Super Obesity: An Obstetricians' Challenge

Dr James Henshaw (O&G PHO), Dr Thangeswaran Rudra (O&G Staff Specialist), Royal Brisbane and Women’s Hospital, QLD.

Introduction:
In 2018 the AIHW reported half (48.6%) of women who gave birth were overweight (26.8%) or obese (21.8%).1 BMI greater than 40 is referred to as morbid obesity and greater than 50 is super obesity.2 A national study in 2010 estimated the prevalence of super obesity as 2.1 per 1000 women giving birth in Australia.3 As a major tertiary institution in Queensland, RBWH is a referral centre for BMI greater than 40, seeing a prevalence of morbid obesity of 21.8 per 1000 and super obesity of 4.3 per 1000 births.

Aim
We embarked on this study to analyse whether there are significantly different outcomes between morbidly and super obese pregnant women.

Methods:
This is a retrospective cohort study of all singleton women who delivered at the RBWH from 2010-2019. The Cohort was subdivided into 3 groups for analysis, a control group (BMI 17-30), morbidly obese (BMI 40-49.9) and super obese (BMI >50). From Jan 2010 to Dec 2019 there was a total of 45261 births.

Results:
83.3% of births included were in the control (n=33751), 2.43% morbidly obese (n=985), 0.48% super obese (n=196). HTN and diabetic disorders increased among the 3 groups. Fetal macrosomia was significantly higher than the control at 5% compared to 21.3% and 24.5% respectively. As the BMI increased mode of delivery by CS increased in both elective and emergency CS:

Conclusion:
The findings of this study demonstrate how poorer obstetric and neonatal outcomes are for pregnant women as BMI increases. There is a significant difference between the outcomes of morbidly and super obese pregnant women. Clinicians and health services should be having management strategies to minimize these risks to the mother and baby.

References: