

healthsmart!

High-risk pregnancy and high-risk obstetrics

Having a baby is one of life's most exciting experiences, but there are many things to learn when planning for childbirth. Good prenatal care and medical treatment during pregnancy can help prevent complications. No matter how healthy you are, pregnancy can be unpredictable. Plan for the unexpected now to help ensure your transition from pregnancy to motherhood is a smooth one.

What is the difference between a high-risk pregnancy and high-risk obstetrics?

- High-risk pregnancy refers to a pregnancy during which a condition puts the mother, developing fetus or both at a higher-than-normal risk for complications.
- High-risk obstetrics refers to complications during the delivery process, including premature labor.

It is important to remember it is possible for a high-risk pregnancy to have no difficulties during the actual delivery, just as it is possible for a high-risk delivery to occur with a low-risk pregnancy.

Who is likely to have a high-risk pregnancy?

You are at risk if you:

- Smoke.
- Are overweight, especially 50 pounds or more.
- Have high blood pressure.
- Have diabetes.
- Have seizures.
- Use drugs.
- Drink alcohol.
- Have a family history of genetic defects.
- Are expecting multiples (twins, triplets).
- Are over age 35 or younger than 18.
- Have previous health issues including cancer, organ transplant, sexually transmitted infections or weight loss surgery.
- Have had any complications in previous pregnancies such as pre-eclampsia, gestational diabetes or preterm labor and/or delivery.

Having any one or more of these risk factors does not guarantee a high-risk pregnancy or delivery. Similarly, not

having a risk factor does not guarantee a low-risk pregnancy or delivery.

Preconception counseling

One of the most beneficial pregnancy-planning activities for a woman is to consider preconception counseling with an OB/GYN or maternal-fetal medicine physician.

The doctor will take a very careful history of the mother and her family and the baby's father and his family before pregnancy to determine any factors, illnesses or conditions that may affect the mother or the fetus, such as a genetic defect or history of preterm deliveries.

By understanding their health and possible risk factors, couples have the advantage of deciding whether and when to start a family.

If you have an underlying medical condition, you should ask your doctor:

- What effect could my medical condition have on the pregnancy and baby?
- How will pregnancy affect my long-term health?

A woman's health prior to conception and during pregnancy is one very important influence on the outcome of pregnancy. It is important for women to keep any pre-existing medical conditions under control leading up to and during pregnancy.

Prenatal genetic testing

Many families have a history of genetic disease. These families may desire further information about how this condition could affect pregnancy and the baby. Genetic testing may also be offered to couples without a family history of genetic disease who have other risk factors. Discussion of prenatal genetic testing should begin with your obstetrician.

Several tests can be done before pregnancy to determine the potential of a fetus having a genetic disorder, such as Down syndrome, cystic fibrosis or a neural tube disorder. Tests can also be done during pregnancy to detect these disorders.

Options include:

- Chorionic villus sampling (CVS) – Between 10 and 12 weeks, a sample of tissue is taken from the placenta and tested.

- First trimester screening – At 11-13 weeks, the pregnancy is evaluated with an ultrasound and blood work.
- Amniocentesis – At 15-20 weeks, a small sample of amniotic fluid, the fluid that surrounds the baby, is collected and tested.
- Quad screen – Between 16 and 18 weeks, blood is drawn and tested.

If any of these tests indicate that you may be a high-risk patient, your obstetrician will refer you to a high-risk program.

Why are high-risk obstetrics programs necessary?

A high-risk obstetrics program is prepared to handle difficult situations, whether they are predicted or arise during the delivery. Because high-risk pregnancies and deliveries involve more than a single life, it is important to have a program for the specialized care of both mother and child.

High-risk care means having 24-hour access to an entire team of doctors, nurses and anesthesiologists, as well as a blood bank, neonatal intensive care unit (NICU) and surgical intensive care unit dedicated to the care of women and their babies.

What should you look for in a high-risk obstetrics program?

- Physicians specializing in maternal-fetal medicine
- Ultrasound unit
- Nutritionists
- Pediatric surgeons and cardiologists
- Neonatologists
- Geneticists

You should choose a program that has the ability to cope with your specific health needs and any health issues your baby may face at birth. If you have complications during delivery, it is important to be in a hospital that has a NICU with the highest level of trained specialists.

NICUs are classified into three levels. Level I NICUs are capable of offering continued care for low-birth-weight babies born prior to 35-36

weeks maturity who are not ill but require frequent feeding or more hours of nursing than a normal newborn. Babies born before a pregnancy has reached 32 weeks who need 6-12 hours of nursing per day are cared for in Level II NICUs. A Level III NICU is an intensive care unit for babies born extremely premature and requiring continuous cardiopulmonary and other support and constant nursing care, as well as those requiring less-intensive care.

Kentucky Children's Hospital has the only Level III NICU in the Bluegrass area. At UK HealthCare, mothers and babies

are cared for in the same building, so neither baby nor mom has to endure the stress of being transferred after birth.

What should you expect with a high-risk obstetrics program?

- More visits to the doctor.
- Increased monitoring of baby's health.
- Diagnostic testing, if appropriate.
- Possible hospitalization during pregnancy.
- Frequent ultrasounds.
- Possible visits to other specialized doctors depending on your condition.

Tips from high-risk patients

Parents who have dealt with the stress of high-risk pregnancies and obstetrics can offer unique insight into the obstacles others will face and how to cope. Here are their suggestions:

For all pregnant women

- If you have small children at home, make child care arrangements in case you have an urgent need to go to the hospital.
- Prepare for any transportation issues that may arise before or after the baby arrives.
- Prepare family and your employer for the possibility of a cesarean birth. Schedule help at home for the first three weeks after discharge.
- If you live or work in an area far from your hospital, make sure you check out which hospital you need to go to in an emergency. Some hospitals are better equipped to handle preterm labor.
- Have a list of emergency contact phone numbers available in several places. In your cellphone, change the name of your emergency contact to the acronym ICE (In Case of Emergency).
- Ask your doctor if it is safe to travel. If you are driving out of town, take a cellphone and overnight bag with

anything you might need in case you go into labor. Bring a friend who can help if there is a problem.

- Compile a list with contact information for support services such as house-cleaning services, babysitters and nannies.

For pregnant women on bedrest and/or having multiple babies

- You may require assistance with cooking, cleaning and child care.
- Some women experience social isolation when on bed rest. Find appropriate ways to continue participating in social events.
- Find appropriate ways to continue spending quality time with your other children. Some children act out when this time together is cut short.
- Expect a longer recovery time due to loss of muscle tone after prolonged bed rest.

Postdelivery

- Many cities have clubs for mothers of multiples. Join one, as these mothers will understand and be able to offer tips for managing the stress of raising multiple infants and children.
- Depression is a common byproduct of a high-risk pregnancy or delivery – don't be afraid to seek help.

UK HealthCare resources

Childbirth education classes are offered at UK HealthCare. Learn more by visiting ukhealthcare.uky.edu/womenshealth/childbirthed.asp.

Breastfeeding support services are available to new mothers. Learn more at ukhealthcare.uky.edu/womenshealth/breastfeeding.asp.

The **Mommy & Me Breastfeeding Clinic** is available to all moms who would like to breastfeed and are interested in having a breastfeeding assessment performed by a Kentucky Children's Hospital physician and/or lactation consultant. The physician and lactation consultant will work with the mother to develop a plan that meets the mother's goals, answer questions, suggest resources and assist with any problems. For an appointment, please call **859-323-6211**.

UK Women's Health Obstetrics & Gynecology specializes in providing medical care and treatment of the female reproductive system. This clinic offers a variety of primary and subspecialty care and accepts referrals of all types. Specialties include high-risk pregnancies, the reproductive system, treatment of gynecologic malignancies, infertility and a range of difficult gynecologic problems. Visit ukhealthcare.uky.edu/womenshealth/obgyn.asp for additional information.

Parenting e-News is a free weekly email newsletter that focuses on each week of a woman's pregnancy and discusses the development of the baby and the mother's experience. Visit ukhealthcare.uky.edu/newsletter to subscribe.

Additional resources

Ronald McDonald House offers local lodging for families with seriously ill children. Visit www.rmhclexington.com for more information.

March of Dimes helps moms have full-term pregnancies and researches the problems that threaten the health of babies. Learn more at www.marchofdimes.com.

The **American Diabetes Association** works to to prevent and cure diabetes and to improve the lives of all people affected by diabetes through research, services, information and advocacy. Information is available at www.diabetes.org.

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Call UK Health Connection at 859-257-1000 or toll free 1-800-333-8874 to make an appointment or request a referral. Visit us online at ukhealthcare.uky.edu.

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