



OPTIMIZING PRECONCEPTION HEALTH

INFORMATION FOR HEALTH CARE PROVIDERS

- Encourage women considering pregnancy to schedule a visit to discuss preconception health and the optimization of maternal and fetal outcomes.
- Take advantage of episodic visits to identify health risks, offer related interventions and encourage positive health behaviours *prior* to conception.
- Encourage all women and men of reproductive age to develop a reproductive-life plan, whether they intend to have children or not.
- Recommend a daily multivitamin containing 400 mcg (0.4 mg) of folic acid for all women of reproductive age who *could* become pregnant, and discuss risk factors that may warrant a higher dose.
- Ensure that immunizations are complete and up-to-date, using immunization history or serological testing for routinely recommended adult vaccines and those for which pregnancy requires specific screening.
- Review all medications for their potential teratogenicity and counsel women about the potential impact on a pregnancy, regardless of their plans to conceive.
- Discuss the effects of alcohol in pregnancy and encourage abstinence leading up to and during pregnancy.
- Promote smoking cessation. Prepregnancy is the ideal time to stop smoking in order to prevent adverse perinatal outcomes associated with maternal smoking.
- Encourage progress towards healthier weights in women who are underweight, overweight or obese. Adverse perinatal and maternal outcomes can be reduced with appropriate preconception weight gain or loss.
- Screen for elevated sexually transmitted infection (STI) risk factors. Identifying an infection before conception allows for timely treatment and prevention of transmission during pregnancy and birth.
- Optimize chronic medical conditions prior to conception to improve perinatal and maternal outcomes.
- For women who have previously given birth, discuss interpregnancy interval (IPI)—the time between a live birth and the beginning of the following pregnancy. Both short and long IPIs have been associated with an increased risk of adverse maternal and newborn outcomes.

For references consult **Chapter 2: Preconception Care** in: Public Health Agency of Canada. Family-Centred Maternity and Newborn Care: National Guidelines. Ottawa (ON): PHAC; 2018.

For more information about the **Family-Centred Maternity and Newborn Care: National Guidelines**, or to download this document, please search “maternity and newborn care” on **CANADA.CA**.



Public Health
Agency of Canada

Agence de la santé
publique du Canada

Canada