



# Guide to Talking to Your Ob About Advanced Maternal Age



# How to use this guide

This guide is meant to be an aid to creating a comprehensive plan with your OB provider to address and reduce risks in your Advanced Maternal Age (AMA) Pregnancy. This guide, along with my masterclass, cover the main concerns and complications associated with AMA, but your OB provider may have more to add to this plan.






You can learn more in the Advanced Maternal Age Collection.

Trigger warning: this guide discusses stillbirth



# CHROMOSOMAL ABNORMALITIES

While we can't reduce the risk of chromosomal abnormalities associated with AMA, we can detect issues as early as possible. Prior to speaking with your OB provider about genetic testing, make sure to learn more about the topics below.

-  Discuss NT ultrasound screening
  - Does not add much to detection of chromosomal abnormalities, but can be used as a sort of initial anatomy evaluation.
-  Discuss cell-free DNA (NIPT) screening
-  Discuss genetic testing CVS/Amniocentesis
-  Discuss carrier testing
-  Discuss fetal anatomy ultrasound

The Plan:

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## Diabetes (Gestational & Pre-Existing)

There is a fair amount we can do to reduce your risk of gestational diabetes. However, it is important to remember that much of the risk is out of your hands. The cause of gestational diabetes is complex and baby/placenta play a big role in whether or not you develop this condition. You can do ALL the things and still end up with GDM!

- 📖 Discuss if early testing for pre-existing diabetes (1 hr gtt, HbA1c) is recommended.
- 📖 Discuss myo-inositol supplementation
- 📖 Exercise and physical activity goals
- 📖 Discuss sleep, if it is an issue. Yes sleep disturbances in pregnancy have been linked to an increased risk of gestational diabetes!
- 📖 Discuss screening for GDM in 2nd/3rd trimester

The Plan:

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# Hypertensive disorders of Pregnancy

There are two main types of blood pressure disorders we are looking to reduce the risk of - gestational hypertension & preeclampsia. Blood pressure issues in pregnancy can escalate quickly so be on the lookout for symptoms such as severe headaches (not improved with medication), vision changes (seeing double, stars, black spots, etc.), or upper abdominal pain and contact your OB should you experience these.

- 📄 Discuss low-dose aspirin.
- 📄 Discuss myo-inositol supplementation (mixed data, but in the right patient may be worthwhile.)
- 📄 Exercise and physical activity goals
- 📄 If you have other risk factors for preeclampsia, discuss plan to monitor for the development of a hypertensive disorder of pregnancy.
- 📄 Discuss sleep, if it is an issue. Yes sleep disturbances in pregnancy have been linked to an increased risk of blood pressure issues!
- 📄 Create a stress reduction plan (if needed). Check out the Sterling Parents WellBeing Program

The Plan:

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## Preterm birth & low Birth Weight

There are several things we can do to attempt to prevent preterm birth & low birth weight, along with signs & symptoms to look out for. If you experience infections (ie. UTI, yeast infection), loss of fluid, bleeding, or contractions please contact your OB.

-  If you have a history of preterm birth, discuss progesterone and plan to monitor pregnancy.
-  Discuss cervical length screening at 18-20 wks
-  Discuss growth ultrasound(s)  
A growth ultrasound in the 3rd trimester is recommended if 40+
-  Create a stress reduction plan (if needed)  
Here are some of our Sterling Parents Resource that can help:
  - Sterling Parents Mindfulness Program
  - Balanced Productivity in Pregnancy Mini-Course
  - Stress in Pregnancy Fact Sheet

The Plan:

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# Stillbirth or Intrauterine fetal Demise

Trigger Warning: There is some data which reports an increased risk of stillbirth after 37 weeks of gestation, however this increased risk is still less 1% so pause here and take a deep breath. Additionally this risk decreases further if this is not your first pregnancy. Below are some precautions to note & discuss with your OB, along with helpful links to prepare you for those discussions.



Antenatal testing. For more information, check out our fact sheet



Discuss monitoring baby's movement. Review our resources on fetal movement.



Discuss induction of labor at 39 wks

- To prepare for birth (induction or not, make sure to go through the Sterling Birth Method)

The Plan:

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