

SUPPLEMENT TO DECEMBER 2008 ■ Volume 199, Number 6B

SUPPLEMENT

\$257 Preconception care: a clinical case of "think globally, act locally" Michele G. Curtis

\$259 Where is the "W"oman in MCH?

Hani Atrash; Brian W. Jack; Kay Johnson; Dean V. Coonrod; Merry-K Moos; Phillip G. Stubblefield; Robert Cefalo; Karla Damus; Uma M. Reddy Preconception care is a way by which to improve the health of mothers and children by focusing on the care of women.

\$266 The clinical content of preconception care: an overview and preparation of this supplement

Brian W. Jack; Hani Atrash; Dean V. Coonrod; Merry-K Moos; Julie O'Donnell; Kay Johnson

We describe the process of selecting and reviewing all of the topics that are reviewed in this supplement and include a summary of all recommendations in Table form.

\$280 Healthier women, healthier reproductive outcomes: recommendations for the routine care of all women of reproductive age

Merry-K. Moos; Anne L. Dunlop; Brian W. Jack; Lauren Nelson; Dean V. Coonrod; Richard Long; Kim Boggess; Paula M. Gardiner Reproductive planning and health promotion are important areas of focus that should be incorporated into the care of all women, irrespective of pregnancy intentions.

\$290 The clinical content of preconception care: immunizations as part of preconception care

Dean V. Coonrod; Brian W. Jack; Kim A. Boggess; Richard Long; Jeanne A. Conry; Shanna N. Cox; Robert Cefalo;

Kam D. Hunter; Albert Pizzica; Anne L. Dunlop

Many routinely administered childhood and adult vaccines have an important role in the promotion of preconception healthcare.

\$296 The clinical content of preconception care: infectious diseases in preconception care

Dean V. Coonrod; Brian W. Jack; Phillip G. Stubblefield; Lisa M. Hollier;

Kim A. Boggess; Robert Cefalo; Shanna N. Cox; Anne L. Dunlop;

Kam D. Hunter; Mona R. Prasad; Michael C. Lu;

Jeanne A. Conry; Ronald S. Gibbs; Vijaya K. Hogan

A number of infectious diseases should be considered for inclusion in preconception care, with the use of risk assessment, screening, and treatment.

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SUPPLEMENT (continued)

\$310 The clinical content of preconception care: women with chronic medical conditions

Anne L. Dunlop; Brian W. Jack; Joseph N. Bottalico; Michael C. Lu; Andra James; Cynthia S. Shellhaas; Lynne Haygood-Kane Hallstrom; Benjamin D. Solomon; W. Gregory Feero;

M. Kathryn Menard; Mona R. Prasad

Detection and control of chronic medical conditions are important for preconception health care; providers should be aware of the recommendations for each condition.

\$328 The clinical content of preconception care: women with psychiatric conditions

Ariela Frieder; Anne L. Dunlop; Larry Culpepper; Peter S. Bernstein Detection and management of psychiatric conditions is critical for avoiding or reducing the potential negative reproductive outcomes associated with such conditions.

\$333 The clinical content of preconception care: alcohol, tobacco, and illicit drug exposures

R. Louise Floyd; Brian W. Jack; Robert Cefalo; Hani Atrash; Jeanne Mahoney; Anne Herron; Corinne Husten; Robert J. Sokol

Substance use is prevalent among women of childbearing age, but tools are available to assist clinicians in identifying and intervening with high risk women who present in primary care settings during the preconception period.

\$340 The clinical content of preconception care: genetics and genomics Benjamin D. Solomon; Brian W. Jack; W. Gregory Feero

Screening for maternal and paternal genetic conditions should be a part of preconception care to avoid preventable poor outcomes and to allow informed reproductive decisions by the parents.

\$345 The clinical content of preconception care: nutrition and dietary supplements

Paula M. Gardiner; Lauren Nelson; Cynthia S. Shellhaas; Anne L. Dunlop; Richard Long; Sara Andrist; Brian W. Jack

Women of reproductive age should be advised that the quality of a woman's diet may influence her pregnancy outcomes.

\$357 The clinical content of preconception care: environmental exposures Melissa A. McDiarmid; Paula M. Gardiner; Brian W. Jack

Environmental exposures have been linked to poor reproductive outcomes and should be detected during preconception care in order to make appropriate recommendations to the woman.

\$362 The clinical content of preconception care: care of psychosocial stressors

Lorraine V. Klerman; Brian W. Jack; Dean V. Coonrod; Michael C. Lu; Yvonne W. Fry-Johnson; Kay Johnson

Three types of psychosocial stressors (inadequate financial resources, problems in accessing health care, and intimate partner and other forms of violence) are described in terms of burden of suffering, identification, treatability, and recommendations for management.

Contents www.AJOG.org

SUPPLEMENT (continued)

\$367 The clinical content of preconception care: the use of medications and supplements among women of reproductive age

Anne L. Dunlop; Paula M. Gardiner; Cynthia S. Shellhaas;

M. Kathryn Menard; Melissa A. McDiarmid

Appropriate medication regimens, including over-the-counter medications and supplements, in addition to prescription medications, are important to maintaining the health of women of reproductive age.

\$373 The clinical content of preconception care: reproductive history Phillip G. Stubblefield; Dean V. Coonrod; Uma M. Reddy; Raja Sayegh; Wanda Nicholson; Daniel F. Rychlik; Brian W. Jack

The reproductive history of a woman has important implications for her future reproductive plans and thus should be screened for and addressed.

\$384 The clinical content of preconception care: preconception care for special populations

Catherine Ruhl; Barbara Moran

Women with disabilities, immigrant and refugee women, and cancer survivors have particular reproductive planning and preconception health concerns that should be addressed as part of their routine health care to promote healthy reproductive outcomes.

\$389 The clinical content of preconception care: preconception care for men

Keith A. Frey; Shannon M. Navarro; Milton Kotelchuck; Michael C. Lu While the father's health can greatly influence the health of a baby, little attention has been given to men's health care in relation to reproduction and preconception care.



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