

Sugary drinks in pregnancy tied to heavier kids later

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obesity," said study author Sheryl Rifas-Shiman. She's a biostatistician at Harvard Medical School in Boston.

However, the study can't prove a cause-and-effect link between an expectant mother's beverage consumption and her child's later weight. The study only showed an association.

For the study, the researchers asked approximately 1,100 pregnant women to report their <u>food intake</u>. These surveys were completed during each trimester of pregnancy. The surveys were done from 1999 to 2002.

Expectant mothers chose from several categories of beverages, including <u>fruit juice</u>, diet soda, sugar-sweetened soda and water. The women were asked to rate, on average, how often they had these beverages.

(HealthDay)—Could a pregnant woman's craving for Once the babies were born, the researchers sugar-sweetened drinks put her child at risk for being overweight later in life?

Once the babies were born, the researchers conducted annual follow-up surveys with the mothers and the children for the next six years.

Maybe, a new study suggests.

Eight-year-olds who drank at least a half of a sugarsweetened beverage each week were about 2 pounds heavier if their moms consumed more than two sugar-sweetened beverages a day during the second trimester of pregnancy, according to the researchers.

The study authors said it appears that mom's consumption of sugary beverages made the difference in the child's weight, not the child's diet.

"There have been numerous observational and meta-analysis [studies] that have linked sugar-sweetened beverages and obesity to non-pregnant adults and children. But our study is novel because it is the first to examine associations of maternal beverage intake during pregnancy with childhood

Once the babies were born, the researchers conducted annual follow-up surveys with the mothers and the children for the next six years. The researchers also conducted in-person visits when the kids were around 6 months, 3 years and 8 years old.

"We found that mothers who consume more sugary beverages during pregnancy had children with higher amounts of body fat, no matter what the kid's intake was," Rifas-Shiman said.

She said she wasn't surprised by these results.

Neither was Dr. Tracey Wilkinson, who is an assistant professor of pediatrics at Indiana University School of Medicine.

"The whole theory about imprinting happening before babies are even born is becoming more mainstream and an accepted theory," Wilkinson explained.



"Even the idea that maternal stress in pregnancy can affect outcomes for infants or children years down the road is becoming more acceptable, proven and evidence-based," she added.

The researchers found no parallels between an expectant mother's beverage intake during the first trimester and a child's weight.

Beverages such as 100-percent fruit juice or diet drinks in mom's diet didn't seem to change a child's weight gain.

According to Rifas-Shiman, the second trimester is when fetal fat is accumulated. That, she said, may be the reason why <u>sugar-sweetened beverages</u> during this time may be an issue.

Wilkinson noted that children who gain extra weight at young ages tend not to grow out of it.

"It is a challenge, and it's really hard for patients once [kids] are overweight to actually make a change in their growth curve trajectory," Wilkinson said.

Rifas-Shiman hopes her research can help change that problem.

"We hope that women avoiding high intake of sugary beverages during <u>pregnancy</u> can be one of the ways to help prevent childhood obesity," she said.

Both Wilkinson and Rifas-Shiman said water is the best thing to drink when thirsty.

"I try to remind families that hundreds of years ago, we only had water," Wilkinson said. "Your body only needs water, and if you can get in the habit of drinking water, then that's the most healthy thing that you can drink."

The study was published online July 10 in *Pediatrics*.

More information: Sheryl Rifas-Shiman, M.P.H., biostatistician, Harvard Medical School and Harvard Pilgrim Healthcare Institute, Boston; Tracey Wilkinson, M.D., assistant professor of

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