

- You will be assigned a midwife and a member of the Obstetric Team will examine you and review your progress.
- A drip will be inserted. This can be used to give you medication or fluids into your vein.
- Blood will be taken

When in Labour

You are more likely to require help to deliver your baby, either with the use of forceps or ventouse (suction cap) or with a Caesarean Section. You are therefore more likely to require anaesthetic assistance. To help us do this safely we suggest:

- Taking a tablet we will prescribe called ranitidine to reduce the acidity in your stomach.
- Placement of an Epidural early in labour, if appropriate.

After the Birth

You may be prescribed heparin to thin your blood after your delivery to prevent blood clots in your legs (Deep Vein Thromboses - DVT's) and your lungs (Pulmonary Emboli - PE's). Blood clots can be more common in women with a high BMI.

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E Drake, J Brown:

In summary:

- A raised BMI makes it more likely that you will need assistance from an anaesthetist during your delivery. You are more likely to need a Caesarean section and you are at an increased risk of problems that can occur.
- This clinic helps to plan for all eventualities to deliver baby safely.
- You will be involved in the decision making

Ultimately responsibility for your health and that of your baby is down to you, healthcare professionals are here to help you make a plan you are comfortable with.

This leaflet is available in other languages and formats.
Please contact:
Administrator
01752 439203

Information for pregnant women with a raised BMI

Why do I need to see an anaesthetist during my pregnancy?

Anaesthetic Antenatal Clinic
Derriford Hospital
Derriford Road
Plymouth PL6 8DH

Tel: 01752 439203
www.plymouthhospitals.nhs.uk

Why am I being asked to see an anaesthetist during my pregnancy?

During pregnancy we aim to identify women who may need extra help during the birth of their baby. Being overweight can increase the chance of problems during birth such as needing a Caesarean section.

At your initial antenatal check your Body Mass Index (BMI) was calculated from your height and weight. Yours was above 40. Women with a BMI higher than 40 are more likely to need help from an anaesthetist, and some anaesthetic procedures such as putting in a drip or epidural can be more difficult.

Because of this we try to see you before labour to discuss possible anaesthetic techniques that you may encounter, thus ensuring the safe delivery of your baby.

What will be discussed with me at the clinic?

The clinic will be an opportunity to ask any questions and discuss anaesthetic techniques.

- We will ask questions about your medical history, pregnancy and any previous operations you may have had. We may examine you.
- We will discuss the available options for pain relief during your labour.

- We will plan for all eventualities, including the possibility of requiring a Caesarean Section.

There are medical reasons why certain techniques are more suitable for some patients than others, the anaesthetist will make suggestions personalised to your specific needs.

Advantages of an Epidural for labour

- An effective epidural is the most reliable way of keeping you comfortable throughout labour.
- Having a high BMI may make your labour last longer. This is tiring and can make underlying medical conditions worse. These effects can be minimised by keeping you comfortable.
- It may be more difficult and take longer to insert an epidural. It is often beneficial to put one in early in labour when it is easier for you to stay in one position for a period of time.
- You are more likely to require help with your delivery and an effective epidural can be used as a quick way of providing anaesthesia for these procedures. This can prevent you needing a General Anaesthetic and the risks this involves. It is particularly useful in an unforeseen emergency, when time can be critical.

If you require a Caesarean Section

There are several methods of providing anaesthesia should you require a Caesarean Section.

- A Spinal Injection
- An Epidural
- A General Anaesthetic (“Going off to sleep”)

It is safer and there are many advantages to being awake during a Caesarean Section. For these reasons the majority are performed with a combination of a spinal or epidural. A high BMI can make General Anaesthetics more difficult.

It is essential you are assessed and a plan made in case you need one. The clinic is an opportunity to find out more about the available options.

When the time comes and you arrive on the Labour ward

When you arrive on the Labour Ward please tell the midwife that you have been seen in the Antenatal Anaesthetic Clinic. There will be a record of the discussions that you had in clinic available on the ward.

- The Duty Anaesthetist will be made aware of your arrival, and will review and act on the plan made in the clinic.