



Anaesthetics and pregnant women with a high BMI

What you need to know

Who would have a high BMI?

One of the aims of antenatal care is to identify those women who may need extra support during pregnancy and birth. One thing that makes this more likely is if you have a high body mass index or BMI. BMI is calculated by your midwife at the time of booking using your height and weight and as it goes up, particularly if it is above 40, the chances of you having certain pregnancy related complications increases although many births will be completely uncomplicated and need no intervention.

What will happen next?

During pregnancy you may be offered an appointment to talk to an anaesthetist about your thoughts on pain relief and anaesthetic choices for your labour and delivery. It is easier to do this in relaxed surroundings, rather than trying to explain things when you are coping with labour. You have all the same choices for pain relief in labour as any other mother but as some options like epidurals or having drips can take longer if you have a high BMI this is a good time to discuss them.



Identifying where you may need extra support during pregnancy and delivery.

Why will an anaesthetist want to discuss epidurals?

It could be more difficult and take longer to get an epidural in and working if you suddenly decide you would like one so we may offer advice on planning for an epidural earlier in labour. We may also examine your back at this visit, sometimes using ultrasound.

If you had to have blood thinning injections in pregnancy we can discuss with you when to stop these beforehand.

What happens if I need to go to theatre?

If your baby needs to be born in theatre, this can happen quickly if you already have an epidural in place. However, if you do not have an epidural, you may need to have a general anaesthetic, which would mean that you will be asleep when the baby is born.

We will do all our routine checks of your airway so that we know if we would need more time or equipment to give you a safe general anaesthetic.

Other considerations

You may or may not have had times when having your blood tested has been tricky. If so this is also a great time to work out where we could take your blood or put a drip in if needed in labour. Sometimes we use an ultrasound machine to do this.



For more general information about how having a high BMI may affect you and your baby there is an excellent patient information leaflet on the Royal College of Obstetricians and Gynaecologists website: www.rcog.org.uk/en/patients/patient-leaflets/why-your-weight-matters-during-pregnancy-and-after-birth