

Contraception, Pregnancy, and Fertility After Bariatric Surgery

How Does Bariatric Surgery Affect Fertility?

Weight-loss (bariatric) surgery often leads to improved fertility, particularly in women who previously experienced obesity-related infertility.

This occurs due to:

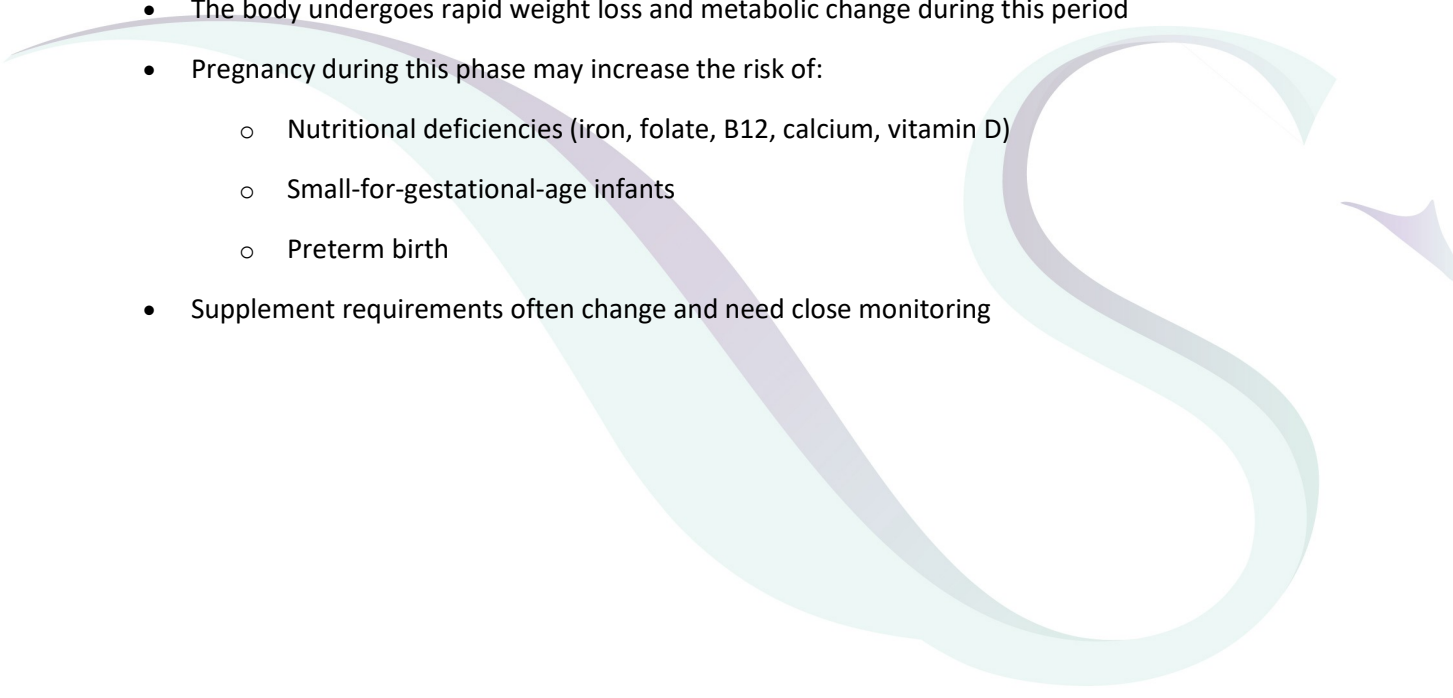
- Improved hormone regulation
- Reduced insulin resistance
- Improved ovulation, including in women with polycystic ovary syndrome (PCOS)

Ovulation may resume within weeks to months after surgery, meaning pregnancy can occur earlier than expected, even in those who previously had difficulty conceiving.

Why Pregnancy Should Be Delayed After Surgery

Most guidelines recommend avoiding pregnancy for 12–18 months after bariatric surgery.

This is because:

- The body undergoes rapid weight loss and metabolic change during this period
 - Pregnancy during this phase may increase the risk of:
 - Nutritional deficiencies (iron, folate, B12, calcium, vitamin D)
 - Small-for-gestational-age infants
 - Preterm birth
 - Supplement requirements often change and need close monitoring
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Current Guideline Recommendations

Recommendation

Organisation

Avoid pregnancy for 12–18 months after surgery

ASMBS, Endocrine Society

Use effective contraception before surgery and continue for at least 12–24 months post-op

RANZCOG

Plan pregnancy with a healthcare team to ensure nutritional adequacy

ASMBS, ANZMOSS

Close nutritional and obstetric monitoring during pregnancy

RANZCOG, Endocrine Society

Contraception Considerations After Bariatric Surgery

- Oral contraceptive pills may be less reliable after malabsorptive procedures (e.g. Roux-en-Y gastric bypass, one-anastomosis bypass) due to altered absorption.
- Non-oral methods are generally preferred.

Recommended options (Long-Acting Reversible Contraception – LARC):

- Hormonal IUD (e.g. Mirena, Kyleena)
- Copper IUD
- Contraceptive implant (Implanon / Nexplanon)
- Injectable contraception (e.g. Depo-Provera)

Your GP or gynaecologist can help choose the most suitable method based on your surgery type and medical history.

Planning a Safe Pregnancy After Bariatric Surgery

Once:

- At least 12 months have passed (preferably 18 months)
- Your weight has stabilised
- Nutritional levels are optimised

You should:

- Discuss pregnancy planning with your surgeon, GP, and obstetrician
- Ensure appropriate supplementation, including:
 - Folic acid
 - Iron
 - Vitamin B12
 - Calcium and vitamin D
- Expect more frequent blood tests during pregnancy
- Understand that pregnancy after bariatric surgery is usually safe and successful with appropriate monitoring

Key Take-Home Messages

- Fertility can improve rapidly after bariatric surgery
- Pregnancy should be planned and delayed
- Reliable contraception is essential
- With proper planning and follow-up, pregnancy outcomes are generally excellent

Evidence-Based Resources for Patients

- American Society for Metabolic and Bariatric Surgery (ASMBS)
<https://asmbs.org/patients/bariatric-surgery-and-pregnancy>
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)
<https://ranzcof.edu.au>
- Australian & New Zealand Metabolic and Obesity Surgery Society (ANZMOSS)
<https://anzmoss.com.au>
- NIH – Obesity and Fertility
<https://www.nichd.nih.gov>

*This information is provided for general education and does not replace individual medical advice.
Please discuss contraception and pregnancy planning with your healthcare provider.*