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## **Obesity in Pregnancy: Contribution to Adverse Pregnancy Outcomes**

In recent years, the global prevalence of overweight and obesity has increased rapidly, contributing significantly to the incidence of chronic disease. This increase in the prevalence of overweight and obesity also affected women of reproductive age. 50% of women of childbearing age are overweight or obese. 18% are obese at the beginning of pregnancy. In the United States and Europe, 20-40% of women gain more weight than recommended during pregnancy. Although the exact mechanism of the negative effects of maternal obesity on the mother and fetus is not known, there are various interactions between genetics, environmental factors, mother and fetus. Obesity is associated with an increased risk of almost all pregnancy complications, and complications such as gestational hypertension, preeclampsia, and gestational diabetes mellitus are more common in women with a normal body mass index. Obese women are also at higher risk of metabolic syndrome in the future, as they are at higher risk of excess weight gain during the gestational period. Risks such as prematurity, stillbirth, spontaneous abortion, macrosomic baby (>4000 g) and large for gestational age baby are increased in an obese pregnant. In addition, obesity can cause spontaneous pregnancy loss and congenital anomalies such as cleft lip, diaphragmatic hernia, cardiac and gastrointestinal anomalies during early pregnancy. In the postpartum period, obese women have an increased risk of venous thromboembolism, depression and breastfeeding problems. Weight gain in the postpartum period increases future cardiometabolic risks and preconceptional obesity in subsequent pregnancies. In conclusion, being overweight during pregnancy increases the burden of health care and contributes to significant obstetric complications. It is recommended to plan effective interventions to reduce the prevalence of overweight and obesity in pregnant women.

## Biography

She completed her undergraduate and graduate studies at İnönü University. She worked as a midwife for a while, then she started to work as a Research Assistant at the Faculty of Health Sciences of İnönü University. Esra Karataş Okyay, who continues her doctoral education has articles on pregnancy, childbirth and women's health and presentations in congresses. She has attended various courses related to her field. She has memberships in professional organizations related to its field.

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