



## IUGR and Macrosomic Phenotypes

How They Develop and How They Change Over Time  
Miami Neonatology 2016 – Annual International Conference

### Learning Objectives

At the conclusion of this activity, participants should be better able to:

- Recognize long-term health problems for infants who are small for gestational age or large for gestational age
- Implement nutritional strategies into perinatal care to reduce long-term health risks

### Faculty



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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

Informed by the video content, reflect individually or discuss as a group the following questions related to this case and your clinical practice:

- 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.



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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.