

OBESITY IN PREGNANCY: RISKS AND MANAGEMENT

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Annotation: Maternal obesity is now considered one of the most commonly occurring risk factors seen in obstetric practice.

Compared with women with a healthy pre-pregnancy weight, women with obesity are at increased risk of miscarriage, gestational diabetes, preeclampsia, venous thromboembolism, induced labour, caesarean section, anaesthetic complications and wound infections, and they are less likely to initiate or maintain breastfeeding. Babies of obese mothers are at increased risk of stillbirth, congenital anomalies, prematurity, macrosomia and neonatal death. Intrauterine exposure to obesity is also associated with an increased risk of developing obesity and metabolic disorders in childhood. This thesis reviews the prevalence of obesity in pregnancy and the associated maternal and fetal complications.

Aim of the study. Recommendations and suggestions for pre-conception, antenatal and postnatal care of women with obesity are presented, and current research in the Uzbekistan and future research priorities are considered.

Objective: Comparative study of the process of pregnancy and childbirth in normal and obese pregnant women. Determine the relationship of complications with the degree of obesity.

Research methods:

1. Calculation of the body mass index of pregnant women
2. Dependence of complications of pregnancy and childbirth on the degree of obesity by correlation analysis.

Venue: Bukhara Regional Perinatal Center.

Data source: the birth histories of 60 women delivered in the Bukhara Regional Perinatal Center in the period from June 1 to September 1, 2023 were analyzed.

Clinical groups: All women examined were divided into 3 clinical groups according to the level of obesity. Group 1 consists of a woman with a BMI of 30.0 to 34.9, that is, with an I degree of obesity; Group 2 - women with the II degree of obesity, whose BMI is 35.0-39.9; 3 clinical group on the III degree of obesity, BMI >40.0.

Medical and social features of clinical groups: 1 group includes 20 women, of which the average age is 26 years. Their 19 women are married, 15 are working, 2 are students. The cure of average body weight during pregnancy is 15 kg.

The 2nd clinical group includes 20 women with an average age of 30 years. All women are married, 18 are working. The average weight during pregnancy increased by 13 kg.

The 3rd clinical group consists of 20 women, their average age is 32 years. All women are married, 17 are working. The average weight gain during pregnancy was 11 kg.

Results.

The study identified the following common complications: 13 women in the first clinical group identified a risk of preterm birth, which was 65% of the total group, with 14 cases accounting for 70% of women in groups 2 and 14 women in the 3rd clinical group, accounting for 70% of the total.

The frequency of delivery by caesarean section was 10 in the 1st clinical group, 13 in the 2nd group and 16 cases in the 3rd clinical group. Thus, the highest incidence of this complication was found in the 3rd clinical group, which accounted for 80% of the total number of women, and the higher the level of obesity, the higher the frequency of incisions.

Premature rupture of the membranes was observed in 8 women in the 1st clinical group, in 11 cases in the 2nd group and in 13 clinical cases in the 3rd group, which reflects the clinical status associated with the degree of obesity.

