





Certified Nurse-Midwives' Experiences With Gestational Weight Management

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The prevalence of overweight and obesity in the United States and worldwide is reaching epidemic proportions (American Heart Association [AHA], 2014; Bell, 2012). People who are overweight or obese are at a 50% to 100% increased risk of dying of all causes, including coronary heart disease, stroke, and hypertension (AHA, 2014; Centers for Disease Control and Prevention [CDC], 2011). Additional risks from obesity include hypercholesterolemia, gallbladder disease, osteoarthritis, and various cancers such as colon, breast, and endometrial (CDC, 2011).

Approximately one in three women in the United States is currently obese (CDC, 2014), and the incidence continues to increase. About 28% of U.S. women ages 20 to 39 years were obese in 1999 and 2000; this increased to 34% by 2008 (Flegal, Carroll, Ogden, & Curtin, 2010). At this current rate, simple mathematics predicts that approximately half of all U.S. women will be obese (not simply overweight) by 2024 and that most U.S. women will be obese by 2072 (within most of our current children's lifetimes).

Abstract: Excessive gestational weight gain is associated with fetal metabolic reprogramming and subsequent childhood obesity, as well as maternal recalcitrant obesity and its successive morbidities. We conducted a review of the literature and an explorative, descriptive study of the techniques and strategies used by a subset of certified nurse-midwives to help women achieve optimal gestational weight gain. We also identified barriers to this outcome. With more effective management approaches to gestational weight gain, adverse maternal and neonatal health outcomes could potentially be prevented. <http://dx.doi.org/10.1016/j.nwh.2015.12.007>

Keywords: gestational weight gain | gestational weight management | maternal obesity | pregnancy weight gain

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