For women who are pregnant or may become pregnant, it’s especially important. In 2009, the Institute of Medicine (IOM) and the National Research Council (NRC) published new guidelines on weight gain and pregnancy. Health care providers can do a lot to help women learn about and follow the guidelines. Here are key points from the guidelines.
The time before pregnancy and after delivery is just as important as the pregnancy itself.
The IOM/NRC recommendations were based on evidence that a woman’s health and weight before pregnancy and after delivery are just as important as her health and weight during pregnancy because each affects the others. But keep in mind that no matter what a woman’s weight is before becoming pregnant, how much weight she gains during pregnancy is important. A long-term view of the reproductive cycle is critical to a healthy pregnancy as well as to a woman’s long-term health.

One in five American women is obese at the start of pregnancy.
Beginning pregnancy at a healthy weight is the key.
Clear evidence indicates that a woman’s prepregnancy weight is an independent predictor of many adverse outcomes of pregnancy for the woman and her baby. A woman’s body mass index (BMI) at the start of pregnancy also is important for how much weight she should and will gain during pregnancy.

Women who are overweight or obese when they become pregnant have a higher risk of having a C-section. They also tend to retain too much weight after delivery. Mothers who are overweight or obese when they conceive are also more likely to have children who become overweight or obese. Women who are underweight when they become pregnant have a higher risk of having a preterm or low-birth-weight baby.

The best way to begin a pregnancy is with a BMI in the normal-weight category. Health care providers should counsel women about choices for healthy diet and physical activity so that women can be at an optimal weight when they enter pregnancy.
Some weight gain during pregnancy—but not too much—is important.
Some weight gain is necessary for a healthy pregnancy, but more than half of pregnant women gain either too much or too little weight. The recommended weight gain during pregnancy depends on a woman’s weight and BMI before she conceives.

The IOM/NRC recommendations are expressed in ranges rather than as a single number because positive outcomes can occur within a range of weight gains. Moreover, a single number cannot accommodate the many factors, such as age, race/ethnicity, or other factors, that affect pregnancy outcomes. The chart on the next page shows the recommended weight gain for each weight category.
About 50 percent of overweight women gain more than 30 LBS during pregnancy.
TOTAL PREGNANCY WEIGHT GAIN

Prepregnancy BMI

- **Underweight**
  - $<18.5\text{ kg/m}^2$

- **Normal (healthy) weight**
  - 18.5 to 24.9 kg/m$^2$

- **Overweight**
  - 25 to 29.9 kg/m$^2$

- **Obese**
  - $>30\text{ kg/m}^2$

**NOTE:** To calculate BMI, visit [http://www.nhlbisupport.com/bmi](http://www.nhlbisupport.com/bmi)

**Conversion:**
- 28-40 LBS = 12.5-18 KGS
- 25-35 LBS = 11.5-16 KGS
- 15-25 LBS = 7.0-11.5 KGS
- 11-20 LBS = 5-9 KGS

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Returning to a healthy weight after delivery sets the stage for a healthy future pregnancy.
Starting out at a healthy weight and gaining within the recommended range make it easier for women to return to a healthy weight after delivery. Returning to a healthy weight after delivery is good for a woman’s overall health and it puts her on the right track for a healthy pregnancy in the future.

6 months after giving birth

About 50 percent of women retain more than 10 pounds

25 percent retain more than 20 pounds
As a health care provider, what can you do to help your patients achieve a healthy pregnancy?
Work with your patients before they become pregnant so that they enter pregnancy at a healthy weight. Annual well-woman visits are an ideal time to have a discussion about healthy weight.

Working in partnership with your patients is the best way to help women conceive at a healthy weight, gain appropriately during pregnancy, and return to a healthy weight after delivery by

- recording prepregnancy BMI;
- charting weight gain throughout pregnancy;
- sharing the results so that women know how they are doing with their weight gain goals;
- counseling women about healthy choices for diet and physical activity so that they can achieve their goals for weight gain during pregnancy and weight loss afterward; and
- referring women to a dietitian or physical activity specialist, if needed, for extra assistance.

Although a majority of health care providers report counseling women about appropriate weight gain during pregnancy, more than half of women say they received no advice from their practitioner.
Notes
Notes
Additional resources

AMERICAN ACADEMY OF FAMILY PHYSICIANS
www.aafp.org

AMERICAN COLLEGE OF NURSE-MIDWIVES
www.midwife.org  www.ourmomentoftruth.com

AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS
www.acog.org  www.acog.org/for_patients

AMERICAN PUBLIC HEALTH ASSOCIATION
www.apha.org

ASSOCIATION OF WOMEN’S HEALTH, OBSTETRIC AND NEONATAL NURSES
www.ahwhonn.org  www.health4mom.org  www.health4women.org

HEALTHPARTNERS INSTITUTE FOR EDUCATION AND RESEARCH
www.hprf.org

MARCH OF DIMES
www.marchofdimes.com

NATIONAL WIC ASSOCIATION
www.nwica.org

SOCIETY OF MATERNAL-FETAL MEDICINE
www.smfm.org