

Information for Pregnant Women with a raised BMI Information Leaflet

Women who are overweight are known to be at increased risk of developing problems during pregnancy, delivery and after giving birth.

Rather than just using weight to assess who is at risk, we use BMI (Body Mass Index), which takes into account people's weight and height. It is a nationally recommended way of assessing health issues associated with weight. Internationally, a figure of 19-25 is classified as normal; 25-30 is overweight, 30-40 is obese and over 40 is very obese.

Pregnant women with a BMI of 30 or more are more likely to have:

- Diabetes in pregnancy
- High blood pressure problems
- Difficulties with assessing the growth and wellbeing of the baby
- Caesarean sections
- Complications associated with caesareans or forceps deliveries
- A higher risk of developing clots in the legs or lungs
- Anaesthetic complications

Antenatal Care

Women with a BMI of 35 or over will be referred for consultant-led care and will be offered a glucose tolerance test (GTT) around 28 weeks of pregnancy to assess their body's ability to handle sugars and detect any tendency towards diabetes during pregnancy.

Women with a BMI of 40 or more will also be offered this test and will be referred to consultant led care and an antenatal clinic with a specialist midwife. Ideally women with a BMI of 30 or more should have taken folic acid 5mg up until 12 weeks. Some women may also be prescribed a vitamin D supplement and aspirin during pregnancy.

Scans

Scanning the unborn baby of a woman with a high BMI is technically more difficult as much of the power of the ultrasound waves is absorbed by the mother's tissues. Therefore the images obtained may not be as accurate as those normally obtained. This may mean a reduced ability to detect problems, for instance at the 20 week anomaly scan. Further scans for growth may be arranged by the consultant or midwife, if they are concerned about the growth of the baby as pregnancy progresses. A scan may also be performed at 36 weeks of pregnancy to confirm which way the baby is lying and make a plan for the birth.

Labour and Birth

If you have a raised BMI 35 and above, you may not be suitable for the midwifery led unit and may be advised to give birth on the delivery suite, but this can be discussed with your midwife or doctor. If your BMI is greater than 40, you will be advised to give birth in the delivery suite.

Pain Relief in Labour

There are a number of options available to you for pain relief during labour. These include Entonox ('gas and air'), water (if you are on the Midwife led unit), diamorphine and an epidural. Being overweight can mean there is an increased risk of complications if you have an anaesthetic during labour and birth (epidural or spinal). Therefore, if your BMI is 40 or more, an appointment will be made for you to see an anaesthetist during your pregnancy, who will discuss this with you and make a plan for when you are in labour, should you wish to have an epidural.

Postnatal Care

If you have a caesarean section, recovery following the operation may be slower. You will be given antibiotics when you are in theatre to help prevent any infections. You are also encouraged to get out of bed as soon as possible to help reduce the risk of blood clots developing in your legs or lungs and you may also need to have a daily injection to 'thin' your blood to help prevent this. These injections will be for at least seven days after you have had your baby.

Feeding Your Baby

Breastfeeding gives your baby all the nutrients it need for the first 6 months. Breastfeeding is recommended as the best way to feed your baby. Support to start and continue breastfeeding is available when you are in the hospital after having your baby and when you go home.

Weight Loss after Having Your Baby

After having your baby it is important that you try to lose weight, in order to reduce your BMI. There are a number of weight management services available in your local area that can assist with weight loss. Make an appointment to see your GP, who will be able to advise you on weight management and refer you to services in your local area.

Finally.....

Liverpool Women's Hospital is at the forefront of research into the way that a woman's weight affects her pregnancy. If you attend the specialist antenatal clinic, you may be invited to take part in some research studies that have been set up to develop our understanding of this common problem. Please do not hesitate to ask if you have any particular concerns or for any further explanations with regards to your care.

For more information ring: **0151 702 1126**

www.nhs.uk/start4life/Pages/Welcome-to-Start4Life

www.eatwell.gov.uk

This leaflet can be made available in difference formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at pals@lwh.nhs.uk