

作產期間的飲食指引：

生產過程會增加體力消耗。研究顯示生產過程的能量消耗與持續的帶氧運動相約。因此在情況許可下適量飲食可穩定血糖及補充身體的水分流失，從而避免延長產程。

但是在生產過程中，胃部蠕動及消化速度會大大減慢。此外，另使用某類藥物後，胃排空的速度會進一步減慢。在此情況下，產婦如有必要進行緊急的全身麻醉，胃內殘餘食物便有機會進入氣管及肺部，引致吸入性肺炎，嚴重甚至可能導致死亡。

不過，隨著現今麻醉技術的提升，因全身麻醉而導致吸入性肺炎的比率已大大減少。故此，在生產過程中，即使一些有需要禁食的產婦，仍可攝取有限量的清水。而大部分低風險的產婦，除攝取飲料外，更可輕量進食。

在可行的情況下，生產期間攝取飲料及輕量進食可達致以下效果：

- 預防產婦在作動期間出現缺水的情況
- 滿足產婦的生理需要
- 促進良好生產經驗
- 減少因產婦體力透支而作出不必要的醫學介入
- 減低產婦在需要進行緊急手術時出現吸入性肺炎的風險



陰道分娩的產婦：

- 低風險的產婦，可飲用流質和進食少量容易消化的食物至宮頸張開至八度為止：
- 清水 或 果汁
- 電解質補充飲料
- 茶 或 咖啡
- 冰粒 (每粒大約五毫升清水)
- 麥片、粟米片配低脂牛奶
- 餅乾 或 麵包，可配果醬或蜜糖
- 低脂乳酪
- 粥水



所有產婦應於宮頸張開至八度後禁食，但仍可於每小時進食最多三粒冰粒(每粒大約五毫升清水)。

- 需要進行藥物引產及某些情況特殊的產婦，例如本身有某些內科疾病或產科問題，其麻醉的風險會較高，因此需要在整個產程禁食。

剖腹產的產婦：

如已預約剖腹產，孕婦需要在手術前六至八小時前開始禁食固體食品，手術兩小時前禁止飲用流質飲品。

如遇緊急情況，在醫生決定需要安排手術後，產婦應立即開始禁食。

無論施行何種麻醉方法，產婦均需服用處方的中和胃酸藥物以減低吸入胃酸所做成肺部傷害。

當產婦完成手術，在產後房完全清醒並經醫護人員評估後，可在手術後兩小時開始進食。建議先嘗試飲用流質飲品如清水，如無嘔吐或肚脹等不適，會跟據個別適應程度逐漸回復正常飲食。


如有任何疑問，請向醫護人員查詢。
以上資料由瑪麗醫院婦產科提供。



瑪麗醫院
Queen Mary Hospital

作產期間的飲食指引 Oral Intake During Labour



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Oral Intake During Labour:

Labour is an energy consuming activity which requires extra calories. Studies have suggested that the energy consumption of labour is similar to that of continuous moderate aerobic exercise. Therefore, a light diet during labour can prevent low blood sugar and dehydration which can potentially prevent prolonged labour.

However, labour delays stomach motility and emptying significantly. The condition is further aggravated by the use of certain medications. If delivery under general anesthesia becomes necessary under this situation, residual food in the stomach might enter airway and cause aspiration pneumonia and potential death.

Nowadays, with advancement in anesthesiology, incidence of aspiration pneumonia has been greatly reduced. Therefore, women who are medically indicated to keep fasted during labour can be allowed to take limited amount of clear fluid. For a majority of low risk cases, a light diet is possible.



Drinking enough fluids and having a light diet can help:

- To prevent dehydration during labour
- To maintain women's physiological needs
- To promote comfort and positive birth experience
- To avoid unnecessary medical intervention due to depletion of energy during labour
- To reduce risk of aspiration pneumonia if there is need of emergency operation under anesthesia

For low risk vaginal birth:

The following drinks and light diet are recommended until your cervix is 8cm dilated:

- Water or juice
- Caloric drinks
- Tea or coffee
- Ice cubes (around 5ml of water each)
- Cereals with skimmed milk
- Biscuits or bread with jam or honey
- Low-fat or fat-free yogurt
- Rice water

You should keep fasted after your cervix is 8cm dilated but you can still have no more than 3 ice cubes per hour for refreshment (each is made up of around 5ml of drinking water). If you undergo induction of labour or suffer from certain medical conditions, you are associated with higher anaesthetic risks and thus should be fasted completely during labour.



For Caesarean deliveries:

- For elective operations, you should be fasted for 6-8 hours for solid food, and 2 hours for clear fluids before the operation.
- For emergency Caesarean delivery, women should be fasted as soon as the decision for operation is made.
- Regardless of the mode of anesthesia, you will be prescribed with antacids to decrease lung damage due to aspiration pneumonia.
- When you are fully awake after surgery in the postnatal ward, you may start oral intake 2 hours later after assessment by healthcare professional. We assess you to start with clear fluid such as water then gradually resume normal diet as tolerated.



For any enquiries, please consult your healthcare professionals

Information provided by the Department of Obstetrics and Gynaecology, Queen Mary Hospital