NOTE:IMPORTANT NUMBERS ARE RED-COLORED OR HIGHLIGHTED

| The event/fact | The date/year/number |
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| Declaration of Alma Ata International Conference on Primary Health Care | 6-12 September 1978.(THE YEAR IS VERY IMPORTANT) |
| lts strategic role was reaffirmed(Alma Ata) by WHO | 30 years later in the 2008 |
| According to Alma Ata decleration, An acceptable level of health for all the people of the world by the year be attained through a further and better use of the world's resources | 2000 |
| Current health status and health care in Jordan(JPFHS): Life expectancy at birth increased from 49 years in(1) to 66 years in(2) to 72 in(3) to <u>73</u> ((5) males and(6) females) in (7) | (1): 1965 (2): 1990 (3): 2004 (4): 71.6 (5): 74.4 (6): 2012 |
| <u>73.5</u> ((1) males and(2) females) in(3) | (1): 72.8 (2): 74.2 (3): 2017 |
| Life expectancy: Ranging from(1) in developing countries to(2) years in developed countries. | (1): 57 (2): 78 |
| Infant mortality decreased from 130 in 1960 to 35 per 1000 live births in 1992 to 22 in 2002 to 19 in(1) to(2) in <u>2012.</u> Stayed(3) per 1000 live births in <u>2017.</u> | (1): 2007 (2): 17 (3): 17 |

| Smallpox was eradicated on | 1979 |
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| The country's population is growing rapidly, doubling over the last years and likely to double again by 2029. | 20 years(prone to changes) |
| Fertility declines in Jordan have contributed to slowing the population growth rate down to 3.2 percent in the second half of the 1990s, and to 2.8 percent in 2002 (JPFHS, 2002) in <u>2012.</u> | 2.2% |
| Latest increased in population growth rate in <mark>2017</mark> due to increased in immigrants. | 2.4 % |
| The proportion of the population under 15 years of age declined from 51 percent in 1979 to 39 percent by 2002 to(1) by <u>2012</u> to(2) by <u>2017</u> | (1): 37.3% (2): 34.3% |
| while the proportion of those age 65 and over has been rising from 2.1% (JPFHS, 2002) to(1) by the year 2012 to(2) by the year 2017. | (1): 3.2% (2): 3.7% |
| Three main reasons for PHC in Jordan 1986 MDH study visits are: A Respiratory diseases B infectious and parasitic diseases C digestive diseases | A: 33% B: 14% C: 10% |
| Top 10 Causes of Death in Jordan center for disease control and prevention <u>(CDC 2010):</u> 1. Ischemic Heart Disease% 2. Cancer% 3. Stroke% 4. Diabetes% | <u>ا: 18%</u> <u>2: 15%</u> <u>3: 12%</u> <u>4: 7%</u> مش مهم تحفظ النسبة قد ما مهم تعرف الترتيب |

| HERE PHC Ends | The World Bank estimates that of all health needs can be met at the primary health care level. | 90% |
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| | women of reproductive age groups | 15-49(VERY IMPORTANT) |
| | -Mothers and children make up over (1)of the whole population. Children < 15 years are 34.3% of the population. Women in reproductive age (15 – 49) constitute around(2) | (1): 1/2 (2): 20% |
| | About percent of maternal deaths in developing countries are due to direct obstetric causes. They result from obstetric complications of the pregnant state (pregnancy, labor, and puerperium) | 80%(IMPORTANT) |
| | More than newborn deaths are believed to result from maternal health problems and their mismanagement | 7 million |
| | Puerperium:The period of about weeks after childbirth during which the mother's reproductive organs return to their original non-pregnant condition | Six(VERY IMPORTANT) |
| | Nutritional problems are severe among pregnant mothers and percent of pregnant women in developing countries are estimated to be anemic | 60-70%(VERY IMPORTANT) |
| | low-birth -weight infant | Less than 2500 g(VERY IMPORTANT) |
| | Among infants who survive the death of the mother, <u>fewer than</u> percent live beyond their first birthday | 10% |
| | Ante partum hemorrhage (bleeding from or into the genital tract, occurring from weeks of pregnancy and prior to the birth of the baby) | 24(VERY IMPORTANT) |

| parity is defined as the number of times that woman has given birth to a fetus with a gestational age of weeks or more, regardless of whether the child was born alive or was stillborn | 24(VERY IMPORTANT) |
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| Stillbirth is when a baby dies before she or he is born, after weeks of pregnancy | 24(VERY IMPORTANT) |
| Normal weight gains during pregnancy | 8-11 Kg(VERY IMPORTANT) |
| A woman in sub-Saharan Africa has a 1 in (1) chance of dying in pregnancy or childbirth, compared to a 1 in(2) risk in a developing country | (1): 16 (2): 4000 |
| pregnancy complications and childbirth are the leading causes of death among women of reproductive age. Less than percent of these deaths occur in developed countries, showing that they could be avoided if resources and services were available | 1% |
| Maternal health problems are also the causes for more than pregnancies to result in stillbirths or infant deaths within the first week of life | 7 million |
| In 2015, an estimated 303000 women worldwide died in pregnancy and childbirth, with% of these deaths occurring in low- income countries(WHO 2018) | 99% |
| % of death occurring in the WHO African Region | Two thirds(64%) |
| % of maternal deaths could be avoided by access to essential maternity & basic health services. | 80% |
| Birth is considered premature, or preterm, when it occurs before the(1) week of pregnancy. A normal pregnancy lasts about (2) weeks | (1): 37 th (2): 40 Both are very important |

| Women who are planning to become pregnant should check with their healthcare professional to make sure they are vaccinated before they get pregnant. Adult women of childbearing age should avoid getting pregnant for at least weeks after receiving MMR vaccine | Four |
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| JPFHS 2017 :About of ever-married women and their husbands had a pre- marital medical exam | half |
| In low- and middle-income countries (LMICs), ANC utilization has <u>increased</u> since the introduction of the WHO ANC model, known as 'focused' ANC (FANC). | 2002 |
| ANC visits (according to FANC): 1. First visit: during the first trimester of pregnancy (up to(1)weeks of gestation). 2. Second visit at(2) to(3) weeks of gestation. 3. Third visit at(4) weeks 4. Fourth visit between(5) and(6) weeks of gestation. | (1): 12 (2): 24 VERY (3): 28 IMPORTANT (4): 32 (5): 36 (6): 38 |
| in Jordan mean age of females at first marriage <mark>2017</mark> is years | 26.3 |
| Height (less than) And wt. under or over wt. is a pregnancy risk fact that should be considered in ANC | 150cm |
| Preeclampsia A condition starting after (1) weeks of pregnancy that causes high blood pressure and problems with the kidneys and other organs. Also called toxemia Pregnant teens and women over(2) are at increased risk. | (1): 20 (2): 40 VERY IMPORTANT |

| Preterm labour – Going into labour before weeks of pregnancy | 37(VERY IMPORTANT) |
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| Chronic hypertension is defined as blood pressure exceeding(1)/(2) mm Hg before pregnancy or before(3)weeks' gestation | (1): 140 (2): 90 VERY (3): 20 IMPORTANT |
| When hypertension first is identified during a woman's pregnancy and she is at less than weeks' gestation, blood pressure elevations usually represent chronic hypertension | 20(VERY IMPORTANT) |
| Preeclampsia (PE) is a multisystem, pregnancy-specific disorder that is characterised by the development of hypertension and proteinuria (elevated levels of protein in the urine) after weeks of gestation | 20(VERY IMPORTANT) |
| PE is a leading cause of maternal, perinatal and foetal/neonatal mortality and morbidity worldwide. Perinatal period is from the(1) week of gestation to the(2) week after birth | (1): 20 th VERY (2): 4 th IMPORTANT |
| Clinically, PE presents as new-onset hypertension in a previously normotensive woman, with systolic and diastolic blood pressure readings of \geq (1) and \geq (2) mmHg, respectively, on 2 separate occasions that are at least (3) hours apart, together with proteinuria that develops after(4) weeks of gestation | (1): 140 (2): 90 VERY (3): 6 IMPORTANT (4): 20 |
| Preeclampsia occurs in approximately (1)of all pregnancies,(2) of first pregnancies, and(3) of women with a history of chronic hypertension | (1): 5% (2): 10% (3): 20-25% |

| Anemia is defined during pregnancy as a hemoglobin (Hb) level below gr/ dL (WHD, 1992) | 11 (VERY IMPORTANT) |
|---|------------------------------------|
| Related to Anemia definition,(range) of women, and even more in some areas, are considered as anemic | 20-50%(VERY IMPORTANT) |
| The World Health Organization aims to reduce the rate of anemia in women of reproductive age by by 2025, because of the adverse effect anemia has on women's and children's health | 50% |
| The physiologic process of plasma volume expansion achieves a(range) increase from pre-pregnancy concentrations near full term | 30-50%(VERY IMPORTANT) |
| In adults, normal levels of HCT (hematocrit) for <u>men</u> range from (range 1) For <u>women</u> , the normal range is slightly lower:(range 2) | Range 1: 41-50% Range 2: 36-44% |
| During pregnancy, maternal plasma volume increases to meet the greater circulatory needs of the placenta and maternal organs (e.g., uterus, breasts, skin, and kidneys), with an average increase of | 45%(VEERY IMPORTANT) |
| IRON DEFICIENCY is responsible for of anemia of pregnancy | 95%(VERY IMPORTANT) |
| Ferrous iron salts are the preparation of choice. The oral dose for iron deficiency anemia should be(range) mg of elemental iron daily | 100-200(VERY IMPORTANT) |
| Women should be counselled as to how to take oral iron supplements correctly. This should be on an empty stomach, hour before meals, with a source of vitamin C (ascorbic acid) such as orange juice to maximise absorption | 1 (one) |

| Gestational diabetes mellitus can occur at any stage of pregnancy but is more common in the half | Second(VERY IMPORTANT) |
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| The most frequently reported perinatal consequence of GDM is macrosomia (usually defined as a neonate weighing over kg) which can increase the risk of caesarean section | 4(VERY IMPORTANT) |
| One of the Complications that may affect the mother from GDM is type 2 diabetes; that% mothers develop type 2 diabetes (T2DM) within five to ten years of delivery | 50% |
| Maternal mortality: The death of a woman whilst pregnant or within days of delivery or termination of pregnancy, from any cause related to, or aggravated by pregnancy or its management, but excluding deaths from incidental or accidental causes"(WHO, 1992) | 42(VEERY IMPORTANT) |
| Causes of Maternal Mortality: Pregnancy and Childbirth-Related Deaths to Women, by Cause, 1997 1.Severe bleeding, 25% 2.Infections, 15% 3.Unsafe abortion, 13% 4.Eclampsia, 12% 5.Obstructed labour, 8% 6.Other direct causes, 8% 7.Indirect causes, 20% | We conclude that nearly three-quarters of maternal mortality is due to direct complications of pregnancy and childbirth(VERY IMPORTANT) |
| percent of <u>women</u> age 15-49 received a postnatal checkup within two days of delivery; 12% received no postnatal check | 83% |
| percent of <u>newborns</u> received a postnatal checkup within two days of birth; 13% received no postnatal check. | 86% |

| Baby's doctor will likely recommend the first well-baby exam within(range) days after birth, Additional well-baby exams will be needed every few October 2021 weeks and, later, every few months for the first year | 3-5 |
|---|---|
| Infant deaths are divided into two groups: those occurring at less than (1) days after birth, referred to as <u>neonatal deaths</u> ; and those occurring at ages 28 days and over but under(2), referred to as <u>post neonatal deaths</u> | (1): 28 VERY (2): one year IMPORTANT |
| Of the 7.1 million infants who die each year, approximately die in the first 28 days after birth – the neonatal period | Two-thirds |
| percent of all neonatal deaths occur in developing countries | 98 |
| Infant mortality (deaths between 0 and months) | 12(VERY IMPORTANT) |
| the mortality of children under the age of five | Under-five mortality(VERY IMPORTANT) |
| Perinatal mortality is the number of late fetal deaths (also called still births) and early neonatal deaths (day 7) per 1000 births | VERY IMPORTANT |
| Perinatal mortality rate for low-birth weight babies is(range) times higher than for fetuses or infants of normal weight | 5-30 |
| 2017-18 JPFHS results showed that: 1. Neonatal mortality was(1) deaths per 1,000 live births 2. Infant mortality was 17/2 deaths per 1,000 live births .Most (90%) of the deaths occur in the first year of life, 58% take place in the first month of life | (1): 11 |

| Nutritional antenatal <u>infections</u> : Balanced energy and protein supplementation (BES) defined as a diet that provides up to percent of total energy in the form of protein, is an important intervention for the prevention of adverse perinatal outcomes in populations with high rates of food insecurity and maternal undernutrition (Imdad & Bhutta, 2012) | 25 |
|---|--------------------|
| The WHO recommends maternal calcium supplementation from weeks' gestation in populations in which calcium intake is low to reduce the risk of hypertensive disorders in pregnancy (Khan, Wojdyla, Say, Gülmezoglu, & Van Look, 2006) | 20(VERY IMPORTANT) |
| Immunizing pregnant women or women of childbearing age with at least two doses of tetanus toxoid was estimated to reduce mortality from neonatal tetanus by percent | 94 |
| Pregnant women with untreated syphilis have a percent increased risk of stillbirths (Gomez et al., 2013) | 21 |
| Up to of all babies infected with syphilis while they are in the womb die shortly before or after birth | half |
| <u>DM & GDM</u> : Optimal blood glucose control in pregnancy compared with suboptimal control was associated with percent reduction in the risk of perinatal mortality (Syed, Javed, Yakoob, & Bhutta, 2011) | 60 |

| WHO defines adolescents as individuals between the ages(range) years A.Early adolescence(10-13 yrs) B.Middle adolescence(14-16 yrs) C.Late adolescence(17-19 yrs) | 10-19(VERY IMPORTANT) |
|--|-----------------------|
| Why adolescence? Demographic rationale One in individuals in the world is an adolescent, aged 10-19 years | five |
| In developing countries,they represent up to a of the population | fourth |
| In 11 countries (out of 64 with available data), a of the adolescent girls are underweight | quarter |
| In 21 countries (out of 41 countries with available data), a of adolescent girls are anaemic | third |
| Between(range) ever-married girls aged 15- 19 reported that they experienced emotional, physical or sexual violence by their current or most recent husband or partner | 40-70 % |
| MOTIVATIONAL STRATEGIES (HCM 3): Give employees compliments for every criticism | three |

MHC ENDS

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