

## Food safety rules and listeria risk foods during pregnancy



### Why Listeria matters in pregnancy

*Listeria monocytogenes* is a bacterium found in soil, water, animals, and food-processing environments. Unlike many foodborne pathogens, it can survive and grow at refrigerator temperatures. This makes it especially relevant to refrigerated ready-to-eat foods that are stored for days, handled after cooking, or eaten without further heating.

Pregnancy involves complex immune adaptations that support fetal tolerance but can also increase vulnerability to certain infections. Listeriosis in the pregnant person may cause mild fever, muscle aches, nausea, vomiting, diarrhea, or a flu-like illness; in some cases symptoms are subtle. The concern is that the organism can cross the placenta and cause fetal or neonatal infection. Reported complications include miscarriage, stillbirth, preterm birth, and serious newborn infection.

This does not mean that every exposure causes illness. Listeriosis remains relatively rare. However, because the potential consequences can be serious and prevention is practical, food safety recommendations during pregnancy are intentionally cautious.

## **Core food safety rules to use every day**

Food safety in pregnancy is built on a few principles: keep cold foods cold, hot foods hot, avoid prolonged room-temperature storage, prevent cross-contamination, and heat higher-risk foods thoroughly when appropriate.

Keep the refrigerator cold. Aim for a refrigerator temperature at or below 4-5 °C, depending on local guidance, and use a refrigerator thermometer if possible.

Follow the two-hour rule. Perishable foods should not sit at room temperature for more than two hours. In hot conditions, such as outdoor meals or warm kitchens, a shorter window may be safer.

Use food by the use-by date. Use-by dates are particularly important for chilled ready-to-eat foods because *Listeria* risk increases with time, even under refrigeration.

Reheat selected ready-to-eat meats until steaming hot. Deli meats, cold cuts, and hot dogs should be reheated until steaming hot before eating during pregnancy.

Separate raw and ready-to-eat foods. Use separate cutting boards or wash them thoroughly between raw meat, poultry, seafood, unwashed produce, and foods that will be eaten without cooking.

Wash hands and surfaces. Handwashing after handling raw foods, wiping refrigerator spills promptly, and cleaning knives, boards, and counters reduce transfer of bacteria.

These steps also reduce risk from other pathogens, such as *Salmonella*, *Campylobacter*, and certain strains of *E. coli*, which are also relevant in pregnancy.

## **Listeria risk foods to avoid or handle with special care**

Many *Listeria*-related recommendations focus on foods that are refrigerated, ready to eat, moist, and stored for a period of time. Risk varies by country, production standards, and product handling, so local public health advice and your clinician's guidance matter.

Unpasteurized milk and foods made from unpasteurized milk. Avoid raw milk and cheeses or dairy products made with unpasteurized milk. Pasteurization is a

heat process designed to kill harmful microorganisms.

Soft cheeses made from unpasteurized milk. The key issue is pasteurization status. Check labels carefully; if you cannot confirm pasteurization, choose another option.

Refrigerated pâtés and meat spreads. These are considered higher risk because they are chilled, ready to eat, and may support Listeria growth. Shelf-stable canned versions are generally treated differently until opened.

Refrigerated smoked seafood. Products such as refrigerated smoked salmon, trout, whitefish, cod, tuna, or mackerel may carry risk if eaten cold. Smoked seafood may be safer when cooked in a dish until thoroughly hot.

Deli meats, cold cuts, and hot dogs. These can become contaminated after processing. If eaten during pregnancy, reheat until steaming hot immediately before eating.

Chilled ready-to-eat foods. Pre-prepared sandwiches, salads, cooked sliced meats, and some packaged convenience foods require careful attention to refrigeration, use-by dates, and storage time.

For a broader prenatal nutrition perspective, related guidance on foods to avoid and high-risk foods during pregnancy can help place Listeria precautions alongside mercury, alcohol, undercooked foods, and other exposures.

### **Safer swaps that still support good nutrition**

Avoidance advice can feel limiting, especially if many of your usual foods are quick refrigerated options. The aim is to substitute rather than simply remove. Pregnancy still requires adequate protein, iron, iodine, calcium, choline, omega-3 fats, fiber, and energy intake.

Instead of cold deli meat sandwiches: choose freshly cooked poultry, meat, eggs cooked until firm, roasted vegetables, hummus from a reputable source and eaten within date, or deli meat heated until steaming and eaten promptly.

Instead of refrigerated smoked fish eaten cold: choose cooked fish in a hot meal, such as baked salmon, fish cakes cooked thoroughly, or cooked seafood soups and stews. Fish can be an important source of omega-3 fatty acids, so the goal is safe selection and preparation, not unnecessary avoidance of all fish.

Instead of unpasteurized cheeses: choose clearly labeled pasteurized dairy products, pasteurized hard cheeses, yogurt, or milk alternatives that provide appropriate calcium and vitamin D where needed.

Instead of refrigerated pâté: choose freshly cooked lean meats, beans, lentils, nut butters, or other protein-rich spreads that are stored safely and eaten within recommended time frames.

Instead of long-stored leftovers: portion cooked food into shallow containers, refrigerate promptly, and reheat until steaming hot before eating.

If food aversions or nausea make these swaps difficult, ask your midwife, obstetrician, dietitian, or primary care clinician for individualized options. Food safety should support nutrition, not make eating feel impossible.

### **Eating out, takeout, buffets, and shared meals**

Restaurants, cafeterias, workplace refrigerators, potlucks, and family gatherings can be harder to control than your own kitchen. A few practical choices can reduce risk without requiring social isolation.

Prefer foods cooked to order and served hot. Hot meals are generally lower risk than cold ready-to-eat items that may have been held for long periods.

Be cautious with buffets and salad bars. Foods may sit at uncertain temperatures and be exposed to repeated handling. If you do choose buffet foods, select items that are visibly hot and freshly replenished.

Ask about pasteurization. For cheeses, dairy-based desserts, smoothies, and juices, it is reasonable to ask whether ingredients are pasteurized.

Transport food safely. Use an insulated bag with ice packs for chilled foods, especially when commuting or traveling.

Do not rely on smell or appearance. Food contaminated with *Listeria* may look, smell, and taste normal.

For takeout, refrigerate leftovers promptly and reheat them thoroughly. If food has been sitting out during a long meeting, party, or car ride, it is safer to discard it than to gamble.

### **What to do after a possible exposure**

It is very common to realize after eating that a food may have been on a pregnancy caution list. Try not to panic. A single exposure does not mean infection has occurred. The next step depends on the type of food, whether there is a known recall or outbreak, and whether you have symptoms.

Contact your maternity care clinician promptly if you develop fever, chills, muscle aches, diarrhea, vomiting, severe headache, stiff neck, confusion, reduced fetal movements, contractions, or any symptom that worries you. Also contact a healthcare professional if you ate a food later recalled for Listeria contamination or if public health authorities identify an outbreak linked to a product you consumed.

Do not start antibiotics, induce vomiting, or attempt home testing on your own. Clinicians may consider your gestational age, symptoms, exposure history, vital signs, and local public health information when advising next steps. Listeriosis is a medical condition requiring professional evaluation.

### **Building a calm, realistic food safety routine**

Food safety works best when it becomes routine rather than a source of constant anxiety. Consider keeping a refrigerator thermometer visible, labeling leftovers with dates, cleaning the refrigerator weekly, and planning quick safe meals for days when fatigue or nausea makes cooking difficult.

It can also help to share the rules with partners, relatives, housemates, or anyone preparing food for you. Clear requests such as "please heat the deli meat until it is steaming" or "please check that the cheese is pasteurized" are reasonable prenatal safety measures, not overreactions.

If you have additional risk factors, such as immunosuppressive therapy, transplant history, inflammatory bowel disease medications, diabetes, kidney disease, or a prior complicated pregnancy, ask your clinician whether any extra precautions apply. General food safety rules are useful, but personal medical context matters.