

Obesity in pregnancy: risks and management

Obesity in pregnancy is associated with serious adverse maternal and fetal effects, including infertility, gestational diabetes, preeclampsia, intrauterine fetal and neonatal death, neural tube defects and many other. Because the prevalence of obesity in pregnancy has been steadily increased over the last few decades, its health impacts are much more serious. According to the World Health Organization, It has been estimated that overweight and obesity affect over 50 million women globally in upper and middle income countries. In the United States, a third of the women are obese and the yearly number of obese pregnant women exceeds 1 million.

Obesity-related hyperinsulinemia and subsequent hyperandrogenemia increase the risk of anovulatory cycles and the chance of conception decreases. Obesity is associated with increased risk of caesarian section, premature placental abruption, perineal tear, puerperal fever, severe puerperal infections, wound healing complications, complications of obstetric anesthesia, postpartum hemorrhage, sepsis, obstetric shock, ICU admission and combined severe maternal morbidity and mortality. Maternal obesity is associated with long term overweight retention and its attendant long term morbidity with diabetes mellitus and cardiovascular risks. Maternal overweight and obesity are associated with increased risks for congenital malformations such as neural tube defects, cardiovascular risks, hydrocephaly, oral cleft and limb reduction anomalies.

In this special issue, leading scientists will be addressing emerging knowledge related to important challenges in evaluating, preventing and managing obesity in pregnancy, with focus on short and long term maternal risks, child risks, congenital malformations and pharmacological and non- pharmacological management.

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