

# Preconception Care and Reproductive Planning in Primary Care



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## KEYWORDS

- Preconception care • Reproductive life plan • Reproductive planning
- Reproductive-aged women • Primary care

## KEY POINTS

- Primary care for women of childbearing age should include routine assessment of a woman's reproductive goals and pregnancy intentions ("reproductive planning").
- Women who could potentially become pregnant should be assessed for preconception risks and educated about the importance of maternal health in ensuring healthy pregnancies.
- Women may be motivated to address modifiable health risks by learning about the way their health will affect a future pregnancy.
- For women not intending pregnancy in the short term, preconception care should include counseling on effective contraception.
- Women with chronic medical conditions should be counseled about highly effective reversible methods such as intrauterine devices and contraceptive implants, which have few medical contraindications.

*It's not a question of whether you provide preconception care, rather it's a question of what kind of preconception care you are providing.*

*—Joseph Stanford and Debra Hobbins*

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## INTRODUCTION

The United States has one of the highest rates of maternal mortality in the developed world,<sup>1</sup> with a growing proportion of maternal deaths attributable to chronic medical conditions.<sup>2</sup> In addition, the United States ranks behind most other industrialized nations in infant mortality, primarily because of congenital anomalies and preterm birth.<sup>3</sup> As prenatal care is often initiated too late to meaningfully impact pregnancy outcomes, a growing body of evidence highlights the prepregnancy or preconception period as critical to addressing high rates of maternal and fetal mortality.<sup>4</sup> Preconception care has been defined broadly as a set of interventions to identify and modify biomedical, behavioral, environmental, and social risks to the health of a woman or her baby before pregnancy occurs.<sup>4</sup> Primary care physicians (PCPs) care for large numbers of reproductive-aged women before, between, and after their pregnancies and thus are ideally positioned to help women identify and modify preconception health risks.<sup>5</sup>

Despite national campaigns by organizations such as the Centers for Disease Control and Prevention (CDC),<sup>4,5</sup> many PCPs lack training and knowledge of preconception care. Few PCPs routinely ask women about their pregnancy intentions or discuss how their health status or medications can impact pregnancy.<sup>6,7</sup> For example, one national study found that contraceptive counseling was provided in less than 20% of health care visits that documented use of a potential teratogen by a woman of childbearing age.<sup>8</sup> Furthermore, many women remain unaware of the importance of their prepregnancy health to both maternal and fetal pregnancy health outcomes, and few seek preconception counseling from providers.<sup>9–11</sup>

Given that more than 50% of pregnancies in the United States are unplanned,<sup>12</sup> PCPs should proactively conduct a preconception risk assessment as part of routine primary care for women of childbearing age.<sup>4,13</sup> The substantial overlap between the goals of comprehensive primary care and preconception care suggests that high-quality preconception care need not be viewed as a new set of interventions for PCPs, but rather as a different lens through which to view standard preventive care. This review focuses primarily on aspects of conditions commonly managed by PCPs that may benefit from targeted preconception intervention.

## REPRODUCTIVE PLANNING

The first step in identifying a reproductive-aged woman's need for preconception risk screening and counseling is to assess her pregnancy desires and plans. CDC<sup>4</sup> and the American Congress of Obstetricians and Gynecologists (ACOG),<sup>14</sup> recommend that providers routinely ask women about their reproductive goals and encourage women to create a "reproductive life plan." More recent data indicate that longer term planning may be difficult for many women, therefore asking women about reproductive goals in a shorter time frame, such as 1 year, may be more widely acceptable to women.<sup>15,16</sup> The "Before, Between, and Beyond" provider toolkit recently released by the National Preconception Health and Health Care Initiative recommends the question, "Are you hoping to become pregnant in the next year?" to initiate reproductive planning conversations in routine primary care.<sup>17</sup>

Additional questions to help women think about their reproductive goals and related health needs are listed in [Table 1](#). For women who desire pregnancy in the next year, preconception risk assessment and counseling are indicated. For women who do not desire pregnancy in the next year, information about effective contraception is essential, including information about highly effective reversible contraceptives that

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