

Prepregnancy, obesity and gestational weight gain influence risk of preterm birth

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Researchers at Boston University School of Medicine's (BUSM) Slone Epidemiology Center and Boston University School of Public Health (BUSPH) have found that pre-pregnancy obesity and gestational weight gain are associated with an increased risk of preterm birth in African American participants from the Black Women's Health Study. This study currently appears on-line in *Epidemiology*.

A baby born at less than 37 weeks of gestation is considered preterm. This occurs more often among black women than white women and is a leading cause of infant morbidity and mortality in the United States. Obesity is associated with intrauterine infections, systematic inflammation, dyslipidemia, and hyperinsulinemia, all of which may increase the risk of preterm birth.

In order to investigate the relations of preterm birth with prepregnancy obesity and gestational weight gain, the BUSM researchers used data from the Slone Epidemiology Center's Black Women's Health Study. They compared mothers of more than 1,000 infants born three or more weeks early with mothers of more than 7,000 full-term infants. They examined two types of preterm birth: that indicated for medical reasons (medically-indicated) and that occurring for no known reason (spontaneous).

The researchers found that obesity increased the risk of medically-indicated preterm birth and very early spontaneous preterm birth (



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