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Editorial

Overweight and Obesity in Pregnant Women

Sirikanok Klankhajhon*

Department of Nursing, Faculty of Nursing, Naresuan University, Phitsanulok, Thailand

*Corresponding Author: Sirikanok Klankhajhon, Department of Nursing, Faculty of Nursing, Naresuan University, Phitsanulok, Thailand.

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Klankhajhon.

Overweight and obesity is a significant issue globally especially in pregnant women both pre-pregnancy overweight or obesity, and excessive weight gain during pregnancy. Maternal overweight and obesity are defined as excessive fat accumulation or abnormal fat that calculated from pre-pregnancy weight and height as prepregnancy BMI (The World Health Organization (WHO) [1]. The international criterion of maternal overweight is body mass index (BMI) which is range between 25 and 29.9 kg/m² and obesity as the BMI equal to 30 kilograms (kg)/meters squared (m²) or higher. It divided into three classifications associated with increasing health complications: obese class I: BMI range between 30-34.9 kg/m²; obese class II: BMI range between 35-39.9 kg/m²; and obese class III: BMI > 40 kg/m^2 [1,2]. In addition, the Asian criterion of overweight is BMI > 23 kg/m² and obesity is BMI > 27.5 kg/m² [3]. Maternal overweight and obesity tend to have negative impacts on maternal and offspring outcomes as miscarriages, hypertensive disorders, gestational diabetes mellitus (GDM), macrosomia, shoulder dystocia, an increasing rate of caesarean section, fetal distress, perinatal asphyxia, preterm birth, and greater risks of developing cardiovascular diseases in later life including psychological problems and socio-economic issues as stress, high costs of medical care and lack of employee [4]. The Institute of Medicine (IOM) recommended total gestational weight gain based on pre-pregnancy BMI of 6.8-11.3 kg for overweight pregnant women and 5-9.1 kg for obese women. For twins, a gestational weight should be gained 14.1-22.7 kg and 11.3-19.1 kg for overweight and obese women [5]. Therefore, the healthcare professionals in prenatal care should be concerned to screen a prepregnancy BMI, monitor a gestational weight gain week by week

and total gestational weight gain, promote weight management and educate nutrition during pregnancy for pregnant women and their families.

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