

SAFE MOTHER HOOD

"Safe motherhood" means maternal services provided to women during antenatal, delivery and post-partum periods



What is safe motherhood?

- It is a global effort to reduce illnesses and deaths among women and children specially in developing countries
- It was launched in 1987 and aimed to improve maternal health and cut maternal deaths to half by 2000

Safe Motherhood

Definition:

Safe motherhood is one of the important components of Reproductive Health. It means ensuring that all women receive the care they need, to be safe and healthy throughout pregnancy and childbirth. It is the ability of a mother to have safe & healthy pregnancy & child birth.

SAFE MOTHERHOOD

OBJECTIVE

- Improve quality and increase access to family planning and maternal health care services
- Educate couples to ensure they have the best chance for a wanted and safe pregnancy

AIMS

- To improve wellbeing of mothers through a comprehensive approach of providing, preventing, promotive, curative and rehabilitative health care
- Improve quality and increased access to family planning and maternal health services
- Educate couples to ensure they have the best chances for a wanted and safe pregnancy



Six Pillars of Safe Motherhood



#NationalSafeMotherhoodDay

“SIX PILLARS” OF SAFE MOTHERHOOD



WHO Pillars of Safe Motherhood

- Pillar #1 ANC
- Pillar #2 Clean, safe delivery
- Pillar #3 Emergency Obstet. Care
- Pillar #4 Family Planning

**SAFE
MOTHERHOOD**

**Family
Planning**

**Antenatal
Care**

**Clean/Safe
Delivery**

**Essential
Obstetric Care**

Basic Maternity Care

PRIMARY HEALTH CARE

EQUITY FOR WOMEN

- **"Safe motherhood" means maternal services provided to women during antenatal, delivery and post-partum periods**

ANTENATAL CARE

- Systemic supervision [examination and advice] provided to a woman during pregnancy/antenatal period .

AIMS

1. To screen the high risk cases
2. To prevent or detect and treat the earliest of any complication.
3. to ensure continued risk assessment and provide ongoing primary preventive health care.
4. to educate the mother about physiology of pregnancy and labour
5. to discuss the couple about date. Time and place of delivery
6. to motivate the couple about need of family planning

objectives

To ensure a normal pregnancy and delivery of a healthy baby from a healthy mother

Antenatal care comprises

- Registration of pregnancy
- History taking
- Antenatal examination **general / obstetric**
- Laboratory investigations/treatments
- Health education

Antenatal visits schedule

IDEALLY

First 28 weeks- once a month

Upto 26 weeks – twice a month

There after weekly till delivery

MINIMUM – 4antenatal visits

1st visit around 16 weeks

2nd visit between 24 and 28 weeks

3rd visit at 32 weeks

4th visit at 36 week

first visit should be

- As early in pregnancy as possible
- Concluded of
 1. history taking
 2. Examination
 3. investigation

Components of first visit

- Detailed history
- Physical examination
- Investigations
 - Hemoglobin
 - Blood group & Rh typing
 - Serological tests for HIV, Hepatitis B, Rubella & Syphilis
 - Urine analysis
 - Pap smear (If facilities are available)
 - Ultrasound
- Folic acid / Iron and calcium supplementation

First visit

- Check for
 1. Pallor
 2. Pulse
 3. BP
 4. Respiratory rate
 5. Edema
 6. W:t gain
 7. Breast examination

SECOND VISIT [24-28 weeks]

- Fetal heart sound measurement
- Detect for multiple pregnancy

THIRD VISIT [32 weeks]

- Screen for
 1. preeclampsia
 2. Anemia
 3. IUGR
 4. Multiple pregnancy

FOURTH VISIT [36 weeks]

- Identification of
 1. fetal lie
 2. Presentation
 3. Position
 4. Birth plan

SUPPLEMENTARY MEDICATIONS

- Supplementary iron is indicated for all pregnant women 20 weeks onwards
- Calcium supplements after first trimester
- Proper diet
- Good hygienic condition
- Walk
- No heavy work



OBSTETRIC ABDOMINAL EXAMINATION

ABDOMINAL EXAMINATION

Measurement of fundal height

Fetal heart sounds

Fetal movements

Fetal parts

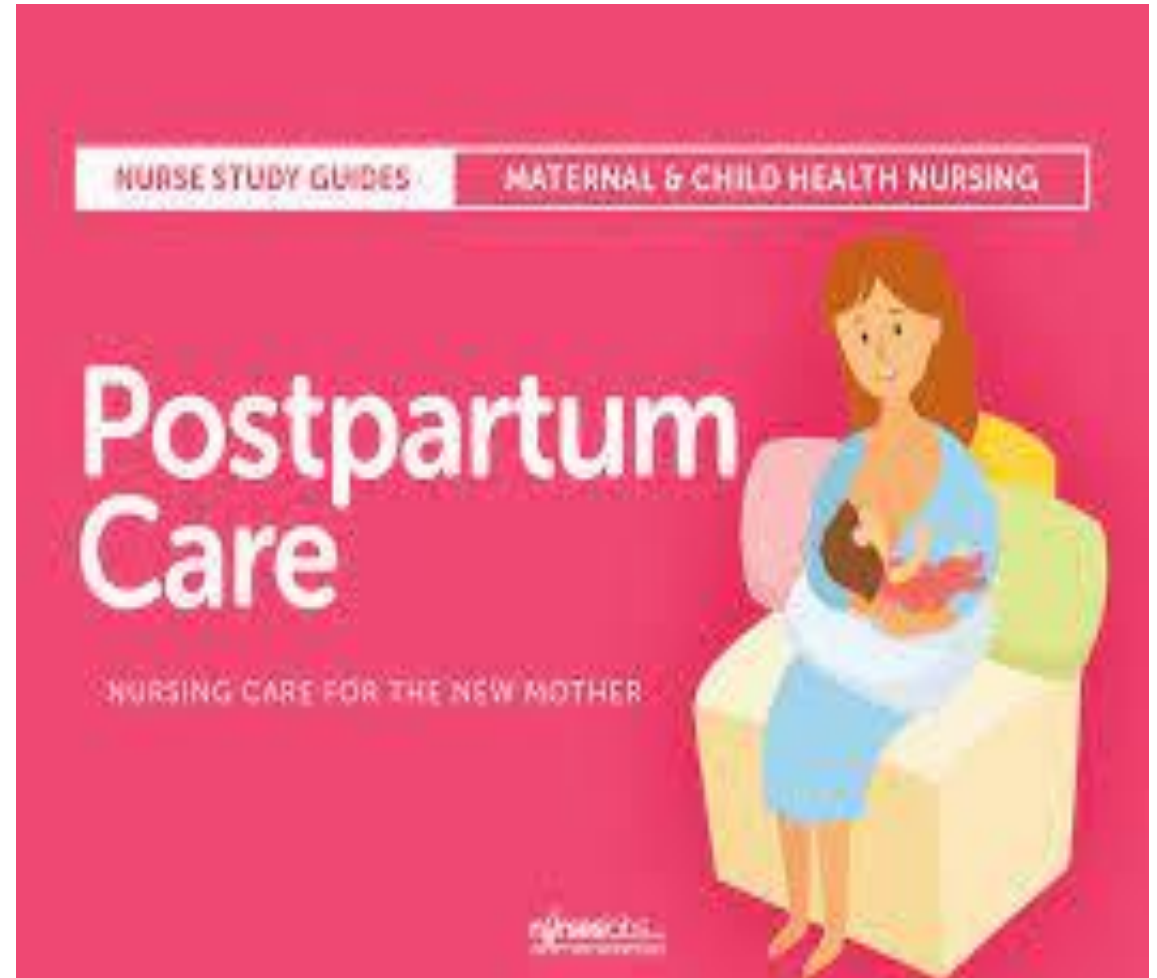
Multiple pregnancy

Fetal lie and presentation

Inspection of abdominal scar or any other relevant findings

POST NATAL CARE

- The post natal care is also called post partum care
- extends from end of labour until genital tract returns to normal
- that is about 42 days



POST NATAL CARE

Care of newborn and mother after delivery

It is responsibility of obstetrician and pediatrician which is called as perinatology.

Care of mother – objectives

1. To prevent complications of postpartum period.
2. To provide care for rapid restoration of the mother to optimum health.
3. To check adequacy of breast feeding.
4. To provide family planning services.
5. To provide basic health education to mother/ family.

AIMS

- Support the mother and family
- Prevention ,early diagnosis and treatment of complications
- Referral
- Counseling
- Also includes neonatal care
- Encourage breast feeding
- Education on nutrition and supplementation
- Counseling contraception and resumption of sexual life
- Immunization of infant



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RATIONALE

- Increase the awareness of warning signals and appropriate interventions at all level
- About 2/3 maternal deaths occur in post natal period

NEEDS OF WOMEN AND NEWBORNS

- Health care for suspected or occurring complications like PPH/PUERPERAL PYREXIA
- Time to care for newborn especially if bottle feeding
- Help with domestic tasks
- Information about breast feeding

NEEDS OF SPECIAL GROUPS

- Special groups needs special attention these are

Women staying in remote areas

Urban poor

Single mothers

immigrants

Illegal immigrants

Frequency of post natal care

- Day 1
- Day 2
- Day 3
- Day 4
- Day 6
- Day 10
- Day 20

PLACES FOR POST NATAL CARE

- Hospitals
- Maternity homes
- Homes clinics



Mother examination in every visit

Examination of

vital signs

breast

abdomen

perineum

ASSESSMENT OF BABY

- Check for
- Body weight
- Body temperature
- Skin
- Eyes
- Umbilical cord



THINK U