

Towards a Preconception Care Programme in the Netherlands

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Central message:

The Health Council of the Netherlands advised the Minister of Health, Welfare and Sports September 2007 to set up a coordinated national programme of preconception care.

A programmatic approach

(as stated in a recent document on the framework of screening coming from the minister of health, welfare and sports)

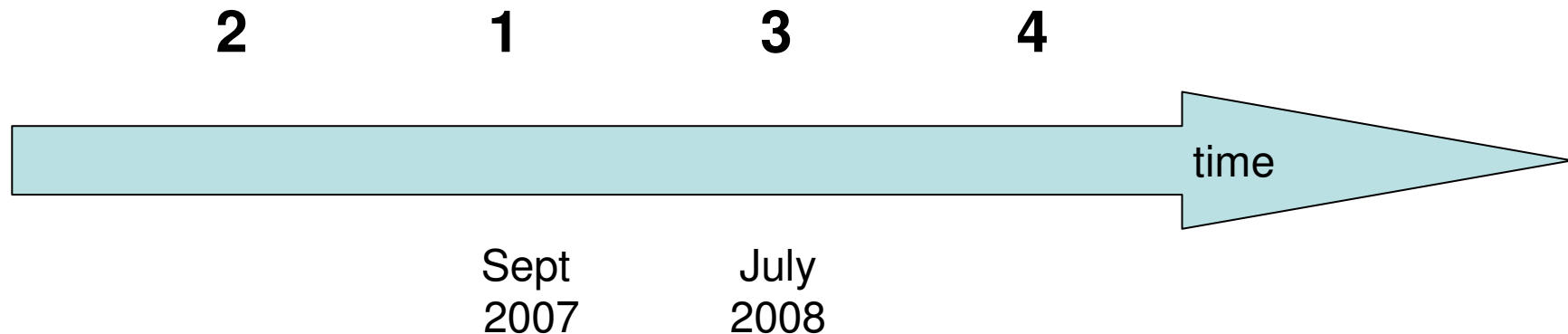
- guarantees access and availability for everyone, irrespective of social-economic background
- guarantees quality assurance of offer, guidance and counseling, registration and evaluation
- results in a higher uptake

Examples of a programmatic approach

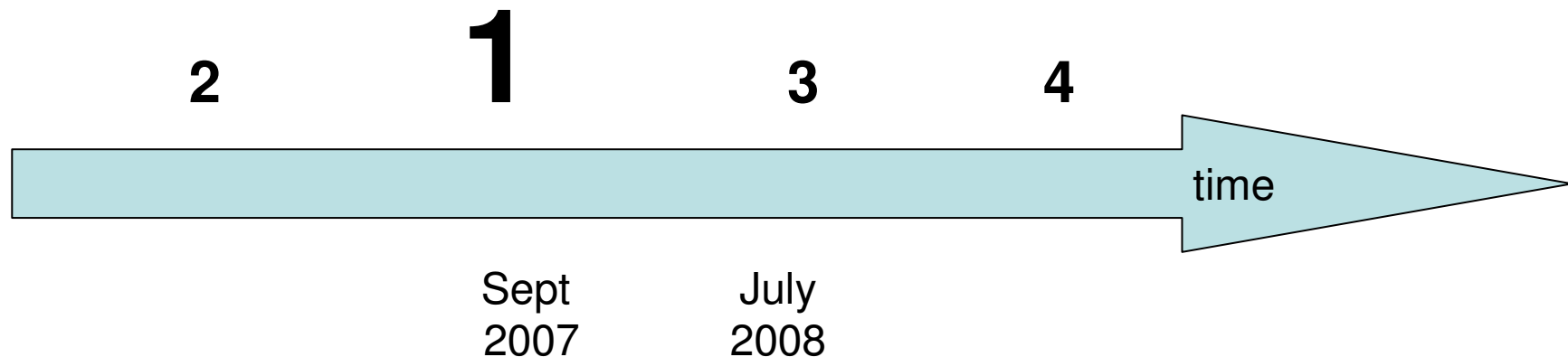
- Neonatal screening
- Cervical screening
- Mammography screening
- Prenatal screening
- Vaccination

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Report of the Health Council of the Netherlands



The report of the Health Council

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The Health Council of the Netherlands (Gezondheidsraad)

is an independent advisory body
charged with providing Ministers
and Parliament with scientific
advice on public health matters

Title and URL of the report

Preconception Care: a good beginning

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Request of the Minister of Health, Welfare and Sports (Hoogervorst, 5 November 2004)

- Current level of knowledge concerning preconception care
- To what extent is available knowledge already applied
- How might one reach the maximum possible number of parents to be
- Which professional groups/bodies should be involved
- What ethical questions and controversies need to be considered
- What specific requirements should be met

Specialities represented in the preparatory committee

(names in acknowledgement)

- Family Medicine
- Community Child Health
- Social Pharmacy and
Pharmaco-epidemiology
- Clinical Epidemiology and
Paediatrics
- Clinical Genetics
- Obstetrics and Prenatal
Medicine
- Preventive and Curative
Paediatric Health Care
- Midwife
- Occupational Health Physician
- Science and Technology
- Ethicist
- Genetic Alliance of Parent and
Patient Organisations
- Advisor of the ministry of
Health, Welfare and Sports
- Chairman (clinical genetics)
- Secretaries (biologists)

The committee's definition

Preconception care is the entire range of measures designed to promote the health of the mother-to-be and her child, which, in order to be effective, must preferably be adopted prior to conception

Types of Preconception Care

- **Collective measures**
 - » e.g. protection against ionizing radiation, or nationwide folic acid campaign
- **Individual preconception care**
 - **Specialist care**
 - » when a (possible) increased risk is already known or found during general preconception care
e.g. maternal diabetes or a history of obstetric complications
 - **General care**
 - » giving face-to-face advice to each parent-to-be, e.g. on smoking, combined with identifying risk factors, e.g. family history

Working method

- Systematic review of scientific literature using “preconception care” as the principle search term (in collaboration with the Dutch Cochrane Centre)
- Systematic discussion of domains where the above strategy would not work (e.g. genetics)
- Formulation of conclusions and recommendations on this basis

Conclusions

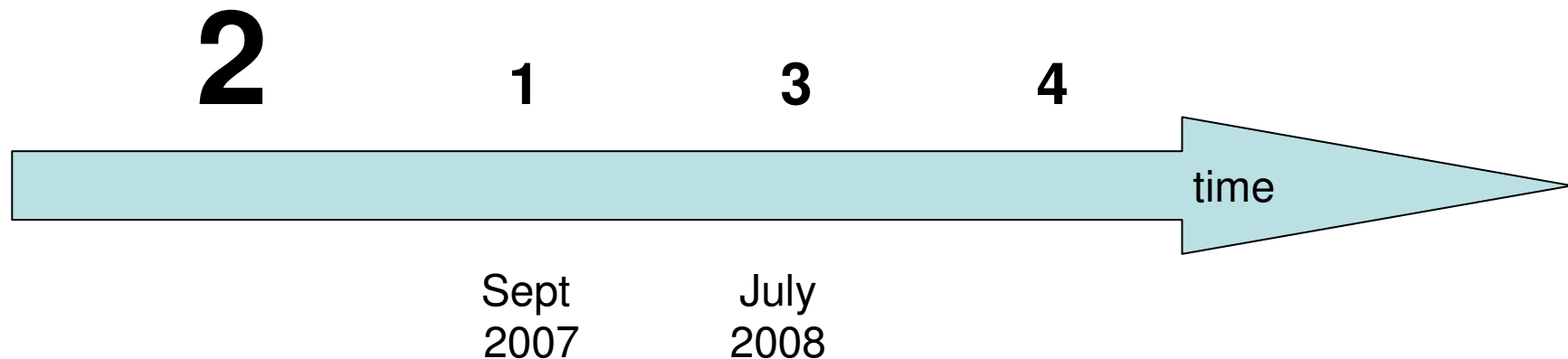
- The effectiveness and efficiency of various preventive and medical interventions have now been established in relation to preconception care
- Integrated preconception care is expected to be more efficient (and more cost-effective) than fragmented delivery of individual components
- Preconception care should be available for all parents to be
- Preconception care should satisfy several quality criteria, e.g effectiveness and efficiency; optimal coverage, equity and ease of access; fair and smooth referral system, good links with prenatal and neonatal care and effective communication

Recommendations

- Adopt a programmatic approach
 - to satisfy the quality criteria,
 - to be better able to reach certain risk groups,
 - to obtain health gain apparent at public-health level; and
 - to achieve clear agreements between relevant professional groups
- Many other recommendations
 - e.g. on guideline formulation, monitoring and data collection, research topics, training and continuing education

What preceded?

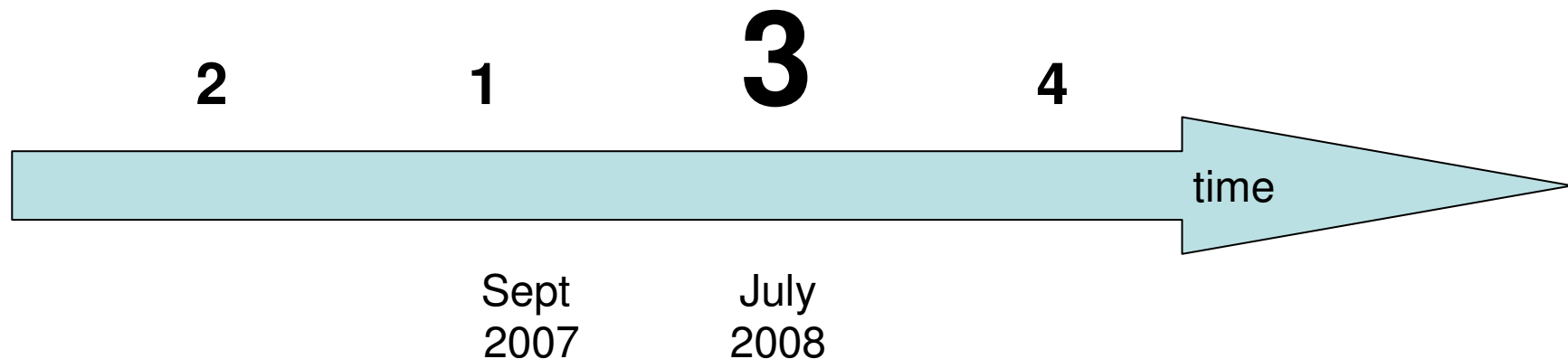
What made the Minister of Health, Welfare and Sports request a report on preconception care?



What preceded

- Push from some research projects (Nijmegen, Leiden, Rotterdam)
- Push from the genetic alliance of parent and patient organizations
 - Conferences
 - Electronic Preconception Checklist
 - Suggestion to request a Health Council report
- Push from the foundation of preconception care
- Push from the organization of midwives
- Push from a political party
- View of Health Council on how to organize advices in relation to pregnancy and birth

Response of the Minister of Health, Welfare and Sports



Response of the Minister of Health (Klink, 2008)

- dealt with preconception care in his view on a larger continuum of care, including pregnancy and birth
- recognition of the value of preconception care
- postponement of decision on general preconception care till financial aspects are clear
- appointment of a multidisciplinary steering committee for pregnancy and birth
- preconception care should link up with current organization of health care
- no sympathy for coordinated programmatic approach at present

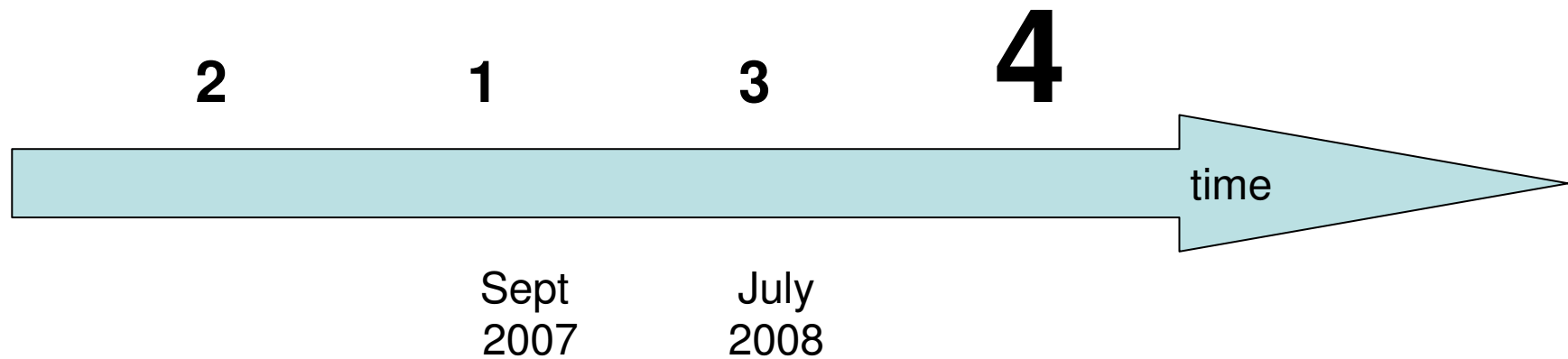
Why no sympathy for coordinated programmatic approach at present?

- Financial aspects?
- Political aspects?
- Programmatic approach is at variance with linking up with existing organization of care

Absence of programmatic approach means

- no guarantee of access and availability for everyone, irrespective of social-economic background
- no guarantee of quality assurance of offer, guidance and counseling, registration and evaluation
- much lower uptake

What follows



What follows

- Parliament
- Foundation of preconception care
 - First National Congress of Preconception Care, September 19, 2008
 - Annual repetition and other means to call attention
- Monitoring
 - Access, equity and quality

Conclusions

- Statement and recommendations of the Health Council of the Netherlands
- Recognition of the value of preconception care by the Minister of Health, Welfare and Sports
- No coordinated programmatic approach
- The fight must go on

Acknowledgement

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- Y Poortman
- VWT Ruiz van Haperen
- CTRM Schrande-Stumpel
- EAP Steegers
- D Stemerding
- SP Verloove-Vanhorick
- MF Verweij
- M Deutekom
- LF Stultiens
- CM Aalfs
- AHJ Jaspar
- LP ten Kate
- NS Klazinga
- JJM van Lith
- C Oosterwijk
- A Verbeeten

URL to the report

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