

# HEALTH

COMMENTARY // *Baby weight*

## Managing weight during pregnancy

By Sarah Garcia  
Special to the Acorn

For most of us, our relationship with food is complicated—but for women, it's never more so than during pregnancy. To make things worse, people typically encourage you to eat everything you desire when you're pregnant—and as much of it as you'd like.

"The baby wants it," they'll say, or, "After all, you're eating for two now."

The reality is much different, however. For most women, the safe weight gain in pregnancy is 20 to 25 pounds. (That number is based on pre-pregnancy BMI, so your doctor may recommend a different goal for you.) If you exceed that range of weight gain, you risk complications for yourself and your baby.

These risks including having a baby who is too large, which increases the chances you'll need a C-section or makes vaginal delivery more difficult and dangerous. Being born larger raises the risk

that your baby will be overweight as a child and may be more likely to develop diabetes in childhood.

So how do you keep your weight in check during pregnancy? There are two parts to this answer: nutrition and exercise. While many women feel it is natural—and even necessary—to eat more during pregnancy, the truth is that the average women needs just 300 more calories per day: 2½ oranges, 9 ounces of turkey deli meat or 2 ounces of chocolate. In other words, it's not a lot of food to add to your diet.

In fact, since many women already eat more calories than they need every day, physicians often recommend that their pregnant patients continue to eat their normal diet, without adding any foods. The only difference is that pregnant patients are typically counseled to eat six small meals a day instead of the typical three larger ones.

During pregnancy, it's particularly important to eat a healthy diet in order to keep weight gain

in a safe range as well as to provide your growing baby the full array of nutrients he or she needs to develop properly.

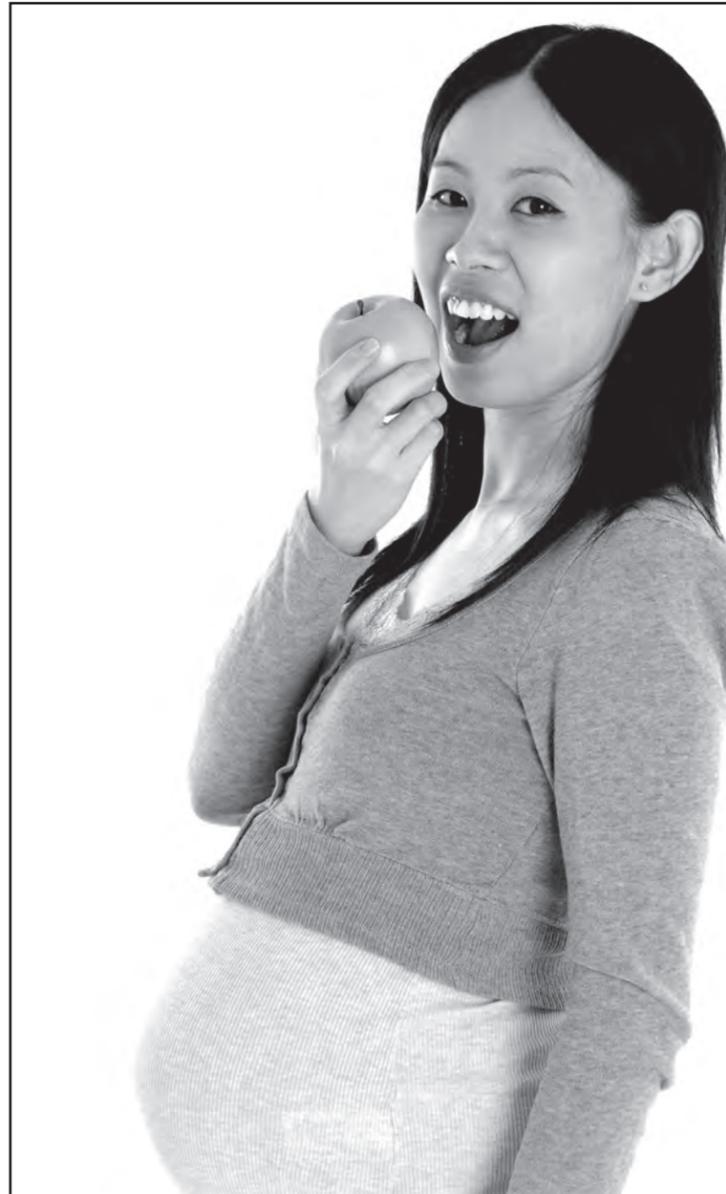
Choose fresh fruits and vegetables and lean protein, such as grilled chicken. Limit high-carb foods—potatoes, bread, tortillas, muffins, cereal and bagels, to name a few—to just one or two servings a day. Too many carbohydrates, which are extremely easy to incorporate into our American diet, result in weight gain for both mom and baby.

The other way to keep your weight gain in check is to continue your exercise routine throughout your pregnancy. In fact, if you're not already physically active, this would be a fantastic time to start—for your health and the health of your baby.

Aim to get 20 to 30 minutes of moderate exercise five to seven days a week. If you're new to exercise, start slowly and work your way up.

Great forms of exercise during pregnancy include walking, swimming, riding a stationary bike, low-impact aerobics and yoga. The only types of exercise you should stay away from are those that carry a real risk of falling and any exercise in a heated environment, such as hot yoga or hot Pilates. (Women who have a fever during pregnancy have a greater risk of having a child who develops cerebral palsy, so there is a concern about any kind of environment that raises the body's core temperature substantially.)

In addition, if there are other issues that can be made worse by



exercise, such as vaginal bleeding or pre-term contractions, talk with your doctor about whether exercise is safe for you. Otherwise, there is no indication that exercise puts you at elevated risk for pre-term labor, miscarriage or early delivery.

With good nutrition and exercise, you can give your baby the

best possible start in the world while keeping yourself fit and ready to take on the task of being a mom to a newborn.

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COMMENTARY // *Aye, eye, doc*

## New ophthalmology procedures available

■ Corrective surgeries cure, reverse poor eyesight

By Rajesh Khanna  
Special to the Acorn

What is presbyopia? If you are reading this article with the help of glasses you'll be pretty familiar with presbyopia.

For those who don't know what presbyopia is, let's talk about it. The eye is like a camera. The natural lens acts as a auto-focusing mechanism and allows us to see things at distance. The lens auto adjusts itself when focusing at middle or near.

By age 40 and up the mechanism starts degenerating and people have difficulty reading books and seeing their smartphones. This condition is called presbyopia.

How to overcome presbyopia? Reading glasses or bifocals have been the solution for hundreds of years. Monovision contact lenses became popular in the last century.

How to reverse or cure presbyopia? Many people are familiar with monovision Lasik eye surgery. The dominant eye is set for far vision and the other for near. Younger women adapt to this procedure better than men. There

may be loss of binocularity and difficulty in intermediate vision.

The 21st century FDA-approved treatment methods are Kamra Inlay and PIE (presbyopia implant in eye).

Each eye is unique  
and every person's  
lifestyle is different

What is Kamra Inlay? It is a specially designed colored implant with a clear aperture in the center.

It works on a pinhole effect similar to a camera. The small aperture increases the depth of field. Therefore a person with Kamra Inlay is able to read and see near without losing much of their distance vision.

The nondominant eye is usually the preferred eye for the Kamra implant. Laser fashions a pocket in the cornea where the inlay is inserted.

How does PIE reverse presbyopia? PIE is the permanent procedure for presbyopia. It removes the defective auto-

focusing mechanism of the eye (natural lens). This lens which has deteriorated is replaced by a biocompatible, synthetic nano-engineered implant.

The PIE will sit in the eye for the rest of one's life. It allows each eye to see at varying distances.

There are various types of PIE like Restor, Tecnis and Crystals.

What if the patient has had previous eye surgery? Presbyopia can still be reversed even if a person has undergone previous Lasik, radial keratotomy or cataract surgery.

So which one is best? Each eye is unique and every person's lifestyle is different. The best way is to do a personalized, customized treatment plan. It is important to talk to an eye surgeon about which one is best for you.

The cost of the procedures varies, monovision Lasik being at the lower end and PIE at the upper end of the spectrum.

For more information, call Khanna Vision at (805) 230-2126, email lasik@khannainstitute.com or go to www.KhannaVision.com.