

USPSTF recommends counseling for healthy pregnancy weight gain

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gestational age (relative risks, 0.77 and 0.89, respectively). Intervention participants experienced reduced weight gain across all prepregnancy weight categories and had reduced postpartum weight retention at 12 months.

Based on these findings, the USPSTF concludes with moderate certainty that for pregnant persons, behavioral counseling interventions aimed at promoting healthy GWG have a moderate net benefit. The USPSTF therefore recommends that pregnant persons should be offered effective behavioral counseling interventions aimed at promoting healthy [weight gain](#) and preventing excess GWG (B recommendation).

"There are many effective counseling interventions that can help, so clinicians should work with their patients to identify the best fit," task force member Chien-Wen Tseng, M.D., M.P.H., said in a statement.

(HealthDay)—The U.S. Preventive Services Task Force (USPSTF) recommends behavioral counseling interventions to promote healthy weight gain in pregnancy. This recommendation forms the basis of a final recommendation statement published in the May 25 issue of the *Journal of the American Medical Association*.

More information: [Evidence Report](#)
[Final Recommendation Statement](#)
[Editorial](#)

Amy G. Cantor, M.D., M.P.H., from Pacific Northwest Evidence-Based Practice Center in Portland, Oregon, and colleagues conducted a [systematic review](#) of 68 studies to examine evidence on the benefits and harms of behavioral interventions to promote healthy weight gain during pregnancy. The researchers found that gestational weight gain (GWG) interventions were associated with reductions in the risk for [gestational diabetes](#) and emergency cesarean delivery (relative risks, 0.87 and 0.85, respectively), but there were no significant associations observed for risks for gestational hypertension, cesarean delivery, or preeclampsia. GWG interventions were associated with a [reduced risk](#) for macrosomia and large for

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