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Before You Know It (Weeks 0–4)

Welcome to the very beginning of your pregnancy journey! Well, almost. It may come as a surprise to you, that when you first see those two pink lines or get a positive pregnancy test, you're already at least *four* weeks pregnant. Pregnancy weeks are really counted from the first day of your last menstrual period (LMP), not from your date of conception. Many women know that the average pregnancy is approximately 40 weeks or 280 days, but they don't realize that they aren't *actually* pregnant with a baby in their uterus yet until week 3 or 4.

Before we start diving into week 4 and all the fun and exciting ways to prepare for your baby, let's explore the miracle that has already been happening in your body. There's a lot going on and, if you're reading this before you are pregnant, there are some things you can do *now* to prepare for conception and implantation. So, let's look at what's *really* happening in those first few weeks of pregnancy, before you even know you'll be expecting.

Week 1: Your Cycle Begins

On the day your period arrives, it marks day 1 of a brand-new menstrual cycle. You're not technically pregnant yet, but your body is preparing. And surprisingly, it's day 1 of your pregnancy. That might sound incredibly strange, especially since conception hasn't happened yet. But here's why: medical professionals count from the first day of your last menstrual period (LMP), because it's a clear, consistent starting point. Many women don't always know the exact moment of ovulation or conception, but they often remember when their last period began.

Using the LMP helps providers estimate your due date, track your baby's development, and schedule important milestone visits throughout your pregnancy.

While this method assumes ovulation happens around day 14 (which isn't always the case because every woman's body is different), it still provides a helpful standard. If your cycles are irregular or your LMP is unknown, an early ultrasound is usually done to confirm dates more accurately. So, even if it seems odd to be pregnant before an egg is even fertilized, trust that your body is already doing the important prep work to support new life. You're officially on your way.

What's Happening with You?

Inside your uterus, the lining from your last cycle (the endometrium) is shedding, and a fresh one is beginning to grow. At the same time, your ovaries are selecting a few follicles, called *eggs*, to mature. One of them will be chosen as the star of this cycle and will be the one to (hopefully) get fertilized.

Common Symptoms and Comfort Tips

In these early weeks of pregnancy, you might not feel much of anything, or you might begin noticing subtle changes. Here are some of the most common symptoms during the first month of pregnancy, along with some tips to overcome discomfort:

Mild cramping or spotting (from implantation): Light twinges or pink/brown spotting can happen as the fertilized egg implants in the uterine lining. It's important to rest, stay hydrated, and avoid overly intense physical activity during this time. If cramping becomes painful or bleeding is heavy, call your care provider.

Increased basal body temperature: Many women tracking their ovulation have noticed their temperature stays slightly elevated after conception.¹ If your raised temperature is causing you discomfort, keep cool by dressing in breathable layers and staying hydrated.

Sore, tender, or swollen breasts: I recommend wearing wireless bras, comfortable sports bras, or even nursing bras that can provide extra comfort and support.

Fatigue: It's important to listen to your body and rest when you can, because your body is working overtime right now due to its significant hormonal shifts, increased blood volume, plus all the physical demands of supporting a growing baby. It's okay to say no to invitations and extra responsibilities. Prioritize rest and try to keep consistent bedtimes and wake-up times.

Heightened sense of smell: You might be able to smell things you never noticed before. I recommend avoiding strong scents when possible, cracking a window when cooking, and keeping a lemon wedge or peppermint oil nearby to sniff and help mask any unpleasant scents.

Headaches: If this is something that you experience, make note of what triggers your headaches, like screen time (maybe turn down the screen's brightness), allergens, or foods, and try to avoid them if possible. Also, always talk to your care provider before taking any medications to manage a headache or any other discomforts you experience during pregnancy.

Nausea or food aversions: This can be awful, especially if you have hyperemesis gravidarum (HG).² (HG is a severe form of nausea and vomiting during pregnancy that affects a smaller percentage of women, which can lead to dehydration, weight loss, and electrolyte imbalances. It is much more extreme and persistent than typical morning sickness, and it's something to discuss with your care provider.) To help with nausea and food aversions, I recommend staying hydrated (be sure to drink your electrolytes) and eating enough small snacks and meals throughout the day. Ginger can help with an upset stomach as well, so keep items like ginger tea, ginger chews, ginger candies³ on hand. Also, avoid strong, spicy, acidic, or fatty foods, if they seem to trigger your morning sickness. It's best to focus on well-rounded nutrition.

Frequent urination: This is totally normal in early pregnancy. It's caused by rising hormones (like hCG [human chorionic gonadotropin] and progesterone) and increased blood flow to your kidneys even before your uterus grows.⁴ I still recommend staying hydrated, but you should try to space out your water intake. Try not to guzzle large amounts all at once but rather sip water throughout your day. Also, try to limit your fluids one to two hours before bedtime to reduce frequent nighttime trips. This will be something to remember, especially as your baby grows and places more pressure on your bladder. Also, because caffeine is a diuretic, limiting your coffee, tea, and soda intake can help with this symptom.

If you ever notice burning, urgency, a foul smell, or cloudy urine, be sure to let your care provider know. It could be a sign of a Urinary Tract Infection (UTI), which is more common during pregnancy, and you'll need to have it treated.⁵

Mood swings or emotional irritability: There can be a whirlwind of emotions during this time (as the fluctuating hormones don't help), so it's common to experience big mood swings.⁶ To help with this:

- Practice grounding rituals like journaling, meditating, or walking outside.
- Eat small, frequent meals with protein and complex carbs to avoid energy crashes.
- Share how you're feeling with your partner, a trusted friend, or therapist.
- Limit any stress triggers – if scrolling social media or googling symptoms raises your anxiety, I recommend stepping away from the Internet and taking a break. Overall, remind yourself: it's okay to feel how you feel. Your brain and body are adjusting to a major life shift.

As you may have noticed, many of these symptoms are also similar to period symptoms. But just know that it's totally normal to feel emotional or tired during this time. Even though conception hasn't happened quite yet, it's important that you give yourself some grace and patience. Remember, this is a fresh start and you'll soon be able to conceive!

Chick Tip: While you aren't pregnant yet, I tell women to *act as if you already are!* There are certain lifestyle actions that you can make now to help optimize your fertility and plan for a healthy pregnancy should you conceive. Things like stress, sickness, travel, and drastic changes in your body weight, exercise routine, and sleep can all affect the timing and quality of your ovulation.⁷ This is why, while trying to conceive, I recommend the following:

- Minimize your stress.
- Don't make drastic changes to your lifestyle or exercise regimen.
- Make sure to get enough sleep.
- Start taking a quality prenatal vitamin.

How to Choose a Prenatal Vitamin That Works for You

Yes, *before* you are even pregnant, you should be taking a quality prenatal multivitamin. This is vital, because certain birth defects, particularly neural tube defects which occur when the neural tube that forms the brain and spinal cord does not close properly, develop very early in pregnancy, often before women even know they are pregnant.⁸ Getting your bloodwork done first is key. Your bloodwork will detail exactly which nutrients you're deficient in (or have plenty of), so you can choose a prenatal vitamin (or individual supplements) that truly match what your body needs. In addition, it's also important to know that not all prenatal vitamins are created equal. Some offer better absorption, more complete nutrients, or gentler forms that are easier on your stomach.

Prenatal Vitamin Checklist

These nutrients are critical in early development, even before you know you're pregnant. Use this checklist when comparing and choosing your prenatal vitamins:

- 400–800 mcg of **folic acid** or **methylated folate** (vitamin B9)
- 27 mg of **iron**

- 1,000 mg of **calcium**
- 200–450 mg **omega-3s** (DHA [Docosahexaenoic Acid] or algae-based)
- 1,000–2,000 International Units [IUs] of **vitamin D**
- 220 mcg of **iodine**
- 770 mcg of **vitamin A**
- 85 mg of **vitamin C**
- 1.9 mg of **vitamin B6**
- 2.6 mcg of **vitamin B12**
- 11–15 mg of **zinc**
- 350–360 mg of **magnesium**
- 60–100 mcg of **selenium**
- Lists **choline** (aim for 450 mg daily through diet or supplement combo)
- Is **third-party tested** for quality and purity
- Is easy for you to take daily

If you're sensitive to iron, look for a formula that uses a nonconstipating form like ferrous bisglycinate.⁹ And if you have a family history of methylenetetrahydrofolate reductase (MTHFR) gene mutation, opt for a vitamin with methylated folate instead of folic acid.

What's the Difference Between Folic Acid and Folate? This is a question that I receive from some of my clients, so let's break this down:

- **Folate** is the *natural form* of vitamin B9 found in foods like leafy greens, lentils, and citrus.
- **Folic acid** is the *synthetic version* often used in supplements and fortified foods.

The difference? Not everyone's body can efficiently convert folic acid into its active form (methylfolate), especially those with the MTHFR gene mutation.¹⁰ This can lead to unmet folate needs even when you're taking a supplement. (If you are unsure if you have the MTHFR gene mutation, this can be discovered during genetic testing through a blood test.) It's why many providers and certified perinatal nutrition experts like me recommend choosing a prenatal with methylated folate instead. It's already in its active, usable form and supports neural tube development effectively.¹¹

Struggling to Take Prenatal Vitamins? I get it, these vitamins can be tough to take, and it's not just you having issues with them. It's common in the first trimester to have a difficult time taking vitamins and supplements. Due to their large size, potential to cause nausea and

vomiting, and the fact that some women simply may have difficulty swallowing pills, taking your prenatal vitamins daily can be a real struggle for some moms. If capsules are hard for you to stomach right now, I recommend trying a gummy prenatal multivitamin, powder, or liquid. Vitamins in the following forms may be easier to take, especially while you might be experiencing nausea. What's most important is that you take your prenatal vitamins consistently. You can always switch to a better-quality prenatal vitamin later or add in missing nutrients as needed.

- **Gummies:** Most gummy prenatal vitamins don't contain iron, which helps with your red blood cell production and oxygen delivery, and some also lack choline or adequate DHA, which are critical for your baby's neural and eye development. They're usually lacking to preserve the vitamins' taste and shelf life, since iron can give gummies a metallic taste or cause them to stick together in the bottle. In addition, gummies also contain a higher amount of added sugar. So, while gummies can be a helpful, short-term solution when you're nauseous or struggling to swallow pills, they often fall short nutritionally, especially once your iron needs increase in your second and third trimesters.

Ultimately, do what you need to do in the first trimester. I believe that taking any prenatal vitamin is better than taking none at all. But if you do take a gummy, consider pairing it with separate iron, choline, and DHA supplements, or switching to a more complete prenatal multivitamin when you're able.

- **Liquids or Powders:** These vitamin forms are often easier to absorb and gentler on the stomach, but they may also lack certain key nutrients that you and your baby need like iron, choline, or DHA. This is why it's important to read the label when choosing one and fill in any gaps through diet or additional supplements.

If you're unsure, your provider, registered dietician, or a certified perinatal nutrition expert can help you find the best fit.

Nutrient-dense Foods

Try to add more nutrient-dense foods to your plate, especially those rich in folate, choline, protein, omega-3s, iron, and vitamin C. Think:

- **Leafy greens** (like spinach, kale, and romaine)
- **Eggs** (especially the yolks, for protein and choline)
- **Salmon** or other **low-mercury fatty fish** (for protein and DHA)
- **Citrus fruits** (vitamin C helps with iron absorption)
- **Berries** (high in antioxidants and contain anti-inflammatory properties)

- **Lentils and beans** (for folate, iron, fiber, and plant-based protein)
- **Sweet potatoes** (great source of beta-carotene, which converts to vitamin A, crucial for healthy eggs and sperm)
- **Fortified foods and drinks** can also fill nutrient gaps, just aim for those that are lower in added sugars and made with whole grains when possible.

When planning your meals and taking your prenatal vitamins, imagine you are prepping the soil before planting a seed. The more nourished your body is now, the stronger the foundation for your baby's development.

■ **Weekly Affirmation:** “*My womb is a healthy, welcoming, and fertile place.*”

Week 2: The Egg Waits to Meet the Sperm

Now that you have had your cycle and are preparing your body, week 2 is all about ovulation preparation. While there's no baby just yet, your body is still working hard behind the scenes! Your estrogen levels are now rising, triggering a surge of luteinizing hormone (LH), which tells your ovary to release its chosen egg.¹² Your uterine lining, called the *endometrium*, is also thickening to become a soft, nourishing home in case a fertilized egg arrives soon.

Ovulation usually happens around day 14 in a 28-day cycle, but this can vary since each woman's cycle is different. A normal cycle can range anywhere from 21–35 days.¹³ So, for a 21–35-day cycle, this means ovulation could occur anytime between days 7 and 21, depending on the cycle's length. I recommend tracking your cycles, so that you can know your fertile windows for a higher chance of conception. There are lots of great apps that you can download to help with this tracking.

Signs You're Ovulating

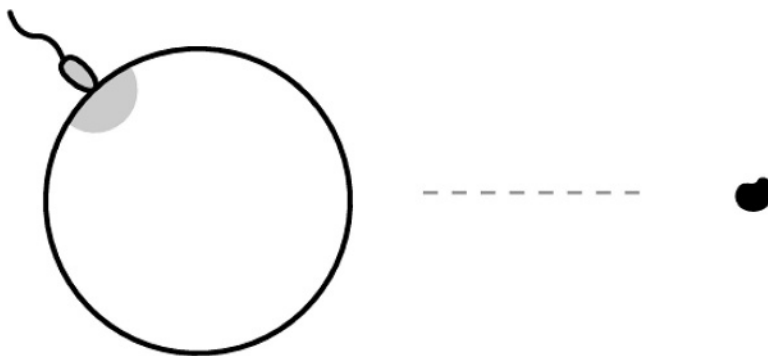
- Increased cervical mucus that looks like raw egg whites
- A slight rise in basal body temperature
- Mild pelvic cramping or twinges (known as *Mittelschmerz* or “middle pain”)
- A stronger sex drive

Partner Tip: Have sex every day or every other day with your partner during her fertile window, which typically spans about 6 days: the 5 days leading up to *and* her ovulation day. This increases the chance of healthy sperm being present when the egg is released.

Fun Fact: Did you know that an egg only lives for 12–24 hours after ovulation, but sperm can live up to 5 days inside the female reproductive tract?¹⁴ That’s why timing is everything.

■ **Weekly Affirmation:** “I release my worry and make space for peace and new beginnings.”

Week 3: The Union and Implantation Begins



If sperm meets an egg around ovulation, fertilization can occur, and this is when you can become pregnant! Once that happens, that tiny, fertilized egg, now called a *zygote* (a single-cell organism carrying DNA from both you and your partner), begins a rapid series of cell divisions as it travels down the fallopian tube toward your uterus.

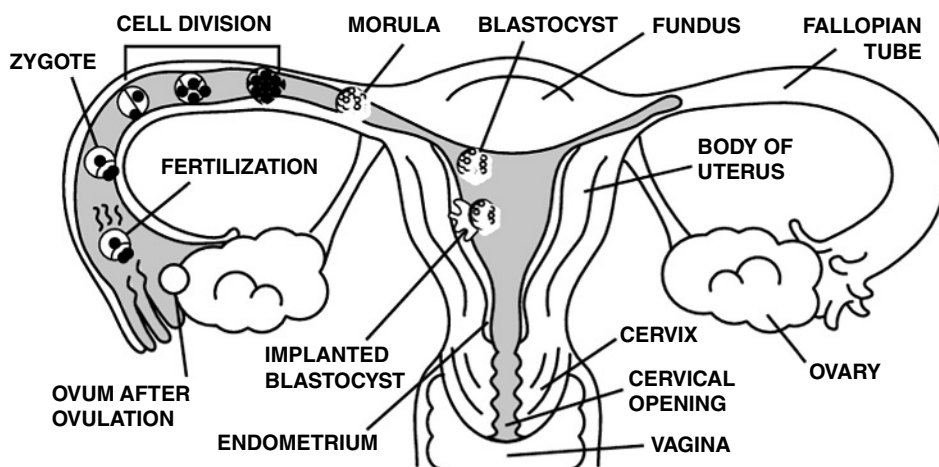
By day 4–5 post-ovulation, this developing ball of cells is called a *morula*, and by day 5–6, it becomes what’s called a *blastocyst*. It’s at this stage that it arrives in the uterus and begins the process of implantation, burrowing into your uterine lining.¹⁵ Some women experience light spotting or cramping during implantation, known as *implantation bleeding*. This bleeding can easily be mistaken for a light period, but it’s not. About a quarter of all pregnant women report experiencing spotting around the time of implantation.¹⁶ I experienced implantation bleeding with my first pregnancy but not with my second, so it’s good to know that both experiences are normal. This process is what officially initiates the body’s hormonal cascade of pregnancy. It’s at this stage, during week 3 of pregnancy, that your baby is **0.048 millimeters in diameter**, or about the size of the *head of a pin*. Truly a miracle!

It’s still a little too early for a positive pregnancy test, but that doesn’t mean your body isn’t working overtime already. Some women claim that they just knew something was different in their body in those first early weeks before a confirmed pregnancy test. I felt the same way with

both of my pregnancies. You may *feel* different, even if you're not sure why. Additionally, there are plenty of other women who don't feel any changes at all. Both experiences are normal.

■ **Weekly Affirmation:** “*My baby will come to me at the perfect time.*”

Week 4: The Big Reveal



What's Happening with You?

At 4 weeks, the blastocyst has fully implanted into your uterine wall.¹⁷ Your body now begins producing the hormone hCG, which is what pregnancy tests detect.¹⁸ If you've missed your period, now's the time to take that test! And if you're like most women, you'll take a few just to *really* confirm that you are, in fact, pregnant. Don't worry. You're not the only one who's peed on six pregnancy tests just to “be sure.” But I want you to know that once you see even one positive test, you can begin celebrating! Generally, home pregnancy tests are very accurate when used correctly, with many claiming 99% accuracy. So, Mama, it's time to do your happy dance, or feel however you feel, because once you see a positive result, you are officially *pregnant!*

What's Happening with Baby?

Although your pregnancy has just begun, your baby is already beginning to form different types of cells that will become organs and tissues. It's truly incredible. The embryo is dividing into three layers that will become the following:

1. **Ectoderm:** Nervous system, brain, skin, mammary and sweat glands, and tooth enamel
2. **Endoderm:** Lungs, gastrointestinal tract, liver, pancreas, and thyroid
3. **Mesoderm:** Heart, blood, kidneys, skeleton, and muscles

What's really cool is that your baby has also begun to develop arm and leg buds even at 4 weeks, though you wouldn't be able to recognize them quite yet.¹⁹ Your baby even has a very basic form of blood developing in their main vessels. It's truly amazing to learn already how much and how quickly your baby is changing.

At this point, your baby is measuring at just under **2 millimeters in length**, or about the size of a *poppy seed*. While it may not sound like much, they've already grown 40 times their size in the past week! And, fun fact, their cells are already beginning to form the placenta, amniotic fluid, yolk sac, and all their major organ systems.²⁰

Chick Tip: Once you've confirmed your new pregnancy, it's now more important than ever to take care of yourself and the new life inside you. The best things you can do right now are to:

- **Rest:** Fatigue is one of the most common pregnancy symptoms because your body begins working in overdrive to maintain the pregnancy and prepare for lactation. Your heart also starts pumping extra blood.²¹ Your whole body is working hard! Please lean into your body's cues to get extra rest and sleep, if needed.
- **Fuel:** Fueling your body with enough calories and protein during early pregnancy is essential for you and your baby. Prioritize eating a well-rounded diet of lean meats, dairy, nuts, seeds, legumes, fruits, vegetables, and whole grains, as your stomach allows.
- **Exercise:** Daily movement is very important during pregnancy. It's usually safe to continue whatever exercise routine you were previously following, once you become pregnant. In the majority of cases, going for daily walks is a safe bet, but always consult with your care provider about your specific habits and continue to move your body! There are so many benefits of exercising during pregnancy for you and baby.
- **De-stress:** No matter how exciting, a new pregnancy can also be overwhelming. Even if this is a planned and desired pregnancy, anxiety and nervousness can emerge. And if stress is taking a toll on you, it can be harmful to you and your little one. So, find outlets that help you release your anxiety during this time, such as meditation, exercise, therapy, writing, and socializing.

■ **Weekly Affirmation:** *"My body is the perfect home for my baby."*

Reflection: Trust the Journey

It's wild to think how much has already happened before you even knew you were pregnant! These early weeks are full of microscopic miracles – from egg release to fertilization to implantation. Even if you just found out, take a moment to celebrate your incredible body, your darling baby, and this powerful new beginning. You are now growing and carrying a little miracle inside of you. You are officially a mother to this precious little one, and I am so excited for you. Congratulations, Mama!

To have a more positive pregnancy, we need to focus on *all parts* of your pregnancy – physical, mental, and emotional. That's why I've created affirmations, journal prompts, recipes, stretches and movements, and meditations ideal for each milestone. For easy reference, I have included all of these in The Pregnancy Toolkit found at the back of this book.

Welcome to the Beginning of Becoming Mama

We've already covered so much in the first month of pregnancy. But now that you officially have a positive pregnancy test, can we just take a moment and recognize that you are, in this very moment, carrying and nurturing your precious little one? *Can you believe it?! Your body is already doing the most amazing things and working so very hard. I want to take this time to honor that because you're literally growing a miracle as you read this.*

I understand that there is a lot of pressure and responsibility to do things *perfectly* for your baby. But I am here to tell you, there is *no such thing as a perfect mother*. All you can do is educate and prepare yourself as best as you can and lead each decision with love so that you can do your best for this child. That is more than enough. *You are more than enough.*

Notes

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and require medical intervention. If this is you, please know that you do not need to suffer. Talk to your care provider for support and treatment.

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