

Healthy Weight Gain During Pregnancy: A Clinician's Tool

According to current evidence, women who have direct, supportive, and non-judgmental weight gain discussions with their health care provider are more likely to stay within the recommendations.

Women who gain weight above or below the Institute of Medicine Pregnancy Weight Gain Guidelines are at higher risk for complications during pregnancy and later in life. The risks of gaining too much or too little weight can include

hypertension and diabetes in the mother, and pre-term birth, low birth weight, and macrosomia in the infant. In addition, there is an association with chronic disease throughout life for both the woman and child (including obesity, hypertension, and diabetes). Most of these are due to excessive weight gain. Research shows that 50–70 percent of women are gaining weight above or below the current guidelines.¹ It is not always problematic if a woman gains below Institute of Medicine guidelines.

Table based on 2009 Institute of Medicine Pregnancy Weight Gain Guidelines

| Pre-pregnancy BMI | | Total Weight Gain | 2nd and 3rd Tri. lbs./wk. | 2nd and 3rd Tri. lbs./mo. | Twins |
|-------------------|-----------|-------------------|---------------------------|---------------------------|---------------|
| Underweight | <18.5 | 28–40 lbs. | 1–1.3 lbs./week | 4–6 lbs./month | No guidelines |
| Normal weight | 18.5–24.9 | 25–35 lbs. | 0.8–1 lbs./week | 4 lbs./month | 37–54 lbs. |
| Overweight | 25.0–29.9 | 15–25 lbs. | 0.5–0.7 lbs./week | 2 lbs./month | 31–50 lbs. |
| Obese | ≥30.0 | 11–20 lbs.* | 0.4–0.5 lbs./week | 1.5 to 2 lbs./month | 25–42 lbs. |

*weight gain at lower end of range for women with a higher BMI

Screen

- Determine pre-pregnancy weight and height to calculate pre-pregnancy body mass index (BMI).
- Determine pregnancy weight gain recommendation based on pre-pregnancy BMI and Institute of Medicine guidelines (see table above).
- Plot pregnancy weight gain on appropriate BMI weight gain chart and review: www.cdph.ca.gov/pubsforms/forms/Pages/MaternalandChildHealth.aspx or <http://wicworks.nal.usda.gov/pregnancy/prenatal-weight-gain>
- Assess patient and family weight history (prior pre-pregnancy weight, pregnancy weight gain, weight loss after delivery, family weight pattern) in addition to patient/family medical issues, i.e., hypertension and diabetes.

Assess

- Start with an open-ended question, “As part of our visit, I would like to take a few minutes to talk about weight gain during pregnancy. Tell me what you have heard about weight gain during pregnancy?”
- Then follow up with additional questions like, “How much weight do you expect to gain during this pregnancy?”
- Ask what she is currently doing to support a healthy weight gain and what, if any, diet and exercise changes she has made.
- With busy schedules, medical providers may give advice as the woman talks, but it saves time in the long run to listen closely first, then provide information.

Clinical judgment

After assessing patient's health status, weight gain, diet, and any potential pregnancy issues, the Institute of Medicine expects providers to use professional judgment in assessing individual patients.

For example, low or no weight gain may be adequate for a woman with a pre-pregnancy BMI over 30 who is eating healthy, walking, and has good fetal growth and no other problems.

If weight gain exceeds the guidelines, consider the overall weight gain pattern/trends as well as factors such as multiple gestations and the composition of weight gain (e.g., fluids, tissues).

Do not wait to start the conversation

Waiting until there is a weight gain issue can make the conversation and subsequent behavior change more difficult.

¹ Reference Rasmussen, Kathleen M., Patrick M. Catalano, and Ann L. Yaktine. *New Guidelines for Weight Gain During Pregnancy: What Obstetricians/Gynecologists Should Know*. Current Opinion in Obstetrics and Gynecology 21 (2009): 521-26.

Affirm/Offer/Educate

- Summarize what the woman has told you. Affirm what she is doing well to support a healthy weight gain.
- Ask permission to share:
 - * “I would like to share my assessment and what we know about healthy weight gain during pregnancy. Would that be okay?”
 - * “Based on your pre-pregnancy weight and ___ (health hx/status), a good weight gain for this pregnancy is ___ pounds a week or ___ pounds a month.”
 - * “Gaining outside this range could place you and your baby at higher risk for complications (diabetes, hypertension, problems with fetal growth).” If applicable, add “... in addition to your other risks of ____, ____, and ____.”
- Offer some healthy habits that can help women gain a healthy weight (see Healthy habits sidebar below).
- Promote long-term breastfeeding for infant health and to support postpartum weight loss.

Explore/Assess Readiness

- Assess patient understanding of information and feelings about the information provided: “What are your thoughts about this information?”
 - * Explore your patient’s readiness for adopting healthy habits:
“How important is it that you ___ (*walk at least 3 days a week*), and how confident are you in your ability to ___ (*walk at least 3 days a week*)?”
 - * Try using a readiness scale: “On a scale of 1–10, with 10 being 100% able to ___ (*walk 3 days a week*), how confident are you to ___ (*walk 3 days a week*)?”
- For more information on the readiness ruler, go to:
www.perinatalservicesbc.ca/NR/ronlyres/F4EA410B-E419-47E8-9098-929D9891CF28/0/ReadinessRuler.pdf

Provide/Assist

- Based on her responses, individualize suggestions to the woman’s lifestyle, culture, and behaviors. Support the woman in exploring solutions for change.
- Offer information for her to take home (see Healthy Habits sidebar) and give her Tips sheet (<http://here.doh.wa.gov/materials/pregnancy-weight-gain>).
- Refer women to ParentHelp123 for local resources to help them connect with registered dietitians (RD), WIC, lactation consultants, childbirth educators, Maternity Support Service, mental health, etc.: www.parenthelp123.org/pregnancy
- If you identify nutrition-related problems or risk factors, consider a referral to a registered dietitian for further assessment.

Monitor

- Plot weight gain at each visit and discuss briefly.
- Monitor adequacy and consistency of fetal growth.
- Acknowledge and support patient efforts to improve nutrition and exercise.

Other Provider Resources

- BMI: www.cdc.gov/healthyweight/assessing/bmi/adult_bmi/english_bmi_calculator/bmi_calculator.html
- Institute of Medicine paper on weight gain: www.iom.edu/Reports/2009/Weight-Gain-During-Pregnancy-Reexamining-the-Guidelines.aspx

To download this document, go to:

<http://here.doh.wa.gov/materials/healthy-pregnancy-weight-gain>

For persons with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY 711).

Avoid labels

For example, say:

“Based on your pre-pregnancy weight, you should gain ___ lbs.”

instead of:

“Since you are obese, you should gain ___ lbs.”



Healthy habits for all women

- Limit or avoid sugary drinks – sweet tea, juice, soda, lemonade, flavored coffee drinks.
- Eat meals or snack on a regular basis, including a wide variety of vegetables and fruits. Do not go longer than 3–4 hours without eating.
- Limit how often you eat out each week (1–2 times maximum) and stay away from fried or breaded items and keep sauces on the side.
- Walk, swim, or incorporate other aerobic activity into your life, at least three times a week for 30–45 minutes.

Nutrition:

<http://www.choosemyplate.gov/moms-pregnancy-breastfeeding>

Physical Activity:

www.cdc.gov/physicalactivity/everyone/guidelines/pregnancy.html
and
www.acog.org/~media/For%20Patients/faq119.pdf?dmc=1&ts=20120813T1909573059

Healthy Weight Gain During Pregnancy tips sheet for women:
<http://here.doh.wa.gov/materials/pregnancy-weight-gain>