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| Topics: **SIDS/SUID** |
| Type: **Thematic Panel** |
| **Behind Every Healthy Child Is a Healthy Mother** |
| **Shapiro - Mendoza, Carrie**1; **Gentile, Angela**2; **Moraes Castro, Mario**3; **Etchegaray, Adolfo**4 *1 - Division of Reproductive Health, Centers for Disease Control and Prevention. Atlanta, GA, USA . 2 - Hospital de Niños Ricardo Gutierrez, CABA, Argentina. 3 - Facultad de Medicina, Instituto de Neurología, Universidad de la República (UDELAR), Montevideo, Uruguay. 4 - Hospital Universitario Austral, Pliar, Buenos Aires, Argentina .* |
| **Objectives of the session** This thematic panel will address vaccination for pregnant women, control care and health risk factors during pregnancy that include tobacco use and alcohol abuse.  **Content of the session** **Vaccines**: Some diseases are particularly harmful for pregnant women and their babies.  Many of these can be prevented through immunization. A mother’s immunity can protect her baby during pregnancy and often for the baby’s first six to 12 months of life. Also it is recommended to have a complete vaccine scheme for all persons who live with a pregnant woman. During pregnancy, even among health professionals, there is a tendency not to take proactive attitudes to vaccination.  It is essential to note that some vaccines are particularly suitable (flu and Tdap), others are recommended under certain circumstances (inactivated vaccines) and finally there are another group of contraindicated vaccines (live attenuated vaccines). Flu is more likely to cause severe illness in pregnant women than in women who are not pregnant. The diagnosis of influenza during the first trimester of pregnancy has been associated with an increase in cardiac malformations, neural tube defects and during the second and third quarters to increase the number of spontaneous abortions, premature births and reduced birth weight. Younger children, who cannot be vaccinated, have flu rates similar to adults over 65 years, and are approximately forty percent more likely to be admitted to an ICU. WHO recommends a new policy: Pregnant women should be vaccinated with an inactivated trivalent influenza vaccine at an early stage of pregnancy. In recent years we have observed an increase in the incidence of pertussis even in developed countries with high vaccination coverage. Maternal vaccination with pertussis component during pregnancy protects the newborn until they receive their first vaccination at 2-3 months of age because of passive antibody transplacental transmission to the fetus. It is essential to use vaccines at this stage of high risk as a useful protection tool for both mother and child. CDC recommends pregnant women get the pertusssis (whooping cough) vaccine between 27 and 36 weeks of each pregnancy    The goal is to give babies some short-term protection against whooping cough in early life. **Prenatal Care**: Regular prenatal care have been shown to decrease SIDS risk. SIDS mothers generally receive less prenatal care and initiate care later in pregnancy, with two or three times higher risk associated with late or no prenatal care**.  Tobacco use**: WHO recognizes the use of tobacco as one of the leading causes of preventable premature death and disease, highlighting tobacco consumption as a serious public health problem.   Pregnant women are a priority population for tobacco control efforts because cigarette smoking during pregnancy poses serious risks to fetal and infant health.   The speaker will l discuss: 1.  the results suggesting that the simultaneous implementation of all the measures set out in the WHO Framework Convention for the Control of Tobacco is an effective strategy to decrease the prevalence of tobacco use in a short period of time.2.  Effects of active and passive smoking during pregnancy. In the U.S., prenatal smoking has declined in recent years, but remains one of the most prevalent preventable causes of infant morbidity and mortality in the U.S. The speaker will provide updated estimates of the percentage of poor pregnancy outcomes and infant deaths attributable (including SIDS) to prenatal smoking using the most recent U.S.-linked birth and infant death certificate data. **Alcohol abuse during pregnancy:** Alcohol use during pregnancy is associated with a range of complications and poor reproductive outcomes and can cause fetal alcohol spectrum disorders (FASDs), which are characterized by lifelong physical, behavioral, and intellectual disabilities. The speaker will discuss these effects of alcohol- use  during pregnancy,  and report on the effects of alcohol on pregnancy and infant outcomes observed in Montevideo, Uruguay.  **Method and extent of audience participation** Child health and maternal health are closely linked.     Too often, the maternal health factors that can have an important impact on child survival are overlooked and  ignored.   . The risk of SIDS is two to three times  higher in children whose mothers do not realize prenatal control  **Proposed content area and why it is important to participants** Contents: Vaccination in pregnancy: a tool to protect the mother and the newborn. Effects of prenatal alcohol exposure.  Infant morbidity and mortality attributable to prenatal smoking SIDS. Risk: it`s More than Just the Sleep  Environment |
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| **CONTACT** | |
| Name: | **Carrie** |
| Lastname: | **Shapiro - Mendoza** |
| E-mail: | **ayn9@cdc.gov** |
| Country: | **USA - United States of America** |
| Institution | **Division of Reproductive Health, Centers for Disease Control and Prevention. Atlanta, GA, USA** |
| Cellphone: |  |
| City: | **Atlanta** |