

## Maternity

# Raised BMI (Body Mass Index) in pregnancy - How to stay healthy and safe

### Obesity in pregnancy

Pregnancy is usually a happy and exciting time for many women. Health professionals want to help women so both mum and baby can be safe and well. This leaflet explains why you have an appointment with the hospital's Maternity team, and it will help you understand how being overweight can sometimes make pregnancy difficult.

Gaining some weight while pregnant is normal. Most women gain about 22 to 28 lbs (10 to 13 kg). If a woman is already overweight, gaining more weight can make it harder for her and the baby. It can cause complications during pregnancy or while giving birth.

Most women who are overweight still have healthy pregnancies and healthy babies. Healthcare professionals can work with you to help keep things safer.

If you are overweight, it is best to try to get to a healthy weight before getting pregnant. But if you are very overweight and already pregnant, it is not a good idea to try and lose weight during your pregnancy as this can be unsafe for both mum and baby. Instead, you can try to keep your weight the same by eating healthy good and staying active.

### Important things to know:

- BMI calculation helps show if you are a healthy weight for your height.
- A BMI of 18.5 to 24.9 is healthy.
- A BMI of 25 or more means there could be more risks for you and your baby.
- The higher your BMI, the more risks there are.



## Patient Information

- Some of the risks of raised BMI include thrombosis, gestational diabetes, high blood pressure, pre-eclampsia, induction of labour, caesarean birth, anaesthetic complications, and wound infections.
- A raised BMI also increases the chance of having a miscarriage, giving birth early, having a big baby or having a stillbirth.
- Healthy eating and exercise can help you and your baby feel better and stay healthy.
- **If your BMI is 30 or more, you are advised to take a higher dose of Folic acid (5mg every day)**

### Body Mass Index (BMI)

Your BMI is an indicator of body fat based on height and weight and will be calculated by your booking midwife. It is calculated by dividing the weight in kilograms by the square of your height in metres ( $BMI = \text{weight (kg)} / [\text{height (m)}^2]$ ). All women will be weighed throughout pregnancy to help them track their progress.

### BMI Weight Status

Below 18.5	Underweight
18.5 to 24.9	Normal
25.0 to 29.9	Overweight
30.0 to 34.9	Obese category I
35.0 to 39.9	Obese category II
More than 40	Obese category III

Pregnancy is an ideal time to make changes to your lifestyle, with fast and long-term effects for you and your family. This is especially important if your BMI is more than 30. Obesity is a major risk factor for developing complications in pregnancy and childbirth.

## Patient Information

### The risks linked with obesity include:

<b>Risks for the mother</b>	<b>Risks for the baby</b>
Spontaneous first trimester and recurrent miscarriages	Stillbirth and neonatal death
Gestational diabetes	Prematurity
Increase in interventions in labour, instrumental deliveries, and Caesarean Sections (due to poor progress in labour, difficulties with monitoring the baby's heart rate etc.)	The baby's position may be difficult to identify during the pregnancy or labour
Excessive bleeding after the delivery of the baby	Difficulties in delivering the baby's shoulders
Increased risk of clots in the lung or leg (Venous thromboembolism - VTE) which can lead to serious health consequences	Increased possibility of low blood sugars after birth
Heart problems (Cardiac disease)	Lower breast-feeding rates
Complications from anaesthetic drugs and procedures, leading to admission to Intensive care	Later child obesity
Maternal death or severe illness	

## Patient Information

<b>Complication</b>	<b>Number of births affected (BMI more than 35)</b>	<b>Number of births affected (BMI less than 25)</b>
Post-partum haemorrhage	5 in 100	2 in 100
Unplanned C-Section	14 in 100	8 in 100
Assisted Birth	12 in 100	18 in 100
Large for gestational age baby	14 in 100	7 in 100
Perineal trauma	Women with a BMI more than 30 have a significantly lower chance of 1 <sup>st</sup> and 2 <sup>nd</sup> degree tears during birth	
Gestational Diabetes	Affects around 1 in 20 of all pregnancies. 3 times more likely for women with BMI more than 30	
High BP or pre-eclampsia	Affects 2 to 8 in 100 of all pregnancies. 2 to 4 times higher for women with BMI more than 30	

At your first appointment, your midwife will measure your weight and height and calculated your Body Mass Index (BMI). If it is more than 35, she will refer you to the hospital. The team includes a midwife and a specialist obstetrician.

The aims of the clinic are to provide support, advice, and individualised care, with dignity and respect for your wishes and to achieve a good outcome for you and your baby.

### **Your first appointment with the hospital team**

- During your first appointment with the hospital team, you will either see a specialist midwife or consultant and the following will take place.
- We will ask you about your health and your life to understand more about you.
- You will get advice on eating healthy and staying active.
- We will tell you about support groups and forums that can help you with healthy eating and exercise.
- You will be told to take Vitamin D to help your and your baby's bones grow strong.
- You should also take Folic acid to help your baby grow properly and avoid problems like spina bifida. Based on your BMI, you may need a stronger dose from the doctor.
- From 12 weeks or 28 weeks of pregnancy, you might need to take aspirin to prevent high blood pressure, and blood thinners as an injection. The doctor will decide if this is best for you.
- If you have other health problems, they can usually be managed in the same clinic. If not, you might need a separate appointment with another doctor.
- You will have baby scans at 12 weeks and 20 weeks.
- If your BMI is 25 or more, you'll have extra scans to check how your baby is growing and their position.
- If your BMI is 35 or more, you will be tested for gestational diabetes between 24 and 28 weeks and you will be given a leaflet (Glucose Tolerance Test – GTT) with more information.
- If your BMI is 40 or more, you will also see an anaesthetist who will check your spine and neck to assess suitability for an epidural or spinal and general anaesthesia, if needed. Pain relief options for labour and anaesthesia for a Caesarean Section will also be discussed.
- The safest place for you to have your baby is the Delivery Suite, where midwives and doctors will look after you.
- If you want to have your baby at home or a birth centre, you can discuss this with your consultant. If your birth plan needs more consideration, you will be able to meet with our consultant midwife to discuss and support your choices if you wish.

## Patient Information

- Breastfeeding is the best way to feed your baby. It helps both mum and baby stay healthy. At UHCW, we promote exclusive breastfeeding, and we will give information and support during your pregnancy.
- For more information about healthy eating at this time please ask for a copy of our leaflet 'Eat Well in Pregnancy,' produced by our Dieticians.
- If you need any more information, please ask at your clinic appointment.

The Trust has access to interpreting and translation services. If you need this information in another language or format, please ask and we will do our best to meet your needs.

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