

Maternal Health

Anemia in Pregnancy

- **Definition:** Hemoglobin levels below:
 - 1st trimester: <11 g/dL
 - 2nd trimester: <10.5 g/dL
 - 3rd trimester: <11 g/dL
 - Postpartum: <10 g/dL
 - **Causes:**
 1. **Physiologic anemia** (hemodilution).
 2. **Iron deficiency** (most common; 95% of cases).
 3. **Folate deficiency** (linked to poor diet).
 - **Risk Factors:** Multiple pregnancies, poor nutrition, smoking, alcohol.
 - **Complications:**
 - Placental abruption, preterm birth, postpartum hemorrhage, maternal mortality.
 - **Prevalence:** 40% of pregnancies are affected globally.
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Urinary Tract Infections (UTIs)

- **Definition:** Common during pregnancy due to hormonal changes, enlarged uterus, and immune adjustments.
 - **Complications:**
 - 20-35% of untreated asymptomatic bacteriuria cases develop symptomatic UTIs.
 - Linked to preterm birth, low birth weight, and perinatal mortality.
 - **Screening:** Recommended at 12-16 weeks gestation.
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Gestational Diabetes Mellitus (GDM)

- **Definition:** Hyperglycemia during the 2nd/3rd trimester due to insulin resistance.
 - **Risk Factors:** Advanced maternal age (≥ 35), obesity (BMI ≥ 30), family history of diabetes, PCOS, prior GDM.
 - **Complications:**
 - **Maternal:** Cesarean delivery, polyhydramnios, type 2 diabetes.
 - **Fetal:** Macrosomia, obesity, type 2 diabetes, stillbirth.
 - **Global Prevalence:** 17%.
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Maternal Mortality

- **Definition:** Death during pregnancy or within 42 days postpartum due to pregnancy-related causes.
 - **Statistics:**
 - 287,000 deaths globally in 2020.
 - 95% of deaths occur in low-income countries.
 - **Causes** (75% of deaths): Severe bleeding, infections, hypertension, delivery complications, unsafe abortions.
 - **Prevention:** Universal health coverage, addressing inequalities, and quality care (WHO initiatives).
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Child Health

Infant Mortality

- **Definitions:**
 - **Neonatal mortality:** Deaths <28 days.
 - **Post-neonatal mortality:** Deaths 28 days to 1 year.
 - **Perinatal mortality:** Stillbirths + neonatal deaths <7 days.
 - **Causes:**
 - Pregnancy complications: Preterm birth, IUGR, uncontrolled diabetes, hypertension.
 - Delivery complications: Asphyxia, cord prolapse, sepsis.
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Well-Baby Care

- **Services:**
 1. Vaccinations and growth monitoring.
 2. Early detection of developmental delays.
 3. Health education (breastfeeding, hygiene).
 - **Visit Schedule:**
 - Neonatal: 3 visits (24 hours, 48-72 hours, 7-14 days).
 - Infancy: 4 visits (6, 10, 14 weeks, 9 months).
 - Early Childhood: 5 visits (1-4 years).
 - Adolescence: 2 visits (10-19 years).
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Adolescent Health

- **Importance:** 21% of Jordan's population is aged 10-19.
 - **Health Challenges:**
 - **Mental health:** 13.5% prevalence in ages 10-14, rising to 14.7% for 15-19.
 - **Physical inactivity:** 81% insufficiently active; screen time is a key factor.
 - **Substance use:** Initiation during adolescence; linked to risky behaviors and mortality.
 - **Nutrition:** Malnutrition, anemia, and obesity are major issues globally.
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Key Interventions

1. Maternal:

- Iron, folate, and calcium supplementation.
- Managing GDM and infections (HIV, syphilis, tetanus).

2. Child:

- Vaccination, growth monitoring, breastfeeding education.

3. Adolescent:

- Promoting physical activity, mental health support, reducing substance abuse.
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