

¹UCD Perinatal Research Centre, Dublin, Ireland ²National Maternity Hospital, Dublin, Ireland, ³St. Vincent's University Hospital, Dublin, Ireland.

Pregnancy has come to be regarded as nature's "stress test", as the changes required to support the growing fetus can reveal underlying predispositions to diseases years earlier than they might otherwise appear (1, 2). It is well-established that the development of complications during pregnancy can influence maternal and child outcomes during pregnancy, delivery and the immediate postpartum period. Beyond this, there is growing evidence that pregnancy complications may have a long-standing impact on maternal health in later life. This provides further justification for health-promoting interventions before and during pregnancy for optimal health throughout the life course. There is a well-described association between gestational diabetes and risk of development of type 2 diabetes within ten years, and accepted recommendations for lifestyle changes and screening postpartum (3, 4). Despite the growing evidence, there is less awareness among women's healthcare providers surrounding long-term health risks associated with other pregnancy complications (5, 6).

Methods

A comprehensive literature review was performed on Pubmed, and the Cochrane library for each pregnancy complication and risk of disease broken down by physiological system. Searches were limited to studies in English with the search terms in the title or abstract. Microsoft Excel was used to create summary tables.

Results

A black silhouette of a pregnant woman is centered on the page. She is facing forward, with her arms at her sides. On her belly, there is a white circle containing a black heart. The background consists of horizontal stripes in shades of pink and light purple.A black silhouette of a pregnant woman is centered on the page. She is facing forward, with her arms at her sides. On her belly, there is a white circle containing a black heart. The background consists of horizontal stripes in shades of pink and light purple.

Risk of NCD following Obstetric Cholestasis	
Cardiovascular Disease ²⁹	12% higher likelihood HR 1.12 (95% CI 1.06-1.19)
Liver cancer ²⁹	3-fold higher likelihood HR 3.61 (95% CI 1.68-7.77)
Biliary tree cancer ²⁹	2.5-fold higher likelihood HR 2.62 (95% CI 1.26-5.46)
Diabetes ²⁹	47% higher likelihood HR 1.47 (95% CI 1.26-1.72)
Thyroid disease ²⁹	30% higher likelihood HR 1.30 (95% CI 1.14-1.47)
Crohn's disease ²⁹	55% higher likelihood HR 1.55 (95% CI 1.14-2.10)
Liver fibrosis/cirrhosis ³⁰	5-fold higher likelihood HR 5.11 (95% CI 3.29-10.33)
Chronic hepatitis ³⁰	6-fold higher likelihood HR: 5.96 (95% CI 3.43-10.33)
Cholangitis ³⁰	4-fold higher likelihood HR: 4.22 (95% CI 3.13-5.69)

Education of women and their healthcare providers about long-term health risks following adverse pregnancy outcomes, as well as strategies to improve postpartum follow-up and accessibility to this and to interventions are paramount. Optimal screening windows and methods need to be defined, and evidence-based prevention strategies developed for this population.

[illegible]