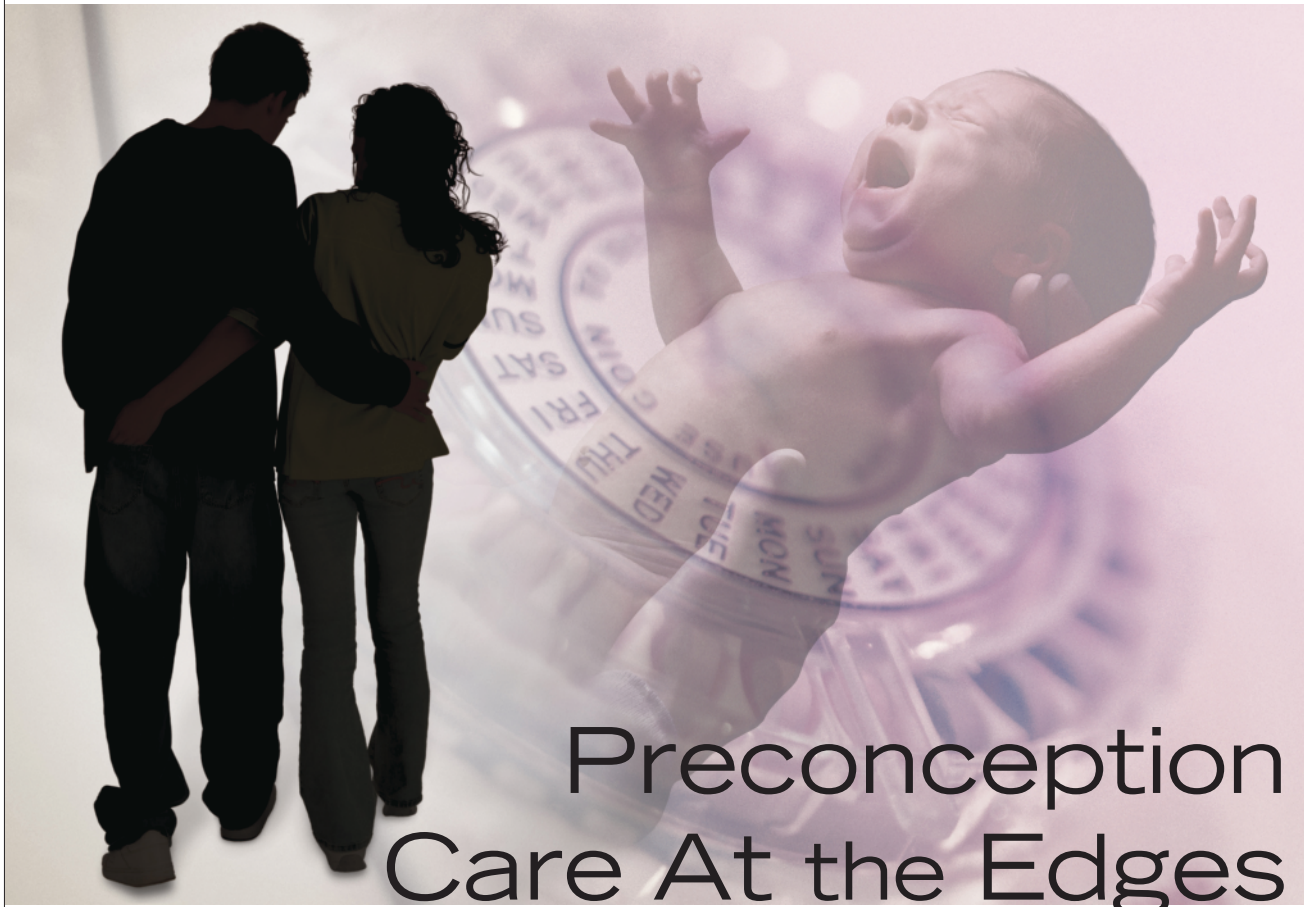




Preconception Care At the Edges of the Reproductive Lifespan

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Preconception care has grown from a narrow focus on women who have had prior unfavorable outcomes to an application to every woman at every opportunity (Chamberlain, 1980; Johnson et al., 2006). The goal of preconception care is to provide health promotion, screening and interventions for women of reproductive age to reduce risk factors that might affect future pregnancies (Johnson et al.). There is clinical content specific to preconception care (see Box 1) (Jack et al., 2008) and evidence that preconception care interventions are effective in improving reproductive outcomes (Atrash, Johnson, Adams, Cordero, & Howse, 2006).

Preconception interventions have immediate as well as generational benefit; there is some evidence that adult diseases such as obesity, hypertension and metabolic syndrome have fetal origins (Barker, Eridsson, Forsen, & Osmond, 2002). Focused preconception care interventions provide a rippling of benefit to the infant, the woman and society.



Communicating the Benefits

Opportunities for preconception care and intervention are frequently missed when patients and health care providers fail to effectively communicate with each other on this important topic (Curtis, Abelman, Schulkin, Williams, & Fassett,

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2006). It's tragic for an infant to be born with a serious cardiac defect that might have been prevented with better diabetes control in the first weeks of pregnancy, or for a mother to die and an infant to be prematurely delivered due to an influenza for which there is an effective vaccine that was never recommended to the woman. It's unacceptable for an infant to be born with a neural tube defect to a mother who never heard of folic acid.

About half of pregnancies in the United States are unintended; therefore, providing or seeking preconception care only when a pregnancy is planned is ineffective (Finer & Henshaw, 2006). A reproductive life plan (RLP) is a tool recommended for use with all women, men

and couples, whether they are planning pregnancy or not (Moos et al., 2008). The RLP is a reflection of a person's intentions about the number and timing of pregnancies in the context of their personal values and life goals (Johnson et al., 2006). It can be used as the starting point of intensive counseling to directly address the individual's plan. An example of an easily used RLP is in Box 2. The vital role of nurses in initiating the conversation about RLPs has been described (Sanders, 2009). The conversations can be initiated in any setting to begin the process of bringing intention and thoughtfulness to reproduction.

Women at the Edges of the Reproductive Lifespan

With regard to women's health, there are preconception messages for every woman at every opportunity, but they must be tailored to the individual needs of each woman. Two groups of women for whom pregnancy has special consequence are those at the two edges of the reproductive life span—adolescence and after 40. Pregnancies occurring in these two life stages have profound life impact, significance and very specific risks. Preconception care for these clients must be thoughtfully targeted to their specific stages of life.

Teens

Teens vary greatly as to where they are in their reproductive life. Teens may already be mothers or may not have initiated sexual intercourse.

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