

Risk Factors in Pregnancy

- DEFINITION: Any findings that have a negative effect on mother or fetus....very hard to have something that's a negative effect on mom that's NOT having a negative effect on the fetus.
- Assessment tools are often used. (see Tables 15.1 and 15.2 in text pgs. 343 -345) These are very inclusive lists of what we're screening for.

The Hit List! (aka personal / social issues)

- Low income (often goes with poor diet...however, resources are available to get nutritious food...often just don't eat enough fresh veggies and fruits.)
 - Also don't get prenatal care
- Poor diet
- Living at high altitude
 - Oxygen levels are lower...questionable if perfusing the baby effectively. Over time, the body compensates for living at a high altitude.
- Multiparity > 3
 - Grandmal Tips has more than 5 births
 - Uterus expands, contracts, expands, contracts...takes longer for uterus to get back into shape after each pregnancy.
 - Would look at spacing between babies...if she spaces them out there is less risk b/c she has time to recover in between.
 - Takes 20-24 months for mom to restore her iron levels after a pregnancy. People who have a baby every single year are very susceptible to low iron problems.
- Weight <100 or > 200
 - Low weight mom doesn't have enough stores, babies may be tiny
 - Obesity: potential for fat dystocia is increased, HTN, gestational diabetes
- Age < 16 or > 35
 - Higher risk for genetic defects > 35 (Downs Syndrome is the biggie)
 - 16 year old girl hasn't had her final growth spurt yet...she's still growing. Epipheseal plates might still be open. Pelvic measurements might not be adequate "contracted pelvis". Nutritionally she needs a lot of calories just for herself...risk for not growing healthily and the impact this has on the fetus.
- Smoking
 - Vasoconstricts...decreases vascular flow to placenta. Makes mom susceptible to placenta abruptions and HTN.
- Drugs and/ or alcohol

Medical Problems

- Diabetes (workshop next week)
 - Buddha baby, red, chubby, been feeding on glucose the whole time in utero, baby will be LGA (pre-term baby that is full-term weight)
- Cardiac
- Anemia
- Hypertension
- Thyroid
- Renal
- DES
 - Diethyl Sylvesterol...given to moms to prevent miscarriages. It's a powerful hormone...daughters of DES mothers are at higher risk of cervical cancer and various other things.

Threats to Pregnancy

- Rubella
- CMV (Cytomegalovirus)
- Herpes 2
- Syphilis (ointment in the eyes for syphillis)
- UTI

- For some reason, UTIs cause preterm labor. One of the theories is that there is an irritability and higher inflammatory level.
- Abruptio/previas (bleeding problems)
- Preeclampsia (major HTN situation)
- Multiples ...lot of baby in a small space.

Dealing with teens in pregnancy

- Describe major factors that contribute to teen pregnancy.
- Discuss the physical, psychological, and sociological risks for pregnant teens.
- Develop care plans that meet the needs of a pregnant teen.
- Discuss family changes in relation to teen pregnancy.
- Know that the teens believe that “it can’t happen to me” ...typical teen!

Teen Developmental Tasks

- Developing identity
- Gaining autonomy and independence
- Developing intimacy in a relationship...need good positive role models for what that means.
- Developing comfort with own sexuality.
- Developing a sense of achievement.

Contributing Factors

- Socioeconomic and cultural factors
 - Television is a huge influence on kids
 - Kids are very comfortable with digital media...a lot of info coming at them.
- High risk behaviors
 - “It can’t happen to me”
 - Won’t ask partner about STD or birth control
- Psychosocial factors

Physiological Risks

- Prenatal care
 - Lot of kids don’t have the means...health insurance, transportation, access, knowledge that they need prenatal care (biggie)
 - Teens just think baby will grow no matter what.
- Iron deficiency
 - Anemia...big issue for teens. Most teens are a little anemic b/c they eat poorly.
- Smoking
 - A greater proportion of pregnant teens smoke...or their partners smoke.
- Weight gain
 - Teens don’t want to gain weight...don’t want to be “fat” ...and want to be able to lose the weight right afterwards
- CPD (pelvic disproportion)
- STI’s
 - Higher # of pregnant teens have STIs than non-pregnant teens
 - Chlamydia and HPV and Herpes

Psychological Risks

- Threat to developmental tasks (developing an identity and developing intimate relationships)
 - If teen does not do tasks of adolescence, then it delays their ability to be effective as they go through other developmental tasks.
- Need for nurturing: they still need to be nurtured themselves...they are still children and aren’t ready for self-sufficiency yet.
- The psychologic risk is a threat to self esteem. Most teenagers who get pregnant and stay pregnant do so with the believe that they will not be lonely. Loneliness is a big factor in teen pregnancy.
 - Teen moms will have a label...”teen mom” carries with it a certain image.

Sociologic Risks

- Social disadvantage
 - A girl who has had a baby before the age of 17 had a super high chance of having a 2nd baby before age 19
- Economic disadvantage
 - Probably on welfare if single mom.
- High school drop out rate is high for pregnant teens. Some of them go to a special program.
- Domestic violence (linked with early marriage).
- Early marriage

Risks to fetus/ newborn (education for teen moms is all about preventing this stuff from happening)

- Lack of economic support
- Family instability
- Abuse and/or neglect

Nursing Assessment

- Family and personal history
- Medical History
- Menstrual History (regular periods)
- OB/ Gyn History (any previous abortions?)
- Substance Abuse History

Planning with a Teen

- All pregnant teens are emancipated minors – confidentiality is an issue. Everything is just between you and the teen...you don't have to consult parents or tell them information.
- Develop trust is essential...she must trust you so she'll feel comfortable coming back to see you for future prenatal visits.
- Build self esteem and problem solving skills.
- Help her to be healthy.
- Skills to create a family.
- Education, education, education!!!!!!

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