Obesity is one of the most common diseases in developed countries. There are 15-40% overweight women of childbearing age. Obesity is common among pregnant women (15.5-20.0%). The purpose was to evaluate perinatal outcomes in obese mothers.

A comparative analysis of perinatal outcomes in 84 women with varying degrees of obesity was performed by BMI before pregnancy: 24 were overweight, 20 were obese grade 1-2, 18 were morbidly obese (grade 3-4) and 22 with normal BMI. Perinatal ultrasound assessed placenta, fluid, gestational fetal weight; consideration included fetal biophysical profile and Doppler. At birth, Apgar score, estimates of growth and weight parameters were performed.

The vast majority of children (50%) of obese mothers had various disabilities. Neonates born to obese mothers had disharmonic physical development (large fetus). Fat content in child was directly correlated with the degree of maternal obesity. Half of the infants born to obese mothers had impaired adaptation in the early neonatal period. Disadaptation syndrome was characterized by significant loss of maximum body weight and longer recovery, edema syndrome, prolonged jaundice. The frequency of congenital malformations in children born to obese mothers was 3-fold than in the control group, it was found that the birth of children with congenital malformations was associated with the greater maternal BMI. Complications of pregnancy and childbirth in obese mothers contributed to frequent child asphyxia. Large fetal birth increased frequency of injuries during childbirth: fractures, cephalhaematoma, intracranial hemorrhage, brachial plexus injuries. 3.5-fold increase in intrauterine fetal hypoxia, 6-fold increase in aspiration of amniotic fluid, 13-fold increase in ischemic and hypoxic fetal CNS were observed in patients with obesity grade 3-4 compared to obese women grade 1-2.

Conclusions. Analysis of perinatal outcomes showed that obese women are at greater risk of adverse perinatal outcomes, and the greater the maternal weight, the higher the risk.