New Resource from the CDC to Prevent Obesity: Perinatal Implications

Kristen S. Montgomery, PhD, RN

KRISTEN MONTGOMERY is an assistant professor in the College of Nursing at the University of South Carolina in Columbia, South Carolina.

Abstract

Research has identified pregnancy as a trigger to obesity among women; therefore, childbirth educators are encouraged to include the topic of weight gain in their classes. The Centers for Disease Control and Prevention recently published a guide on obesity that may serve as an excellent resource for both educators and their clients.

Journal of Perinatal Education, 13(3), 58–60; obesity, weight gain, pregnancy.

DOI: 10.1624/105812404X1798

Obesity has reached epidemic proportions in the United States. Over 50% of Americans are considered overweight (Body Mass Index [BMI] >25; Whitney & Rolfes, 2002) and 21% of Americans are considered obese (BMI >30; Centers for Disease Control and Prevention [CDC], 2003a, 2003d). Some evidence suggests that women who have experienced pregnancy are susceptible to significant weight gain over time.

As women age, about one-half pound is gained per year between the ages of 25 and 55 years (Whitney & Rolfes, 2002) and each pregnancy adds an additional 2.2 pounds above this amount. Even with these weight gains, many women weigh much more than can be explained by these factors alone (Olson, 2002). Previous research has shown that excessive weight gain in the prenatal period contributes to overweight status in women and the future development of obesity (Harris, Ellison, & Holliday, 1997; Harris, Ellison, Richter, de Wet, & Levin, 1998; Lederman, Alfasi, & Deckelbaum, 2002).

In 2001, 20 states reported obesity prevalence rates of 15% to 19%, while 29 states reported obesity rates of 20% to 24% (CDC, 2003c). The Office of the

Research has shown that excessive weight gain in the prenatal period contributes to overweight status in women and the future development of obesity.

Surgeon General (2003) estimated that in the year 2000 \$117 billion was spent on health-care costs related to obesity.

Because women have identified pregnancy as a trigger to weight gain and later obesity development, providing appropriate interventions is an important factor in helping women manage their weight. Previous research reveals two important triggers for obesity among women: excessive weight gain during pregnancy (Butte, Ellis, Wong, Hopkinson, & Smith, 2003) and pregnancy weight that is not lost within 6 months of the postpartum period (Gore, Brown, & West, 2003; Rooney & Schauburger, 2002). While the perinatal period is a time of adjustment, adaptation, and potential high stress, it is also viewed as a "teachable moment" in which women and families are attentive to health concerns.

A new publication developed by the CDC (2003b) serves as an excellent resource for childbirth educators and other health-care professionals to help women prevent obesity. Titled *Resource Guide for Nutrition and Physical Activity Interventions to Prevent Obesity and Other Chronic Diseases*, the publication provides rec-

Table Obesity Prevention Strategies From the CDC

- Adequate Community Resources
- Energy Balance
- Physical Activity
- 5-A-Day (Vegetables and Fruits)
- Breastfeeding
- Reduced Television Time
- Comprehensive Planning in the Community
- Intervening at Multiple Levels (e.g., Society, Environment, and Individual)
- Social Marketing
- Collaboration among Interested Groups

Note. From *Resource guide for nutrition and physical activity interventions to prevent obesity and other chronic diseases*, Centers for Disease Control and Prevention. 2003. Retrieved February 27, 2004, from <http://www.cdc.gov/nccdphp/dnpa/obesityprevention.htm>.

Providing appropriate interventions is an important factor in helping women manage their weight.

ommended obesity-control strategies with rationale.* The guide was developed by leading experts in nutrition and physical activity and includes strategies with extensive research support in healthy adults. Using individual, community, and environmental approaches, the strategies focus on lifestyle changes (see the Table for a synopsis of obesity prevention strategies). Many of the CDC's recommendations are also relevant to pregnant women.

Because research has identified pregnancy as a trigger to obesity among women, childbirth educators are encouraged to include the topic of weight gain in their classes. The CDC's (2003b) publication on obesity can serve as an excellent resource for both educators and their clients.

References

- Butte, N. F., Ellis, K. J., Wong, W. W., Hopkinson, J. M., & Smith, E. O. (2003). Composition of gestational weight gain impacts maternal fat retention and infant birth weight. *American Journal of Obstetrics and Gynecology*, 189, 1423-1432.
- Centers for Disease Control and Prevention. (2003a). *Obesity trends 1991 to 2001: Prevalence of obesity among U.S. adults, by characteristics*. Retrieved February 27, 2004, from http://www.cdc.gov/nccdphp/dnpa/obesity/trend/prev_char.htm
- Centers for Disease Control and Prevention. (2003b). *Resource guide for nutrition and physical activity interventions to prevent obesity and other chronic diseases*. Retrieved February 27, 2004, from <http://www.cdc.gov/nccdphp/dnpa/obesityprevention.htm>
- Centers for Disease Control and Prevention. (2003c). *U.S. obesity trends 1985 to 2002*. Retrieved February 27, 2004, from <http://www.cdc.gov/nccdphp/dnpa/obesity/trend/maps/index.htm>
- Centers for Disease Control and Prevention. (2003d). *What is BMI?* Retrieved February 25, 2004, from <http://www.cdc.gov/nccdphp/dnpa/bmi/bmi-adult.htm>

* The guide is available on-line at the CDC Web site (<http://www.cdc.gov/nccdphp/dnpa/obesityprevention.htm>) or by contacting CDC's Division of Nutrition and Physical Activity, 4770 Buford Highway, NE, Atlanta, GA 30341-3717 (telephone: 770-488-3717).

Gore, S. A., Brown, D. M., & West, D. S. (2003). The role of postpartum weight retention in obesity among women: A review of the evidence. *Annals of Behavioral Medicine*, 26, 149–159.

Harris, H. E., Ellison, G. T., & Holliday, M. (1997). Is there an independent association between parity and maternal weight gain? *Annals of Human Biology*, 24, 507–519.

Harris, H. E., Ellison, G. T., Richter, L. M., de Wet, T., & Levin, J. (1998). Are overweight women at increased risk of obesity following pregnancy? *British Journal of Nutrition*, 79, 489–494.

Lederman, S. A., Alfasi, G., & Deckelbaum, R. J. (2002). Pregnancy-associated obesity in black women in New York City. *Maternal Child Health Journal*, 6, 37–42.

Office of the Surgeon General. (November 2003). *The Surgeon General's call to action to prevent and decrease overweight and obesity*. Retrieved February 27, 2004, from <http://www.surgeongeneral.gov/topics/obesity/default.htm>

Olson, C. M. (2002, July). *Predictors of postpartum weight retention: Who is at risk and why?* Paper presented at the National Maternal Nutrition Intensive Course, University of Minnesota, Minneapolis.

Rooney, B. L., & Schauburger, C. W. (2002). Excess pregnancy weight gain and long-term obesity: One decade later. *Obstetrics and Gynecology*, 100, 245–252.

Whitney, E. N., & Rolfes, S. R. (2002). *Understanding nutrition* (9th ed.). Belmont, CA: Wadsworth.

The Price of Obesity

This is not a society that pays for prevention. This is a society that pays for a heart attack once you have it. People are reticent about paying for obesity, but the facts are very clear: Obesity is increasing and we have all the diseases that are associated with it... The big message is that obesity isn't even a reimbursable diagnosis, and it's costing a fortune.

— Cathy Nonas, North General Hospital in New York City

A heavy burden on hospitals

The number of Americans who are extremely obese has quadrupled in recent years, a study shows. This presents a challenge to hospitals who aren't equipped to treat the extremely obese who may not fit imaging equipment, operating tables or wheelchairs.

Obese growth rates,
percent of increase 1986-2000

Maternal Concepts
Your maternity specialists!

130 N Public St

Elmwood WI 54740

715-639-4050 or 800-310-5817

Email: sales@maternalconcepts.com

www.maternalconcepts.com

- ❖ Evert-It™ Nipple Enhancer
- ❖ Suckle Cup™ Infant Feeder
- ❖ SuppleMate™ Infant Care I & II
- ❖ SofteN™ Nursing Pads
- ❖ NurtureMates™
- ❖ Lap-N-Lay™
- ❖ Whisper Wear™ Breast Pumps