



Maternal Nutrition

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A healthy diet during pregnancy contains adequate energy, protein, vitamins and minerals, obtained through the consumption of a spread of foods, including green and orange vegetables, meat, fish, beans, nuts, pasteurized dairy products and fruit

Maternal nutrition stone for child's growth & development, critical for women's health & wellbeing across life stages.

The diversity of the food intake should be diversified.

- Grains, white roots/tubers, plantains
- Pulses (beans, peas, lentils)
- Nuts & seeds
- Dairy products
- Meat, poultry & fish
- Eggs
- Dark green leafy vegetables
- Other vitamin A rich fruits & vegetable
- Other vegetables
- Other fruits

Calories: The calorie cost of pregnancy is claimed to be approximately 80,000 calories over the course of pregnancy.

Carbohydrates: Carbohydrates should constitute approximately 50% of the diet for many pregnant women. The RDA for carbohydrates in pregnancy is 175 g/day, up from 130 g/day in non-pregnant women.

Protein: Protein is required for the expansion of maternal and fetal tissue. The pregnant woman should ingest 1.1 g/kg/day protein, which is moderately above the 0.8 g/kg/day recommended

for non-pregnant adult women.

Folate: Folate is vital during preconception, as most of the people are conscious of, but it's also recommended that ladies increase their Folate intake during pregnancy by about 100microgram each day to 300mcg/day.

Calcium: The RDI for calcium during pregnancy is 1200mg per day, which is 300mg quite for non-pregnant women.

A diet is simply one component within the determinants of fetal/offspring growth and development, which is attenuated by genetic, demographic, behavioral, and other factors. Thus, maternal nutrition, like all other intervention, should be personalized so as to realize its maximal benefit.

Goals of metabolic management of a pregnancy complicated with GDM (Gestational Diabetes Mellitus) need to balance the wants of a healthy pregnancy with the requirements to regulate glucose level. Exposure to maternal antibiotics during pregnancy could also be related to an increased risk of childhood asthma, consistent with recent study results published in Archives of Disease in Childhood.

Malnutrition predominantly affects children within the first years of life who are vulnerable from birth, as they transition from breastfeeding through complementary feeding to independent feeding; and since of frequent communicable disease episodes.

However, malnutrition can also begin before birth. Low birth weight and premature delivery, also posing high risk in themselves, set children on a poor health and nutritional trajectory. The Nutritional health of mother determines the health of infants and young children.

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Received: February 5, 2021; Accepted: February 12, 2021; Published: February 19, 2021

Citation: Rita N (2021) Editorial Note- Maternal Nutrition. Matern Pediatr Nutr 6:e002

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