

Should patients who have had bariatric surgery be managed differently during pregnancy?

Pregnant patient who have had bariatric surgery require some special considerations:

- Common complaints such as vomiting, abdominal pain may be indicative of surgical complications and should be thoroughly evaluated
- Consideration should be given for an evaluation of micro-nutritional deficiencies at the beginning of pregnancies. If a specific deficiency is not detected, then monitoring the blood count, iron, ferritin, calcium and vitamin D levels should be done every trimester.
- Consultation with a nutritionist is recommended
- Patients with dumping syndrome may not tolerate a GCT. Home glucose monitoring for one week with a glucometer is an alternative to the GCT.
- Bariatric surgery is not considered an indication for a Cesarean Section
- Extended release medications and non-steroidal anti-inflammatory medications should be avoided. If using a medication in which a therapeutic drug level is critical, then testing drug levels may be necessary.