

# Leveraging Action to Support Dissemination of Pregnancy Weight Gain Guidelines: IMPROVING HEALTH CARE FOR WOMEN

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# Preconception Health and Interconception Care

I have no conflicts of interest to declare

# The Reality Check

- It is much less common to see a woman of normal weight at the first prenatal visit than to see an overweight or obese patient
- The post partum visit is under-utilized for addressing concerns, but 70% of women will conceive again AND many will never see a clinician before the next prenatal workup
- The “weigh in” is a stressor



# Well Woman Health and Interconception Health

- Eighty percent of women in the US conceive at least one time (another 10% are trying)
- Seventy percent of women in the US conceive a second time
- Ninety percent of pregnancies have some complication



*Statistical Brief #131 Complicating Conditions of Pregnancy and Childbirth, 2012*

# Obesity

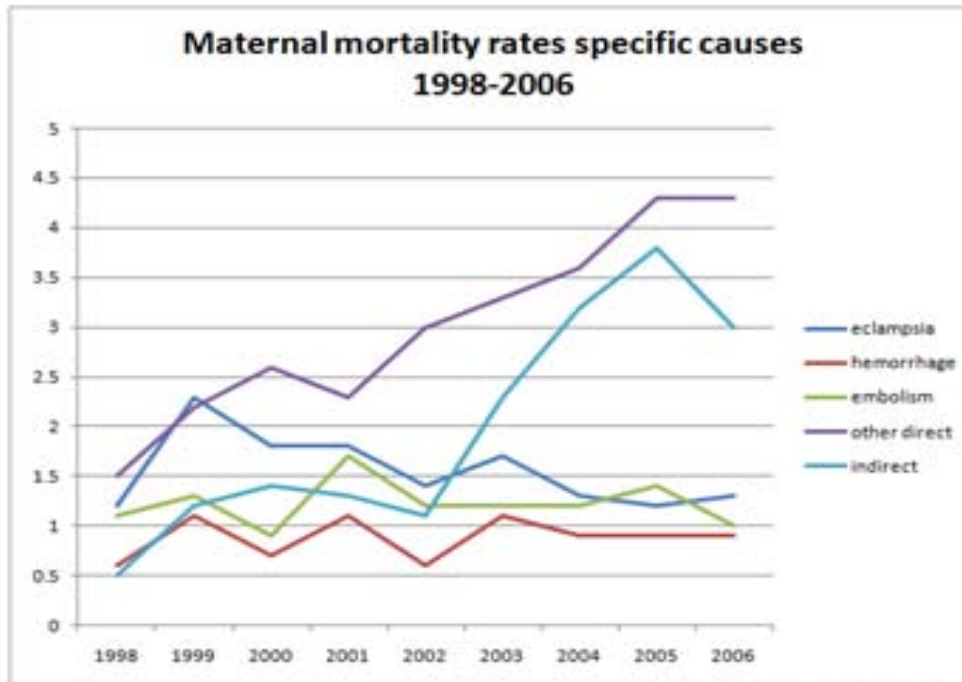
- Some have likened it to solving world peace
- Some have said it's like the tobacco discussions of the 60's
- Everyone acknowledges it is an issue
- Patients have NO concept that it impacts their obstetric risks and outcomes
- Need to balance the perception of "judgment" with the message of empathy



# What is the REAL goal of Preconception Care?



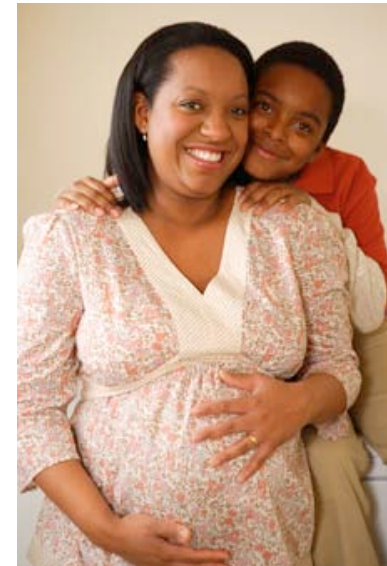
## What is the Ultimate Goal?



<http://www.cmqcc.org/>

# Well Woman Health Care

- Needs a focus on the Life Course Concept
- Needs to focus on Reproductive Health Choices
- Needs to focus on lifestyle choices





# What Does ACOG have to offer?

- Most Obstetrician Gynecologists are members
- ACOG is known for the quality of our clinical care guidelines, effectively creating a national standard of care
- ACOG partners with the American Board of Obstetricians and Gynecologists for board certification: any educational goal can be identified as an ABOG learning objective
- ACOG offers learning options: webinars, meetings, online choices



# ACOG Committee Opinion 2013

- Outlines IOM recommendations for weight gain in pregnancy as a basis for clinical practice
- Recommends BMI calculation at start of pregnancy
- Recommends goal-directed counseling with specific weight recommendations
- Identifies limitation of our knowledge base



# ACOG Committee Opinion

- Women should begin pregnancy at a healthy weight and gain within the guidelines, a goal not previously achieved.
- We must have individualized preconceptional, prenatal, and postpartum care to help women attain a healthy weight, gain within the guidelines, and return to a healthy weight

*We need to share with physicians NOT just the impact of excess weight gain on pregnancy, but the important role in life long obesity*

## Healthy Diet Exercise:

- Frequency
- Intensity
- Timing



# I believe in “Bang for the Buck”



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# How can we engage clinicians?

- Get the ABOG to include weight recommendations and risks of obesity in our certification exams
- Send messages out in our newsletters
- Develop champions in medical groups
- Highlight apps to share with patients
- Increase the publicity so patients and clinicians have a dialogue
- Share studies where there has been an improvement with intervention

# Recommendations from a patient....



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# Walking Prescription

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## Walking

Name: \_\_\_\_\_

Remember to be **FIT**:

**Frequency:** 5 days a week

**Intensity:** Walk and talk

**Timing:** 30 minutes a day

**Recommended activity level:** 150 minutes per week.

**Stop:** If you experience chest pain, excessive shortness of breath, or feel ill. \*

Signature: \_\_\_\_\_

\* If you have an emergency medical condition, call 911 or go to the nearest emergency department. An emergency medical condition is a medical or psychiatric condition that a reasonable person would believe requires immediate medical attention to prevent serious jeopardy to his or her health. For the complete definition of an emergency medical condition, please refer to your Evidence of Coverage.



Walk 150 minutes a week to decrease chances of:

- Type 2 Diabetes ↓58% (with 7% weight loss)
- Depression ↓47%
- Breast cancer ↓20%
- Colon cancer ↓30%
- Heart disease ↓30%
- Stroke ↓25%
- Stress/anxiety ↓30%
- Insomnia ↓40%

**Significantly decreases:**

Some Cancer Recurrence, Osteoporosis, Fatigue, Alzheimer's, and Dementia.

**References:**

<http://www.medicinenet.com/walking/article.htm>  
<http://www.cancer.gov/cancertopics/factsheet/prevention/physicalactivity>  
[http://www.health.gov/paguidelines/Report/G2\\_cardio.aspx#\\_Toc199847815](http://www.health.gov/paguidelines/Report/G2_cardio.aspx#_Toc199847815)  
[http://www.health.gov/paguidelines/Report/G8\\_mentalhealth.aspx#\\_Toc197778613](http://www.health.gov/paguidelines/Report/G8_mentalhealth.aspx#_Toc197778613)

[www.kpwalktothrive.org](http://www.kpwalktothrive.org)

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# Rx for a Healthy Weight During Pregnancy



## Rx for a Healthy Weight During Pregnancy

Pre-pregnancy Weight: \_\_\_\_\_ & BMI: \_\_\_\_\_

Target Weight: \_\_\_\_\_ (at end of pregnancy)

	Pre-pregnancy BMI	Recommended Total Gain (lbs)	Rate of Gain in 2nd & 3rd Trimesters (lbs/week)
<b>Underweight</b>	< 18.5	28–40	1
<b>Normal</b>	18.5–24.9	25–35	1
<b>Overweight</b>	25–29.5	15–25	0.6
<b>Obese</b>	≥ 30	11–20	0.5

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### Tips for prenatal nutrition:

- Eat well balanced meals with a variety of foods
- Aim for 5–7 servings of fruits and vegetables each day
- Be sure to take your prenatal vitamins!
- Don't diet; weight gain is important to your baby's normal growth and development
- Replace any juice you are drinking with water or milk
- Don't eat large fish such as shark, swordfish, king mackerel, and tilefish
- Do eat other kinds of cooked fish, up to 12 ounces per week (wild is better than farmed) or take fish oil
- If you eat tuna, eat light tuna (not albacore) and only 2 meals a week
- Don't eat raw or undercooked meat, chicken, or fish

00900-092 (9-11) REVERSE