



Women's Health

Maternal Health



Common terms

- **Neonate/Newborn** – A child from birth to the first 28 days of life.
- **Infant** – A child from birth to 1 year of age.
- **Infant mortality rate (IMR)** – Number of infants dying per 1000 live births per year.
- **Maternal Mortality Rate (MMR)** – Number of mothers dying due to pregnancy related causes (During pregnancy/childbirth/ in upto 42 days thereafter) per one lakh live child births per year.
- **Neonatal/Newborn mortality rate (NMR)** – Number of newborns dying per 1000 live births per year.
- **Low Birth Weight (LBW)** – any child born with birth weight < 2500 grams

Maternal Death

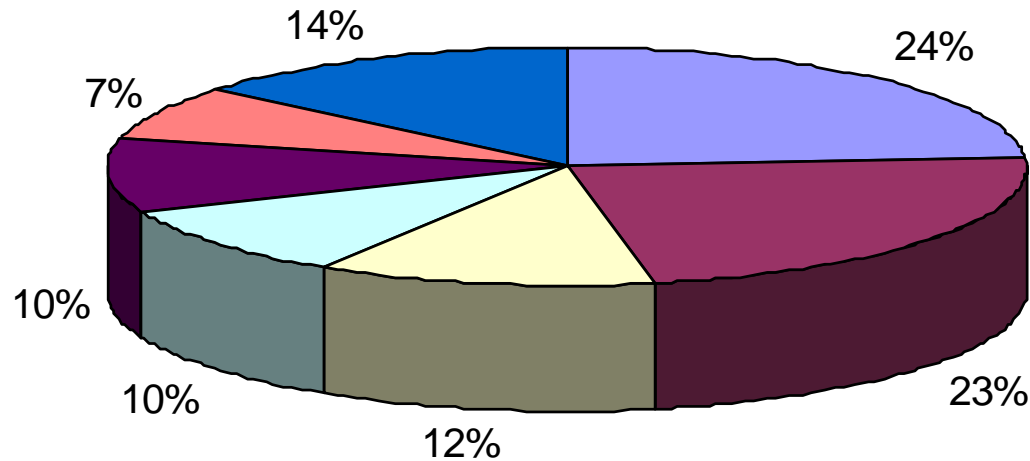
- In group three each, discuss and list main causes of maternal death on chart paper . We will hear some example (10 Minutes).

Maternal Health

- **Women Constitute 50% of The Total Population**
- **Women Are One Of The Most Vulnerable Groups of The Society**
- **India has High Maternal Mortality Ratio (MMR)- 301 Per 1,00,000 Live Births**

Causes of Maternal Mortality

Causes of Maternal Mortality



■ Anemia ■ Hemorrhage ■ Abortion ■ Toxemia ■ Puerperal sepsis ■ Malposition ■ Others

Source: Registrar General India, Survey of Causes of Death (Rural) 1998

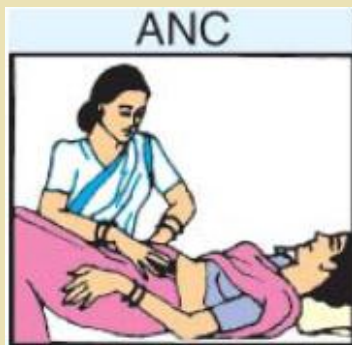
Proper Care of Pregnant and Lactating Mothers Could Prevent Maternal Mortality

Antenatal Care

In group three each, discuss and list government services which are available at facility level and why it is important for pregnant woman. We will hear some example (10 Minutes).

ANTENATAL CARE

- The first visit is recommended as soon as the woman feels that she is pregnant This is called registration of pregnancy, which ensures that all pregnant women receive care throughout pregnancy.
- In villages/districts where female fetuses are being eliminated before birth, it is further important that pregnancy is registered early.
- The second visit should be made between the fourth and sixth month
- The third visit should be planned in the eighth month
- An additional visit in the ninth month would help provide better care.
- If the health worker identifies health problems during these visits, a visit to a doctor will become necessary.

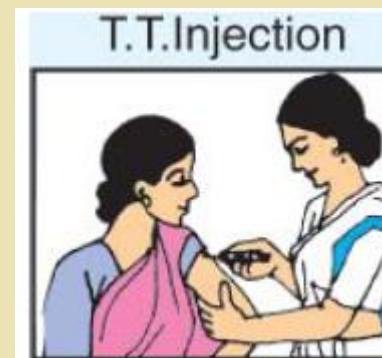


Antenatal Care



Registration With ANM Within 12 Weeks

- Tetanus Toxide (TT) Injection Should Be Given – Two Doses at the Interval of One Month. It Gives Immunity Against Tetanus to Mother & Child
- **Regular Consumption of Iron Tablets Which Helps in Preventing Anaemia**
- Medicines Should be Taken in Consultation With ANM Or Doctor
- **Sufficient Rest**





Health Check-Up



- **Regular Health Check-Up with Nearby ANM Or Doctor**
- **Check-Up Should Be Done At Least 3 Times During Pregnancy**
- **Helps to Find Out Growth of the Foetus**
- **Helps to Detect Diseases / Complications At The Earliest**
- **Helps to Take Immediate Action**



Blood pressure



Health Check-Up

Weight



Should Include

- **Colour of Eyes, Nails, Tongue : For Detecting Anaemia**
- **Swelling on the Hands, Feet & Face**
- **Blood Pressure**
- **Measurement of Weight : For Finding Foetal Growth**



STAGES OF PREGNANCY



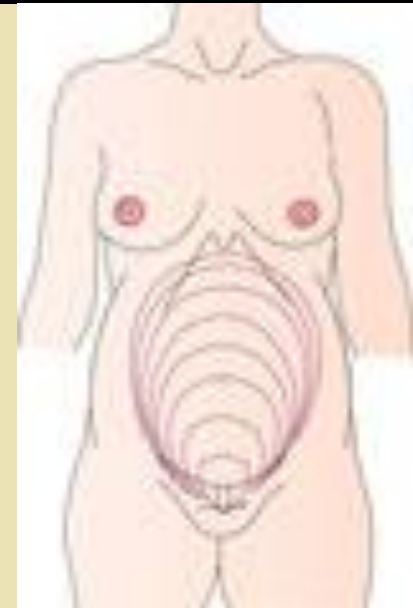
First Trimester
(week 1 - week 12)



Second Trimester
(week 13 - week 28)



Third Trimester
(week 29 - week 40)



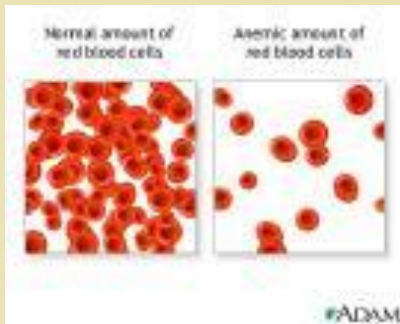


WEIGHT GAIN DURING PREGNANCY

- **6 Kg.** : Baby + Products of Conception (Placenta, Amniotic Fluid etc.)
 - **6 Kg.** : Muscles, Breast & Fat on Body
 - **Total 12 Kg.**
- **First Trimester** : Per Month **500-750 gms.**
 - **Second Trimester** : Per Month **1 – 1.5 Kg.**
 - **Third Trimester** : Per Month **1.5 – 2 Kg.**
 - **Total 12 Kg.**

Causes of Anemia

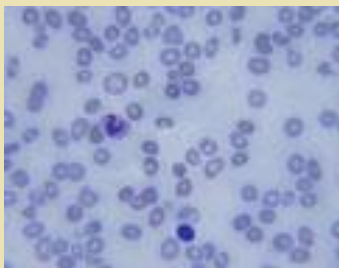
In group three each, Discuss and list on chart paper the What is main cause of Anemia and its treatment available at home and government health facility for pregnant woman.



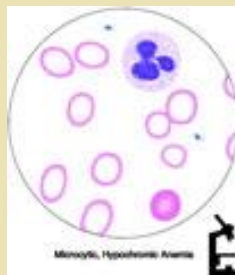
Anaemia



- **Is Caused Due To Iron Deficiency**
- **Could Prove Harmful During Delivery If Heavy Blood Loss Occurs**
- **Should Be Treated Early**
- **Symptoms –**
 - **Weakness**
 - **Pale Colour of Eyes, Nails & Tongue**



Anaemia



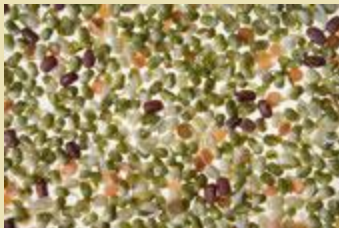


Anaemia

Continued.....

Treatment

- **Should Consult Doctor**
- **Iron Tablets Should Be Consumed Regularly**
- **Foods rich In Iron Content e.g. Green Leafy vegetables, Sprouted Pulses, Meat, Eggs, Jaggery etc. Should Be Eaten**
- **Iron Utensils Like '*Kadhai*' Should Be Used For Cooking Food**



Maternal Health



High BP During Pregnancy

Signs & Symptoms –

- **Swelling on Hands, Legs, Face**
- **Dizziness**
- **Headache**
- **Blurred Vision**
- **Pain in Upper Part of The Abdomen**



Nutrition During Pregnancy

In group three each, Discuss and list on chart paper, kind of food to be given to or not to be given during pregnancy and how many time food to serve. (10 minutes).



Nutrition During Pregnancy



- **Pregnant Mother Should Eat More Than The Regular Diet**
- Food Should Be Eaten 4-5 times in a Day
- **Iodized Salt Should Be Consumed**
- Food Items With High Iron Content Should Be Eaten e.g. Ragi, Jowar, Bajra, Jaggery, Green Leafy Vegetables, Drumstick, Meat, Fish, Eggs etc.



R,KHANDWA

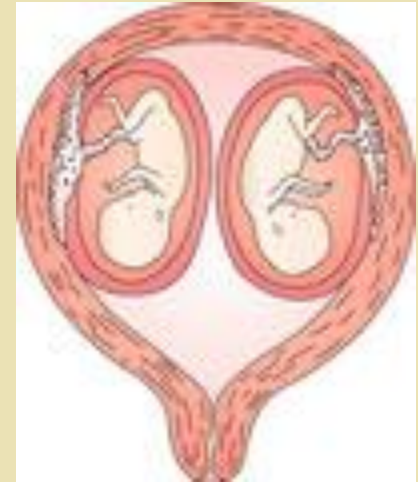
Maternal Health

High Risk Pregnancy

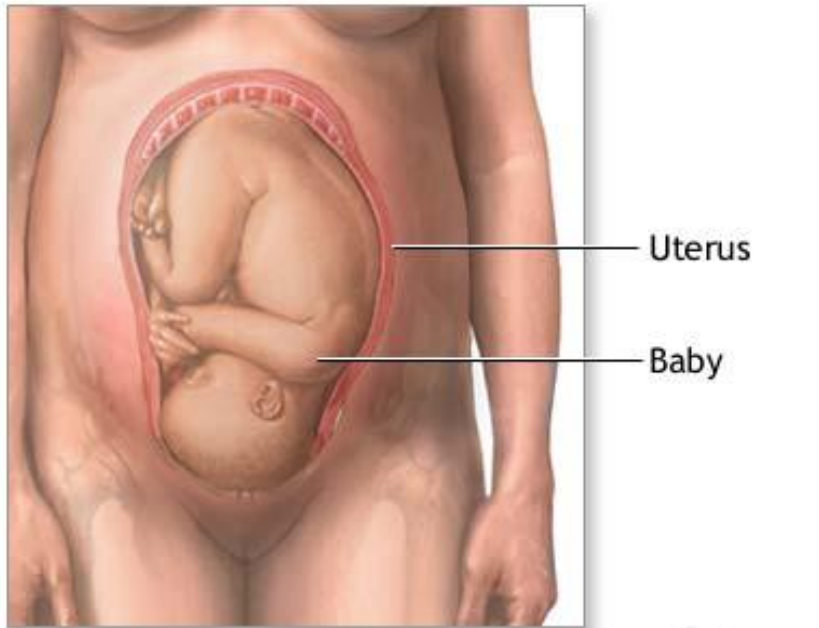
In group three each, Discuss and list on chart paper, symptoms of high risk mothers and danger signs which need extra care during pregnancy, we will hear some example . (10 minutes).

At Risk Mothers

- Height Less Than 5 Feet (150 Cms.)
- Age less Than 18 Years
- Age More than 35 Years
- Mothers Having More Than 4 Children
- Foetus With Breech Position
- Two Foetuses (Twins)
- Prolonged Pregnancy (14 Days – after Expected Date of Delivery)



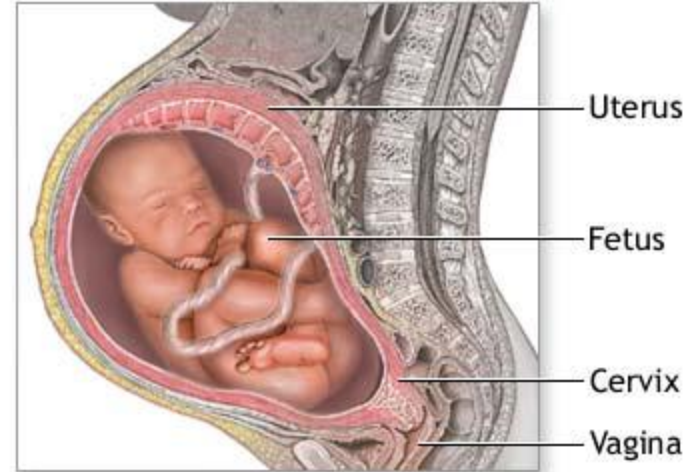
COMPLICATIONS



NORMAL POSITION

ADAM.

Fetus in breech presentation



ADAM.

Fetus in transverse lie presentation



EFICOF

ADAM.

Fetus in posterior presentation



ADAM.

At Risk Mothers

- **Mothers Having History of Complications During Previous Pregnancy Such As –**
 - **Heavy Bleeding**
 - **Pre Term Delivery**
 - **Low Birth Weight Baby**
 - **Caesarian OR Instrumental Delivery**
 - **Abortion / Still Birth**
- **Mothers With Diseases Like**
 - **TB, Jaundice**
 - **High Blood Pressure**
 - **Cardiovascular Disease**
 - **Diabetes**



Danger Signs During Pregnancy

- **Severe Anaemia**
- High Fever
- **Severe Weakness**
- Bleeding / Heavy Bleeding
- **Swelling on Feet,**
- Headache, Blurring of Vision, Giddiness, Fits
- **Vomitting**
- Abdominal Pain



Danger Signs During Pregnancy

- Foetal Heart Beats Above 180 OR Less than 120**
- Slowing Down of Foetal Movements**
- Discharge of Amniotic Fluid**
- Labour Pains for More Than 12 Hours**



**Such Mothers Should Be Admitted to
Nearest Dispensary / Hospital**

Referral of At Risk Mothers

- **At Risk Mothers OR Pregnant Mothers With Danger Signs Should Be Admitted To Well Equipped HOSPITAL Having Facilities Such As**



- **24 Hour Attendance**
- **Experts Like Gyneacologist & Anaesthetist**
- **Operation Theatre**
- **Blood Transfusion**
- **Oxygen & Life Saving Medicines**
- **X-Ray & Laboratory Diagnosis**

Home Care During Pregnancy

- The woman's family and community have the key responsibility for making sure that the woman gets more food, takes rest and does not have to do heavy manual work during pregnancy
- The pregnant woman needs extra energy from food, for the sake of her own health, for the growing fetus and for effective breastfeeding later on.
- During pregnancy a nutritious diet which is rich in iron, calcium and protein is required. For this, a pregnant woman should eat more green, leafy vegetables like palak and sarson, dals, milk, jiggery, eggs, fish, meat, etc. Taboos and restrictions on a pregnant woman's diet, such as not allowing certain vegetables, fruits, milk and ghee, might in fact harm her and the baby.
- Pregnant women are entitled to get food from the Anganwadi centre.

Home Care During Pregnancy

- A pregnant woman should not fast. This deprives her and the growing baby inside the uterus of essential food.
- Pregnant women should not carry out heavy manual labour, like working on construction sites, famine relief, brick kilns, etc. Other members of the family and community should help to reduce her work burden.
- Pregnant, adolescent girls are especially likely to be under-nourished and are more likely to suffer problems during delivery. They need extra nutritious food and help for safe delivery at a health facility.
- Sometimes there are overweight pregnant women who need to avoid eating fat-rich food like oil, ghee, sugar, etc), but they should continue to eat vegetables, fruits, nuts and milk which are rich in iron, calcium, vitamins and minerals. They should also take regular exercise and consult a doctor

In group three each, Discuss and list on chart paper, what you will do to save pregnant mother from maternal death. We will hear some example (10 minutes).

You need to do

- You should identify all pregnant women in your village.
- You should help pregnant women in getting registered between 12-16 weeks of pregnancy and in getting the next three ante-natal check-ups.
- Ensure all requisite examinations/investigations are done for all pregnant women.
- You should know the date and time of availability of ANM in Anganwadi Centre (AWC) in your village and inform all pregnant women about the same.
- Advise pregnant women regarding importance of balanced diet and ensure undernourished pregnant women receive supplementary food from AWC.
- You should track the drop-out pregnant women especially those who live in remote areas, are below poverty line, schedule caste/schedule tribe/migrants etc and help them in accessing health services.
- Help eligible pregnant women to get benefits under Janani Suraksha Yojana

You should know

You should also know

1. The location of nearest hospital with obstetrician, anaesthetist, paediatrician, nursery, O.T. and blood bank.
 2. The mode of transport to reach facility should there be an emergency
 3. Approximate cost for Caesarean Section, blood transfusion and hospital stay, if it is a private hospital.
- In case, it is a second pregnancy, when a couple already has a daughter, You needs to be alert to the possibility that the family may reject another daughter and counsel accordingly.

Post Natal Care

- **First Six Weeks (42 Days) After Delivery Are Very Crucial**
- **Special Attention Should Be Paid To Mothers Health**
- **After the delivery, health worker should visit the woman frequently – twice a day during first three days and once a day till umbilical cord drops off, and there after once week till 6 weeks.**

Post Natal Care

- **Woman should be examined from “head to foot” – temperature, pulse and respiration, examination of breast, progress of involution of uterus, lochia for any abnormality.**
- **Women will have vaginal discharge for few days after delivery. Only clean pieces of cloth (washed with soap and dried in sun) should be used.**

Post Natal Care

- **After delivery, complications like Puerperal Sepsis, Thrombo-phelbitis, Secondary Hemorrhage may arise, which should be recognised early and dealt with promptly.**
- **Personal Hygiene Should Be Maintained**
- **Lactating Mother Should Take Sufficient Rest**

Nutrition After Delivery



- **Normal Diet Should Be Started After Delivery**
- **Nutritious Food Should Be Given To Mother**
- **Mothers Diet Should Include Pulses, Vegetables, Fruits, Meat, Eggs, Fish etc.**
- *Haliv, Dink Laadu, Shatavari and Other Traditional Foods / Medicines Should Be Given Which Are Known To Increase Breast Milk*



Ananya



THANK YOU

