International Federation of Gynecology and Obstetrics
FIGO Adolescent, Preconception and Maternal Nutrition Working Group

**Chair:** Prof Mark Hanson  
**Co-Chair:** Prof Ronald Ma

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Nutrition has been traditionally neglected as an **essential component** of the healthcare system, especially for women and children.

**BUT...**

it has a central role in determining health across the life course.
In the international field, the Millennium Development Goals (MDGs), which were adopted in 2000 by the United Nations and the international community, and which ended in 2015, dealt with the important targets for improving health in general.
The MDGs

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. Reduce child mortality
5. Improve maternal health
6. Combat HIV/AIDS, malaria and other diseases
7. Ensure environmental sustainability
8. Global partnership for development
Sustainable Development Goals (SDGs)

In September 2015, the Sustainable Development Goals (SDGs) were adopted by the UN General Assembly and the international community to achieve important goals by 2030.
The Sustainable Development Goals
By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under five years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons.
Sustainable Development Goal 3.4

By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

Ensure healthy lives and promote well-being for all at all ages.
End all forms of discrimination against all women and girls everywhere
Other Maternal and Prepregnancy Nutrition Initiatives
Implementing the Global Strategy, with increased and sustained financing, would yield tremendous returns by 2030:

- An end to preventable maternal, newborn, child and adolescent deaths and stillbirths\textsuperscript{10,18-22}

- At least a 10-fold return on investments in the health and nutrition of women, children and adolescents through better educational attainments, workforce participation and social contributions\textsuperscript{13,14,16,17,23}

- At least US$100 billion in demographic dividends from investments in early childhood and adolescent health and development\textsuperscript{16,17}

- A “grand convergence” in health, giving all women, children and adolescents an equal chance to survive and thrive\textsuperscript{10,14,22}
COMMITTING TO ACTION

Academic and research institutions at all levels will:

- Advocate for targeted in-country research and increased budgets for research and innovation
- Build institutional research capacity in low- and middle-income countries
- Generate, translate and disseminate evidence and best practices to shape effective and equity-oriented policies and programmes
- Strengthen networks of academics and researchers to promote knowledge exchange
REPORT OF THE COMMISSION ON

ENDING CHILDHOOD OBESITY

FIGO
INTERNATIONAL FEDERATION OF
GYNECOLOGY & OBSTETRICS

WEIGHT MANAGEMENT

PROMOTE INTAKE OF
HEALTHY FOODS

1

PROMOTE PHYSICAL ACTIVITY

2

PRECONCEPTION AND PREGNANCY CARE

3

EARLY CHILDHOOD DIET AND PHYSICAL ACTIVITY

4

HEALTH, NUTRITION AND PHYSICAL ACTIVITY FOR SCHOOL-AGE CHILDREN

5

END CHILDHOOD OBESITY

6
EFFECTS OF MATERNAL OBESITY

For the Mother
- decreased fertility
- increased risk of miscarriage
- increased risk of gestational diabetes
- increased risk of perinatal complications

For the Fetus
- increased risk of stillbirth
- increased risk of metabolic abnormalities
- increased risk of developmental abnormalities

For the Offspring
- increased risk of obesity
- increased risk of diabetes
- increased risk of hypertension (high blood pressure)

PROPORTION OF OVERWEIGHT OR OBESE WOMEN IN ENGLAND

- 2-15: Over 33% (boys and girls)
- 16-24: 36%
- 25-34: 50%
General Assembly proclaims the Decade of Action on Nutrition

1 April 2016: The United Nations General Assembly today agreed a resolution proclaiming the UN Decade of Action on Nutrition from 2016 to 2025.

The resolution aims to trigger intensified action to end hunger and eradicate malnutrition worldwide, and ensure universal access to healthier and more sustainable diets – for all people, whoever they are and wherever they live. It calls on governments to set national nutrition targets for 2025 and milestones based on internationally agreed indicators.

By agreeing to today’s resolution, governments endorsed the Rome Declaration on Nutrition and Framework for Action adopted by the Second International Conference on Nutrition (ICN2) in November 2014.

The UN resolution calls upon FAO and WHO to lead the implementation of the Decade of Action on Nutrition, in collaboration with the World Food Programme (WFP), the International Fund for Agricultural Development (IFAD) and the United Nations Children’s Fund (UNICEF), and involving coordination mechanisms such as the United Nations System Standing Committee on Nutrition (SCN) and multi-stakeholder platforms such as the Committee on World Food Security (CFS).

The Framework for Action commits governments to exercise their primary role and responsibility for addressing undernourishment, stunting, wasting, underweight and overweight in children under five years of age, anaemia in women and children - among other micronutrient deficiencies. It also commits them to reverse the rising trends in overweight and obesity and reduce the burden of diet-related noncommunicable diseases in all age groups.
Background
Pregnant women are particularly vulnerable to vitamin and mineral deficiencies because of the increase in metabolic demands to meet fetal requirements for growth and development. It is estimated that 38.2% of pregnant women (aged 15–49 years) worldwide are anaemic and that iron deficiency anaemia represent approximately 60% of these cases in non-malarious areas and 50% in malaria-endemic settings. Vitamin and mineral deficiencies in pregnancy are associated with adverse health outcomes in both the mother and her neonate.

Recommendation
• Routine use of multiple micronutrient powders during pregnancy is not recommended as an alternative to standard iron and folic supplementation during pregnancy for improving maternal and infant health outcomes (strong recommendation, very low quality of evidence).
Adequate nutrition, beginning in early stages of life, is crucial to ensure good physical and mental development and long-term health. This action plan illustrates a series of priority actions that should be jointly implemented by Member States and international partners to achieve, by the year 2025, six global nutrition targets:

- 40% reduction of the global number of children under five who are stunted
- 50% reduction of anaemia in women of reproductive age
- 30% reduction of low birth weight
- No increase in childhood overweight
- Increase the rate of exclusive breastfeeding in the first six months up to at least 50%
- Reduce and maintain childhood wasting to less than 5%
The importance of nutrition

Nutrition has now been included in the Goals - it is clear that it is an important component in achieving global health and development.
FIGO Commitment to Maternal Nutrition

• Pregnancy is an **opportune moment for reaching women - who may otherwise be neglected - with nutritional support**

• Approaching maternal nutrition as part of a package of reproductive health services and as part of a **continuum of care** offered to women

• Partnering with **midwives and paediatricians** to address maternal nutrition in a holistic manner in line with the realities faced by women and newborns across the world
FIGO Initiative: Adolescent, Preconception and Maternal Nutrition

- Develop and disseminate evidence-based recommendations on maternal nutrition, from adolescence, through pre-conception, pregnancy and to the post-partum period

- FIGO recommendations developed by an Expert Group of nutritionists, obstetricians and scientists representing different geographical areas and resource settings, and in collaboration with other key healthcare professionals and stakeholders

- Open-access available on IJGO and FIGO websites
FIGO Nutrition Recommendations: Key Principles

• Greater attention to be given to the links between poor maternal nutrition and noncommunicable diseases

• Adolescent, preconception and maternal nutrition to be considered using a life course approach

• Women should be supported from the time of planning a pregnancy right through to the post-partum period

• Focus on both the woman and the newborn
FIGO Nutrition Recommendations: Key Principles

• Dispel food-related myths

• Discuss both under-nutrition and obesity

• Highlight the impact that various micronutrients have on the wellbeing of women and the development of the foetus and newborns

• Promote a wide range of healthcare providers working together, with a focus on nutrition, health, and lifestyle
FIGO recommends promotion of a varied and healthy diet as the first step to meeting the nutrient needs of adolescent girls and women, with the provision of supplements or fortified foods when necessary.
Malnutrition should be viewed as poor nutrition in all its forms, from both deficient (energy and protein undernutrition) or excessive (obesity) consumption of macronutrients, to micronutrient malnutrition.

This results from a diet with insufficient vitamin and mineral density, poor bioavailability of nutrients, or increased body requirements due to infection or growth.

Malnutrition can result from overconsumption of non-nutritive calories - food quality counts as much as food quantity.
FIGO recommends that micronutrient deficiencies are recognized and rectified through interventions, including dietary diversity, consumption of fortified foods, and supplementation as appropriate.
FIGO Recommendations: Micronutrients

- **Iron**: adolescent girls and pregnant women are at risk of iron deficiency due to menstrual blood loss and increased pregnancy demands, and commonly require iron supplements

- **Iodine**: required early in pregnancy and often lacking in diets if iodized salt is not used

- **Folate**: required before conception and in early pregnancy as dietary intake is usually inadequate; all women of reproductive age are advised to consume 400 μg of folic acid per day as supplements or fortified foods
FIGO Recommendations: Micronutrients

- **Vitamin B12**: dietary intake is very low in vegetarian diets and absent in vegan diets

- **Calcium**: lacking in diets low in dairy products; there is a higher requirement, especially in adolescents during the growth spurt

- **Vitamin D**: food sources are minimal unless fortified, and inadequacy is common, especially in women with minimal sun exposure or darkly pigmented skin
FIGO recommendations: Adolescent and Preconception life stages

• FIGO emphasizes the importance of optimizing the nutritional status of adolescent girls and women and encouraging the adoption of good dietary and lifestyle habits before pregnancy.

• FIGO recommends that attention be paid to preconception body weight and BMI as modifiable risk factors with important effects on a woman’s nutritional status:
  • Underweight women may be lacking in a number of important nutrients, and their diets should be carefully assessed and supplemented as required.
  • Overweight or obese women may have poor diets that are high in energy but low in nutritional value.
FIGO recommendations: 

*Pregnant women*

- FIGO strongly recommends that pregnant women have early access to prenatal care to receive appropriate nutrition counselling and interventions, and treatment for conditions that jeopardize their pregnancy outcome, such as malaria, tuberculosis, HIV, gastrointestinal infections, and noncommunicable diseases.
FIGO recommendations: Postpregnancy period

- FIGO recommends that the period that follows birth is used to improve the nutritional status of both mother and child. FIGO endorses the WHO recommendation of exclusive breastfeeding for the first 6 months of the infant’s life.
Summary

These FIGO recommendations aim to address several issues relating to nutrition in adolescent and young women before, during, and after pregnancy.

FIGO calls for:

• Increased awareness of the impact of women’s nutrition on their health and the health of future generations

• Greater attention given to the links between poor maternal nutrition and increased risk of later noncommunicable diseases in the offspring as a core component of meeting global health goals
FIGO calls for:

• Action to improve nutrition among adolescent girls and women of reproductive age

• Public health measures to improve nutritional education, particularly for adolescents, girls and young women

• Greater access to preconception services for women of reproductive age to assist with planning and preparation for healthy pregnancies and healthy children
FIGO calls for:

• Healthcare professionals to take action to recommend and monitor appropriate gestational weight gain in relation to prepregnancy BMI. In resource-constrained settings, gestational weight gain monitoring should not occur at the expense of assessments such as blood pressure measurement, urine testing for protein and abdominal examination.
Launched at the 2015 FIGO World Congress in Vancouver, Canada

Developed into an infographic, available in English, Spanish and French

Recommendations document and infographics are available on FIGO website – www.figo.org
FIGO recommendations: what next?

• FIGO Working Group on Adolescent, Preconception and Maternal Nutrition established

• Tasked with disseminating and implementing these guidelines through wide-reaching advocacy and capacity-building activities
The Working Group is developing a range of resources for use by policy-makers, health care professionals, professional organisations and others, including:

- An advocacy tool with practical suggestions for policy-makers on implementing systems to improve women’s and girl’s nutrition
- A nutrition diagnosis checklist for health care professionals

The Working Group will work to strengthen linkages with other groups, professional organisations and NGOs working in this field, including:

- World Health Organisation
- The International Paediatrics Association (IPA)
- The International Confederation of Midwives (ICM)
- DOHaD Society
- Other FIGO Working Groups – including those on Hyperglycemia in Pregnancy, and Reproductive and Environmental Developmental Health
FIGO recommendations: what next?

14 Regional Ambassadors for the initiative around the world

Tasked with developing, disseminating and implementing locally-relevant adolescent, preconception and maternal nutrition guidelines

Using FIGO recommendations as a basis

Adjusting to suit local and regional context
Call to action

• Support the scale up of evidence-based, cost-effective, and relatively simple solutions to reduce malnutrition

• Train healthcare workers on how best to advise women of all ages to adopt optimal nutritional practices
Call to action

- Implement innovative strategies for translating scientific evidence into action for improving the nutritional health of the most underserved populations, using FIGO Working Group documents where relevant.

- Provide quality care across the life cycle: a child’s nutritional future begins with the mother’s nutritional status in adolescence and during pregnancy.
Thank you for listening

www.figo.org