Influence of pre-pregnancy BMI on gestational outcome: a retrospective study
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Aim
Analyse the association between pre-pregnancy BMI and different items of gestational outcome

Results
Pre-existing obesity has an impact on the mode of delivery. Especially obese primiparous are more than twice as likely to have a secondary C-section than normal weight primiparous (OR 2.43; p < 0.001, KI95% 1.91-3.09). There is a higher risk for macrosomia (OR 2.11; p< 0.001; KI95% 1.76-2.52). Obese women have a extremely higher risk of developing gestational diabetes (OR 5.99;p<0.001; KI95% 4.97-7.21) and pregnancy induced hypertonia (OR 8.26; p < 0.001; KI95% 5.59-12.22). There is no difference in the rate of premature birth in our study group.

Materials and methods
A retrospective study of 15’074 patients delivering at a Swiss perinatal centre including 1’046 obese patients with a BMI > 30.0 (8.6%) and 12’855 with a BMI between 18.5-29.9 from 2005 to 2015. Following items were analysed: mode of delivery, gestational age, gestational weight and pregnancy complications.

Discussion
Both primiparous and multiparous should be motivated to attain a normal BMI before pregnancy. In addition to all other negative impacts of obesity young women should be informed of the risks associated with gestational outcomes. Pregnant women with a BMI > 30.0 should be motivated to prevent a gain of weight > 8kg.