

### *Prenatal Care Begins Before Pregnancy -- A Preconception Checklist*

Are you thinking of becoming pregnant, or is there a chance you could become pregnant in the near future? A healthy mom is a prerequisite to a healthy baby. Additionally, many women only learn they are pregnant after the critical period of organ development has passed.

Therefore, we recommend considering the following in the months or year prior to conception:

[ ] Folic acid supplementation should begin well before you become pregnant, because adequate maternal storage of folic acid prior to conception has been shown to decrease the risk of neural tube defects. Therefore, we recommend you take a multivitamin with at least **400 mcg of folic acid daily** for at least 3 months prior to pregnancy. If you have seizure disorder or have already had a pregnancy complicated by a neural tube defect, we recommend supplementation with ten times this amount -- 4 mg daily -- beginning at least 4 weeks prior to conception and continuing for the first trimester.

[ ] Are you over- or underweight? We recommend beginning pregnancy at a normal weight for your height. If you are overweight or obese, not only will weight loss decrease your risk of pregnancy complications, but will also improve fertility.

[ ] Are you up to date on all vaccines, including rubella, Hepatitis B, varicella (chicken pox)? If not, we recommend vaccination 1-3 months before attempting pregnancy. The flu vaccine is safe and recommended, and can be given before or during pregnancy.

[ ] Smoking has been shown to be linked to numerous pregnancy complications affecting the health of both mother and baby. If you are smoking, we recommend you discontinue prior to pregnancy. Alcohol and recreational drugs should also be avoided.

[ ] Do any genetic conditions run in your family that would warrant a consultation with a genetic counselor? These conditions include Down Syndrome, neural tube defects, mental retardation, bleeding or clotting disorders, and phenylketonuria (PKU). Additionally, if you and your partner are of Ashkenazi Jewish descent, screening is recommended for Tay-Sachs, Canavan's disease, cystic fibrosis, and other enzyme disorders.

[ ] Are you on any medications that may be teratogenic? These include warfarin, valproic acid, lisinopril and other ACE-inhibitors and angiotensin receptor blockers, methotrexate and other immunosuppressants, and isotretinoin (Accutane). It is NOT advisable to discontinue medications without talking to your physician, but it is recommended to discuss with your reproductive plans with your physician, especially because the use of these medications should be combined with effective contraception.

[ ] Have you had any prior abdominal surgeries or cesarean sections? If so, your obstetrician will likely want to read over records from these procedures.

[ ] Some women who suffer from anxiety or depression may have questions about medication use prior to and during pregnancy. Discuss with your doctor before discontinuing any medications, and let your prescribing doctor know if you intend to become pregnant.

[ ] Finally, do you have any significant medical problems that need to be fully evaluated and stabilized prior to pregnancy? In some cases, such as pulmonary hypertension, poorly-managed diabetes, or heart failure, it is be advisable to avoid pregnancy altogether. Serious conditions that warrant evaluation and management prior to conception include:

- Anemia
- Asthma
- Chronic kidney disease
- Cystic fibrosis
- Diabetes
- Heart disease
- Hepatitis B and C
- High blood pressure
- HIV/AIDS
- Inflammatory bowel disease (Crohn's disease, ulcerative colitis)
- Lupus, rheumatoid arthritis
- Pulmonary hypertension
- Thyroid problems (hypothyroid and hyperthyroid)