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Preventing fetal programming of cardiovascular diseases: Insights from the stories of pregnant women gaining weight above national guidelines

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Background & Aim: Research on fetal programming of chronic diseases demonstrates that cardiovascular diseases (CVDs) have roots in prenatal life. For instance, higher maternal gestational weight gain before 36 weeks of gestation is associated with greater adiposity and adverse cardiovascular risk factors in the offspring. Prevalence rates of high gestational weight gain are steadily increasing in many countries, including the United States and Canada. From 2000-2009, 44% of American pregnant women gained above the Institute of Medicine (IOM) recommendations, with a biennial 0.8% point increase in women gaining above IOM recommendations. Little qualitative research has been conducted to investigate pregnant women's perspectives and experiences of high gestational weight gain. The purpose of this hermeneutic phenomenological study was to explore the meaning and experience of weight gain for pregnant women with high gestational weight gain.

Method: In-depth interviews were conducted with seven pregnant women from St. John's, Newfoundland and Labrador, Canada who gained more weight than medically recommended according to Health Canada/IOM guidelines. In order to examine a lived experience in-depth, phenomenological studies have a sample size of 6-10 participants. The data were analyzed using van Manen's method of hermeneutic phenomenology.

Findings: The themes in the data indicated that the women swiftly gained weight and were caught off guard by their high weight gains. They were confused about their weight gain status because they received contradictory messages from their health care providers. They perceived their weight gain as being outside of their control and resorted to hoping for healthy pregnancy outcomes.

Conclusion: The participants painted a picture of helplessness in their accounts of high gestational weight gain. Recommendations for health care professionals are made to support pregnant women in gaining within the IOM guidelines.

Biography

Cynthia L Murray is an Associate Professor in the School of Nursing at Memorial University of Newfoundland in St. John's, Canada. She obtained her PhD in Nursing from the University of Alberta and both her Bachelor of Nursing degree and Master of Nursing degree from Memorial University. She conducts quantitative, qualitative and mixed methods research. Her qualitative methodological expertise is in phenomenology, particularly hermeneutic interpretive phenomenology based on the philosophical underpinnings of Heidegger, Ricoeur and Gadamer. She has extensive experience in community health nursing.

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