



Intra-partum issues in obesity

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Obesity during pregnancy is associated with numerous maternal and perinatal risks. The risk of problems increases with increasing degrees of obesity. Managing these problems, and potentially reducing their risk, can pose a challenge to the obstetrical provider. The prevalence of obesity in reproductive aged and pregnant women varies widely depending upon the definition used, year, and characteristics of the study population, but has increased in concordance with the increased prevalence of obesity in the general population. (31.9% of women of reproductive age).

Intra partum issues in obese pregnant women include increased rate of dysfunctional labor and induction of labor, increased rate of failed trial of labor after cesarean delivery and cesarean delivery, risk of anesthesia and higher rate of difficult intubation, higher rate of failed labor analgesia requiring a repeat procedure, more inadvertent dural puncture, a higher frequency of multiple attempts at placement, and higher rates of hypotension and fetal heart rate decelerations, shoulder dystocia and related complications.

Postpartum Issues include spending more days in the hospital postpartum and prolonged hospitalization due to postpartum complications which led to increased health care costs, higher risk for postpartum infection (wound, episiotomy, endometritis), regardless of mode of delivery and despite use of common prophylactic antibiotic regimens, increased risk for a major postpartum hemorrhage, increased risk of failure to initiate lactation and decreased duration of lactation, and higher rate of venous thromboembolism (VTE).