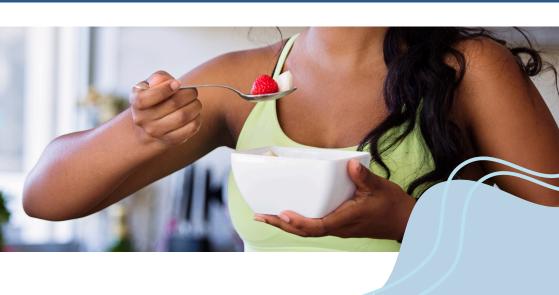


# Preconceptual Care for women at risk of Spontaneous Preterm Birth



# What is Preconceptual Care?

The Preterm Birth Clinic offers advice and support to women and families planning a pregnancy where there is a high risk of spontaneous preterm birth. Spontaneous preterm birth is where birth occurs early and spontaneously in pregnancy.

The aim of this clinic is to reduce the risk of spontaneous preterm birth and optimise the care of women that go on to deliver early.

Reasons that you may need a pre-pregnancy consultation at the Preterm Birth Clinic include:

- A previous early birth where labour started early, the cervix shortened/opened, or your waters broke before 34 weeks' gestation.
- A mid-trimester pregnancy loss (between 14-23 weeks).
- Cervical surgery for abnormal smears including Cone Biopsies or two or more LLETZ procedures.
- Uterine anomalies (abnormal shape to the womb).

# What happens at the Clinic?

The clinic runs alongside the Preterm Birth Clinic in the Antenatal Clinic at Holles Outpatient Department in The National Maternity Hospital. The doctor will listen to your history in detail, review results from your last pregnancy (if any), and discuss any questions you might have. We will recommend an individual plan of care or interventions which may reduce the risk of preterm birth. If you delivered elsewhere in the past, having a copy of your medical notes and test results can be very helpful for this visit. You can request access to these notes from the hospital under the Freedom of Information Act.

From this consultation, you will have a personalised plan for reducing the risk of preterm birth when you do become pregnant. You will gain an understanding of the care pathway and the additional supports available to women at risk of Preterm Birth such as Perinatal Mental Health Support or Bereavement Care.

After going through your history and examination, some possible therapies will be discussed with you:

- Vaginal progesterone pessaries
- Cervical cerclage
- Abdominal cerclage
- Intravaginal Pessary Device

Ways in which you can reduce your preterm birth risk before and during pregnancy include:

- See your doctor regularly in pregnancy for antenatal care.
- Take care of health problems like high blood pressure, diabetes, medical conditions including thyroid disease and autoimmune conditions, and take care of your mental health including anxiety and depression, especially if it is a difficult journey to pregnancy.



 Normalising Body Mass Index (BMI) – avoid having your BMI too low or too high. Normal BMI range associated with lowest risk of preterm birth is 19-25kg/m2.

When you do become pregnant, there are target weight gains that also reduce risk of preterm birth, based on your BMI before pregnancy:

Body Mass Index (Kg/m2)	Class	IOM 2009 Target Gestational Weight Gain
<18.5	Underweight	12.5-18kg
18.5-24.9	Normal	11.5-16kg
25.0-29.0	Overweight	7-11.5kg
30-34.9	Obese	5-9kg
35-39.9	Severe Obesity	
>=40	Morbid Obesity	
>=50	Super Obesity	

#### • Checking for and treating vaginal or urinary infections:

Have a STI screen that is up to date including syphilis, HIV, Hepatitis and Chlamydia and Gonorrhoea.

Screening for STIs, bacterial vaginosis and urinary tract infections in the first trimester of pregnancy and treatment/prevention where appropriate.

#### Smoking Cessation:

Smoking is linked to preterm birth. Cutting down or stopping smoking is one of the most powerful things you can do to reduce your risk of preterm birth.

#### • Alcohol and Drug Intake:

When trying to conceive; drink no more than 1 or 2 units of alcohol, no more than 1 or 2 times per week and avoid any episode of intoxication. Avoid alcohol completely during pregnancy.

Recreational drugs can be very harmful in pregnancy, including increasing risk of preterm birth. If you need help with this, please discuss it with your trusted healthcare professional.

#### • Folic acid replacement:

Being low in folic acid can increase the risk of preterm birth. Using folic acid replacement from before pregnancy commences can reduce risk of preterm birth. Daily intake should be at least 400mcg of folic acid for at least three months prior to pregnancy.

#### • General hygiene:

Pay attention to washing your hands after using the bathroom, before eating, after changing nappies, etc.

#### Look after your teeth and gums:

There are some links between gum infection or inflammation and preterm labour. If you are considering pregnancy, consider seeing your GP, dentist and taking steps to improve your tooth and gum health.

#### • If having fertility treatment:

Encourage your fertility team to do single embryo transfer. Multiple pregnancy (twins and triplets) carries the highest risks of preterm birth, including risk of pregnancy loss. Preterm birth outcomes are lowest with single embryo transfer.

#### Plan your next pregnancy:

Lowest preterm birth rates are seen with an interpregnancy interval of >=18 months. However, this should take your individual factors into account including your age, medical history and journey to pregnancy including infertility and pregnancy loss. Please consult your doctor if you would like to discuss this further.

Use reliable contraception until you are ready to get pregnant.





# Things that are not proven to reduce your risk of preterm birth

#### • Bedrest:

Bedrest is not shown to reduce risk of preterm birth. It may in fact be linked to harm for the mother including risk of clots, decreased mobility and impact on mental health.

## • Limiting physical activity:

Healthy exercise patterns should include 30 minutes of exercise per day. Strenuous exercise should not exceed frequency of 3-4 times per week.

## Abstaining from sexual intercourse:

There is no evidence that complete abstinence from sexual intercourse will reduce the risk of preterm birth. Please consult with your doctor for advice if you would like to discuss further.



# How can I book an appointment?

#### Referrals

We accept GP referrals. It is very important that your full medical history is clearly specified on the referral and should include any necessary investigation or results pertaining to your risk factors. It is helpful to have had a formal scan of your uterine shape and cervical length with report to accompany the referral.

Referrals can be sent in by letter to: The Preterm Birth Clinic, The Holles Outpatients Department, Holles Street, D02 YH21, Ireland

Or by email to: pretermsurveillanceclinic@nmh.ie

It is important that your full medical history is clearly specified in the referral letter.



# **Additional Support**

The Irish Neonatal Health Alliance www.inha.ie

# Tommy's Pregnancy Information for Treatment to Prevent a Preterm Birth

https://www.tommys.org/pregnancy-information/premature-birth/treatment-to-prevent-a-premature-birth



# **Contact information**

The Preterm Birth Clinic,
The Holles Outpatients Department,
The National Maternity Hospital
Holles Street, D02 YH21, Ireland

pretermsurveillanceclinic@nmh.ie



01 637 3100

www.nmh.ie



