

# RECOMMENDATIONS

## Considering that:

- Most new progress in perinatal outcomes will be observed if we focus on preconception health and preconception care (PCC).
- The first cause of perinatal death or morbidity is birth defects (including congenital anomalies, preterm birth, low birthweight, neurodevelopmental anomalies).
- Congenital anomalies occur or manifest in very early pregnancy before most women know they are pregnant.
- Many aspects of preconception health are outside the field of care providers and would be taken into account not only by the Ministry of Health but also by other Ministries.
- Preconception health is not limited to the few months before conception, but concerns all the reproductive life of women and men
- Health is foundation of social progress and that preconception health of the mother is the foundation of the health of her offspring as future adult.

## Taking into account:

- Epidemiological data on birth defects.
- EBM researches on efficient actions to make during preconception period.
- The fact that many actions to promote preconception health are outside the fields of care providers but must be done before.

The participants of the 1st European Congress on preconception care and preconception health, held in Brussels 6/10/10 to 9/10/10, propose to the Ministers of Health of European governments:

## As general recommendations:

1. To support any action which promotes preconception care and health (for example, to organize an “European Preconception week or day”)
2. To favour and support the realization of tools to inform providers of the importance of preconception health from a point of view of sustained development and to give guidelines on PCC to all primary care providers,
3. To favour and support the realization of tools for population in reproductive age to be aware of preconception care,
4. To introduce PCC in the missions of Family Planning Centres and to favour any multidisciplinary or integrated approach of PCC
5. To modify the curricula of all health professionals in the purpose to cover preconception health, both in the basic training and continuous education programmes.
6. To include reproductive health (preconception and pregnancy) in all policy strategies aimed at tackling major determinant of health (tobacco, alcohol, obesity ...) and to promote Preconception health in particular at school.
7. To favour all political actions which could reduce social inequalities, one of the most important issues of health, as they may impact negatively the fertility of prospective parents and their children.
8. To facilitate access to PCC services (for example by increasing the insurance coverage) to all people, as an universal health service
9. To support Parent and Patient Organisations which have an unique position to emphasize the importance of informed choice and preventive options which simultaneously point to social and economic solidarity for people with hereditary and congenial disorders.
10. To adopt the WHO resolution on birth defects.

## As specific recommendations

### Folic Acid

1. To have a consensus between the different governments of Europe concerning flour fortification (Addition of folic acid in the flour), because Flour fortification has been proved to be the most efficient action to reduce NTD; and/or to accelerate the implementation of preconception micronutrition programs.

### Chronic and endocrine diseases

2. To sensitize endocrinologists and neurologists or other practitioners who are prescribing potentially dangerous drugs
  - to the importance of preconception care and that all women in reproductive age could become pregnant at any time, and
  - to the importance of a good management of therapy in women with epilepsy, diabetes, obesity or thyroid dysfunction in particular before pregnancy.

### Immunization

3. To insure immunization for all babies and children
4. To inform general practitioners and women in reproductive age of the importance to know their immunization status and to immunize them, if necessary, before the pregnancy
5. To recommend immunization against influenza if pregnancy is planned during the flu season
6. To make campaign on the importance of hand washing (for CMV prevention, for example)
7. To inform physicians of the importance to enquire for possible travel or healthcare exposure; in such cases, vaccines are needed.
8. To favour immunization in adolescents (scholar medicine, for example for Pertussis)
9. To promote any strategy which implements preconception immunisation of women where infrastructure exists

### Fundamentals

10. To conduct more researches & surveillance on PCC, including both research on causes of poor outcomes, and research on the effectiveness of preconception care interventions.
11. To identify lead/appointed responsible persons to lead national efforts in that field.
12. To support the implementation of birth defects registries

### Nutrition

13. To favour actions which can reduce the weight gain
  - a. Balanced nutrition
  - b. Physical activities, sports, ...
14. To increase surveillance of alimentary chain
15. To improve nutritional education (at school, in the Medias...)

### Psychosocial issues

16. To consider that women affected by psychiatric disorders have not to be neglected as special maternal disease, but that they need special preconceptional care, as Preconception consultation may help to identify ways to reduce psychiatric complications
17. To sensitize to and to inform all practitioners of the importance of psychosocial issues in pregnancy and the post-partum period so that they will be able to screen and treat women before and between pregnancies, as:
  - a. Pregnancy and post-partum period are times of high risk for psychiatric symptoms
  - b. Stress (Anxiety, depression) during pregnancy has both short- and long-term effects on the offspring

c. Psychological aspects should be included in the family planning care, as Family planning may be an optimal solution to prevent perinatal depression and its complications, even the prevalence of depression of the future generation

18. To help the providers to recognize vulnerable populations in the purpose to support them in future parenthood.

## Genetics

19. To ensure timely access to high quality clinical genetic services

20. To promote genetic literacy of medical professionals and the general public

21. To facilitate preconceptional carrier screening within the health care system

## Addictions (Tobacco, Alcohol, Drugs)

22. To favour campaigns against tobacco and alcohol, principally in periconceptional period

23. To implement centres for Tobacco Addiction in hospitals or outside

24. To facilitate any action focused on adolescents to be aware of the risks of drug addiction

25. To be aware of and to avoid any lobbying of tobacco industries on political decision-makers

## Environment

26. To promote researches not only on human beings but also on environment in an approach of sustained development, concerning future generations (a particular attention must be given to pesticides).

27. To facilitate any action for safe environment and products (Hazards: chemical, physical, biological)

28. To propose edicts, laws to improve environment quality in working conditions and public space

29. To establish independent committees which should inform government about environmental hazards in relation to reproductive health (after assessment of the validity of information)

30. To facilitate free access to information or treatment of environmental and occupational hazards