

POSTNATAL CARE: A CRITICAL OPPORTUNITY TO SAVE MOTHERS AND NEWBORNS**Dr. Shubhangi Kapil Thakur***

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Article Received on 21/04/2023

Article Revised on 11/05/2023

Article Accepted on 31/05/2023

ABSTRACT

The days and weeks following childbirth—the postnatal period—are a critical phase in the lives of mothers and new born babies. Most maternal and infant deaths occur in the first month after birth: almost half of postnatal maternal deaths occur within the first 24 hours,^[1] and 66% occur during the first week.^[2] In 2013, 2.8 million newborns died in their first month of life—1 million of these newborns died on the first day.^[3,4] Considerable progress has been made globally in improving maternal health. Around the world, 72% of women give birth attended by skilled personnel,^[5] and the maternal mortality ratio has decreased from 380 to 210 per 100,000 live births between 2000 and 2013. Yet, in South-East Asia and sub-Saharan Africa only 67% and 48% of women give birth with the assistance of skilled personnel, respectively.^[5] Postnatal care reaches even fewer women and newborns: less than half of women receive a postnatal care visit within 2 days of childbirth.^[4] Analysis of Demographic and Health Survey data from 23 sub-Saharan African countries found that only 13% of women who delivered at home received postnatal care within 2 days of birth.^[6] Hence, we need to focus on postnatal care of new born and mother.

KEYWORDS: Newborns, postnatal care, mother.**INTRODUCTION**

The postnatal period, defined here as the period beginning immediately after the birth of the baby and extending up to six weeks (42 days), is a critical time for women, newborns, partners, parents, caregivers and families. Yet, During this period, the burden of maternal and neonatal mortality and morbidity remains unacceptably high, and opportunities to increase maternal well-being and to support nurturing newborn care have not been fully utilized. Postnatal care services are a fundamental component of the continuum of maternal, newborn and child care, and key to achieving the Sustainable Development Goals (SDGs) on reproductive, maternal and child health, including targets to reduce maternal mortality rates and end preventable deaths of newborns.

Recommendation of postnatal care

1. Provide postnatal care in first 24 hours for every Birth: It Is important that both the mother and the newborn baby have a full check and assessment within 1 hour of birth, 6 hours after birth, and again within the first 24 hours after birth and before discharge home.¹⁰ For these reasons, mothers are encouraged to remain in the healthcare facility for at least 24 hours following birth, so that both mother and baby can be closely monitored.¹⁰ This also

gives the mother a chance to rest. It is recommended that a woman is not discharged until breastfeeding is established

2. Visit women and babies with home births within The first 24 hours.
3. Provide every mother and baby a total of four Postnatal visits on: First day (24 hours) Day 3 (48–72 hours) Between days 7–14 ,Six week .At each of the four postnatal care check-ups, newborns and mother should be assessed for key clinical signs of Severe illness and referred as needed.

Postnatal Care for Newborns

Assessment of the baby -The signs should be assessed during each Postnatal care contact, and the newborn should be Referred for further evaluation if any of the signs is Present: stopped feeding well, history of convulsions, fast Breathing (breathing rate of ≥ 60 per minute), severe Chest in-drawing, no spontaneous movement, fever (temperature ≥ 37.5 °C), low body temperature (temperature < 35.5 °C), any jaundice in first 24 hours of Life, or yellow palms and soles at any age. The family should be encouraged to seek health care Early if they identify any of the above danger signs in-between postnatal care visits.

Exclusive breastfeeding (EBF) -All babies should be exclusively breastfed from birth until 6 months of age. Mothers should be counselled and provided support for exclusive breastfeeding at each postnatal contact.

Cord care -Daily chlorhexidine (7.1% chlorhexidine digluconate Aqueous solution or gel, delivering 4% chlorhexidine) Application to the umbilical cord stump during the first week of life is recommended for newborns who are born at home in settings with high neonatal mortality. Clean, dry cord care is recommended for newborns born in health facilities and at home in low neonatal mortality settings.

Sleeping position -For the prevention of Sudden infant death Syndrome Putting the baby to sleep in the supine position during the first year is recommended to prevent sudden infant death syndrome (SIDS) and Sudden unexpected death in infancy (SUDI).

Immunization for the prevention of infections - Newborn immunization should be promoted as per the latest Existing WHO recommendations for routine immunization.

Vitamin D Supplementation For breastfed, term Infants Vitamin D supplementation in breastfed, term infants is recommended for improving infant health outcomes.

Infant growth and development Whole-body massage gentle whole-body massage may be considered for term, healthy newborns for its possible benefits to growth and development.

Other postnatal care for the newborn -Bathing should be delayed until 24 hours after birth. If this is not possible due to cultural reasons, bathing should be delayed for at least 6 hours. Appropriate clothing of the baby for ambient temperature is recommended. This means one to two layers of clothes more than adults, and use of hats/caps. The mother and baby should not be separated and should stay in the same room 24 hours a day. Communication and play with the newborn should be encouraged. Immunization should be promoted as per recommend schedule.

Postnatal Care for Mothers

Assessment of the mother -First 24 hours after birth: All postpartum women should have regular assessment of vaginal bleeding, uterine contraction, fundal height, temperature and heart rate (pulse) routinely during the first 24 hours starting from the first hour after birth. Blood pressure should be measured shortly after birth. If normal, the second blood pressure measurement should be taken within 6 hours. Urine void should be documented within 6 Hours.

Beyond 24 hours after birth: At each subsequent postnatal contact, enquiries should continue to be made about general well-being and assessments made

regarding the following: urination and urinary incontinence, bowel function, healing of any perineal wound, headache, fatigue, back pain, perineal pain and perineal hygiene, breast pain, uterine tenderness and lochia.

Breastfeeding should be assessed at each postnatal contact- At each postnatal contact, women should be asked about their emotional wellbeing, what family and social support they have and their usual coping strategies for dealing with day-to-day matters. All women and their families/partners should be encouraged to tell their health care professional about any changes in mood, emotional state and behaviour that are outside.

Counselling- All women should be given information about the physiological process of recovery after birth and told that some health problems are common, with advice to report any health concerns to a health care professional, in particular, signs and symptoms of postpartum haemorrhage, pre-eclampsia/eclampsia, infection and thromboembolism. Women should be counselled on birth spacing and family Planning. Contraceptive options should be discussed, and Contraceptive methods should be provided if requested.

Iron and folic acid supplementation -Iron and folic acid supplementation should be provided for at Least 3 months after delivery.

SUMMARY

Childbirth and the time around childbirth is an important and significant event in families' lives that is often governed by societal and cultural norms. There is emerging evidence of a significant burden of ill health (including physical, psychological and social morbidity) in women (and their babies) during and after childbirth. Postnatal care provides a 'window of opportunity' for healthcare providers to provide a full comprehensive and holistic assessment of the health and well-being of the mother and her newborn baby, in a way that meets their individual health needs. Well trained and empathic healthcare providers can provide good quality postnatal care to detect and manage ill health and to ensure the provision of a supportive environment in which a mother, her newborn and family are well informed and equipped to begin their new life together.

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