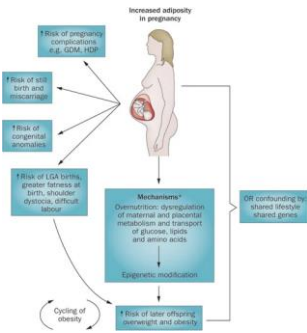
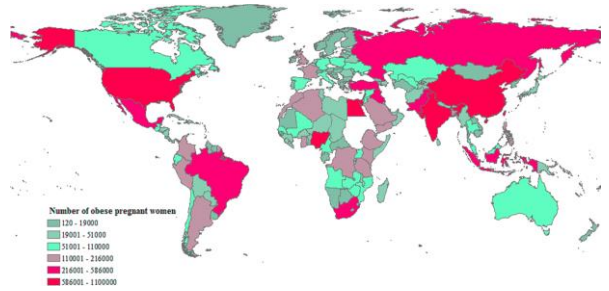


Summary of the associations of maternal increased adiposity with perinatal and long-term offspring outcomes.



Lawlor D. Et al. 2012. Nat Rev Endocrinol 8, 679-688

1

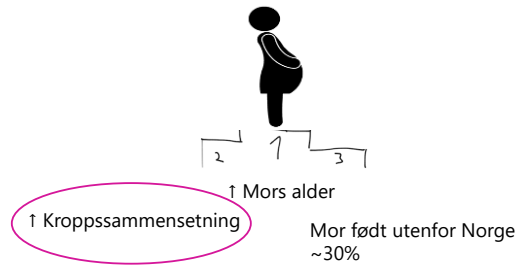


2

Kan vi forebygge overvekt og fedme hos gravide?

Katrine Mari Ove, Forsker PhD
Nasjonalt senter for kvinnehelseforskning
Oslo Universitetssykehus

3



Tall hentet fra Medisinsk fødselsregister, april 2022 <http://statistikkbank.fhi.no/mfr/>

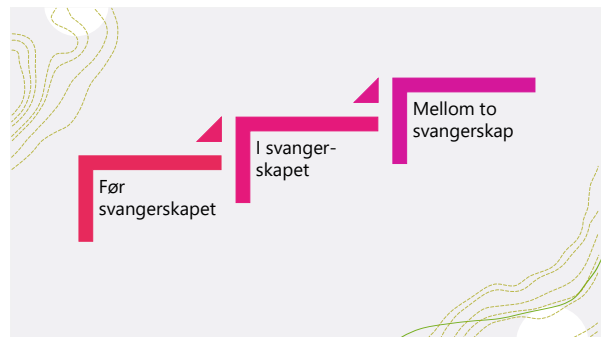
4

Veileder i fødselshjelp (2020) – adipositas i svangerskap og fødsel

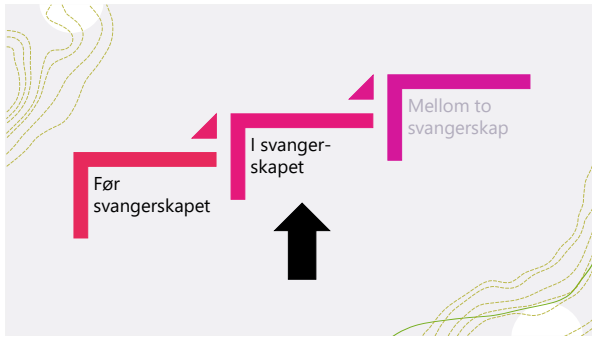
+Prekonseptjonell veiledning med vurdering av ko-morbiditet og med råd om kost, tilskudd og fysisk aktivitet anbefales, hvis praktisk mulig, for alle med BMI > 30 kg/m² (I-II)

+Klinisk erfaring og fysiologisk kunnskap taler for at redusert BMI, godt fysisk aktivitetsnivå og god kontroll på medfølgende sykdommer (komorbiditet) på konseptjonstidspunktet spiller en viktig rolle for å redusere risikoen for svangerskapskomplikasjoner

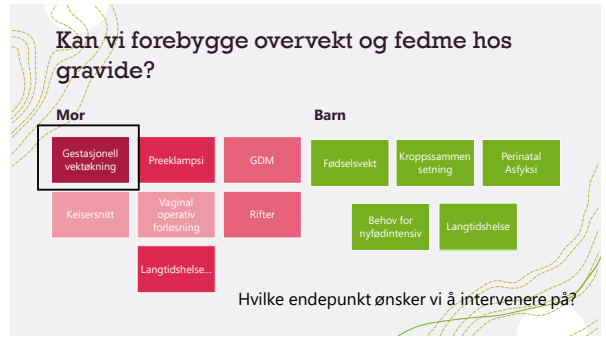
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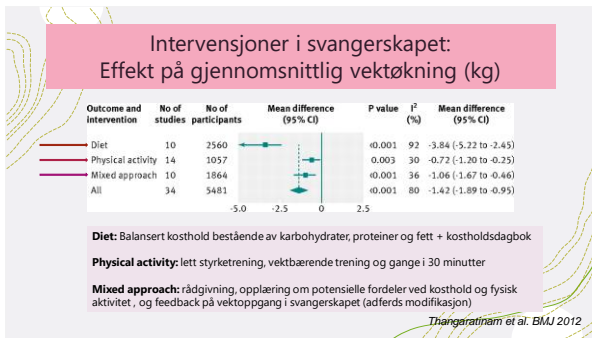
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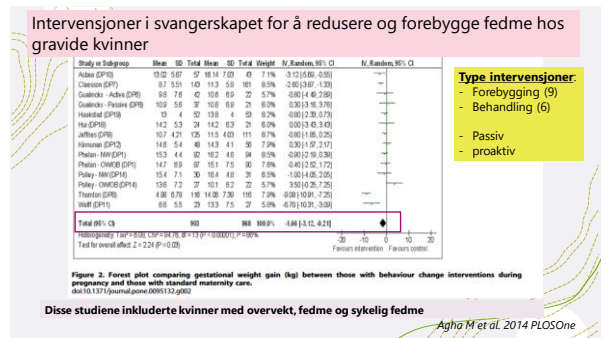
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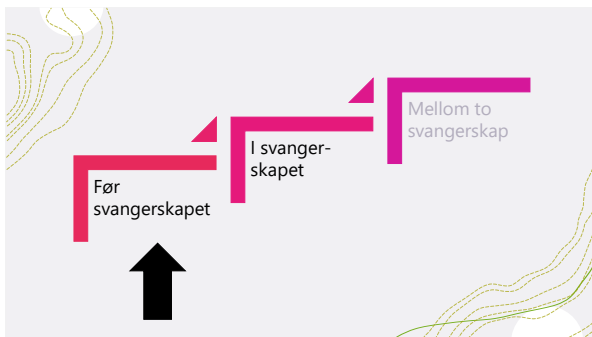
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10



11

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Cochrane Database of Systematic Reviews | Review - Intervention

Directed preconception health programs and interventions for improving pregnancy outcomes for women who are overweight or obese

Nicolel Opray, Rosalie M Grivell, Andrea R Deussen, Jodie M Dodd | Authors' declarations of interest

Version published: 14 July 2015. Version history

Hensikt: å evaluere effektiviteten til prekonseptjonelle helseprogrammer og intervensjoner for å bedre svangerskapsutfall hos kvinner med overvekt og fedme

Data innsamling: Vi identifiserte ingen studier som møtte inklusjonkriteriene for denne oversiktsartikkelen.

Konklusjon: Vi fant ingen randomiserte kontrollerte studier som vurderte effekten av helseprogrammer og intervensjoner for unnfangelse hos kvinner med overvekt og fedme med sikte på å forbedre svangerskapsutfall. Inntil effektiviteten av prekonseptjonelle helseprogrammer og intervensjoner kan slås fast, kan det ikke gis noen praksis anbefalinger. Ytterligere forskning er nødvendig på dette området

12

Promoting Health Behavior Change in the Preconception Period: Combined Approach to Intervention Planning

Objective:
We outlined the intervention planning and design process to develop an evidence-informed eHealth intervention to promote weight management.

The intervention, based on psychological theories and behavior change techniques, has been developed for women affected by overweight or obesity who intend to become pregnant.

The Begin Better web application is part of an integrated program being evaluated in a clinical trial to assess if weight management before pregnancy can influence clinical outcomes for mothers and babies.

Scott J. et al 2022

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Promoting Health Behavior Change in the Preconception Period: Combined Approach to Intervention Planning

Methods:
Our intervention development process was guided by intervention mapping and person-based methods. This study documents steps 2 to 4 of a 6-step iterative intervention mapping approach informed by the Information-Motivation-Behavioral Skills model and the findings of a previous interview study.

We defined behavior change objectives for each of the Information-Motivation-Behavioral Skills behavioral determinants as well as theory-based behavior change techniques and practical strategies.

We also used persuasive system design principles to assist in translating these strategies into a digital environment.

Scott J. et al 2022

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Promoting Health Behavior Change in the Preconception Period: Combined Approach to Intervention Planning

Results: The resultant intervention comprises **nutritional and physical activity content** along with psychological strategies, which are notably absent from mainstream weight management programs.

Strategies to **increase motivation, garner social support, and promote self-care are integral to maintaining engagement with the intervention**, which aims to improve lifestyle behaviors and enhance well-being.

Important elements include tracking mechanisms for easy achievable steps toward positive change.

Et eksempel på hvordan en intervensjon kan planlegges og utvikles for kvinner i målgruppen

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Barrierer:

- Tid
- Manglende kunnskap om overvekt/fedme
- Familie kultur
- Tilgang til sunn mat

Fremmere:

- Motivasjon for endring
- Familie og sosial støtte
- En helhetlig plattform for intervensjonen (3-i-1)
- Ønsket informasjon levert til passende tidspunkt
- Regelmessig feedback
- Målingsetil!

17

Det er behov for intervensjoner på ulike nivåer for å kunne forebygge fedme hos kvinner før svangerskapet

- Flere populasjonsbaserte intervensjoner for å forebygge fedme!

Forenklet økologisk teoretisk modell:

16

Influence of maternal and paternal pre-conception overweight/obesity on offspring outcomes and strategies for prevention

Bettina Hieronimus^{1,2,3}, Regina Erenseuer^{2,3}

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Abstract
Overweight, obesity, and their comorbidities remain global health challenges. When established early in life, overweight is often sustained into adulthood and contributes to the early onset of non-communicable diseases. Parental pre-conception overweight and obesity is a risk factor for overweight and obesity in childhood and beyond. This increased risk likely is based on an interplay of genetic alterations and environmental exposures already at the beginning of life, although mechanisms are still poorly defined. In this narrative review, potential routes of transmission of pre-conceptional overweight/obesity from mothers and fathers to their offspring as well as prevention strategies are discussed. Observational evidence suggests that metabolic changes due to parental overweight/obesity affect epigenetic markers in oocytes and sperm alike and may influence epigenetic programming and reprogramming processes during embryogenesis. While weight reduction in overweight/obese men and women, who plan to become pregnant, seems advisable to improve undesirable outcomes in offspring, caution might be warranted. Limited evidence suggests that weight loss in men and women in close proximity to conception might increase unobservable offspring outcomes at birth due to nutritional deficits and/or metabolic disturbances in the parent also affecting gamete quality. A change in the dietary pattern might be more advisable. The data reviewed here suggest that pre-conception intervention strategies should shift from women to couples, and future studies should address potential interactions between maternal and paternal contribution to long-lasting childhood outcomes. Randomized controlled trials focusing on effects of pre-conceptional diet quality on long-term offspring health are warranted.

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Effektive intervensjoner er ikke bare avhengige av individuell psykologisk evne og viljestyrke; i stedet fremmer de helse i stedet for bare å fokusere på kroppsvekt *Mann et al. 2015*

