

Gynecology 2017: Does an antenatal educational programme improve maternal outcomes among obese pregnant women in the Kurdistan region of Iraq? - Aveen Hajimam, Hawler Medical University.

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The prevalence of obesity is increasing at an alarming rate, across all populations and age groups. Estimates suggest that 20% of girls are going to be obese by 2025—a sobering statistic, particularly considering that obesity during pregnancy increases risk of adverse health outcomes to both mother and child. What's more, obesity during pregnancy increases the risk of life-long health problems in children, including obesity, type 2 diabetes, and heart disease. Obesity is a major public health problem worldwide. The World Health Organization estimated that 11% men and 15% women of the world's adult population were obese in 2014. The strong increase in obesity prevalence also affected women of reproductive age. Over time, studies from the US and UK showed an increase in maternal obesity at the start of pregnancy from approximately 10% around 1990 to approximately 16-22% in the early 2000s. Maternal pre-pregnancy obesity and excessive gestational weight gain are important risk factors for multiple adverse fetal outcomes. Several large meta-analyses have shown that a higher maternal pre-pregnancy or early pregnancy BMI is associated with increased risks of fetal death, stillbirth, neonatal death and the development of various congenital anomalies. Thus far, increased gestational weight gain seems not to be associated with fetal death or still birth. To date, the obesity prevalence rate in pregnant women is estimated to be as high as 30% in Western countries. In these countries, an even higher percentage of women gain an excessive amount of weight during pregnancy based on the US Institute of Medicine (IOM) guidelines, which define optimal ranges of maternal weight gain during pregnancy according to a mother's pre-pregnancy body mass index (BMI) as per evidence from observational studies. An accumulating body of evidence suggests that maternal obesity and excessive weight gain during pregnancy are not only associated with adverse maternal and fetal pregnancy outcomes, but also have a long-term adverse influence on common health outcomes in the offspring.

Maternal obesity is associated with health risks for mother and new-born. Obesity during pregnancy has increased dramatically in Iraqi Kurdistan. The aim for this study is to assess the influence of an educational program on the maternal pregnancy outcomes of obese

women attending primary health centres in a large city in the Kurdistan region of Iraq. A randomized controlled trial was undertaken. 292 pregnant women who attended one among three health centres for his or her antenatal care before 20 weeks gestation were recruited to the study. 99 women were recruited of normal weight women were of normal weight with a BMI of 20-25Kg/m², (baseline group), 96 women had a BMI \geq 30 and were randomised to receive normal care (control group) and 97 obese women were allocated to received normal antenatal care and invited to participate in an antenatal education programme (intervention group). Maternal outcomes measured were gestational weight gain during pregnancy, pregnancy induced hypertension, Gestational Diabetes Mellitus and duration of pregnancy. Obese women were older and were more likely to possess had more pregnancies than normal weight women. Regarding maternal outcomes there was no statistically significant difference among the three groups regarding pregnancy induced hypertension, and fetal age at onset of labor. In reference to Gestational DM findings indicated that the prevalence of Gestational DM was reduced among those obese women who received the tutorial programme compared to the control and baseline groups. In addition all obese women (intervention and control groups) had a statistically significant lower weight gain in pregnancy compared to baseline group. The antenatal education programme made a little difference to maternal outcomes. One factor which can have affected the results of this study was the low attendance rate among women who were randomized to receive the education programme. A higher rate of attendance at education classes may have improved outcomes in others areas.

Biography:

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