

Risks of Early Pregnancy after Bariatric Surgery

Women of childbearing age or who have suffered from infertility prior to bariatric surgery have the ability to become pregnant in the early stages postoperatively due to improvement in hormone regulation or failure to implement a contraception plan. Increased risks exist to the mother and fetus during this time of rapid weight loss (prior to 24 months post-op), including:

- ▶ Greater incidence of premature birth
- ▶ Challenge meeting maternal weight-gain goal to promote appropriate fetal growth
- ▶ Increased metabolic and vitamin/mineral disturbances resulting in growth retardation and neural tube defects
- ▶ Greater risk of spontaneous abortions
- ▶ Increased risk of malnutrition for mother and fetus with restricted oral caloric and protein intake
- ▶ Increased incidence of cesarean deliveries
- ▶ Greater fetal mortality rates

With the above complications noted, it is required that a plan for early pregnancy prevention be in place for two years postoperatively to prevent early pregnancy and the high risks that accompany it. Oral birth control and emergency contraceptives (e.g., Plan B) are not recommended methods of contraception postoperatively because the malabsorption mechanism present after surgery makes them ineffective. Recommended forms of pregnancy prevention include: progesterone-only implant in the uterus or arm (potential options may include Mirena, Kyleena, Skyla, Liletta, Implanon and Nexplanon); Paragard (copper implant in the uterus); sterilization of either partner; or abstinence/denying sexual activity. A documented plan for early pregnancy prevention will be established during the preoperative evaluation phase while working with our team in the event that you are noted as being a safe candidate for bariatric surgery.

Women of childbearing age should have a birth control plan in place before surgery. Your focus needs to be on healthy weight loss, and pregnancy will certainly complicate your weight-loss results. Pregnancy after bariatric surgery, especially the duodenal switch, is high-risk. You will be at greater risk of nutritional problems during pregnancy. If you become concerned that you are pregnant, it is imperative you receive a urine pregnancy test as soon as you are suspicious. If you do become pregnant, you must call your surgeon's office right away. We will refer you to the program dietitian and also collaborate with your family practice physician or OB/GYN to ensure proper prenatal care. Consultation with the bariatric team, surgeon, OB/GYN and primary care provider can ensure screenings are in place and care can be coordinated to ensure the most safe and successful outcome.