

# Losing weight before pregnancy is healthier for mom, baby

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Before she got pregnant in 2014, Lizzy King, 28, of East Lansing, Mich., gave herself a "lifestyle overhaul." She started running and lost 50 pounds. She eschewed processed food and ate her first banana.

King became "hyper-aware of the effects of too much weight gain before and during pregnancy," she said. "That was fuel to keep exercising and turn down that extra bowl of ice cream."

The result: King's pregnancy and childbirth were smooth sailing, her baby is healthy, and she quickly returned her pre-pregnancy clothes.

If only every new mom were this conscientious, doctors would not be alarmed by the effects of obesity on pregnancy. But according to the U.S. Centers for Disease Control and Prevention, 22.1 percent of women giving birth are obese (175-plus pounds for a 5-foot-4 woman) before they become pregnant.

"Obesity can adversely affect fertility, pregnancy, childbirth, postpartum recovery and the baby," said Dr. Raul Artal of the American College of Obstetricians and Gynecologists.

Just getting pregnant can be thwarted by obesity. A common fertility enemy for [obese women](#) is polycystic ovary syndrome, which can disrupt ovulation.

After a woman becomes pregnant, obesity increases her chances of

gestational diabetes, hypertension, preeclampsia, long labor, labor interventions, miscarriage and ultrasound test difficulties.

Obesity can cause macrosomia, having too large of a baby, which in turn ups a woman's chances of having a cesarean section, and that is more dangerous than a vaginal birth.

Anesthesia is more problematic for the obese woman, whether she has a vaginal delivery or C-section.

After pregnancy, the obese mom is more likely to hemorrhage and less able to drop her "baby weight."

Until recently, researchers said children's obesity was primarily a reflection of a family's lifestyle. Now they know Mom's excess pounds also affect the baby's propensity toward obesity by rewiring its brain.

"One way we've learned this is by studying babies born to moms before and after gastric bypass surgery," said Dr. Lisa Neff, an endocrinologist at Northwestern Medicine in Chicago. "The babies born after their moms lost weight have fewer problems associated with obesity themselves."

An obese mom's fetus is "bathed in the hormones leptin and insulin, which control weight," Neff said. "His brain is programmed for obesity by having different appetite set (hungry or full) points."

"These babies have gene mutations that will affect generations to come," Artal added.

The first trimester is especially crucial, according to a 2014 study of 3,000 women by the University of Southampton in England.

In addition to a propensity for obesity, the obese mom's baby is more likely to have a neural-tube or heart defect, be stillborn or suffer birth injuries.

The baby is more likely to be premature, too, according to the Seattle Children's Hospital's Global Alliance to Prevent Prematurity and Stillbirth. Prematurity increases the baby's chances of becoming obese, so a vicious cycle begins.

Obesity in pregnancy is part of a greater societal problem, said Gerald Celente, publisher of the Kingston, N.Y.-based Trends Journal.

"There used to be one fat kid in the class, and, yes, we said, 'fat,'" he said. "Now we have a generation of fat people who have grown up on junk food, with sedentary lifestyles."

Obesity is part of the "I don't care" trend, Celente said. "The loss of pride and self-respect is endemic."

The blame has shifted from "personal responsibility" to "a community problem," according to a 2014 study of 38,625 adults and 3,518 health-care professionals, said co-author Diana Thomas, director of the Center for Quantitative Obesity Research in Montclair, N.J.

Preceding the shift, Thomas noted, was the American Medical Association's classification of obesity as a "disease" in 2013.

Fortunately, intervention helps. Obese pregnant women who participate in intensive nutritional diets and exercise in their first trimesters are less likely to gain excess weight or have macrosomia, C-sections, preeclampsia or hypertension than peers with standard prenatal care, according to a 2014 study by the Capital Medical University in Beijing.

It's all about education - not just for pregnant women but also for the medical community, Neff said.

The obese woman should view pregnancy as "a great window of opportunity to learn from her doctor and make changes," said Michael Goran, director of the University of Southern California's Childhood Obesity Research Center.

### **Consider these tips**

First, achieve mental health. Liza Vismanos, 36, of Los Angeles, worked with a trainer to get "in shape physically mentally and spiritually" pre-pregnancy, she said. During pregnancy, she "gained weight gracefully. Afterward I lost it because I had gone from the crazy cardio exerciser to calm."

Consult the scale. A normal-weight woman, for example, should gain 25 to 35 pounds during pregnancy, depending on her height, according to the American College of Obstetricians and Gynecologists. Obese women should gain 11 to 20 pounds.

Listen to your body. "Just as you stay away from alcohol and sushi, stay away from sugary beverages, too," Goran said. Pregnancy is not a time to indulge, according to Artal. "Just continue to exercise and eat well," he said.

Include your partner in your exercise-and-diet team.

Ignore websites that urge you to dismiss doctors' warnings, King said. "It's fine to be 'bold and beautiful,' if it's just you, but it's not fair to the baby," she said.

Use an activity device that reminds you to "keep active all day," Neff

said. "Take the stairs, get off the bus a stop early, park in a farther spot."

Aim for a realistic weight-loss goal, Neff said. "Even five or 10 percent can significantly affect your pregnancy," she said.

Take an online exercise class from an instructor who has been there, done that, like Kelly Coffey, 35, of Northampton, Mass., who became a personal trainer after having gastric-bypass surgery, then having children.

Bottom line, we have only begun to understand the effects of [obesity](#) on [pregnancy](#), the doctors said.

It's no longer just about losing your post-prego baby bump. "It's about taking charge of your health for the sake of your baby," Coffey tells her students. "Lose the weight now, before you get pregnant, or I'm going to tell you to do it before you have another baby."

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