

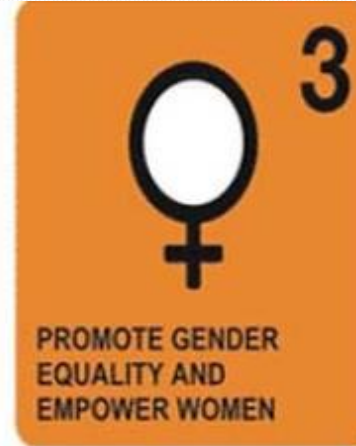


FIGO

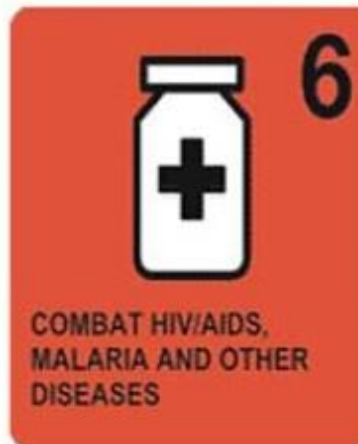
International Federation of
Gynecology and Obstetrics

C.N. Purandare
President of FIGO

The MDGs



Millennium Development Goals



The Sustainable Development Goals



Sustainable Development Goal 2.2

By 2030, **end all forms of malnutrition**, including achieving, by 2025, the **internationally agreed targets** on stunting and wasting in children under five years of age, and **address the nutritional needs** of adolescent girls, pregnant and lactating women and older persons



End hunger, achieve food security and improved nutrition and promote sustainable agriculture

Sustainable Development Goal 3.4

By 2030, reduce by one third premature mortality from **non-communicable diseases** through **prevention** and treatment and promote mental health and well-being



Ensure healthy lives and promote well-being for all at all ages

Sustainable Development Goal 5.1

End all forms of discrimination against all women and girls everywhere



Achieve gender equality and empower all women and girls

**Maternal health – impacts NCD burden
Foetal Programming IUGR and Macrosomia**



Maternal under nutrition
Maternal stunting
Anaemia
Malaria
Other medical conditions

Maternal overweight / obesity
Diabetes
Excess weight gain during pregnancy

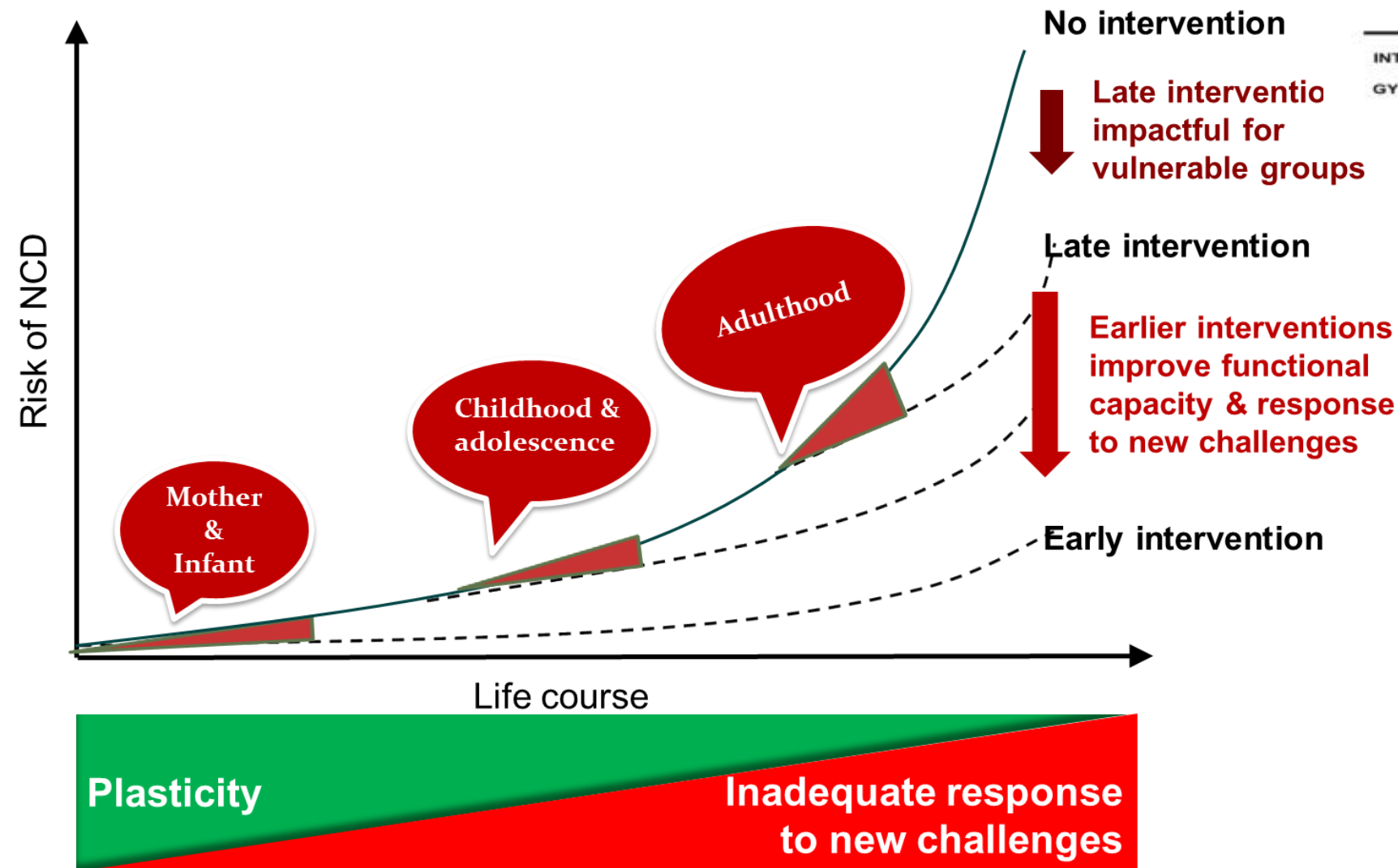
Barker's Hypothesis
Low birth weight

Predicts
development
of HTN,
Type 2 DM
& IGT

Pederson's hypothesis
Macrosomia

Solution
LIFE COURSE APPROACH

Life Course Approach to Prevention



FIGO VISION

- **Objective of this presentation**
- Describe the relevance of maternal health in the context of Diabetes and other NCDS
- Describe the barriers operating at the Individual level ,Societal, Health System and at different stages of GDM care
- Show how the proposed FIGO HIP initiative addresses these barriers in its recommendations & Suggest possible solutions to overcome the barriers

Window of Opportunity

WC



Pregnancy offers a window of opportunity to provide maternal care services to



Reduce traditional maternal and perinatal morbidity and mortality indicators



Address intergenerational prevention of NCDs, such as diabetes, hypertension, cardiovascular disease, and stroke.



FIGO recognises that

Obstetricians have a huge role to play!



1

- Primary prevention
- Obesity/ PCOS- lifestyle

2

- Secondary prevention
- GDM diagnosis and care

3

- Tertiary prevention
- Prevent long term complications

Recommendations

Management during pregnancy



FIGO recognizes that management of diabetes in pregnancy should be made in accord with available national resources and infrastructure, even without high quality evidence, as it is preferred to the alternative of no or poor care





Increase
acceptance
and access to
**preconception
services**



**Universal pre-conception
screening** for malnutrition,
anemia, overweight and obesity,
hypertension, diabetes and
thyroid dysfunction

- FIGO calls for public health measures to increase awareness and acceptance of preconception counseling and to increase affordability and access to preconception services to women of reproductive age, as this is likely to have both immediate and lasting benefits for maternal and child health.

- FIGO supports the concept that the postpartum period in women with GDM provides an important platform to initiate early preventive health for both the mother and the child who are both at a heightened risk for future obesity, metabolic syndrome, diabetes, hypertension, and cardiovascular disorders.

- FIGO encourages obstetricians to establish connections with family physicians, internists, pediatricians, and other healthcare providers to support postpartum follow-up of GDM mothers linked to the regular check-up and vaccination program of the child to ensure continued engagement of the high-risk mother-child pair.

PREGNANCY OFFERS A WINDOW OF OPPORTUNITY TO:

- **Establish** services
- **Improve** health
- **Prevent** intergenerational transmission of non-communicable diseases

POSTPARTUM AIMS



Early
DETECTION
of infections



SUPPORT
of
breastfeeding



ADVICE on
pregnancy
spacing



RETEST all women
with GDM at 6-12
weeks postpartum



Future
blood glucose
TESTS