



# **Pregnancy & Birth in Women Aged 40 Years & Above**

Patient Information Leaflet

## Congratulations on your pregnancy!

Most pregnancies in women aged 40 years and above will remain low risk to both mother and baby. Recent studies have shown that average maternal age in the UK is increasing, with 7.5% of women (roughly 500 women per year) delivering at Kingston Hospital being aged 40 years and above. This leaflet is designed to provide you with information regarding additional care in your pregnancy and labour that may be offered to you and why. All women who will be aged 40 years or above at the time of their delivery are referred to see a specialist midwife (or obstetrician if there are additional needs), at Kingston Hospital where an individualised care plan for your pregnancy and labour will be made.

### What are the risks during the pregnancy?

#### Raised Blood Pressure

Roughly 1 in 10 women over the age of 40 will develop raised blood pressure in pregnancy and 1 in 50 will develop pre-eclampsia (raised blood pressure and protein in the urine). You can help reduce this risk by maintaining a healthy diet during pregnancy and partaking in 30 minutes of exercise a day (e.g. Swimming, walking etc.). Your individual risk will be assessed and you may be offered a low dose aspirin to take throughout your pregnancy to reduce the risk of pre-eclampsia even further (roughly 15%). Every time you see a Midwife or Doctor your blood pressure will be monitored and you should endeavor to provide a urine sample to screen for protein.

#### Diabetes in Pregnancy

Diabetes is a condition that can occur during pregnancy where the amount of sugar (glucose) in the blood stream is too high. Glucose comes from starchy foods, such as bread and rice. It complicates 2-5% of all pregnancies and is usually diagnosed in those who are overweight and/or are aged 40 years and above. You can help reduce your risk by maintaining a healthy diet during pregnancy, please ask your midwife for more details, and partaking in 30 minutes of exercise a day.

Your urine will be screened for sugar every time you attend an antenatal clinic. If you have sugar present on 2 or more occasions you will be offered a formal glucose test. Your Midwife or Obstetrician may offer you a formal glucose test at your initial consultation depending on other risk factors present (e.g., weight, family history, and ethnicity).

#### Venous Thrombosis

Thrombosis is a blood clot in a blood vessel (a vein or an artery). Venous thrombosis occurs in a vein.

Venous thrombosis is uncommon in pregnancy or in the first 6 weeks after the birth of your baby. However the risk for venous thrombosis for this group of women is 1 in 500, which is ten times more likely than for women who are the same age but not pregnant. Although age alone is not a reason to take medication to prevent blood clots throughout your pregnancy, labour and in the period after your baby is born you will be assessed and advised accordingly.

#### Small or Big Babies

There is no need for routine additional growth scans during your pregnancy. From 24 weeks pregnant your midwife or Obstetrician will assess the size of your baby by measuring from the fundus (top of the womb) to your pubic bone. Additional scans will be arranged if needed based on this measurement and other clinical need.

#### Induction of labour

Women aged 40 years and above are recommended induction of labour at around their due date, this is because recent data has shown a small increase in the risk of stillbirth (baby dying before it is born) (risk is 1 in 503 for women 40 years and over compared to 1 in 1020 for women <35 years old). It is important to remember the risk of a stillbirth is very low.

At Kingston Hospital you will be referred to see a specialist midwife at around 16 weeks to discuss the recommendations and your wishes. If your pregnancy is healthy and you agree to be induced at 40 weeks, as recommended, your community midwife will book this for you at 39 weeks. At this appointment an internal examination will be offered to assess your cervix and offer a sweep. Should you choose to decline induction of labour an appointment will be made at 40 weeks with an obstetrician and further fetal assessment will be offered, although this does not reduce the risk stated above.

Please see patient information regarding induction of labour.

### **Can I deliver on the Midwifery led unit (Malden)?**

If you are otherwise healthy and the pregnancy remains low risk you can deliver on the Malden Suite, with intermittent monitoring of the baby's heartbeat. However, we strongly recommend syntometrine injection for delivery of the placenta (afterbirth) to reduce blood loss following delivery of the baby.

### **Further information**

If you would like this information in your own language, in large print, in Braille or audio tape please speak to a member of staff on the ward or in the department.

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