

Prenatal Nutrition Exercise

Cecilia Jevitt 2016 (Canada update 2020)

This is my mother, Marilyn Jevitt, in November 1952. It's her birthday and she's wearing a maternity top because she's about 27 weeks pregnant. She had classic, US "scientific" prenatal care.



The last page is a copy of the prenatal diet my mother received in 1952. I found it in my father's papers when we packed up his home in 2014. He must have kept it because he was a sales rep for Stuart prenatal vitamins in 1952. You'll note that Stuart prenatal vitamins are part of the diet advice. Comparing the prenatal diet advised in 1952 to current recommendations may help you remember the current recommendations.

There are three themes to consider during this exercise: 1) scientific, evidence-based recommendations change over time, 2) the availability of foods changes over time, and 3) food preferences are culturally based.

Here's some background about that decade to think about when you see my mother's prenatal diet. Fruits and vegetables were locally grown and available in season. You couldn't get blueberries and tomatoes year-round. Off-season fruits and vegetables were canned. Butter or lard were the dominant cooking oils. Corn and other vegetable oils weren't generally available. Few prepackaged frozen foods were available. Ethnic cuisine consisted of Italian and Chinese foods available in urban restaurants.

Sodas were not taken daily. They were considered party food and cocktail mixers. Milk was often drunk with each meal. Few women had a car at home while husbands were at work. Women walked daily. Washing machines had crank wringers to press water out of clothing which was then hung outside or across an unused room to dry. Many gastrointestinal diseases and food allergies, such as H. pylori and celiac disease, hadn't been discovered.

Women were exhorted not to gain more than 9 pounds during a pregnancy. If prenatal weight gain was excessive, especially in the third trimester, diuretics were prescribed. More about this during the study questions.

First, review the current daily recommendations for fruit, vegetable, fat and protein intake during pregnancy. Then, read the diet on the next page and answer as many of these questions as you can. We'll discuss them in class. Please bring a copy of this exercise to class with you.

1. Name some groups of women who would have a hard time following this 1952 diet.
2. The diet calls for a 6-ounce glass of juice daily. How does that size compare with current glass and cup sizes in the US and Canada? Do you have a 6- ounce glass at home?
3. Look at the daily recommendation for fruits and vegetables. Would those 1952 recommendations meet current recommendations for fruit and vegetable intake?
4. A square of butter is a tablespoon. How does the 1952 fat intake recommendation compare with current recommendations?
5. When the diet refers to whole grain cereals, it is referring to cereals such as oatmeal, Ralston Chex, and Cheerios. Look at the cereals, breads, potatoes, rice and pasta recommendations. How does this compare with current recommendations? What happens when carbohydrates are limited in a diet? Don't worry about hormonal perturbations. Think about energy and cost.
6. Where's the dairy in this 1952 diet? (Commercial yogurt wasn't available in the US until the middle 1970s.) What other dairy products might have been recommended?
7. Two to three eggs daily and 8-10 ounces of lean meat? (4 ounces is about the size of a deck of cards.) Does that meet the current recommendations for protein intake during pregnancy? What other sources of protein are in this diet?
8. Why were corn, dried lima beans or dried beans off limits?
9. Why were highly seasoned or spiced foods not to be eaten at all?
10. Comment on the recommendation to avoid salt compared to current recommendations.
11. How does the recommendation to limit ALL fluid intake to 7 glasses (6-8 ounces each) compare to current recommendations? What is the research evidence for current fluid recommendations? Think about fluid restrictions in relation to weight gain being limited to 9 pounds.
12. Could a My Plate Diet be followed from the foods on this list? (This is a US dietary recommendation.)
13. Why do think coffee, tea and alcohol aren't addressed on this diet? What are the current recommendations for these beverages?
14. The 1952 diet exhorts women to avoid an excess of sugar. How and why do you think sugar intake increased in North American diets from 1950 to 1980?

Patient's Name _____

Date _____

PREGNANCY DIET

FRUITS: Orange, grapefruit or tomato juice: One glass (6 oz.) daily - Or -
Fresh fruit in season: One serving daily.

VEGETABLES: Two cups (12 oz.) of cooked vegetables daily.

Fresh green leafy vegetables and other highly colored vegetables
in the form of a salad: One cup in amount using any dressing
desired -- once daily.

FATS: Butter: Eat 3 squares daily, or not more than 1 tablespoonful
of oil.

CEREALS: Any of the whole grain cereals, either hot or cold, at least 1
serving daily. One piece of whole wheat bread may be substituted
for one serving of cereal.

EGGS: At least 2 or 3 eggs daily -- more if desired.

MEATS: At least 8 to 10 oz. daily of lean meat, fish, chicken, turkey
and particularly liver and other organ meats.

BREAD: Whole wheat: Not more than 3 slices daily.

SKIMMED MILK: Three glasses daily are sufficient.

DESSERTS: Cheese, jello, junket, custards, fruits and fruit-whips.

POTATOES	NOODLES)	
SPAGHETTI	CORN)	
MACARONI	LIMA BEANS)	Not to be eaten at all
RICE	DRIED BEANS)	(Highly seasoned
PASTRIES	ICE CREAM)	(or spiced foods)
NUTS	CANDY)	
FRIED, FATTY & GREASY FOODS)	

LIQUIDS: Do not drink more than 7 glasses in 24 hours. (This is to include
all milk, water, fruit juices, soup, coffee, tea, cocoa or any
other liquids.)

AVOID SALT AND SALTY FOODS AND AN EXCESS OF SUGAR

IT IS VERY IMPORTANT THAT YOU EAT 5 OR 6 SMALL MEALS RATHER THAN 2 OR 3 LARGE ONES

VCM Tablets (Stuart) -- Directions: One tablet with each meal.

B. E. Cole, Jr., M.D.