

Dear Health Care Professional:

January is National Birth Defects Prevention Month. As you may know, birth defects are the leading cause of infant mortality, and the costs, both monetary and non-monetary, to individuals, families, communities and the health care industry are substantial. In (*Your State*), approximately (*XXX*) babies are born with a birth defect each year and nationally, 120,000 babies are affected annually.

Obesity is a leading public health concern in the United States. Over 30% of women of ages 20-39 were identified as obese, with a Body Mass Index (BMI) of 30 or greater, in the National Health and Nutrition Examination Surveys (NHANES) 2005-2006 report. The high rates of obesity among women of childbearing age and the increasing body of evidence linking obesity to birth defects are the reasons that we have selected **“Obesity Prevention and Weight Management – Before, During, and After Pregnancy”** as the theme of the year’s Birth Defects Prevention Month packet.

Numerous studies have found that maternal obesity is associated with neural tube defects, especially spina bifida. Additional research suggests that maternal obesity contributes to heart defects, limb reductions, diaphragmatic hernias, anorectal atresia, omphalocele, and hypospadias. Additionally, compared to normal-weight women, obese women have an increased risk of pregnancy complications and adverse outcomes such as infertility, hypertensive disorders, gestational diabetes mellitus, and fetal and neonatal death..

Women of childbearing age should be informed of the risks of being overweight and obese, ideally before pregnancy. The following strategies can be incorporated into your practice:

- **Measure height and weight before conception or at the initial prenatal visit to allow for calculation of BMI.**
- **Discuss Institute of Medicine’s recommendations for weight gain during pregnancy: 25-35 lbs for women of normal weight, 15-25 lbs for overweight women, and 15 lbs for obese women.**
- **Inform all women about the complications and possible adverse outcomes associated with being overweight and obese during pregnancy.**
- **Promote eating a healthy diet which includes taking a multi-vitamin with folic acid every day.**
- **Screen for hypertension and diabetes mellitus in women at risk. Consider screening obese women for gestational diabetes during the first trimester.**
- **Encourage regular exercise that includes 30 minutes or more of moderate physical activity daily.**
- **Counsel postpartum women to return to a healthy weight.**

You can make a difference in the lives of (*Your State*) families and communities. The National Birth Defects Prevention Network hopes that you will take the time to review this information and make an effort to convey the prevention message to your patients. If you have questions or would like more information, please contact \_\_\_\_\_ (public health/surveillance program/MCH program/Birth Defects/Genetics Programs) or visit the National Birth Defects Prevention Network at [www.nbdpn.org](http://www.nbdpn.org).

Sincerely,