Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force’s (Task Force) draft recommendation statement on behavioral counseling interventions for healthy weight and weight gain in pregnancy. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from December 8, 2020 to January 11, 2021. The Task Force welcomes your comments.

Behavioral Counseling Interventions for Healthy Weight and Weight Gain in Pregnancy

The Task Force issued a draft recommendation statement on Behavioral Counseling Interventions for Healthy Weight and Weight Gain in Pregnancy.

The Task Force recommends that healthcare providers offer pregnant patients counseling throughout their pregnancy to help them maintain a healthy weight and prevent excess weight gain.

This draft recommendation applies to all pregnant adults.

What is considered healthy weight gain in pregnancy?

Weight gain during pregnancy is the amount of weight gained from the start of pregnancy to delivery. Gaining too much weight during pregnancy can be harmful for pregnant people and their babies. The target healthy level of weight gain during pregnancy is based on how much someone weighs when their pregnancy begins.

Facts About Healthy Weight and Weight Gain in Pregnancy

Gaining a healthy amount of weight during pregnancy is important for the health of both pregnant people and their babies.

While gaining weight is part of pregnancy, gaining too much weight can be harmful for pregnant people and their babies, leading to a higher risk of gestational diabetes, cesarean deliveries (C-sections), and babies born with a high birth weight. When a baby has a high birth weight, there is an increased risk of maternal and infant complications, including C-sections and injuries to the baby during birth.

Facts About Counseling for Healthy Weight and Weight Gain in Pregnancy

Behavioral counseling interventions can focus on a range of topics including nutrition, physical activity, and lifestyle or behavior changes, or some combination of these. Counseling is effective when it lasts anywhere from 15 minutes to 1 hour. However, it is important that counseling occur throughout pregnancy, rather than as a single discussion.

Counseling can be incorporated into existing prenatal care and often begins at the end of the first trimester or the beginning of the second and ends prior to delivery. Interventions can range from a discussion during a prenatal visit to a more focused session on diet or exercise.

A wide variety of healthcare providers can conduct counseling including clinicians, registered dieticians, qualified fitness specialists, physiotherapists, and health coaches. Interventions can be delivered face-to-face, by computer, or by telephone, and can be individual or in a group setting.
Potential Benefits and Harms of Counseling for Healthy Weight and Weight Gain in Pregnancy

For the first time, the Task Force reviewed the evidence on how to help people maintain a healthy weight during pregnancy. Evidence shows that regular counseling throughout pregnancy can be effective. Counseling interventions that help pregnant people maintain a healthy weight can help prevent gestational diabetes, C-sections, and babies being born with a high birth weight.

The Task Force found that counseling interventions are unlikely to cause harms. Harms could include people gaining too little weight during pregnancy as a result of counseling.

The Draft Recommendation on Counseling for Healthy Weight and Weight Gain in Pregnancy: What Does It Mean?

Here is the Task Force’s draft recommendation on behavioral counseling interventions for healthy weight and weight gain in pregnancy. It is based on the quality and strength of the evidence about the potential benefits and harms of counseling for this purpose. It is also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **B Grade**, it recommends counseling because it has more potential benefits than potential harms.

Before you send comments to the Task Force, you may want to read the full draft recommendation statement. The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An evidence document provides more detail about the scientific studies the Task Force reviewed.

The USPSTF recommends that clinicians offer pregnant persons **recurring behavioral counseling interventions** aimed at promoting **healthy weight gain** and preventing **excess gestational weight gain** in pregnancy. *(B Grade)*

**Notes**

1. *Recurring* Multiple contacts between pregnant people and healthcare providers. A contact can range from a discussion during a prenatal visit to a more focused session on diet or exercise.

2. **Behavioral counseling interventions** Discussions and programs throughout pregnancy that focus on a range of topics including nutrition, physical activity, and lifestyle or behavior changes, or some combination of these.

3. **Healthy weight gain** The target healthy level of weight gain during pregnancy, based on how much someone weighs when their pregnancy begins.

4. **Excess gestational weight gain** Gestational weight gain is the amount of weight gained from the start of pregnancy to delivery. Excess gestational weight gain is when a pregnant person gains more weight than recommended during pregnancy.
What is the U.S. Preventive Services Task Force?

The Task Force is an independent, non-federal, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the Task Force website.

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<td>A</td>
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<td>B</td>
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<td>C</td>
<td>Recommendation depends on the patient’s situation.</td>
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<td>D</td>
<td>Not recommended.</td>
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<td>I statement</td>
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Click Here to Learn More About Healthy Weight and Weight Gain in Pregnancy

- Eat Healthy During Pregnancy: Quick tips (MyHealthfinder)
- Managing Your Weight Gain During Pregnancy (MedlinePlus)
- Weight Gain During Pregnancy (Centers for Disease Control and Prevention)
- Pregnancy and Birth: Weight Gain in Pregnancy (National Institutes of Health)

Click Here to Comment on the Draft Recommendation

The Task Force welcomes comments on this draft recommendation.
Comments must be received between December 8, 2020 and January 11, 2021.
All comments will be considered for use in writing final recommendations.