
Allostatic Load During Pregnancy and Its Impact on Offspring Health: A Survey

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Abstract

Allostatic load, the cumulative physiological impact of chronic stress, is particularly significant during pregnancy, affecting both maternal and fetal health. This survey explores the multifaceted nature of allostatic load and its implications for maternal stress and prenatal development. Chronic stress during gestation is linked to adverse outcomes such as preterm birth, low birth weight, and long-term neurodevelopmental disorders in offspring. The survey underscores the critical need for comprehensive management strategies, integrating pharmacological, behavioral, and nutritional interventions to mitigate these effects. Personalized healthcare approaches, including non-invasive technologies like ECG data analysis, offer promising avenues for early detection and intervention, enhancing maternal-fetal health outcomes. The survey calls for further research into the molecular and epigenetic mechanisms underlying stress responses, emphasizing the importance of longitudinal studies to track health outcomes from birth through adulthood. It highlights the need for multi-scale approaches and the identification of potential biomarkers for prenatal stress to develop effective interventions. Addressing these research gaps will enhance our ability to improve health outcomes for both mothers and their offspring, ultimately contributing to healthier future generations.

1 Introduction

1.1 Concept of Allostatic Load

Allostatic load is crucial for understanding the physiological effects of chronic stress, particularly during pregnancy. It refers to the cumulative 'wear and tear' on the body resulting from prolonged activation of stress response systems, providing insights into how the body adapts to stressors. This concept encompasses not only the immediate physiological responses to acute stressors but also the chronic stress that can adversely affect maternal health and fetal development [1]. The physiological demands of pregnancy heighten during this period, and chronic stress can exacerbate these demands, leading to increased allostatic load [2].

The implications of allostatic load for maternal and offspring health are significant. Chronic stress is associated with adverse pregnancy outcomes, such as preterm birth, and can disrupt fetal neurodevelopment, potentially resulting in long-term cognitive and psychosocial challenges [3]. Understanding allostatic load allows for an examination of how stress-induced physiological changes impact maternal and fetal health, emphasizing the need for targeted interventions [1]. Additionally, the dynamic cellular responses to stress, as discussed by [4], highlight the complexity of the body's reaction to chronic stress, necessitating a nuanced approach to studying and managing allostatic load during pregnancy.

1.2 Significance of Chronic Stress in Pregnancy

Chronic stress during pregnancy presents a complex challenge with profound implications for both maternal and offspring health, leading to various physiological and psychological consequences. The

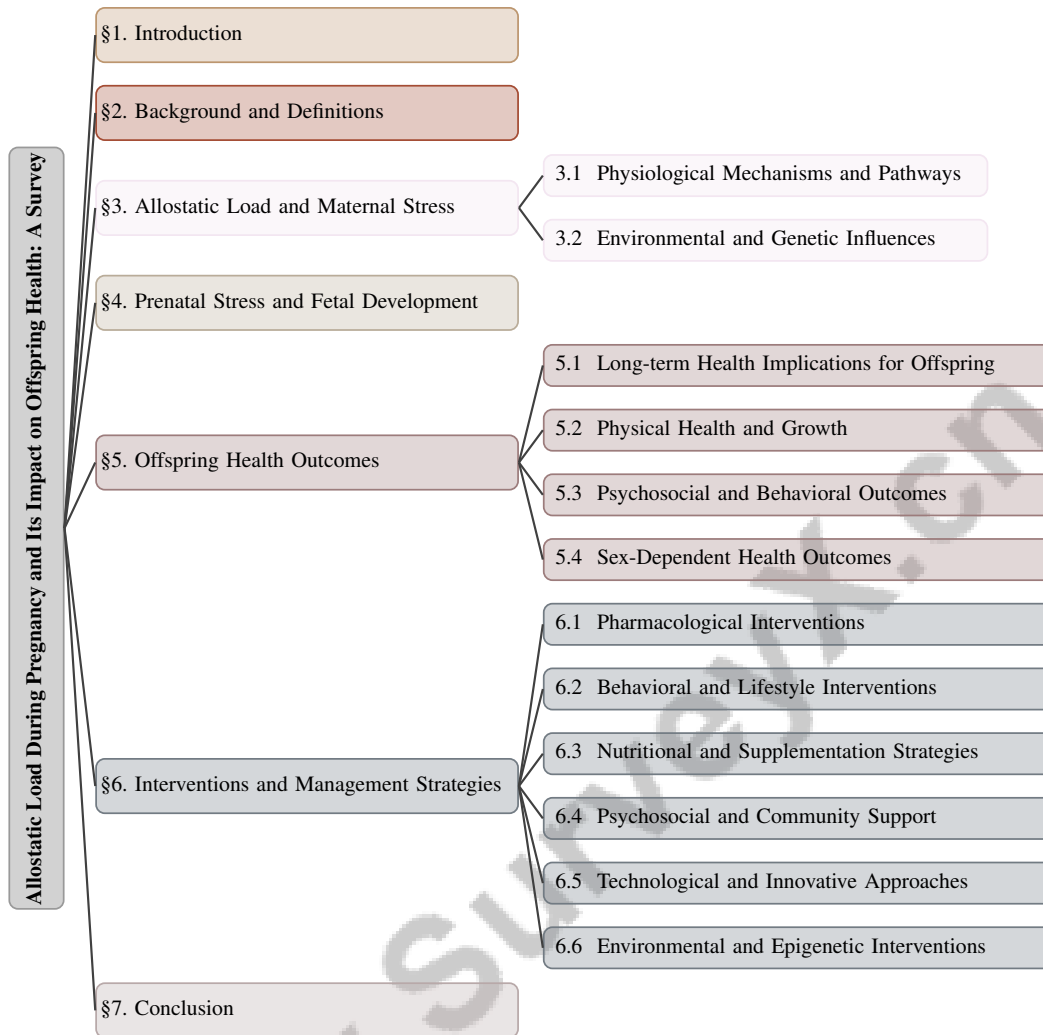


Figure 1: chapter structure

inherent physiological demands of pregnancy can intensify stress responses, contributing to severe outcomes such as preterm birth, low birth weight, and hypertensive disorders. The variability in allostatic load calculations underscores the necessity for standardized methodologies to enhance research consistency and reliability [5].

Environmental factors, including air pollution exposure, further exacerbate stress during pregnancy, adversely affecting children's health outcomes [6]. Maternal behaviors, such as smoking, are also linked to increased risks of preterm birth and fetal growth restrictions, leading to long-term neurodevelopmental and respiratory issues [7]. Understanding the mechanisms by which chronic stress affects fetal development, particularly through the modulation of the hypothalamic-pituitary-adrenal (HPA) axis and the autonomic nervous system (ANS), is essential [8].

Moreover, chronic stress is associated with an elevated risk of neuropsychiatric disorders, highlighting the importance of addressing stress to prevent long-term cognitive and behavioral issues. The COVID-19 pandemic has further intensified stress levels among pregnant women, underscoring the need for effective support systems [1]. This is particularly relevant in high-stress environments like neonatal intensive care units (NICUs), where mothers encounter compounded stressors related to their infants' fragility [1].

In low- and middle-income countries (LMICs), the effects of prenatal stress on child development are pronounced due to limited resources to mitigate these impacts [3]. The interplay between physiological dysregulations, psychosocial factors, and health outcomes necessitates a comprehensive

understanding of chronic stress during pregnancy, focusing on sex differences and health implications. Addressing chronic stress is vital for improving maternal and offspring health outcomes, emphasizing the importance of targeted interventions and support measures. Chronic health shocks, such as those experienced during pandemics, can significantly influence maternal health and affect gender ratios at birth [9]. Furthermore, chronic stress prior to conception can impact gestational length and subsequent maternal and child health [10]. The structural and functional changes in cellular networks due to stress further illustrate the complexity of stress responses and their health implications [4].

1.3 Structure of the Survey

This survey systematically explores the multifaceted concept of allostatic load during pregnancy and its implications for maternal and offspring health. It begins with an introductory section that establishes the foundational understanding of allostatic load, emphasizing its relevance in the context of pregnancy and chronic stress. A detailed background section follows, providing definitions and explanations of key concepts, including the historical context and current relevance of allostatic load, as well as differentiating between allostatic load and chronic stress.

Subsequent sections examine the specific relationship between allostatic load and maternal stress, focusing on the physiological mechanisms and pathways involved, alongside the influence of environmental and genetic factors. The survey then transitions to prenatal stress and its impact on fetal development, discussing environmental factors and potential neurodevelopmental and cognitive outcomes for the fetus.

The discussion on offspring health outcomes is comprehensive, addressing long-term health consequences for children exposed to high maternal allostatic load and prenatal stress, including increased risks of obesity, cardiovascular diseases, neurodevelopmental disorders, and asthma, as well as potential alterations in epigenetic processes and immune function linked to maternal obesity and stress during pregnancy [11, 12, 13]. This includes an examination of physical health, psychosocial and behavioral outcomes, and sex-dependent health outcomes.

The survey concludes with a review of current interventions and management strategies aimed at reducing allostatic load and stress during pregnancy. This section evaluates pharmacological, behavioral, lifestyle, nutritional, and supplementation strategies, alongside the importance of psychosocial and community support. It also highlights technological advancements and innovative approaches, as well as interventions targeting environmental and epigenetic factors.

The concluding section summarizes key findings and underscores the importance of addressing allostatic load and stress in pregnancy to improve health outcomes for both mothers and their offspring, while also suggesting areas for future research. The following sections are organized as shown in Figure 1.

2 Background and Definitions

2.1 Historical Context and Current Relevance

The concept of allostatic load, pivotal in understanding stress's physiological impacts, has evolved from its origins in stress-related disorder studies, such as major depressive disorder [2]. This evolution highlights chronic stress's role in health outcomes and the biological mechanisms underlying stress-related conditions. The relationship between psychosocial resources and allostatic load is vital for understanding individual stress coping mechanisms, as historical studies emphasize its relevance [14]. These insights are crucial for recognizing how social and psychological factors can mitigate or exacerbate stress's physiological effects during pregnancy.

Recently, allostatic load has gained importance in public health research, despite challenges in standardizing allostatic load score (ALS) methodologies [5]. Variability in ALS calculations affects research consistency and reliability, necessitating standardized approaches for comparability across populations and settings. Research on maternal stress has historically categorized stressors into physical and psychological types, distinguishing their timing during pregnancy [15]. This framework aids in understanding stress's differential impacts on maternal and fetal health. Contextual stress, organized into sociodemographic factors, parenting stress, and maternal mental health, is critical for assessing stress's comprehensive effects on maternal sensitivity and offspring outcomes [16].

Current research builds on this foundation by integrating multi-species and multi-scale approaches to deepen prenatal stress effects understanding [8]. These integrative frameworks combine animal models and human data, providing a holistic perspective on stress, maternal health, and fetal development interactions. The relevance of allostatic load in contemporary studies is further emphasized by its application in exploring neural, metabolic, and immune responses to chronic stress [17]. This interconnectedness is a focal point for ongoing research aimed at unraveling the multifaceted nature of stress responses and their implications for health across various physiological systems.

2.2 Conceptualizing Allostatic Load and Chronic Stress

Allostatic load and chronic stress are distinct yet interrelated concepts essential for understanding physiological and psychological dynamics during pregnancy. Allostatic load refers to the cumulative physiological burden from repeated allostasis cycles, where the body maintains stability through change in response to stressors [10]. This concept encapsulates long-term wear and tear on bodily systems, potentially leading to health complications if unmanaged. In contrast, chronic stress involves persistent stress response system activation, disrupting homeostasis and leading to adverse health outcomes [10].

During pregnancy, physiological adaptations necessary for fetal development are vulnerable to chronic stress, which can elevate allostatic load. The autonomic nervous system (ANS) regulates physiological responses during fetal life, and disruptions can impact maternal and fetal health [11]. Chronic stress during pregnancy can disturb endocrine and metabolic response balance, notably affecting key hormones like cortisol, essential for maternal and fetal well-being [12].

Chronic stress's implications extend beyond immediate physiological responses, influencing epigenetic modifications with lasting effects on offspring. Prenatal stress may disrupt maternal-fetal interactions, potentially leading to enduring neurological and immune system alterations [12]. Estimating critical windows of susceptibility to environmental exposures during pregnancy complicates identifying periods when such exposures are most detrimental [18]. Chronic stress also mediates inflammation, linking psychosocial stress and neuropsychiatric outcomes, complicating health trajectories for mother and child [12]. Differentiating stress types and pathways, such as adrenergic signaling and immune response mechanisms influenced by chronic stress, is necessary. Classifying stress effects into direct and indirect forms aids in organizing stress and genetic expression interactions, enhancing understanding of how maternal stress can alter developmental trajectories [10].

The societal and historical context of stress research, including biases against female participation and misconceptions about female physiology, has shaped contemporary understanding of allostatic load and chronic stress. Addressing these gaps is crucial for developing targeted interventions to mitigate chronic stress's adverse effects and reduce allostatic load during pregnancy, ultimately improving health outcomes for mothers and their offspring [9].

3 Allostatic Load and Maternal Stress

3.1 Physiological Mechanisms and Pathways

The impact of allostatic load on maternal stress and health during pregnancy is governed by a complex interaction of hormonal, genetic, and environmental factors, with the hypothalamic-pituitary-adrenal (HPA) axis playing a central role in regulating stress responses. Genetic predispositions significantly influence HPA axis regulation, resulting in varied physiological responses that are essential for understanding stress's differential effects on maternal and fetal health [10]. Elevated allostatic load is associated with increased risks of adverse pregnancy outcomes, such as preterm birth and low birth weight, highlighting the need to address these physiological stressors [10].

Chronic stress during pregnancy disrupts metabolic processes, necessitating attention to lifestyle and environmental factors that elevate allostatic load. Biomarker assessments facilitate the evaluation of chronic stress's physiological impact on pregnancy outcomes, enabling precise identification of at-risk populations [19]. Viewing cellular networks as dynamic systems adapting through modular rearrangements during stress further illustrates the complexity of physiological responses involved [4].

Advanced modeling techniques, such as the Tree-Distributed Lag Nonlinear Model (TDLNM) and the Distributed Lag Mixed Model (DLMM), enhance understanding of stress exposure timing and its impacts on maternal and fetal health by addressing challenges related to high dimensionality and collinearity in traditional analyses [18]. The interaction between maternal and fetal physiological responses is exemplified by the dynamic interplay of maternal and fetal heart rates influenced by stress, which has long-term implications for offspring health. The significant variability in physiological stress responses among individuals, particularly during pregnancy, complicates the assessment and management of allostatic load due to the interplay of various factors, including the need for high-quality data and advancements in computational methods. This complexity is exacerbated by the disproportionate effects of social, structural, and environmental stressors on marginalized populations, which can increase adverse pregnancy outcomes like hypertensive disorders and preterm birth [20, 21, 22].

Understanding how allostatic load affects maternal stress and health requires an integrative approach considering genetic, hormonal, and environmental factors while employing advanced modeling techniques to elucidate their complex interactions. This is particularly important for addressing disparities in maternal and infant morbidity and mortality, especially among non-Hispanic Black women, who are disproportionately affected by chronic stressors linked to allostatic load and its physiological implications [22, 21, 23, 20, 24]. These approaches aid in identifying critical exposure windows and mitigating the adverse effects of stress on pregnancy outcomes.

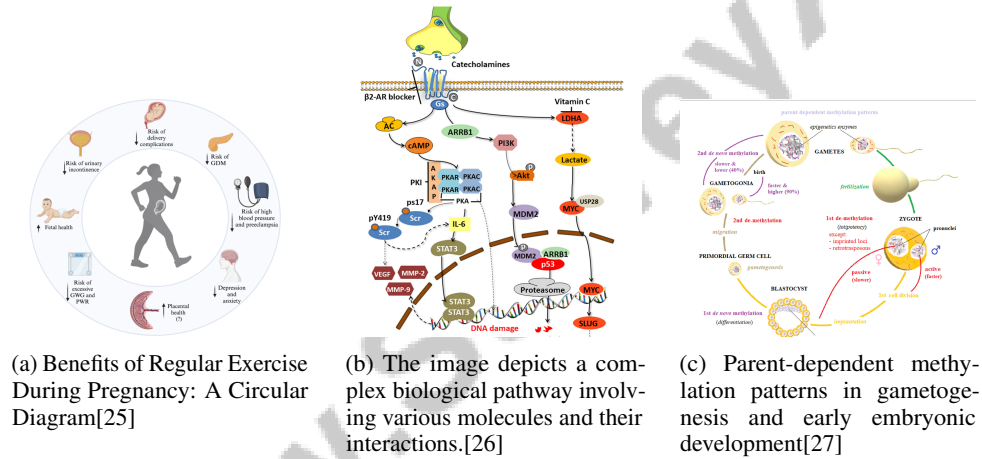


Figure 2: Examples of Physiological Mechanisms and Pathways

As illustrated in Figure 2, allostatic load serves as a crucial framework for understanding stress's impact on maternal health and fetal development. It encapsulates the cumulative burden of chronic stress and life events on physiological systems, leading to various health outcomes. The physiological mechanisms and pathways involved emphasize the intricate interplay between stress and biological processes. The visuals provide a comprehensive overview of related aspects, including the benefits of regular exercise during pregnancy, depicted in a circular diagram contrasting benefits and risks, and a detailed illustration of a complex biological pathway involving cellular signaling and metabolism, emphasizing the role of catecholamines and 2-AR receptors. Additionally, an image of parent-dependent methylation patterns during gametogenesis and early embryonic development highlights the epigenetic influences that stress can exert on developmental processes. Collectively, these elements underscore the multifaceted nature of allostatic load and its implications for maternal and fetal health [25, 26, 27].

3.2 Environmental and Genetic Influences

Environmental and genetic factors significantly influence maternal allostatic load and stress during pregnancy, presenting complex challenges for identifying effective interventions [28]. Environmental influences, such as exposure to pollutants, socioeconomic stressors, and lifestyle choices, interact with genetic predispositions to shape physiological and psychological stress responses in pregnant

women. The intricacies of these interactions are underscored by the difficulty in isolating individual stressor effects, which often co-occur and interact in multifaceted ways [28].

Genetic factors are crucial in modulating stress responses, with differential expression analysis and weighted gene co-expression network analysis (WGCNA) shedding light on their contribution to the molecular pathology of stress-related disorders, such as major depressive disorder (MDD) [2]. These analytical methods elucidate the genetic underpinnings of stress responses and their potential impacts on maternal health. Chronic stress has been shown to affect the morphology and function of basolateral amygdala (BLA) neurons, with environmental and genetic factors influencing these neural changes [29]. This highlights the necessity of considering both genetic predispositions and environmental exposures in understanding stress-related neural adaptations.

Investigating the extent of network damage and the mechanisms enabling recovery after stress is critical, particularly in understanding how environmental and genetic factors contribute to maternal allostatic load [4]. The dynamic nature of cellular networks during stress events emphasizes the need for comprehensive approaches to assess the cumulative impact of stressors on maternal health. Advanced methodological approaches, such as feature selection techniques that iteratively select or remove predictors based on statistical significance and model fit criteria, provide valuable tools for identifying key environmental and genetic contributors to stress [18].

The complex interplay between environmental stressors, particularly those stemming from systemic racism, and genetic predispositions underscores the urgent need for a comprehensive strategy to effectively understand and mitigate maternal allostatic load and stress. This is especially pertinent given the alarming rise in maternal and infant morbidity and mortality rates in the U.S., particularly among non-Hispanic Black women [20, 3, 22]. By integrating genetic analyses with environmental assessments, researchers can better identify at-risk populations and develop targeted interventions to alleviate the adverse effects of stress during pregnancy.

4 Prenatal Stress and Fetal Development

4.1 Impact of Environmental Factors

Environmental influences play a crucial role in shaping prenatal stress and subsequent fetal development, significantly affecting maternal and fetal health outcomes. Incorporating regular physical activity into prenatal care is essential, as it is linked to beneficial health effects, underscoring the need for strategies that integrate physical, psychological, and environmental dimensions to optimize pregnancy outcomes [25]. Mental health is equally important; stressors such as socioeconomic disparities, pollution exposure, and insufficient social support heighten prenatal stress, highlighting the necessity of addressing mental health during pregnancy to ensure offspring well-being [25]. The interaction between environmental exposures and genetic predispositions further complicates this scenario, necessitating interventions tailored to the unique contexts of pregnant individuals. Future research should focus on bridging knowledge gaps and developing evidence-based strategies to reduce prenatal stress and promote healthy fetal development. By addressing both physical and mental health aspects, healthcare providers can enhance support for pregnant individuals, ultimately improving health outcomes for mothers and their offspring [25].

4.2 Neurodevelopmental and Cognitive Outcomes

Prenatal stress significantly affects neurodevelopmental and cognitive outcomes, with evidence showing that gestational stress can lead to alterations in brain structure and function. Studies indicate that prenatal stress exposure is associated with increased gray matter volume in specific brain regions, potentially impacting cognitive and emotional processing [8, 30, 31]. Maternal behavior quality is pivotal in moderating prenatal stress effects; research comparing Wistar and Kyoto dams reveals that higher quality maternal behaviors under stress result in better cognitive outcomes for offspring [32]. This suggests that nurturing maternal care can mitigate prenatal stress's adverse effects, emphasizing the importance of supportive environments during pregnancy. Additionally, prenatal stress is linked to adverse cognitive and emotional development, increasing the risk of neurodevelopmental disorders like ADHD and depression [33]. These findings highlight the need for early intervention programs to alleviate prenatal stress effects and promote healthier neurodevelopmental trajectories. The interplay between prenatal stress, maternal behavior, and

neurodevelopmental outcomes underscores the complexity of fetal brain development. Prenatal stress impacts maternal psychosocial health and induces biological changes, including inflammation and alterations in the HPA axis, affecting cognitive and behavioral outcomes throughout development [8, 30, 31]. Understanding these relationships is crucial for developing targeted interventions to enhance cognitive and emotional resilience in offspring exposed to prenatal stress.

In examining the multifaceted impacts of prenatal stress on offspring, it is essential to consider the various health outcomes that may arise as a result. Figure 4 illustrates the hierarchical impact of prenatal stress, highlighting key areas such as neurodevelopmental outcomes, maternal behavior, and biological mechanisms. This visual representation emphasizes the importance of understanding these relationships for early interventions and improving offspring developmental trajectories. It categorizes health outcomes into long-term health implications, physical health and growth, psychosocial and behavioral outcomes, and sex-dependent health outcomes. Each of these categories reveals specific factors and mechanisms that underscore the importance of early intervention, comprehensive care, and tailored strategies to promote healthier developmental trajectories. This visual representation not only enhances our understanding of the complex interplay between prenatal stress and offspring health but also emphasizes the need for targeted approaches in addressing these critical issues.

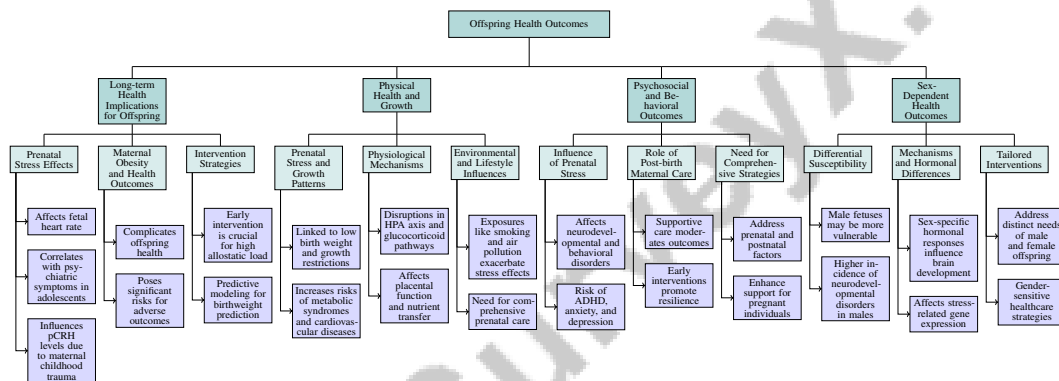


Figure 3: This figure illustrates the hierarchical structure of offspring health outcomes influenced by prenatal stress, categorized into long-term health implications, physical health and growth, psychosocial and behavioral outcomes, and sex-dependent health outcomes. Each category reveals specific factors and mechanisms, underscoring the importance of early intervention, comprehensive care, and tailored strategies to promote healthier developmental trajectories.

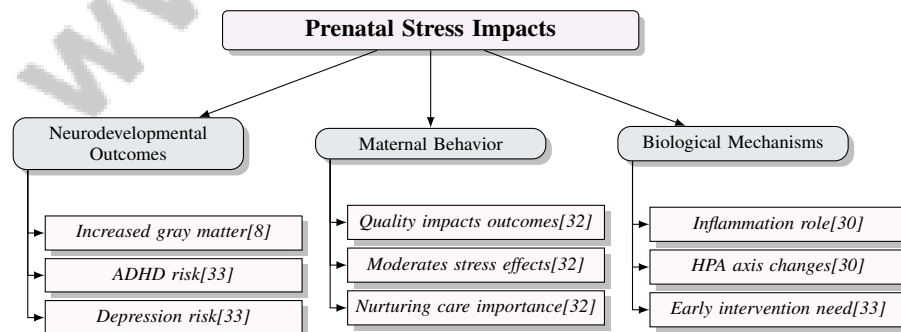


Figure 4: This figure illustrates the hierarchical impact of prenatal stress, highlighting key areas such as neurodevelopmental outcomes, maternal behavior, and biological mechanisms. It emphasizes the importance of understanding these relationships for early interventions and improving offspring developmental trajectories.

5 Offspring Health Outcomes

5.1 Long-term Health Implications for Offspring

Offspring of mothers with elevated allostatic load face heightened risks for various long-term health issues, with prenatal stress serving as a significant determinant. Studies indicate that prenatal stress adversely affects fetal heart rate and correlates with psychiatric symptoms in adolescents exposed to maternal major life event stress (MLES) during gestation [34]. Furthermore, maternal childhood trauma influences placental corticotropin-releasing hormone (pCRH) levels, suggesting enduring health impacts on children [23]. Given that high allostatic load is a modifiable risk factor for adverse pregnancy outcomes, early intervention strategies are crucial [22].

To visualize these complex relationships, Figure 5 illustrates the hierarchical categorization of long-term health implications for offspring, focusing on prenatal stress, maternal obesity, and comprehensive strategies. Each category is detailed with specific aspects such as fetal heart rate, adverse outcomes, and genetic factors, highlighting the multifaceted nature of maternal health influences on offspring. Maternal obesity complicates offspring health, posing significant risks for adverse outcomes [13]. A nuanced understanding of health outcomes can be achieved by integrating biological markers with clinimetric criteria for assessing allostatic load [1]. Advances in predictive modeling, notably the forward selection model, have improved birthweight prediction, aiding in the identification of at-risk populations and informing targeted interventions [18].

The complex interplay among genetic, environmental, and physiological factors necessitates comprehensive strategies addressing prenatal stress and maternal health conditions. By considering unique challenges faced by pregnant individuals, including assisted reproductive technologies and mental well-being, healthcare providers can enhance support for expectant mothers, improving health trajectories for their children [11, 30, 31, 25, 23].

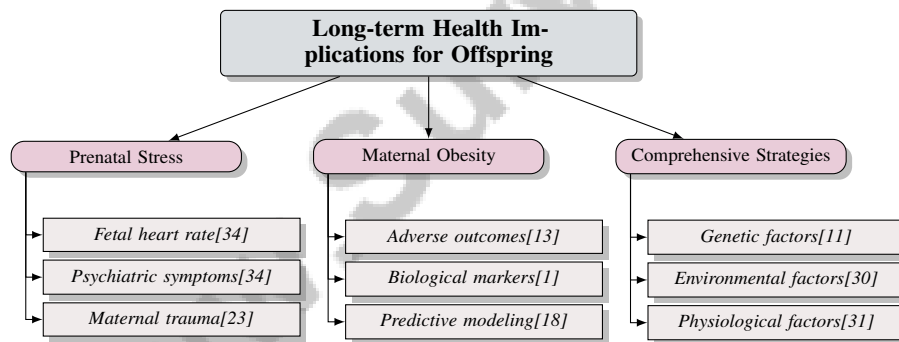


Figure 5: This figure illustrates the hierarchical categorization of long-term health implications for offspring, focusing on prenatal stress, maternal obesity, and comprehensive strategies. Each category is further detailed with specific aspects such as fetal heart rate, adverse outcomes, and genetic factors, highlighting the multifaceted nature of maternal health influences on offspring.

5.2 Physical Health and Growth

Prenatal stress significantly influences offspring's physical health and growth, affecting outcomes from birth through developmental stages. Chronic gestational stress is linked to altered fetal growth patterns, resulting in low birth weight and growth restrictions. Maternal stress, both preconception and during pregnancy, increases risks of adverse birth outcomes, such as low birth weight and preterm labor, primarily via elevated cortisol levels and hormonal imbalances [35, 10, 15, 31, 23]. These growth impediments are associated with increased risks of metabolic syndromes and cardiovascular diseases later in life, highlighting the need for effective prenatal stress management.

Physiological mechanisms involve disruptions in the hypothalamic-pituitary-adrenal (HPA) axis and glucocorticoid signaling pathways, crucial for fetal development and growth regulation [10]. Prenatal stress adversely affects placental function, essential for nutrient transfer and hormone regulation, further compromising fetal growth [23].

Maternal behaviors and environmental exposures, such as smoking and air pollution, exacerbate prenatal stress effects, increasing offspring's risk of respiratory and other health complications. Prenatal maternal stress (MPS) disrupts fetal development through altered placental metabolism and impaired fetal stress response systems, contributing to long-term health challenges [30, 15, 12, 31, 23]. Comprehensive prenatal care must address these environmental and lifestyle influences to mitigate adverse outcomes.

Advanced modeling techniques, including the forward selection model, have elucidated predictive factors of neonatal health, emphasizing the need for targeted interventions to support optimal growth and development in children exposed to prenatal stress [18]. Integrating predictive models with clinical assessments enables healthcare providers to identify at-risk populations and implement strategies to enhance physical health and growth in offspring, ultimately improving long-term health trajectories.

5.3 Psychosocial and Behavioral Outcomes

Prenatal stress exposure significantly influences offspring's psychosocial and behavioral outcomes, affecting development from infancy through adolescence. The maternal gestational environment, particularly under high stress, predisposes offspring to neurodevelopmental and behavioral disorders. Maternal obesity during pregnancy is associated with increased risk of neurodevelopmental disorders, indicating enduring effects of prenatal stress on child development [13].

Mechanisms underlying these outcomes involve complex interactions among genetic, hormonal, and environmental factors. Prenatal stress from negative major life events disrupts fetal brain development, altering neural circuitry essential for cognitive and emotional processing. This stress affects brain morphology and increases psychiatric symptoms and behavioral issues risk, highlighting prenatal stress's long-term implications on child development and mental health [36, 31]. Such disruptions may lead to heightened susceptibility to conditions like ADHD, anxiety, and depression. Furthermore, prenatal stress's impact on the HPA axis complicates the psychosocial landscape for affected offspring.

Post-birth maternal care quality is crucial in moderating these outcomes. Supportive and nurturing maternal behavior can alleviate some adverse prenatal stress effects, fostering better emotional regulation and social interactions in children. Early interventions and supportive environments are essential for promoting resilience among children exposed to prenatal stress. Research indicates such interventions significantly mitigate long-term neurodevelopmental risks by enhancing parent-child attachment and addressing physiological and epigenetic stress response markers [10, 3, 30, 31, 33].

The psychosocial and behavioral outcomes from prenatal stress underscore the necessity for comprehensive strategies addressing prenatal and postnatal factors. By examining complex relationships between prenatal stress and various developmental outcomes, healthcare providers can enhance support for pregnant individuals and their children, leading to improved strategies promoting healthier developmental trajectories and long-term psychosocial well-being, particularly in low- and middle-income countries where significant maternal stress and adverse outcomes links have been documented [3, 31].

5.4 Sex-Dependent Health Outcomes

Prenatal stress affects offspring health outcomes in a sex-dependent manner, revealing differential susceptibility and responses to stressors between male and female fetuses. Variations in developmental outcomes are attributed to unique developmental trajectories and hormonal environments encountered during gestation, influenced by maternal stress and autonomic nervous system (ANS) functioning. Prenatal stress impacts HPA axis and ANS development, leading to sex-specific differences in health indicators like heart rate variability and iron homeostasis, with lasting effects on postnatal development and well-being [37, 31, 8, 34, 38]. Research indicates male fetuses may be more vulnerable to adverse conditions, resulting in higher neurodevelopmental disorders and metabolic syndromes incidence compared to females.

The mechanisms underlying these sex-dependent differences involve intricate interactions among genetic, hormonal, and environmental factors. Regulation of the HPA axis is critical, with sex-specific hormonal responses potentially influencing fetal brain development and stress reactivity.

These hormonal differences may lead to variations in stress-related genes expression, contributing to observed disparities in health outcomes between male and female offspring [10].

Moreover, prenatal stress’s impact on placental function may exhibit sex-specific patterns, affecting nutrient transfer and fetal growth differently in males and females. Maternal stress during pregnancy correlates with varied growth trajectories, increasing risks of complications like low birth weight and preterm birth. Antenatal stress is significantly associated with higher low birth weight rates (Odds Ratio [OR] 1.68) and may influence preterm birth rates (OR 1.42), with lasting implications for cognitive development and chronic conditions later in life. Additionally, maternal obesity and preconception stress complicate these outcomes, indicating a multifaceted relationship between maternal health and child development [11, 10, 15, 31, 13].

Sex-dependent health outcomes associated with prenatal stress highlight the critical need for tailored interventions addressing distinct physiological and psychological needs of male and female offspring. Research indicates prenatal stress can create significant disparities in developmental outcomes, including neuropsychiatric risks and iron homeostasis, varying by gender. For example, male neonates exposed to prenatal stress demonstrate lower cord blood transferrin saturation, potentially affecting long-term neurodevelopment. This underscores the importance of gender-sensitive healthcare strategies to effectively mitigate adverse prenatal stress effects on child development [38, 3, 30, 31]. By integrating insights from genetic and hormonal research, healthcare providers can better address specific risks associated with prenatal stress, ultimately improving health outcomes for both sexes and promoting healthier developmental trajectories and long-term well-being for all offspring.

6 Interventions and Management Strategies

Category	Feature	Method
Pharmacological Interventions	Enzyme and Biomarker Analysis	4-MP[39]
Nutritional and Supplementation Strategies	Health Assessment	CSIPS[35], ALA[22]
Psychosocial and Community Support	Dynamic Interaction Modeling	BDLIM[6]
Technological and Innovative Approaches	Personalized Health Strategies	PMLM[40]
	Biological Network Analysis	IGNA[2]
	Neural Circuit Control	OS-DB[19]

Table 1: This table provides a comprehensive overview of various intervention and management strategies for maternal stress and allostatic load during pregnancy, categorized into pharmacological, nutritional, psychosocial, technological, and innovative approaches. It highlights specific features and methodologies employed across these categories, demonstrating the multifaceted nature of interventions aimed at improving maternal and fetal health outcomes.

The management of maternal stress and allostatic load during pregnancy requires a comprehensive approach that integrates various interventions targeting both physiological and psychological aspects of maternal health. Table 2 provides a detailed summary of the diverse intervention strategies employed in managing maternal stress and allostatic load during pregnancy, showcasing the integration of pharmacological, nutritional, and behavioral approaches. Pharmacological interventions, which focus on biochemical pathways influencing stress responses, are crucial for alleviating stress-related complications during pregnancy. The following subsection explores these pharmacological strategies and their implications for maternal and fetal health.

6.1 Pharmacological Interventions

Pharmacological interventions are essential in managing maternal stress by targeting biochemical pathways affecting stress responses. For example, inhibiting CYP2E1 with 4-methylpyrazole can mitigate ethanol’s adverse effects on maternal and fetal health, highlighting pharmacological strategies’ potential in alleviating stress-related complications [39]. Understanding interactions between pharmacological agents and stress markers is crucial for effective interventions, as these markers can reveal disparities in pregnancy outcomes [22].

Personalized medicine approaches enhance pharmacological interventions by tailoring treatments to individual needs, as demonstrated by improved emotion classification accuracy through personalized models [40]. In neonatal intensive care units (NICUs), aligning pharmacological treatments with maternal stress management provides better support [28]. Advanced models like the Bayesian

Distributed Lag Interaction Model (BDLIM) refine estimates of prenatal exposure effects to environmental stressors, including air pollution [6], addressing limitations of small sample sizes and confounding factors like maternal obesity [13].

Combining physiological signals with epigenetic biomarkers can predict neurodevelopmental outcomes, offering a comprehensive framework for interventions that reduce anxiety-like behavior and enhance neurodevelopmental trajectories. Understanding stress-induced cellular network rearrangements is vital for developing therapeutic strategies to bolster cellular robustness [4]. While pharmacological interventions hold promise, their success depends on overcoming challenges related to data quality and predictive modeling, which can enable more effective strategies supporting maternal and fetal health [5].

6.2 Behavioral and Lifestyle Interventions

Behavioral and lifestyle interventions are crucial for managing maternal stress and reducing allostatic load during pregnancy by modifying daily habits to foster a supportive environment for maternal and fetal health. Regular physical activity improves maternal cardiovascular health, mood, and stress levels, promoting a healthier pregnancy [35]. Exercise mitigates chronic stress effects by regulating cortisol levels and enhancing overall well-being.

Sleep, another vital aspect of maternal health, presents challenges due to the complexity of measurement and cumulative stressors [41]. Ensuring adequate sleep is essential for hormonal balance and stress reduction, highlighting the need for interventions promoting healthy sleep patterns. Nutritional strategies play a pivotal role in managing stress during pregnancy, with adequate intake of essential nutrients like vitamin D ameliorating stress effects on hormonal regulation [35]. Future research should explore disrupted hormone mechanisms and vitamin supplementation efficacy in stressful pregnancies.

Integrating physical activity, sleep optimization, and nutritional support into prenatal care can significantly enhance healthcare providers' ability to assist pregnant individuals in managing stress. This holistic approach addresses psychological aspects of pregnancy, as elevated stress levels are linked to adverse outcomes such as low birth weight and preterm labor, while promoting overall maternal and fetal well-being. Moderate-intensity exercise alleviates anxiety and depression during pregnancy, and adequate sleep and nutrition further support maternal health and fetal development. Recognizing cumulative stress effects and implementing comprehensive care strategies can better mitigate prenatal stress risks, improving health outcomes for mothers and children [10, 15, 31, 25, 20].

6.3 Nutritional and Supplementation Strategies

Nutritional interventions and supplementation are critical for managing allostatic load during pregnancy, supporting maternal health, and mitigating chronic stress effects on fetal development. Adequate nutrition maintains hormonal balance and addresses pregnancy's physiological demands, exacerbated by stress [22]. Key nutrients, such as omega-3 fatty acids, folic acid, and vitamin D, are crucial for promoting healthy fetal brain development and reducing neurodevelopmental disorder risks [33].

Omega-3 fatty acids modulate inflammatory responses and support neural development, underscoring their importance in prenatal nutrition [33]. Folic acid supplementation prevents neural tube defects and improves cognitive outcomes in offspring, emphasizing adequate intake during pregnancy [19]. Vitamin D regulates immune function and reduces inflammation, vital for managing stress-related physiological changes during pregnancy [35]. Ensuring sufficient vitamin D levels can mitigate stress impacts on the hypothalamic-pituitary-adrenal (HPA) axis, reducing overall allostatic load [35].

Integrating nutritional assessments with personalized dietary recommendations can enhance interventions aimed at reducing allostatic load. By tailoring nutritional strategies to individual needs, healthcare providers can better support maternal and fetal health, ultimately improving pregnancy outcomes [40]. Future research should explore combining nutritional interventions with lifestyle modifications, such as physical activity and stress management techniques, to further alleviate allostatic load during pregnancy.

6.4 Psychosocial and Community Support

Psychosocial and community support systems are essential for mitigating maternal stress and reducing allostatic load during pregnancy. Integrating social support networks enhances maternal mental health and improves pregnancy outcomes by buffering against stress and diminishing physiological and psychological impacts of chronic stressors [14]. Effective community support strategies address environmental stressors, such as socioeconomic disparities and inadequate healthcare access, which significantly contribute to maternal stress [6].

Community support is particularly crucial in environments like NICUs, where maternal stress is heightened. The Multiple-Stressor approach equips psychosocial providers with a comprehensive understanding of key elements contributing to maternal stress in NICUs, facilitating more effective interventions [28]. Addressing these stressors enhances maternal resilience and improves maternal and fetal health outcomes.

Future research should focus on longitudinal studies to establish causal relationships between psychosocial support and maternal stress reduction, as well as explore interventions aimed at improving maternal sleep to enhance parenting [41]. Investigating interventions to mitigate long-term prenatal stress effects on child development is crucial, particularly given increased stress levels observed during the COVID-19 pandemic.

Community support systems play a pivotal role in raising awareness about pre-pregnancy behavior risks, such as alcohol consumption, and promoting behavioral assessments following chronic stress exposure to better manage stress. By cultivating a nurturing environment and implementing tailored interventions, psychosocial and community support systems can effectively mitigate maternal stress, enhancing health outcomes for mothers and children. Research links prenatal stress to adverse effects like low birth weight and developmental delays, particularly in low- and middle-income countries. Fostering maternal sensitivity—an essential factor for secure infant attachment—can be compromised by stressors, including socioeconomic challenges and mental health issues. Early intervention programs, guided by emerging stress response biomarkers, are crucial in addressing these vulnerabilities, promoting healthier developmental trajectories for children exposed to prenatal stress [15, 33, 16, 31].

6.5 Technological and Innovative Approaches

Technological advancements and innovative approaches are pivotal in managing stress and allostatic load during pregnancy, offering novel solutions for assessment and intervention. Consumer wearable technology integration for non-invasive emotion recognition offers a promising avenue for stress management, evidenced by the feasibility of using such devices to monitor physiological signals and emotional states [40]. This technological approach provides real-time feedback and personalized stress management strategies, enhancing maternal well-being.

Technological advancements extend to gene expression data analysis, improving chronic stress understanding and its implications for conditions like major depressive disorder (MDD) [2]. Leveraging these advancements offers insights into molecular mechanisms underlying stress responses, paving the way for targeted interventions.

In neurodevelopmental disorders, optogenetic stimulation shows promise in addressing dysregulated glutamatergic transmission, crucial for emotional regulation and anxiety control [19]. This innovative technique offers a precise method for modulating neural circuits involved in stress responses, potentially reducing stress-related disorder risks in offspring.

Manipulating the vagus nerve (VNS) presents an intriguing intervention avenue, necessitating future research to explore optimal VNS protocols and microglial response dynamics over time [42]. These investigations could significantly impact stress management and enhance neurodevelopmental outcomes.

To enhance classification accuracy in stress management, future research should focus on integrating contextual data with physiological signals [43]. This approach provides a comprehensive understanding of stressors and their impact, enabling more effective intervention development.

The intersection of technology and innovation in managing stress and allostatic load during pregnancy holds significant potential for improving maternal and offspring health outcomes. By embracing these

advancements, healthcare providers can offer more personalized and effective support to pregnant individuals, ultimately reducing stress-related complication burdens.

6.6 Environmental and Epigenetic Interventions

Environmental and epigenetic interventions are critical for mitigating prenatal stress impacts, potentially improving maternal and offspring health outcomes. Integrating developmental origins of health and disease (DOHaD) concepts underscores epigenetics’ importance in mediating prenatal stress effects, emphasizing targeted interventions addressing these mechanisms [33]. Epigenetic modifications, such as DNA methylation and histone acetylation, regulate gene expression in response to environmental stressors, influencing fetal development and long-term health.

Maternal obesity impacts offspring health through epigenetic pathways. Future research should explore these mechanisms to understand maternal obesity’s link to adverse child health outcomes [13]. Identifying specific epigenetic markers associated with maternal stress and obesity can facilitate targeted intervention development to mitigate these effects.

Significant gaps remain in understanding how different populations, particularly ethnic minorities, experience and measure allostatic load and its health impacts [5]. Addressing these disparities is essential for developing culturally sensitive interventions considering diverse populations’ unique environmental and genetic contexts.

Innovative prenatal stress effect measurement methods are crucial for advancing maternal and child health therapeutic strategies. Future research should focus on developing non-invasive biomarkers and exploring their intervention strategy implications [8]. These advancements provide valuable insights into prenatal stress exposure timing and extent, enabling more precise interventions.

Longitudinal studies integrating diverse methodologies are necessary to explore allostatic load’s health outcome impact and develop effective interventions [1]. Combining environmental assessments with epigenetic analyses offers a comprehensive understanding of prenatal stress factors and effects, ultimately informing intervention development to enhance health outcomes for mothers and offspring.

Feature	Pharmacological Interventions	Behavioral and Lifestyle Interventions	Nutritional and Supplementation Strategies
Intervention Type	Biochemical Pathways	Daily Habit Modification	Nutrient Intake
Target Outcome	Stress Reduction	Allostatic Load Reduction	Hormonal Balance
Unique Feature	Personalized Medicine	Holistic Approach	Omega-3 Importance

Table 2: This table provides a comparative overview of various intervention strategies aimed at managing maternal stress and allostatic load during pregnancy. It categorizes the interventions into pharmacological, behavioral and lifestyle, and nutritional and supplementation strategies, highlighting their respective intervention types, target outcomes, and unique features. The table underscores the importance of integrating diverse approaches to enhance maternal and fetal health outcomes.

7 Conclusion

This survey has explored the complex interplay between allostatic load and chronic stress, emphasizing their profound effects on maternal and fetal health. The physiological toll of stress during pregnancy, encapsulated by the concept of allostatic load, poses significant risks such as preterm birth, low birth weight, and enduring neurodevelopmental challenges. These findings highlight the critical need for integrated management strategies that encompass pharmacological, behavioral, and nutritional interventions to alleviate these adverse effects.

The potential of personalized healthcare is underscored, particularly in enhancing the precision of stress detection and intervention methods. Non-invasive technologies, such as ECG data analysis, present promising opportunities for the early identification and scalable management of maternal-fetal stress. Future research directions should focus on deepening our comprehension of the molecular and epigenetic foundations of stress responses and improving training methodologies for predictive models.

Longitudinal research is imperative for monitoring health trajectories from birth into adulthood, considering the influence of nutrition and environmental factors on fetal programming. Additionally, there is a need for further exploration into the neurobiological aspects of maternal behavior and its

repercussions on offspring, especially within vulnerable populations. Investigating the impact of specific preconception stressors on pregnancy outcomes and the molecular mechanisms that drive synaptic and neural pathway alterations in stress and anxiety is also crucial.

In conclusion, the survey advocates for multi-scale approaches and the identification of potential biomarkers for prenatal stress, which are essential for crafting effective interventions. Bridging these research gaps will enhance our capacity to improve maternal and offspring health outcomes, contributing to the well-being of future generations.

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