

Supporting Pregnancies With Advanced Maternal Age

Rebekah Teel

Midwives College of Utah – Student Midwife

MDWF 2020 – Prenatal Care 2

Aisha Al Hajjar

7-31-2022

Supporting Pregnancies With Advanced Maternal Age

Pregnancy at age 35 or older does come with more risks but can be safe and healthy for some people when properly supported. Many people are choosing to start their families later for a variety of reasons. Some may wait until they find a supportive partner. Others choose to wait until they finish their education or are more financially stable. Some parents choose to have a career for a while before having children. And some struggle with infertility for many years and are finally able to start a family at an older age. The reasons don't concern us. Our job as midwives is to support and care for these people who are expecting and help them to have a healthy and safe pregnancy, labor, birth, and postpartum period.

Studies show that there is an increased risk of stillbirth, FGR, preeclampsia, and placental abruption for those with AMA, or advanced maternal age. Lean et al. suggest, "that placental dysfunction may mediate adverse pregnancy outcome in AMA" (2017). If placental dysfunction is the main cause of pregnancy related risks for those of AMA then we should be looking into how to support the placenta throughout pregnancy.

Older people often have preexisting conditions that can become worse with the demands that pregnancy puts on the body. In a study done by Fuchs et al., they found that, "Compared to the 30–34 years old group, the rate of chronic hypertension almost tripled in the >40 years group (4.1% versus 1.4%) and the rate of gestational diabetes more than doubled (19.4% versus 8.7%)" (2018). These conditions can both be managed through diet, exercise, and/or medications allowing a pregnancy to go on without harm to the baby. As midwives we encourage all of our clients to eat a nutritious diet, get plenty of exercise, and take their vitamins.

Maternal mortality is another risk for pregnant people aged 35 or older. “The prominence of hemorrhage, cardiomyopathy, eclampsia/preeclampsia, and embolism among the leading causes of death for women aged 35+ highlights the urgent need for greater attention to these potentially preventable complications” (MacDorman et al., 2021). We need to pay attention, listen to our clients complaints, and take them seriously when they feel like something isn’t right. If people are dying primarily from *preventable* complications, then *they* aren’t the problem, *we* are, the healthcare providers are. MacDorman said that “increased vigilance is needed to promptly identify and address both social and medical risk factors across the pregnancy care continuum, including throughout the postpartum year” (2021).

Overall health may make a bigger difference in pregnancy outcomes than just looking at the age of the gestational parent. Young age does not necessarily make someone healthy. Older age does not necessarily make someone unhealthy. And even preexisting conditions, when managed properly, do not have to impact the health of the parent or baby. Let’s look at some examples.

I know a 40-year-old female who has had 4 babies. She eats a healthy diet of mostly organic fruits and vegetables, lean meat, and dairy. She does light exercise regularly. She has a preexisting thyroid disorder and an autoimmune disease that affects the small nerve fibers all over her body. Both are managed with medications. Her 1st pregnancy, age 20, ended in a cesarean due to failure to progress and non-reassuring fetal heart tones. Her 2nd pregnancy, age 25, was a failed home VBAC with cord prolapse and an emergency transfer to the hospital for a cesarean. The 3rd pregnancy, age 30, was a successful VBA2C in the hospital with a very supportive provider. Her final pregnancy was a surprise at age 40. She gave birth unassisted at home and had a healthy 8 lb baby at 40 weeks and 2 days gestation. This was the easiest pregnancy and birth for her despite her advanced maternal age and other health conditions. She nursed her baby for 3 years. She is a healthy person that happens to be older.

I also know of a person on the other end of the spectrum of health and age. I was a doula for a young woman having her 1st baby. She was 21 years old. Her diet consisted mostly of Mountain Dew, Sweet Tea, Taco Bell, and McDonald's. She did not exercise at all but was not overweight. She was seen several times during pregnancy for UTI's, yeast infections, and preterm labor contractions. She gained 70 pounds during her pregnancy. She ended up with gestational diabetes and preeclampsia. Her labor was induced at 37 weeks due to the preeclampsia and "her baby was getting too big". The baby did not tolerate labor well and her birth ended with a cesarean. The baby was 5 lbs and struggled to latch and breastfeed. This was a young woman who did not take care of her body before or during pregnancy and ended up with several pregnancy related health conditions because of her lifestyle and diet choices. Youth does not equal health.

Midwives have a unique opportunity to build trusting relationships with their clients. We see clients throughout their life and can offer them information and education regarding their health before, during, and after pregnancy. We tend to allow time for longer appointments giving clients the opportunity to ask questions and gain a better understanding of the information they are given. Most midwives seem more approachable and available, so clients will often contact us, even after hours, with questions they have. We emphasize the importance of health. Health is a combination of physical, mental, emotional, and social well-being. Improvement in any of these areas can affect a person in a positive way.

Nutrition is a big key in pregnancy health. We meet people where they are and help them come up with goals and solutions that fit their needs and lifestyle. Small changes that they can make to improve their overall health. Some people need more sleep, or less stress, other need a healthier diet, better hydration, or to get moving. Whatever the individual needs, we try to help them work towards it.

Many people are vitamin and mineral deficient. Midwives also encourage supplementation of specific micronutrients either through food, herbal supplements, or synthetic supplements when necessary. Sometimes nutritious food can be your medicine.

I truly believe that your age isn't the biggest factor affecting your health, pregnancy, or baby. I think your health plays the biggest role in determining if you will have a healthy pregnancy.

References

- Fuchs, F., Monet, B., Ducruet, T., Chaillet, N. & Audibert, F. (2018). Effect of maternal age on the risk of preterm birth: A large cohort study. Plos One. <https://doi.org/10.1371/journal.pone.0191002>
- Lean, S. C., Derricott, H., Jones, R. L. & Heazell, A. E. P. (2017). Advanced maternal age and adverse pregnancy outcomes: A systematic review and meta-analysis. Plos One. <https://doi.org/10.1371/journal.pone.0186287>
- MacDorman, M. F., Thoma, M., Declercq, E. & Howell, E. A. (2021). Causes contributing to the excess maternal mortality risk for women 35 and over, United States, 2016–2017. Plos One. <https://doi.org/10.1371/journal.pone.0253920>