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RESEARCH ARTICLE

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## THE IMPORTANCE OF PRENATAL MONITORING IN PREVENTING PREGNANCY COMPLICATIONS IN THE CONTEXT OF PRIMARY HEALTH CARE

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### ABSTRACT

Prenatal care is an essential strategy in the context of Primary Health Care, aiming at promoting maternal and child health. Through preventive, educational and monitoring actions, the aim is to reduce risks and complications during pregnancy. Ensuring quality prenatal care directly contributes to the safety of the pregnant woman and the baby, in addition to positively impacting public health indicators. This study aimed to analyze the importance of prenatal care in the context of Primary Health Care, highlighting its role in preventing gestational complications and promoting maternal and child health. This is an integrative literature review. The bibliographic survey was carried out from April to May 2025, in the following databases: SCIELO, LILACS and PubMed. Four articles that met the inclusion criteria were analyzed. The articles were sorted in descending order according to the year of publication. From the analysis and synthesis of the included articles, it was possible to identify that inadequate or late prenatal care directly impacts the health of mother and baby, since the lack of adequate monitoring can result in serious complications, both for maternal health and fetal development. Therefore, strengthening Primary Health Care, combined with welcoming, problem-solving practices based on health education, is presented as a central strategy to reduce maternal and infant morbidity and mortality.

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## INTRODUCTION

Pregnancy is a phase marked by profound physical, emotional, and social changes in a woman's life, which makes it essential to provide specialized care to ensure the health and well-being of mother and baby (De Almeida, 2024).

According to the World Health Organization (WHO), both the adequate number of consultations and the quality of care received by pregnant women are factors directly associated with the reduction of maternal and neonatal mortality rates (Nascimento, 2024). Adequate prenatal care, when carried out systematically and in a qualified manner, allows monitoring of the progress of the pregnancy, offering

health guidance, performing preventive exams, and intervening early in the event of possible serious complications, such as pre-eclampsia, gestational diabetes, premature birth, and low birth weight; in addition, adequate diagnosis and treatment ensure a safe birth and reduce maternal and fetal morbidity and mortality (Candido, 2024). In 2015, the United Nations (UN), when launching its new global agenda, reaffirmed its commitment to reducing maternal and infant mortality, a goal that has not been fully achieved by several countries, including Brazil (De Almeida, 2024). Thus, the 2030 Agenda incorporates this challenge among the Sustainable Development Goals (SDGs), highlighting in item 3.1 the goal of reducing the global maternal mortality rate to less than 70 deaths per 100,000 live births by 2030 (Nascimento, 2024). In the Brazilian context, prenatal care is a right guaranteed to all pregnant women and must be provided free of charge and accessible through the Unified Health System (SUS). In Primary Health Care (PHC), which is the main gateway to the SUS, prenatal care is considered essential, as it encompasses comprehensive, continuous, effective, and humanized care actions (Ferreiras, 2025). Therefore, the work of multidisciplinary teams, with an emphasis on nursing, is essential to ensure quality care, capable of contributing to the reduction of maternal and neonatal morbidity and mortality rates, in addition to promoting a healthy and safe pregnancy (Nolasco, 2025). However, challenges persist in accessing qualified prenatal care, especially in regions of greater social vulnerability, rural areas, and urban outskirts, both in Brazil and in several low-income countries (Oliveira, 2025). In this context, prenatal care is an essential strategy for promoting public health, since it directly contributes to protecting maternal and child health and reducing health inequalities (Silva, 2025). Therefore, it is necessary to ensure that all pregnant women have access to quality prenatal care, based on humanized, qualified and efficient care, provided by properly trained professionals (Santos, 2025). In addition, it is essential to strengthen public policies that guarantee universal and equitable access to prenatal care and other health services aimed at pregnant women (Sousa, 2025). Given the relevance of the topic, this work is justified by highlighting the importance of early detection of possible complications during the gestational period, aiming to ensure a safe, healthy and complication-free pregnancy, both for the mother and the baby (Oliveira, 2025). Thus, this study aims to analyze the importance of prenatal monitoring in the context of Primary Health Care, highlighting its role in preventing gestational complications and promoting maternal and child health.

## PROCEDURES AND METHODS

This is an integrative literature review, a method that allows the analysis and synthesis of relevant research and enables general conclusions to be drawn regarding the current state of the topic under investigation. It was prepared following six distinct phases: 1) identification of the topic and selection of the guiding question; 2) establishment of criteria for inclusion and exclusion of studies/sampling or literature search; 3) definition of the information to be extracted from the selected studies/categorization of studies; 4) evaluation of the studies included in the integrative review; 5) interpretation of the results; and, 6) presentation of the review/synthesis of knowledge. The research question was developed using the PICO strategy (Population, Interest/phenomenon of interest and Context), defining the population as pregnant women followed up in primary health care; intervention as adequate prenatal care; comparison as the absence of adequate care or inadequate prenatal care and the outcome as the prevention of gestational complications and promotion of maternal and child health.

Thus, this study was conducted with the following question: Does adequate prenatal care in Primary Health Care contribute to reducing gestational complications in pregnant women, compared to inadequate prenatal care?

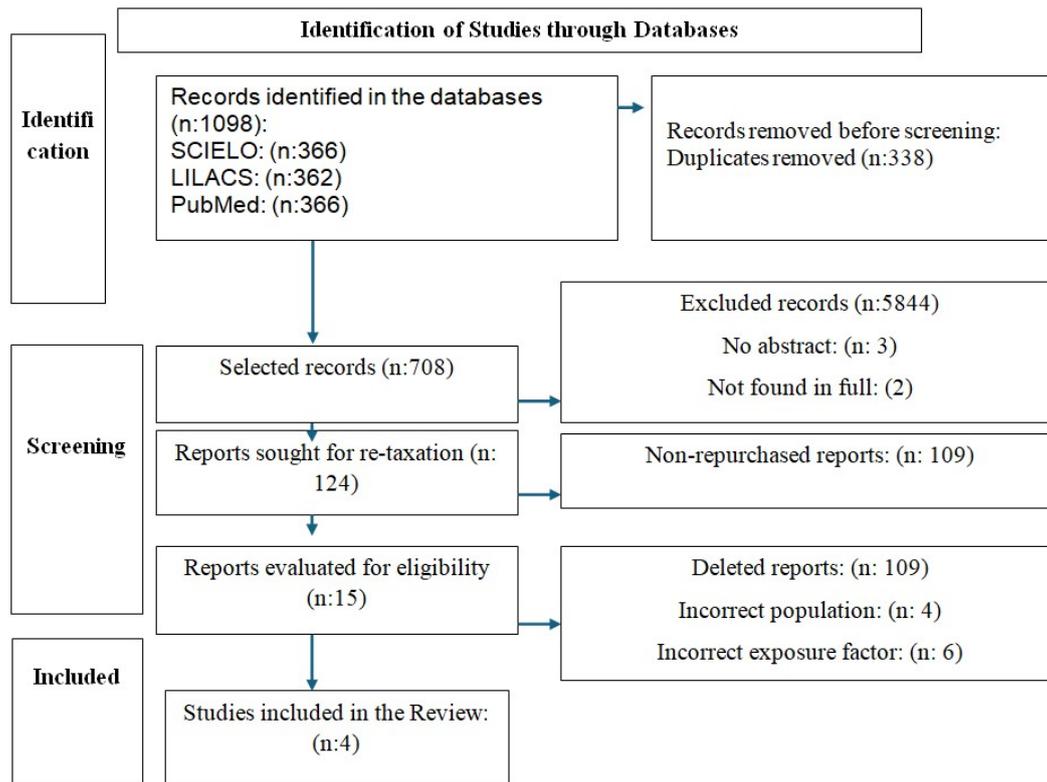
Thus, the search strategy was based on the combination of the terms "Primary Health Care"; "Prenatal care"; "Nursing" and "Pregnant women", with the Boolean operator "AND" to associate them. Thus,

the search implemented for the crossing in all databases was as follows: "Primary health care AND Prenatal care AND Nursing AND Pregnant women". The bibliographic survey was carried out from April to May 2025, in the following databases: Scientific Electronic Library Online (SCIELO) and Latin American and Caribbean Literature in Health Sciences (LILACS) and PubMed.

Primary studies that investigated the importance of prenatal care in the context of Primary Health Care and that answered the guiding question were included in the research. The inclusion criterion was all articles published in all languages, between 2022 and 2025, for better analysis, with full text available and open access, that answered the guiding question. The exclusion criteria defined were: editorials, review articles, letters to the editor, expert opinions, dissertations, theses and abstracts in conference proceedings, which did not answer the guiding question were discarded, duplicate articles. In addition to those with an exclusively hospital focus or focused only on complications already installed. Data analysis was performed by carefully reading the selected articles, observing aspects such as objectives, methods, main findings and contributions to the topic in question. To facilitate validation of the selection of publications for analysis, the articles were evaluated by two independent reviewers, considering the inclusion and exclusion criteria and guided by the research question, with any disagreements resolved by a third reviewer. This process allowed the inclusion of consistent studies that contributed to achieving the objective and the exclusion of others that did not meet the necessary requirements. Certainty was assessed using the Grading of Recommendations Assessment, Development and Evaluation (GRADE) to ensure the robustness of the conclusions. Finally, the results were integrated in a narrative manner, allowing a holistic view of the importance of prenatal care in preventing gestational complications in the context of Primary Health Care. As this is an integrative review, there was no direct interaction with humans or animals. The secondary data used were analyzed ethically, ensuring reliability and respect for the copyright of the cited authors.

## RESULTS AND DISCUSSION

The initial search conducted in the databases yielded 1,098 publications on the topic. By reading the titles and abstracts, it was possible to exclude duplicates in the different databases (n=388), studies that did not meet the inclusion criteria or the proposed topic (n=584), and those that were not available in full (n=109). Of these, 15 articles were selected for full reading, and the articles that did not meet the inclusion criteria for achieving the research objective were eliminated (n=10). The articles were evaluated by two reviewers from the team, through independent selection considering the inclusion and exclusion criteria, and guided by the research question, to favor the validation of the selection of publications for analysis. Each reviewer recorded their assessment and justification for inclusion or exclusion of the article in an instrument containing the respective titles, abstracts and database. The results were compared and disagreements resolved by consensus among the reviewers, without the need for the inclusion of an external reviewer. This process of validating the selection of the final sample of articles allowed the inclusion of studies that presented consistency and contributed to achieving the objective and the exclusion of others that did not meet the necessary requirements. Thus, of the 15 articles read in full, four answered the guiding question and, therefore, constituted the final sample of this review (Flow 1). The critical analysis and qualitative synthesis of the studies selected in this review were substantiated and followed all the stages. The review shows that the strategies for improving prenatal care were reinforced with the implementation of continuous improvement programs, the use of performance indicators and actions aimed at qualifying care. During this review, four articles that met the inclusion criteria predetermined in the methodology were selected. These articles were organized in a table, arranged in descending order based on the year of publication. In addition, information was provided on the authors, year, objectives, methodological design and main results, as shown in Table 1.



Source: the authors (2025).

**Flow 1. Flow of the process of selecting studies for the integrative review. Brazil, 2025**

**Table 1. Distribution of references included in the integrative review, according to authors, year of publication, objectives, methodological design and main results. Recife, Brazil, 2025**

Actors, Year	Objectives	Methodological design	Main results
Ferreiras, 2025	Understand the insertion of nurses in prenatal care (PN) in Primary Health Care (PHC).	Qualitative, descriptive-exploratory research	The study allowed the identification of the sociodemographic characteristics of the participants and the analysis of the interviews revealed two thematic categories: continuing education (PE) as an instrument for qualifying PN care and challenges to PN care provided by nurses in PHC.
NMR, 2025	Analyze indicators related to prenatal care using information from the 2013 and 2019 editions of the National Health Survey (PNS).	Cross-sectional study	There was a significant increase in the number of prenatal consultations performed ( $p < 0.05$ ), as well as in the number of clinical-obstetric examinations performed ( $p < 0.05$ ). The analysis of prenatal care reveals important advances in the coverage and quality of care for pregnant women in Brazil.
Nascimento, 2024	To describe the intervention carried out in a UBS in the municipality of Uiraúna-PB, with the aim of increasing adherence to prenatal care carried out in the APS.	Situational Strategic Planning through the creation of matrices	Low adherence to prenatal consultations carried out at a UBS in the municipality of Uiraúna-PB was identified
Santose <i>et al.</i> , (2024)	It investigates the impact of the intersection of race/color, education and place of residence on the inadequacy of care provided in different dimensions of prenatal care.	Quantitative study	Black women with low levels of education are more likely to start prenatal care late; women living in the North, Northeast and Central-West regions are less likely to undergo recommended exams; young black women have less access to guidance on childbirth.

Source: the authors (2025).

The critical analysis and qualitative synthesis of the studies selected in this review were substantiated and followed all the stages. The review shows that the strategies for improving prenatal care were reinforced with the implementation of continuous improvement programs, the use of performance indicators and actions aimed at qualifying care. During this review, four articles that met the inclusion criteria predetermined in the methodology were selected. These articles were organized in a table, arranged in descending order based on the year of publication. In addition, information was provided on the authors, year, objectives, methodological design and main results, as shown in Table 1. In this review, it was identified that inadequate or late prenatal care directly impacts the health of mother and baby, since the lack of adequate monitoring can result in serious complications, both for maternal health and fetal development.

Prenatal care plays a fundamental role in monitoring pregnancy, identifying risk factors and implementing preventive interventions, providing a safer pregnancy and a healthy birth. Furthermore, late prenatal care increases the risk of vertical transmission of maternal infections, such as syphilis, HIV, and hepatitis B. When diagnosed early, these infections can be treated or controlled, significantly reducing the risk of transmission to the baby. However, in the absence of adequate screening, the newborn may be exposed to serious diseases, which compromise their health and quality of life in the long term. In the qualitative, descriptive-exploratory research conducted by Ferreira S. (2025), eleven nurses working in Primary Care participated. The study revealed that some of these professionals reported that, at certain times, they end up minimizing the importance of nursing consultation in prenatal care, prioritizing other demands of

the unit. However, they recognize the need to incorporate nursing consultations into their practices, aiming to improve the care provided to pregnant women. Another point highlighted by the participants refers to the lack of time, a consequence of the excess of demands, internal activities and bureaucratic processes that end up taking up a large part of the working day, making it difficult to carry out adequate prenatal care. In the study carried out by NMR (2025), a significant increase was observed in the number of prenatal consultations performed ( $p < 0.05$ ), as well as in the performance of clinical-obstetric examinations ( $p < 0.05$ ). Regarding the performance of examinations during prenatal care, between 2013 and 2019, significant decreases were identified in the number of pregnant women who underwent blood tests, falling from 97.3% to 94.3% ( $p = 0.0003$ ), and in urine tests, from 98.1% to 93.3% ( $p = 0.0000$ ). On the other hand, there was a significant increase in the performance of syphilis and HIV tests, with the syphilis test increasing from 66.4% to 79.7%, and the HIV test, from 95.5% to 99.3% ( $p = 0.0000$  for both). This study highlights that initiatives such as teaching clinics, run by supervised students, contribute to the early initiation of monitoring, ideally in the first trimester of pregnancy. This monitoring enables the identification of problems, appropriate clinical management, as well as guidance on self-care, risk reduction and strengthening of social support. In addition, the personalized approach, centered on the pregnant woman, is essential to meet the specific needs of each woman, promoting more humanized, comprehensive and resolute care, indispensable elements in the performance of PHC.

In the study by Nascimento (2024), low adherence to prenatal consultations carried out at a Basic Health Unit (UBS) in the municipality of Uiraúna-PB was identified. The study also highlights that community health agents (CHAs) play an essential role, acting as a link between the health team and the community. The support provided by these professionals is of fundamental importance for strengthening intervention actions, especially with regard to promoting adherence of pregnant women to prenatal care. In the study conducted by Santos (2024), it was found that black women with low levels of education are more likely to start prenatal care late. In addition, those living in the North, Northeast, and Central-West regions of Brazil are less likely to undergo the recommended tests during prenatal care. The study also shows that young black women have less access to guidance related to childbirth. The joint analysis of the results reinforces that the problem of inequities in prenatal care in Brazil is multidimensional, involving several instances of social organization. These inequalities materialize in different social categories, reflecting matrices of oppression and privilege that directly impact access to and the quality of care provided to pregnant women. Prenatal care, when provided by a trained professional, who is available to listen to and guide the pregnant woman, contributes to the reduction of complications and maternal and child morbidity and mortality. There is an ongoing effort, both nationally and internationally, to expand the coverage of primary health care services aimed at pregnant women. Maternal and child health remains a priority topic in research, highlighting the need to overcome fragmented and dichotomous care models in education and interventions. Despite advances, the reduction in maternal and child mortality is still slow, remaining a priority on global political agendas. For this reason, it was once again included among the Sustainable Development Goals (SDGs). This study reinforces that, although pregnant women are recruited early, many municipalities have low levels of prenatal care, which compromises the quality of care provided. Therefore, it is essential to increase investments in Primary Health Care, ensuring adequate infrastructure, material resources, rapid testing and easy access to laboratory tests. The effective work of community health agents, as a link between the community and services, contributes to the active search, ongoing monitoring and health education of pregnant women.

## CONCLUSION

The review shows that qualified prenatal care in Primary Health Care is essential for promoting maternal and child health and preventing gestational complications. Prenatal care is not limited to performing

tests, but involves comprehensive, humanized and continuous care, which allows for early identification of risk factors, guidance for the pregnant woman and timely intervention. The challenges encountered, such as the overload of professionals, the lack of planning in the units and social inequalities, reinforce the need to strengthen public policies, invest in the training of health teams and ensure adequate infrastructure. In addition, it is essential that prenatal care considers the sociocultural specificities of pregnant women, with actions that combat inequities and promote equitable access to health services. Therefore, strengthening Primary Health Care, combined with welcoming, problem-solving practices based on health education, is presented as a central strategy to reduce maternal and child morbidity and mortality, contributing directly to the achievement of the Sustainable Development Goals and to the construction of a fairer and healthier society.

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