



### ANTENATAL CARE

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### **LEARNING OBJECTIVES:**

### By the end of this subject the student will be able to:

- -Define antenatal care
- -List the objectives of antenatal care
- -Plan a protocol for antenatal care including determining the minimal number of visits
- -Mention the value of the first visit correctly
- -Mention the objectives of subsequent visits
- -List routine investigations for pregnant women
- -List the warning symptoms of pregnancy
- -Know the risk factors for pregnancy
- -Take an appropriate history from a pregnant woman during an antenatal visit
- -Diagnose some obstetric and general conditions from the results of routine investigations.

### **Definition:**

# It is a program of preventive obstetrics It aims at Safe mother hood

### Aims of antenatal care:

- Erly diagnosis & prompt management of preexisting medical disease (e.g. D.M.).
- *Prevention* of pregnancy-induced complications (e.g. PET).
- Health Education for adequate diet, proper hygiene and warning symptoms
- Doing important laboratory investigations e.g. blood group& Rh factor
- Adequate management of problems that may affect labor (e.g. disproportion)

### Pregnancy Risk Assessment:

To determine the type of pregnancy whether Low Risk or High Risk according to the following factors:

- -Age -Parity
- -Socio-economic status
- -Previous infertility
- -Obstetric history
- -Chronic maternal disease

-BMI

Frequency of Visits: depends upon the type of pregnancy:

### Low Risk pregnancy:

/month in the 1st 7 months, /2weeks in the 8th month, /week in the 9th month.

High Risk pregnancy: increased (may be doubled, my be hospitalized).

# First Visit

# The following things should be done

Registration and Filing: better to be electronic.

History taking: to cover all items in the personal, menstrual, obstetric, past and family history.

### Examination:

- conducted systematically
- Indications for vaginal examination:
  - diagnosis of pregnancy (before U/S)
  - bleeding (in early pregnancy or after exclusion of placenta previa in late pregnancy).
  - presence of uterine colic
  - · presence of vaginal discharges.

### Investigations:

Urine:-albumin -sugar

Blood:-Hb%, -blood group

- Rh factor.

Others: according to the merets of each case.

# Follow up Visits

# History taking:- warning symptoms. Examination:-

- -BP -weight gain (ideally  $\leq 2kg/m$ ).
- -L. Ls.: edema.
- -Abdominal examination:-fundal level (fetal growth)
- -Vaginal examination: for
  - \*pelvimetry at the 36th week.
  - \*diagnosis of labor.
  - \*evaluation of the cervical condition on attempted termination of pregnancy.

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### Investigations:

The urine is retested for:

the appearance of albumin or sugar

## Instructions

Habits: 3 Bs.

Bath: shower and not tube

#### Breast care:

- -daily wash,
- -nipple massage: glycerine & alcohol
- -nipple withdrawal: particularly for primigravid.
- Bowel: prevent constipation "by fresh vegetables".

Clothes loose with no high heals.

## Requirements

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- -BMR: \*non pregnant: 1500 cal./day.
- -Total caloric needs (=BMR+work):
- \*non-pregnant:- 2000-2300 cal./day.
- \*normal pregnancy: 2300-2500 cal./day.
- -Proteins:\*non pregnant: 1 g/kg/day,
  - \*pregnant: 1.5g/kg/day,
- -carbohydrates: 65 g/day.

### Vitamins:

- vit. A: 1000 IU/day
- vit. D: 400IU/day
- thiamin: 0.4 mg/day
- riboflavine: 0.7 mg/day
- nicotinic acid: 3 mg/day
- pyridoxine: 2.5mg/day
- cyanocobalamin: 7μg/day
- vit. C: 40mg/day
- Folic acid: 300µg/day

# Minerals

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- -Ca 5g/day and
- -Na& K.: no need for supplementation
- -iron:\*non pregnant: 1.5 mg/day.
  - \*food: 15mg/day (absorbed 1/10).
  - Needs during pregnancy:
  - \*external losses: 170mg,
  - \*maternal expansion: 450mg,
  - \*fetal expansion: 270mg,
  - \*placenta and cord: 90mg

total 980 mg.

Supplementation after the 16th week, by Fe SO4

200mg=60mg elemental=6mg absorbed/day

# The suggested adequate balanced diet might be in the form of:

- -Breakfast: 200ml milk, piece of cheese, one egg, bread
- -Supper: 200ml milk
- -Lunch: Potatoes, 120gm Meat or Fish, Fresh vegetables, bread, Fruit
- -Supper: 200ml milk
- -Dinner: 200ml Milk, cheese, butter, bread, fresh fruit juice.

### Warning Symptoms:

- -Vaginal bleeding
- -Sudden water per vagina
- -Colic
- -Heaviness, Frequency, Backache
- -Swelling of the L.Ls., face, fingers.
- -Persistent headache, vomiting, blurring of vision
- -Yellow discoloration.

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