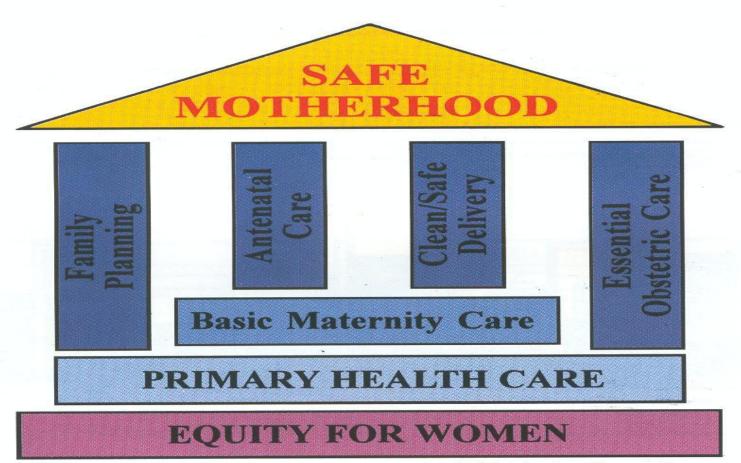


### Maternal Health

Dr Deepika Attygalle
MSc, MD (Communiy Medicine)
Programme manager maternal Care
Ministry of Health

A pregnant woman and her baby are one entity - What affects one, affects the other



Source: WHO Mother Baby package, Implementing Safe Motherhood in countries -WHO\FHE\MSM\94.11

WILLO Mathew Doby



### Every minute Globally

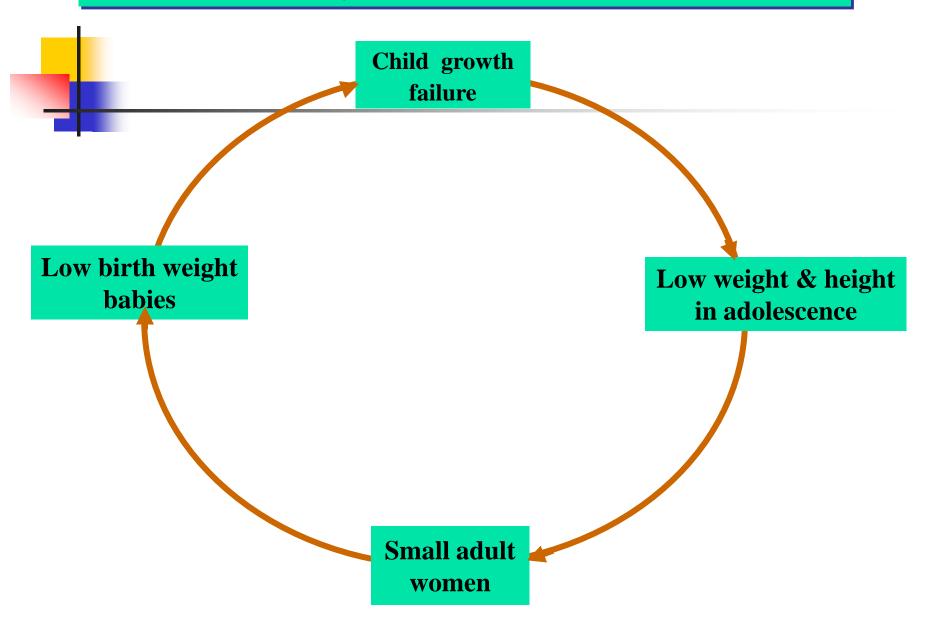
- 380 women become pregnant
- 190 women face an unplanned or unwanted pregnancy
- 110 women experience a pregnancy- related complication
- 40 women have an unsafe abortion
- 1 woman dies

  ■

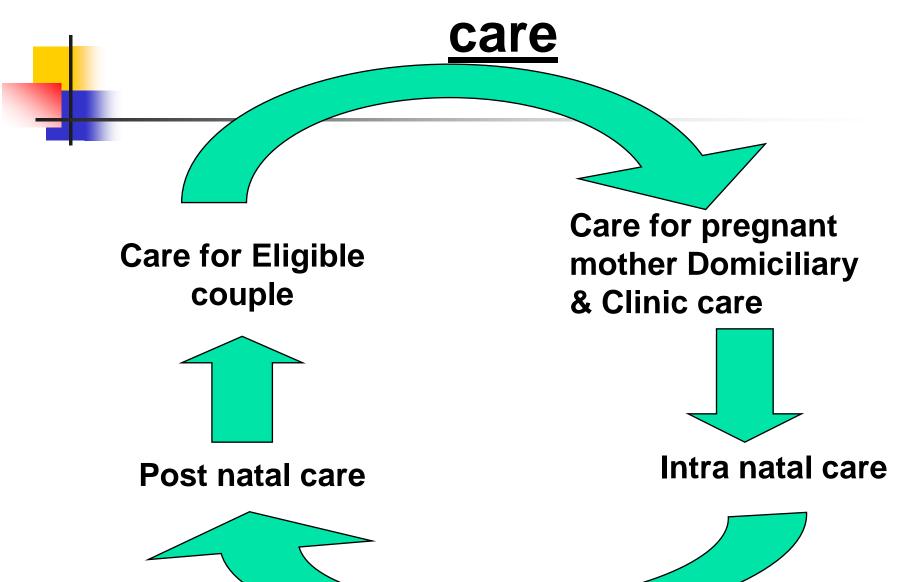


## Wellbeing of the mother and the newborn

### **Life Cycle of Malnutrition**



## Organized and continued MNH



### Intervention Prior to or During Pregnancy

#### - Prior to Pregnancy

Domiciliary care and clinic care by Public Health staff

Every Married couple is under Health care worker Eligible Couple registration (93%)

Rubella Immunization introduced in 1996

(coverage age 16-44 -s 42.4%)

Family planning

Risk screening and Nutritional education

**Preparation for pregnancy** 

AJ/FHB 7

### **Ante Natal Care**

- Periodic health check
- To estimate gestational age, monitor fetal growth and accurately identify presentation and position of fetus.
- To recognize and early detect anaemia in pregnancy and take appropriate action.
- To recognize risk factors and medical diseases complicating pregnancy and treat and manage appropriately.

# **Intervention During Antenatal Period Cont..**

#### Prevention of infection.

- Anti helmenthic treatment for all pregnant mothers after 12 weeks of POA.
- Malarial prophylaxis for mothers in endemic areas.
- Tetanus toxoid immunization (coverage 100%).
- Screening for syphilis ? HIV.

#### Information education and communication.

- Information on nutrition, preparation for bf, identification of danger signs etc.
- Education on family planning.

# **Current Status of Maternal Nutrition**

- Pregnant mothers with < 18.5 26%</li>
- Aneamia During pregnancy 30.3%
- Weight gain during pregnancy 8 kg (7-9)

**Source** – FHB 2006 data base, Assessment of Anaemia status in Sri Lanka 2001, MRI survey report 2003

# Why maternal weight gain is important

- Affect on the Health & Birth Weight of the baby
- May affect on weight gain in infancy & childhood
- May show delayed development
- Prone for frequent infections & thereby lower the quality of life of whole family

• • •

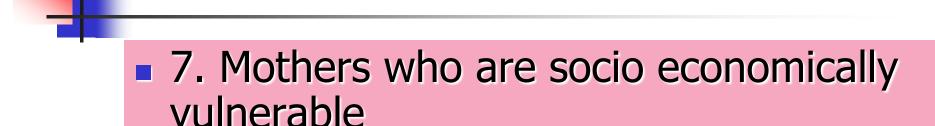
# Expected Maternal Weight Gain during pregnancy

| BMI         | Expected weight gain |
|-------------|----------------------|
| <18.5       | 12.5 - 16            |
| 18.5 - 24.9 | 11.5 - 14            |
| 25.0 - 29.0 | 7.0 - 9.5            |
| >30         | = 6.8</td            |

# Mothers who need close monitoring of weight gain & evaluation

- 1.Those with low prepregncy BMI (under weight) and those with higher prepregnancy BMI (over weight & obese)
- 2. Multiple pregnencies
- 3. Anaemic mothers
- 4. Short interval pregnancies
- 5. Teenage pregnancies
- 6. pregnant while lactation





- 8. Mothers with infections
- 9. Mothers with medical disorders
- 10. Gain of more than 3Kg per month for any mother



## Target the pregnant mothers with pre pregnant BMI less than 18.5 by;

- Nutrition counseling on importance of increased intake of food rich in energy, protein and micronutrient
- Reduce heavy work load
- attain & sustain high coverage with micronutrient supply
- strengthen de worming
- Improve quality of maternal care











# Maternal wellbeing during postpartum

- Nutrition
- Hygiene
- Mental wellbeing
- Contracepton

#### **Post Natal Care**

- Information and counselling on infant care and nutrition
  - Adequate intake of micronutrient
  - Vit A supplementation
  - Family planning information and services
  - Counselling on the benefits of ECCD (stimulation, attention, love etc.)
  - Counselling or possibility completion by the health workers of legal registration of birth

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