

Dietary Restraint and Attitudes Towards Weight Gain on Weight Gain During Pregnancy

Pregnancy can be a difficult time for women struggling with or in recovery from eating disorders, disordered eating, and body image concerns. There is a lot of focus around weight, specifically gaining the “right” amount of weight. There is no international consensus on how much weight a woman should gain during pregnancy but in the US, the Institute of Medicine (IOM) sets guidelines based on a woman’s pre-pregnancy BMI. Many pregnant women gain weight outside of the IOM’s recommended range, which has been associated with negative maternal and child outcomes (although few studies parse out the effect of weight gain from nutrition and physical activity). Many healthcare providers feel pressure to monitor and limit their patients’ weight gain during pregnancy, which in turn may increase a pregnant woman’s own concerns about weight gain during pregnancy. Could these very concerns and restriction of food intake lead to overeating and increased weight gain during pregnancy?

A study by Heery et al (2016) set out to determine if pre-pregnancy restrained eating behaviors (defined as the conscious effort to restrict food intake to control body weight) and early pregnancy attitudes to weight gain were associated with weight gain during pregnancy outside the IOM guidelines. The boundary model of eating behavior suggests that restrained eating leads to overeating in disinhibited states; pregnancy may trigger disinhibited eating. The authors hypothesized that a history of dietary restraint (restrained eating, weight cycling, and dieting) would be associated with higher absolute gestational weight gain (GWG) and weight gain in excess of the IOM recommendations. It was also hypothesized that increased food intake would mediate the relationship and that greater worry about pregnancy weight gain and worry about changes in shape and size would be associated with higher absolute GWG and excessive GWG.

Participants included 799 pregnant women in Dublin, Ireland. The Prenatal Distress questionnaire was used to assess attitudes to pregnancy weight gain, a modified version of the Restraint Scale was used to assess restrained eating behaviors prior to pregnancy, and change in food intake was assessed using self-report.

Results indicated that 34% of women were at least moderately worried about weight gain and 28% were at least moderately worried about changes in body shape and size during pregnancy. An additional 38% of women were ‘a little’ worried about weight gain and 36% were ‘a little’ worried about changes in shape and size. Increased levels of concern about weight gain and concern about changes in body shape and size were associated with higher total GWG and higher odds of excessive weight gain. Increased food intake partially explained these relationships. The authors suggest that women’s concerns about weight gain and changes in body shape and size during pregnancy may partly arise from recognition of increased food intake in early pregnancy. Consistent with prior research, women who were restrained eaters had higher pre-pregnancy BMI. Restrained eating, weight cycling,

and dieting were each independently associated with higher absolute GWG. Weight cycling, but not restrained eating or dieting, was associated with weight gain in excess of the IOM guidelines. Contrary to hypotheses, restrained eaters did not report increased food intake since becoming pregnant when compared to non-restrained eaters. The authors postulate that this may be because restrained eaters overeat in periods of disinhibition and they may fail to account for their additional food intake when asked about it. Dietary restraint and concerns about weight gain were associated with GWG irrespective of BMI, suggesting that these issues affect women across the weight spectrum.

The authors conclude that concerns about weight gain, concerns about changes in body shape and size, and a history of weight cycling predicts weight gain during pregnancy in excess of IOM recommendations. As eating disorder professionals, it is important to work with our patients throughout the pregnancy process to support them in becoming more comfortable with their changing bodies and encourage eating in ways that are attuned to their bodies' changing needs.

Reference: Heery E, Wall P, Kelleher C, & McAuliffe F. (2016). Effects of Dietary Restraint and Weight Gain Attitudes on Gestational Weight Gain. *Appetite*, 107: 501-510.