

IUGR and Macrosomic Phenotypes – How They Develop and How They Change Over Time

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Case Presentation

A 3-month-old infant presents for a wellness visit weighing 7.5 kg. He was delivered on his due date by elective cesarean at a weight of 4120 g. The mother, a 28-year-old woman who was moderately overweight before becoming pregnant, gained 30 lb during her pregnancy. She stopped breast-feeding after returning to work 2 months ago.

Discussion Items

- What short-term health risks would you monitor for in this infant?
- What long-term health risks would you monitor for in this infant?
- Are there any interventions you would suggest?
- How does this mother's status as overweight but nondiabetic modify her infant's risk?

Suggested Readings and Resources

1. Hay WW, Jr, Care of the infant of the diabetic mother. *Curr Diab Rep.* 2012;12(1):4-15.
2. Ludwig DS, Currie J. The association between pregnancy weight gain and birthweight: a within-family comparison. *Lancet.* 2010;376(9745):984–990.
3. Boney CM, et al. Metabolic syndrome in childhood: association with birth weight, maternal obesity, and gestational diabetes mellitus. *Pediatrics.* 2005;115(3):e290-e296.
4. Silverman BL, et al. The intrauterine environment: Implications for the offspring of diabetic mothers. *Diabetes Rev.* 1996;4(1):21-35.
5. Young BE, Johnson SL, Krebs NF. Biological determinants linking infant weight gain and child obesity: current knowledge and future directions. *Adv Nutr.* 2012;3(5):675-686.