

Back sleeping in late pregnancy linked to lower birth weight

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(HealthDay)—Back sleeping in late pregnancy is independently



associated with lower birth weight, according to a study published online Oct. 2 in *JAMA Network Open*.

Ngaire H. Anderson, Ph.D., from University of Auckland in New Zealand, and colleagues evaluated the association between the position in which <u>pregnant women</u> went to <u>sleep</u> and infant <u>birth weight</u>. Individual participant data consisted of a meta-analysis of four case-control studies investigating sleep and stillbirth in New Zealand, Australia, and the United Kingdom.

The researchers found that among 1,760 women, 3.2 percent reported they usually went to sleep in a supine position during the previous one to four weeks. Among women who reported sleeping in the supine position, the adjusted mean birth weight was 3,410 g versus 3,554 g among women who reported sleeping in a nonsupine position (adjusted mean difference [aMD], 144 g; 95 percent confidence interval [CI], -253 to -36 g; P = 0.009), representing an approximate 10-percentile reduction in adjusted mean INTERGROWTH-21st birth weight centiles (48.5 versus 58.6; aMD, -10.1; 95 percent CI, -17.1 to -3.1) and customized centiles (40.7 versus 49.7; aMD, -9.0; 95 percent CI, -16.6 to -1.4). At less than the 50th INTERGROWTH-21st centile, there was a nonsignificant increase in birth weight (adjusted odds ratio [aOR], 1.90; 95 percent CI, 0.83 to 4.34) and a twofold increase in birth weight at less than the 50th customized centile (aOR, 2.12; 95 percent CI, 1.20 to 3.76). Using INTERGROWTH-21st standards, going to sleep in the supine position was associated with a threefold increase in small-forgestational-age birth weight (aOR, 3.23; 95 percent CI, 1.37 to 7.59) and a nonsignificant increase in small-for-gestational-age birth weight customized standards (aOR, 1.63; 95 percent CI, 0.77 to 3.44).

"This novel association is biologically plausible and likely modifiable," the authors write.



More information: Abstract/Full Text

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