Pregnancy in the Obese Woman

Clinical Management

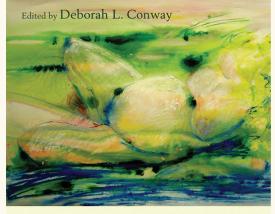
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الحمل في المرأة البدينة

العلاج السريري

المحرر: ديبورا كونواي





epidemic proportions. Although the prevalence is highest in developed countries, obesity has become an important health issue in many developing countries, often coexisting with undernutrition.

Concomitant with the increased rates of obesity in the general population, rates during pregnancy have also escalated, and obesity is now a common high-risk obstetric condition. Information is limited on the prevalence of overweight and obesity during pregnancy in various countries. According to this book, the reported prevalence of maternal obesity in different cities and states of the USA ranged from 10% to 26%.

Obesity is not only a health issue, but also has economic consequences. Total costs involve both direct costs related to medical expenditure on obesity-related diseases (including type 2 diabetes, cardiovascular diseases, several types of cancers and musculoskeletal disorders) as well as indirect costs related to absenteeism, reduced productivity, and disability. Studies from many countries have reported on the substantial and increased economic burden of obesity. Recognition of this problem has led to an explosion of research into causes and solutions, from the genetic to the population level and all points in between.

The pregnancy care of obese and overweight women provides a unique set of challenges. Excess weight affects fertility, pregnancy, delivery and the postpartum period. A specialised knowledge base and skill set are required to provide competent pre-pregnancy, obstetric and postnatal care to obese women. The aim of this book is to supply this knowledge to busy clinicians facing just such challenges. The reader will find collected in one location information covering every aspect of pregnancy in obese women beginning with the epidemiological scope of the problem and ending with postpartum care. This is the first edition of the book, edited by Deborah L.Conway of the

Department of Obstetrics & Gynecology at the University of Texas School of Medicine,

There is a growing body of evidence to suggest that obese women experience more psychological stressors and psychological disorders than normal weight women. In this book, composed of 14 chapters, the second one describes the psychological aspects of obesity in women outside of and during pregnancy and offers pragmatic screening tools for use in clinical assessment during pregnancy.

In addition to the typical obstetrics topics like prenatal care, fetal surveillance and delivery, in chapter 4 the book addresses bariatric surgery (vertical banded gastroplasty and Roux-en-Y gastric bypass). This surgery is recommended for women with a body mass index of 40 kg/m2 or over who have failed at conventional weight loss attempts, have been properly educated and are motivated for surgery. Chapter 5 deals with post-bariatric surgery pregnancy-related complications like hypertensive disorders and gestational diabetes. Caesarean sections are more prevalent in women who have undergone bariatric surgery. However, there is no difference between them and the general population in intra-partum complications like placental abruption, labour dystocia and meconiumstained amniotic fluid. Chapter 5 also covers fetal malformation and birth weight problems like small for gestational age neonates and macrosomia.

The reader will find covered in this book the special considerations needed in prenatal care for obese women and the limitations of ultrasound in anomaly detection as well the difficulty of invasive testing. It also covers late pregnancy and intrapartum care, especially breech presentation and trial of labour in obese women.

Other chapters address the adverse consequences of maternal obesity during pregnancy, as well the adverse effects on child health outcomes later in life such as: child, adolescent and adult obesity; high

blood pressure; metabolic syndrome, and cardiometabolic complications. Chapter 13 focuses on the preparation of the obese pregnant women for surgery and anaesthetic considerations as well antibiotics and pre-operative and post-operative

The last chapter, the most interesting one in my opinion, focuses on how obesity affects breastfeeding and contraception. The various contraception methods are described in detail. Since obesity increases the failure rates of several methods, the book proposes that there is a need for in depth evaluation, which should take into consideration the woman's personal, social, family and medical history.

This book is unique on several scores. It focuses on a problem that has now reached epidemic proportions and uses evidence-based medicine to cover many aspects of obesity in pregnancy in one volume. It is an excellent source of up-to-date information and, in addition, it is very easy to read and digest. Overall, this book is therefore a useful resource for medical students, obstetric residents, and general and high-risk obstetricians.

I will definitely use this book for reference and I highly recommend it to others.

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