for yourself, and enjoy your pregnancy.



## Tip 9 Attend all antenatal appointments

Antenatal appointments play a vital role in the care of your pregnancy. They are important for monitoring the progress of your baby's development, and also give you an opportunity to ask questions and learn about what to expect from your pregnancy and labour.

It's important to attend all antenatal appointments. If you work full time, your employer is required to allow you time off to attend appointments. Keep your manager informed about your appointment dates so your workload can be managed effectively.

Your antenatal care will be managed either by a doctor, a midwife or a combination of both. This combination is referred to as 'shared care'. If you need special care during pregnancy, usually because of a previous medical problem, you'll be seen by an obstetrician at your appointments. Your partner, a relative or a friend is welcome to attend some, or all of your appointments with you.

### Your first appointment

Your first appointment will be at around 8 to 12 weeks of pregnancy. It's usually the longest appointment, so leave plenty of time for it. You'll be asked a number of questions: about your medical history, including any childhood or recent illnesses; the date of your last menstrual period; details of previous births or pregnancies; etc. This is so your carers can understand your individual situation and get an idea of any potential risks to your pregnancy.

At your first appointment, your blood pressure will be measured, and with your consent, your blood tested for:

- blood type
- whether you're rhesus positive or negative (to assess whether there is any risk of rhesus disease)
- haemoglobin levels (which indicate how well your blood carries oxygen)
- rubella antibodies (German measles)
- sexually transmitted diseases
- HIV.

Your urine will also be tested for protein and glucose, and you'll probably be offered an ultrasound scan.

### Ultrasound scans

Ultrasound scans measure sound waves in the womb to build up a picture of your baby. Usually two scans are offered, one at 10 to 14 weeks, and the second at 18 to 20 weeks. The first scan is to:

- estimate your baby's size
- confirm the due date

The second scan is also called an anomaly scan. It again measures your baby's size and position and is a check for abnormalities in your baby's development. You may also be offered a nuchal translucency scan which tests for Down's Syndrome, if your baby is considered at risk.

You'll probably be asked to drink about a pint of water before your ultrasound. This extends the bladder which pushes up the womb to make it easier to see.

## Later appointments

You'll usually have an antenatal appointment every four weeks after your first appointment until about week 28 or 30. Then every two weeks until week 36, then weekly until the birth. These later visits are usually shorter than the first, but are just as important to check your baby's development. Your urine and blood pressure will be tested each time, and your abdomen felt to measure the size of your baby, the amount of fluid surrounding it and where it is lying. Your doctor or midwife will also listen for your baby's heartbeat. They often use a Sonicaid – a small instrument that allows you to hear the heartbeat too.

Further tests to check for abnormalities are also available early in pregnancy, such as amniocentesis, chorionic villus sampling, etc. Risks are associated with some of these tests, so you'll only be offered them if you're at risk for any reason. If you're offered any of these tests, ask your doctor or midwife to explain the procedure and implications.

## Your input

Antenatal appointments are not just a time for your midwife or doctor to check you and your baby, they are also your opportunity to ask any questions you may have about your pregnancy and labour. Make the most of this time, and ask as many questions as you need to – it's a good idea to write a list before your appointments. Don't be afraid to ask embarrassing questions, for example about sex during pregnancy or bowel movements. Ask your doctor or midwife for more time in your appointment if you have more questions, or if there is anything you don't understand.

If you have any concerns between antenatal visits, contact either your GP or midwife to discuss your worries or to make an earlier appointment.



## Tip 10 Contact your midwife or doctor

Contact your midwife or doctor if you're worried about your health for any reason, or if you experience any of the following:

- reduced movement of your baby in the third trimester
- vaginal bleeding
- breaking 'waters'
- swollen face, hands or feet
- disturbed vision
- flashing lights
- abdominal pain
- recurring headaches
- generally feeling unwell.

If you need urgent assistance contact NHS Direct on 0845 4647 who'll put you in touch with relevant help in your area.

### Bleeding

If you experience vaginal bleeding at any stage in your pregnancy, you should see your doctor or midwife straight away. If they are unavailable, go to the outpatients department of your hospital. Bleeding early in pregnancy can be a sign of miscarriage.

Bleeding later in pregnancy can be a sign that the placenta is lying too low in the womb, or that the placenta has started to separate away from the wall of the womb.

### Pre-eclampsia

Pre-eclampsia is a dangerous condition which can be life-threatening to both mother and baby if allowed to continue. The presence of high blood pressure combined with protein in the

urine is an indication of pre-eclampsia, which is why these are routinely checked at every antenatal visit. In the absence of protein in the urine, other symptoms may be present alongside high blood pressure, including headaches, blurred or altered vision, or abdominal pain.



# Useful organisations

The following organisations supply information and advice to pregnant women, their partners and families. For a broader list of useful organisations, visit Tommy's website: [www.tommys.org](http://www.tommys.org)

## Antenatal Results & Choices

Offers support for parents throughout the antenatal testing process and when a serious abnormality is diagnosed. Helpline 020 7631 0285 (Mon to Fri 10am to 1pm and 2pm to 6pm).

## BLISS

[www.bliss.org.uk](http://www.bliss.org.uk)  
Offers information and support for families of babies who are or have been in special care. Information and support line 0500 618 140 (Mon to Fri 10.00am to 5.00pm).

## Drinkline

Offers support and information about alcohol related concerns. Information and support line 0800 917 8282 (Thurs to Sat 24 hours, Sun to Wed 7am to 11pm).

## The Maternity Alliance

[www.maternityalliance.org.uk](http://www.maternityalliance.org.uk)  
Offers advice and information on all aspects of pregnancy and birth, particularly maternity employment rights and benefits. Advice line for information on maternity rights and benefits 020 7490 7638.

## National Drugs Helpline

[www.ndh.org.uk](http://www.ndh.org.uk)  
Advice and information is given by trained advisors on local services available and offers support for drug related problems.  
Helpline 0800 77 66 00 (24 hours).

## National Childbirth Trust

[www.nct-online.org](http://www.nct-online.org)  
Provides information and support to new parents during childbirth and early parenthood.  
Enquiry line 0870 444 8707 (Mon to Fri 9am to 5pm),  
breastfeeding line 0870 444 8708 (every day 8am to 10pm).

## NHS Direct

[www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)  
24 hour nurse-led helpline providing confidential healthcare advice and information 0845 46 47.

## NHS Pregnancy Smoking Helpline

Intensive support service for pregnant smokers who want to give up, on 0800 169 9 169 (every day 1pm to 9pm). Also Quit offers practical help on giving up smoking on 0800 00 22 00 (every day 9am to 11pm).

## WellBeing/Sainsbury's 'Eating for Pregnancy' helpline

Offers advice on nutrition for women planning a pregnancy, who are currently pregnant and who are breastfeeding, and for media and health professionals, 0114 242 4084 (Mon to Fri 8am to 4pm).

## Tommy's, the baby charity

Tommy's provides information and support about pregnancy related issues. Tommy's also covers the work of The Toxoplasmosis Trust. For further information or advice, please contact the Tommy's information line: 0870 777 3060, or visit our website: [www.tommys.org](http://www.tommys.org)

# How we can help you

I would like to find out more about Tommy's, the baby charity.  
Please send me:

- Healthy Pregnancy guide
- Toxoplasmosis and pregnancy: everything you need to know
- Toxoplasmosis and pregnancy
- Toxoplasmosis and animals
- Toxoplasmosis: a handbook for health professionals
- Premature labour: information for parents
- Premature labour: information for midwives
- When a baby dies
- Information on miscarriage
- Information on stillbirth
- Information on premature birth
- Information on pre-eclampsia
- Research update
- Information on ways to donate regularly to Tommy's
- Fundraising information

Please complete your details below and return the form to Tommy's, the baby charity, Nicholas House, 3 Laurence Pountney Hill, London EC4R 0BB, or contact Tommy's on our information line (0870 777 30 60) or e-mail: [info@tommys.org](mailto:info@tommys.org)

|                     |          |
|---------------------|----------|
| <b>Your details</b> | Name     |
| Address             |          |
|                     | Postcode |
| Telephone           |          |
| Email               |          |

Please tick this box if you do not wish to receive further mailings from Tommy's.



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