

# Risks for prematurity, SGA, cesarean up with IBD in pregnancy

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pregnancy compared with non-IBD pregnancies (aOR, 1.43). During pregnancy, Crohn disease activity decreased, while there was no change in ulcerative colitis activity.

"In the era of biologics, pregnancies in women with IBD are associated with only moderately increased risks of prematurity, small for gestational age, and caesarean section," the authors write. "Women with inactive IBD should be reassured when considering pregnancy."

One author disclosed financial ties to the pharmaceutical industry.

**More information:** [Abstract/Full Text](#)

(HealthDay)—The risks for prematurity, small for gestational age, and cesarean section are increased in pregnancies among women with inflammatory bowel disease (IBD), according to a study published in the November issue of *Alimentary Pharmacology & Therapeutics*.

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Antoine Meyer, M.D., from the Assistance Publique-Hopitaux de Paris, and colleagues used data from the French national health system and compared [pregnancy outcomes](#) between IBD and non-IBD pregnancies (36,654 and 8,595,562, respectively) ending between April 1, 2010, and Dec. 31, 2018.

The researchers found that 75.6 percent of IBD pregnancies ended in live births and 0.4 percent ended in stillbirths. Compared with pregnancies in women without IBD, those in women with IBD more often resulted in preterm birth (adjusted odds ratio [aOR], 1.51), small for gestational age (aOR, 1.15), and [cesarean section](#) (aOR, 1.39). Compared with non-IBD pregnancies, active IBD before and during [pregnancy](#) was associated with marked increases in the rates of prematurity and small for gestational age. More stillbirths were seen in association with active IBD during

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