



Pregnancy risk in overweight glucose tolerant women

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Objective

The prevalence of obesity amongst women in childbearing age is rising worldwide and has important implications for obstetric care. The aim of this study was to assess the prevalence and impact of overweight glucose tolerant women on maternal, peripartum and neonatal outcomes.

Methods

Fifty pregnant women between 18 and 45 years of age with singleton pregnancy were included in the study. They were negative for 75g oral glucose tolerance test performed between 24 and 28 gestational weeks and followed until delivery. Women were categorized into 2 groups according to their body mass index (BMI): normal $n=25$ (BMI 18.5-24.9 kg/m²) and overweight $n=25$ (BMI 25-29.9 kg/m²). Between the two groups we compared sociodemographic factors, history of spontaneous abortions, incidence of hypothyroidism and hypertensive disorders of pregnancy, mode of delivery and neonatal outcome.

Results

Both groups were comparable in age, education, nationality, incidence of hypothyroidism, hypertensive disorders of pregnancy and neonatal outcomes. Overweight women had a higher risk of spontaneous abortions and delivery by cesarean section (20% vs. 0% and 56% vs. 32%, $p<0,05$, respectively). BMI was significantly correlated with history of previous abortions and delivery by cesarean section ($r=0,322$, $p<0,05$ and $r=0,284$, $p<0,05$, respectively). Prevalence of cesarean section was significantly correlated with maternal age and hypertension in pregnancy ($r=0,50$, $p<0,01$ and $r=0,32$, $p<0,05$, respectively).

Conclusion

Overweight women have increased risk of adverse pregnancy outcomes. Therefore effective preventive strategies are needed.