



Annex 1 - Guidelines

Management of Obesity in Pregnancy

BMI $\geq 30\text{Kg/m}^2$

- 5mg folic acid daily from 1 month pre-conception till week 12
- Vitamin D 10mcg daily during pregnancy and breastfeeding
- Omit anti-obesity/weight loss medications
- Dietician Referral
- OGTT
- Re-weigh in 3rd trimester
- Discuss mode of delivery in 3rd trimester
- Active 3rd stage of labour
- $>2\text{cm}$ of subcutaneous fat requires suturing of subcutaneous tissue
- Consider antepartum & postpartum thromboprophylaxis
- Antibiotic prophylaxis at time of LSCS

BMI $\geq 35\text{Kg/m}^2$

All of the above PLUS
Serial assessment of foetal size using ultrasound
If ≥ 1 Risk Factor¹;
Aspirin 150mg daily from week 12 to birth

¹Risk Factors;

Primigravida

Maternal age >40 years

Family history of Pre-eclampsia

Multiple Pregnancy

Pregnancy interval of $>10\text{yrs}$

BMI $\geq 40\text{Kg/m}^2$

- All of the above PLUS
- Bariatric Bed Booking if mother weighs $>135\text{Kg}$
- Obstetric Anesthetist Referral
- Tissue Viability Referral
- Venous access established early in labour + Second Cannula

Annex 2 - Educational Leaflet

Obesity in Pregnancy

This information is for you if you are overweight and planning to have a baby, expecting a baby, or have given birth recently.

What is Body Mass Index (BMI)?

The BMI is calculated by measuring your weight and height. The BMI will give us an indication whether there is an increased risk of developing complications during pregnancy.

Classification	BMI (Kg/m ²)	Risk
Ideal weight	18.5 - 24.9	Average
Overweight	25 - 29.9	Mildly Increased
Obese	>30	Increased

When Will My BMI be Calculated?

Your BMI will be calculated during your first antenatal appointment and during the last 3 months of your pregnancy.

What are the Risk Factors of a High BMI in Pregnancy?

Gestational Diabetes Mellitus: High blood sugar levels first diagnosed during pregnancy. You will be offered a test called OGTT to check for diabetes. If the test is positive, you will be referred to a diabetes specialist for further treatment.

High Blood Pressure & Pre-eclampsia

Your blood pressure and urine will be checked regularly during every appointment. The risk of pre-eclampsia is further increased if;

- You are over 40 years
- This is your first pregnancy
- Had pre-eclampsia in a previous pregnancy
- Your blood pressure was already high before the pregnancy

If you have these or other risk factors, your doctor will advise you to take a medicine called aspirin.

Thrombosis

The formation of blood clots in the legs or in the lungs. Your risk of thrombosis will be evaluated during the first antenatal appointment. If the risk is high, you will be offered

clexane injections.

Additional Appointments

If your BMI is over 30, you will be referred to a Dietician to advise you on healthy eating. If your BMI is over 40, you will be referred to an anesthetist who will discuss with you the options of pain relief during labour.

What Can I do to Reduce the Risks?

Healthy Eating: Losing a huge amount of weight during pregnancy is not recommended. However, it is best if you follow a healthy diet and try not to gain weight during pregnancy.

Exercise: It is recommended to exercise 15 minutes 3 times a week and increase this gradually to 30 minutes every day. Some recommendations include swimming, walking and yoga. Avoid contact sports, sports where falling is likely and exercises which require long periods of time lying on your back.

Folic Acid: It is recommended to take 5mg folic acid daily from 1 month before the pregnancy till the 12th week of your pregnancy. If you have not started taking it early, there is still a benefit from taking it as soon as you find out you're pregnant.

What Happens After Birth?

Prevention of Thrombosis: The risk for thrombosis continues after birth. Try to be active as soon as you feel comfortable, your doctor may tell you to wear compression stockings and you may be given clexane injections for a few days after birth.

Prevention of Wound Infection: Being obese makes you more susceptible to a wound infection postpartum. You may be given antibiotics during the birth and for a few days after.

Breastfeeding: You will be encouraged to breastfeed your baby. However, this is ultimately your decision. If you choose to breastfeed, the midwives will offer their help and support even after you and your baby are discharged from hospital.

Healthy Lifestyle: It is important to continue following a healthy diet and exercise regularly. It is advisable to lose weight if you are planning to get pregnant.