

PRECONCEPTION CARE

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INTRODUCTION

Planning pregnancy can help to make wise choices that will benefit both mother and baby. Many women don't know they are pregnant until several weeks after they have conceived. These early weeks are key for the baby's growth. Good health and health care before you become pregnant also called preconception care It will help throughout your pregnancy.

DEFINITION

In 2006, the Centers for Disease Control and Prevention defined periconceptional care as "a set of interventions that aim to identify and modify biomedical, behavioural, and social risks to a woman's health or pregnancy outcome through prevention and management."

GOALS FOR IMPROVING PRECONCEPTIONAL CARE

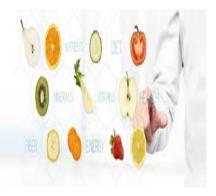
- 1. Improve knowledge, attitudes, and behaviours of men and women related to periconceptional health.
- 2. Assure that all women of childbearing age receive periconceptional care services including evidence-based risk screening, health promotion, and interventions that will enable them to enter pregnancy in optimal health.
- 3. Reduce risks indicated by a previous adverse pregnancy outcome through periconceptional interventions to prevent or minimize recurrent adverse outcomes.
- 4. Reduce the disparities in adverse pregnancy outcomes

COMPONENTS OF PRECONCEPTIONAL CARE HEALTH PROMOTION: GENERAL TEACHING

- 1. Nutrition
 - ➢ Healthy diet, including folic acid
 - Optimal weight
- 2. Exercise and rest
- Avoidance of substance abuse (tobacco,alcohol, "recreational" drugs)
- 4. Use of safer sex practices
- 5. Attending to family and social needs

RISK FACTOR ASSESSMENT

- 1. Medical history
 - Immune status (e.g., rubella)





- Family history (e.g., genetic disorders)
- Illnesses (e.g., infections)
- Current use of medication (prescription, nonprescription, herbal)
- 2. Reproductive history
 - Contraceptive
 - > Obstetric
- 3. Psychosocial history
 - Spouse/partner and family situation, including domestic violence
 - Availability of family or other support systems
 - Readiness for pregnancy (e.g., age, life goals, stress)
- 4. Financial resources
- 5. Environmental (home, workplace) conditions
 - Safety hazards
 - > Toxic chemicals
 - Radiation

INTERVENTIONS AS INDICATED

- 1. Anticipatory guidance/teaching
- 2. Treatment of medical conditions and results
 - Medications
 - Cessation/reduction in substance use/abuse
 - Immunizations (e.g., rubella, hepatitis)
- 3. Nutrition, diet, and weight management
- 4. Exercise

6.

- 5. Referral for genetic counseling
 - Referral to and use of other services
 - Family planning services
 - ➢ Family and social needs management.

PRECONCEPTIONAL COUNSELING VISIT

- 1. Personal and Family History
- 2. Medical History
- 3. Genetic Diseases
- 4. Reproductive History
- 5. Social History
- 6. Maternal Age
- 7. Adolescent Pregnancy
- 8. Paternal Age
- 9. Recreational Drugs and Smoking
- 10. Environmental Exposures
- 11. Electromagnetic Energy.

LIFESTYLE AND WORK HABITS

1. Diet







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- 2. Exercise
- 3. Domestic Abuse
- 4. Family History
- 5. Immunizations
- 6. Screening Tests
- 7. Contraception
- 8. Genetic Screening

CONCLUSION





Preconception care consists of three main components: Risk assessment, health promotion, and intervention. Preconception care and early pregnancy care are excellent opportunities to modify the medical, social and behavioural risks on pregnancy outcomes and should be an integral part of primary care practice. The benefits are not likely to be fully realized unless primary care physicians include preconception care as a routine intervention for all women of reproductive age in their practice.

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