

Clinical Quick Reference Table for Providers

Condition	Why It Matters	Key Preconception Actions	Medication Considerations	When to Refer
Diabetes	Poor glycemic control increases risk of congenital anomalies, pregnancy loss, hypertensive disorders, and fetal growth abnormalities	Optimize glycemic control before conception; screen for retinopathy and nephropathy; provide nutrition counselling	Some medications may require adjustment before pregnancy	Endocrinology
Hypertension	Increased risk of preeclampsia, placental complications, preterm birth, and fetal growth restriction	Achieve stable blood pressure control; assess cardiovascular risk; support lifestyle changes	ACE inhibitors and ARBs are contraindicated in pregnancy	Primary care / Cardiology
Thyroid Disorders	Can affect fertility, pregnancy loss risk, and fetal neurodevelopment	Achieve euthyroid status before conception; establish monitoring plan	Thyroid medication dosing often increases during pregnancy	Endocrinology
Epilepsy	Seizures and antiseizure medications may affect maternal and fetal outcomes	Achieve seizure stability; coordinate neurology care; initiate folic acid supplementation	Some antiseizure medications carry teratogenic risk	Neurology
Asthma	Poor control increases risk of preterm birth, hypertensive disorders, and low birth weight	Optimize asthma control; review inhaler technique; address triggers and smoking	Most asthma medications are safer than uncontrolled asthma	Respiratory specialist
Autoimmune Disease	Active disease increases risk of pregnancy loss, preeclampsia, and preterm birth	Aim for disease remission or low activity before conception; coordinate specialist care	Some immunosuppressive medications are contraindicated in pregnancy	Rheumatology / Relevant specialty
Obesity and Metabolic Health	Associated with gestational diabetes, hypertensive disorders, caesarean birth, and metabolic risk in offspring	Assess metabolic health; encourage nutrition and physical activity; screen for diabetes and hypertension	Review medications for metabolic conditions	Primary care / Dietitian

Clinical Pearl

Stabilizing chronic disease before pregnancy is one of the most effective ways to reduce maternal and neonatal complications.

Quick Clinical Prompts

During routine visits with patients who have chronic illness:

- Ask about reproductive goals
- Review medications
- Assess disease control
- Screen for cardiometabolic risk
- Coordinate specialist care
- Provide preconception counselling