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Obesity in obstetrics

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With approximately one in five women presenting as obese or with overweight (Obesity in Romania 2015 study), obesity is one of the greatest challenges to maternity services in both developed countries and those in development. Obesity during pregnancy is associated with an increased risk of overweight children, overweight children being more likely to become overweight or obese adults. The etiology of obesity is multifactorial involving genetic, environmental, socioeconomic and behavioral factors. Identification of risk factors, especially those that can be modified, gives us epidemiological tools for planning intervention measures with positive impact on public health. Evidence suggests that maternal obesity is a risk factor for adverse pregnancy, labor and delivery outcomes and increased health care service utilization at birth, with increased costs. Overweight and obesity in pregnancy are

associated to antepartum stillbirth, large-for-gestational-age with shoulder dystocia, meconium aspiration, diabetes, hypertension, low Apgar scores, congenital anomalies, birth asphyxia and neonatal hypoglycemia. Increased maternal body mass index before conception influences fetal intrauterine growth and their weight, labor and delivery outcomes. There is an association between BMI and the risk of pregnancy complications, active management in labor and at delivery, including labor induction and surgical delivery. Conclusions: Maternal overweight and obesity are associated with increased risks, both for the mother and for the fetus and later newborn, but they are preventable risks. Prenatal care in women with excess weight needs to be individualized to lower the risks, to improve maternal and fetal outcomes and to reduce healthcare services costs.

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