

How a raised body mass index (BMI) might affect your pregnancy and birth

The body mass index (BMI) is a measure that uses your height and weight to work out if your weight is in what is considered a 'healthy' range. Your BMI has been noted as above this range, and this leaflet will explain how that might affect your pregnancy and your birth. We will look at the risk of complications, how it will affect your care and what impact your BMI has on choices you will make during your pregnancy.

Introduction

Your BMI classification may have come as a surprise to you, medically your midwives and doctors may talk about your BMI using the terms 'obese' or 'morbidly obese.' In this leaflet we will talk about a 'raised BMI' being anything over a BMI of 30, and give information based on how raised your BMI is.

You can find more about how BMI is measured here: <https://www.nhs.uk/common-health-questions/lifestyle/what-is-the-body-mass-index-bmi/> Please read this leaflet in full to understand the increased risks, and speak to your midwife or doctor if you'd like to know more. With all complications we will talk about the 'risk' or likelihood of the complication happening, this percentage or figure is based on national statistics and is not personal to you. Your BMI will be part of the overall risk assessment which looks at you as an individual.

We do not recommend dieting in pregnancy. The best way to look after yourself and your baby/babies is to not gain excessive amounts of weight during your pregnancy, attend all your antenatal appointments and get the care you need. Your healthcare team can, if needed, talk to you about healthy eating and physical activity during pregnancy.

What are the risks with a raised BMI?

Around 1 in 5 women¹ have a BMI of over 30 at their booking appointment. Most will go on to have a straightforward pregnancy and have healthy babies. Having a raised BMI does slightly increase your risk of complications^{2a}. The higher your BMI the higher those risks.

The table below shows some of the complications which have been noted. Remember that your healthcare team are here to help manage these risks with the necessary monitoring and care:

Complication	Risk if BMI is below 30	Risk if BMI is above 30	What we do to help manage that risk
Miscarriage in early pregnancy ²	1 in 5 (20%)	1 in 4 (25%)	Sadly, nothing can be done to prevent miscarriage
Gestational diabetes ² – 3-4 times as likely	2.3 in 100 (2.3%)	9.5 in 100 (9.5%)	Glucose tolerance test at 24-28 weeks and if positive support to control your blood sugars through eating the right food or using blood stabilising medication (metformin or insulin)

High blood pressure and pre-eclampsia ² - 2-4 times as likely	Hypertension 1 in 10 (10%) Severe pre-eclampsia 1 in 100 (1-2%)	1 in 5 (20%)	Blood pressure checks at every appointment. If right for you, you may be asked to take a low dose of aspirin from week 12 onwards to thin the blood and help prevent pre-eclampsia
Neural tube defects - problems with the development of the baby's skull and spine ² – twice as likely	1 in 1000 babies (0.1%)	2 in 1000 – BMI over 30 (0.2%) 3 in 1000 – BMI over 40 (0.3%)	Anomalies scan at 20 weeks and it may be suggested to take a higher dose of folic acid (5mg) which can be prescribed, or bought over the counter
Bigger babies (over 10lbs/4.5 kgs) ² – twice as likely	7 in 100 (7%) with BMI 20-30	14 in 100 (14%)	Additional scans as needed to monitor babies growth. Larger babies have an increased chance of shoulder dystocia (their shoulders becoming stuck during birth ³)
Stillbirth or neonatal death ² – 4 times as likely	1 in 200 (0.5%)	1 in 100 (1%)	A combination of all of the above

Possible related increased risks

There are other documented risks during pregnancy, which increase as your BMI increases, or because of the increased risk factors mentioned above. Please find full information on these using the 'increased risk' references at the end of this document.

Please also be aware that you must seek urgent medical attention if you experience any chest pain which radiates to your left arm or jaw as this may be a sign of heart disease.

Thrombosis There is also a small risk in pregnancy (1-2 in 1000) of blood clots in your legs (venous thrombosis) or lungs (pulmonary embolism). This risk increases with your BMI and other risk factors, and you may be recommended daily injections of blood thinners.

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Please ask if you need this information in another language or format.

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