

Gestational diabetes, obesity impact pregnancy outcomes

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and birth weight greater than 90th percentile compared to normal/underweight women (64.2 percent of participants) with normal glucose.

"Both maternal GDM and obesity are independently associated with adverse <u>pregnancy outcomes</u>," the authors write. "Their combination has a greater impact than either one alone."

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay) -- Women with gestational diabetes mellitus (GDM) who are obese have significantly higher odds of adverse pregnancy outcomes, according to findings from the multinational Hyperglycemia and Adverse Pregnancy Outcome (HAPO) Study published online Feb. 22 in *Diabetes Care*.

To determine associations of GDM and obesity with adverse outcomes, Patrick M. Catalano, M.D., of Case Western Reserve University at MetroHealth Medical Center in Cleveland, and associates analyzed HAPO data on 23,316 women (average age, 29.2 years) from 15 centers in nine countries who took a 75-g oral glucose tolerance test (OGTT) between 24 and 32 weeks of pregnancy.

The researchers found that obesity, defined as <u>body mass index</u> (BMI) ?33.0 kg/m², and GDM were diagnosed in 13.7 and 16.1 percent of participants, respectively, with an odds ratio (OR) of 2.19 for birth weight greater than 90th percentile for GDM alone, compared with obesity alone (OR, 1.73) and GDM and obesity combined (OR, 3.62). The data showed that women with higher OGTT glucose and maternal BMI had significantly higher odds for newborn body fat, cord serum C-peptide,



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