

## Witness valuable scientific talks and discussions to participate and contribute to future innovative ideas and technologies about Obstetrics Gynecology.

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Fetal and Maternal Medicine is an international platform for presenting research about diagnosis, prevention, and management of Fetal diseases, exchanging ideas about it and thus, contributes to the dissemination of knowledge in Fetal and Neonatal for the benefit of both the academic and business. This event brings together Fetal Medicine, Parental nutritionists and all the eminent researchers and experts in the field of Fetal and Maternal medicine to explore the advancements in the Parental. We bring together industry executives, Fetal and Maternal Pharma and Health care sectors making the conference a perfect platform to network, share views and knowledge through interactive discussions.

#### Significance and Scope:

Fetal medical procedures vary from market to market. Most companies view fetal procedures as preventive care and therefore do not cover them, and many have historically had exclusions for congenital conditions as well.

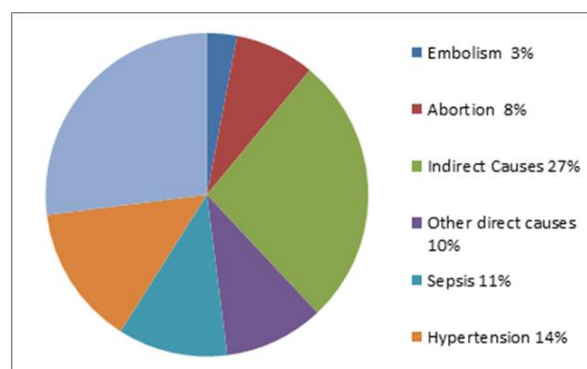
With the number and scope of prenatal screens increasing, claims for congenital diseases have been rising in number and cost. Still, in markets where these conditions are covered, costs generally do not exceed USD \$30,000. This is lower than the costs incurred to treat congenital conditions even in just the first year of life. It may, therefore, be more cost-effective to treat conditions such as fetal lung and heart defects and spina bifida in utero, as doing so can save costs compared to postnatal procedures.

Every country should reduce its maternal mortality ratio by at least two thirds from the 2010 baseline, and no country should have a rate higher than 140 deaths per 100 000 live births (twice the global target).

#### Causes of Maternal Mortality:

As the era of the millennium development goals comes to a close, more needs to be done for women's

and children's health. Although maternal deaths declined to 289 000 in 2013,<sup>1</sup> the 45% reduction in maternal mortality since 1990 falls far short of the target of 75% in millennium development goal 5. The majority of maternal deaths are still due to direct obstetric causes—that is, haemorrhage (27%), hypertensive disorders (14%), sepsis (11%), and complications of abortion (8%).<sup>11</sup> However, a rising number of deaths are related to chronic health conditions in pregnancy, such as diabetes, HIV, malaria, cardiovascular conditions, and obesity.



#### Target Audience:

- Gynecologists
- Obstetricians
- Maternal-Fetal Medicine Specialists
- Neonatologists
- Midwife
- Nursing
- Fetal & Neonatal Faculty
- Business Entrepreneurs
- Physician Assistants
- Pediatric Cardiologist
- IVF Specialists

- Medical Student
- Obstetrics – Pediatrics
- Pediatric surgeons
- Geneticists
- Women’s Healthcare Researchers
- Radiologists
- Physician Assistants
- Young researchers
- Sonographers
- Clinical Nurse Specialists

**Related Hospitals:**

- Advocate Good Samaritan Hospital
- Anderson Hospital
- Aspirus Wausau (Wis.) Hospital
- Aultman Hospital (Canton, Ohio)
- Aurora St. Luke's Medical Center (Milwaukee)
- Banner Good Samaritan Medical Center (Phoenix)
- Beaumont Hospital (Royal Oak, Mich.)
- Boone Hospital Center

- Boston Medical Center

**Related Associations and Societies:**

- British Pregnancy Advisory Service
- Reproduction and Society
- Teratology Society
- Association of Early Pregnancy
- American Pregnancy Association
- North American Menopause Society
- Menopause Association
- SIGMA Canadian Menopause Society
- Canadian Menopause Coalition
- Maternity and Reproductive Health in Asian Societies
- International Menopause Society
- Indian Menopause Society
- Australasian Menopause Society