

The Alabama Department of Public Health and The March of Dimes Prematurity Summit



Embassy Suites
Montgomery, Alabama
Friday, November 14, 2014

March of Dimes National Perspective: Prematurity Prevention

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Judy Lilley

- Financial Disclosure
 - No relevant financial relationships with any commercial interests



Founding Principles - 1938

- Bringing science into service for people
- Building public trust
- Gathering the power of volunteers

Our Story


- For more than 75 years, the March of Dimes has been helping families
- We successfully overcame the threat of polio and one day, every family will know the joy of a healthy baby




march of dimes




Community
Our programs help moms-to-be have full-term pregnancies and healthy babies.




Advocacy
We advocate to help moms and babies get care and services to improve their health.



Research
We research the serious problems that threaten our babies and work on preventing them.



Education
Our websites provide the latest pregnancy health information in English and Spanish.



Support
We offer information and comfort to families with a newborn in intensive care.

Mission Statement: To improve the health of babies by preventing birth defects, premature birth and infant mortality.

Our Accomplishments


Polio


Nobel Prize


Support


Surfactant


Folic Acid


Double Helix


Legislation



Newborn Screening


Prematurity



Global Impact

March of Dimes Chapters

- 48 chapters
- 1,400 staff
- Endless volunteers



- **Volunteers and staff together identify needs, set priorities and select local grantees**



Why Focus on Prematurity

- **Scope of the Problem** – 450,000 babies born too soon each year in the U.S.
- **Severity of the Problem** – It's a leading cause of newborn death, cerebral palsy, learning disabilities, hearing loss and blindness
- **U.S. Ranking** – The United States has the highest premature birth rate of any industrialized country

Why Focus on Prematurity

- **Cost of the Problem** – Employers pay \$12 billion annually in excess health care costs for premature babies, and the U.S. spends \$26 billion total. Premature babies cost 12 times as much as a healthy baby.

Prematurity Campaign Launch January 2003

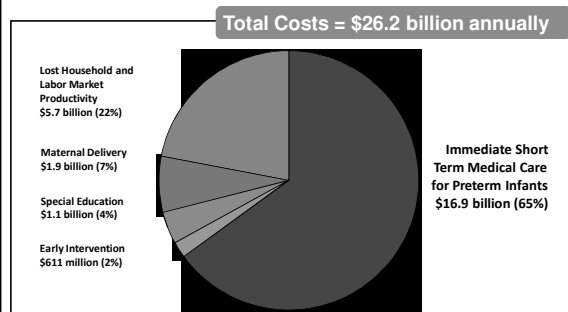


Prematurity Campaign Partners

- American Congress of Gynecologists (ACOG)
- American Academy of Pediatrics (AAP)
- Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)
- Association of Maternal & Child Health Programs (AMCHP)
- Association of State and Territorial Health Officials (ASTHO) Center (ASTHO)
- The National Association of County and City Health Officials (NACCHO)

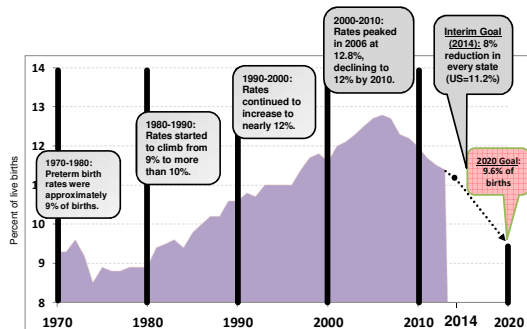
Preterm Birth is Costly

Annual Societal Economic Costs Associated with Preterm Birth, U.S. 2005



Preterm is less than 37 completed weeks gestation. Source: Institute of Medicine, 2007. Preterm Birth: Causes, Consequences, and Prevention. National Academy Press, Washington, D.C. Published and unpublished analyses. Prepared by the March of Dimes Perinatal Data Center, 2007.

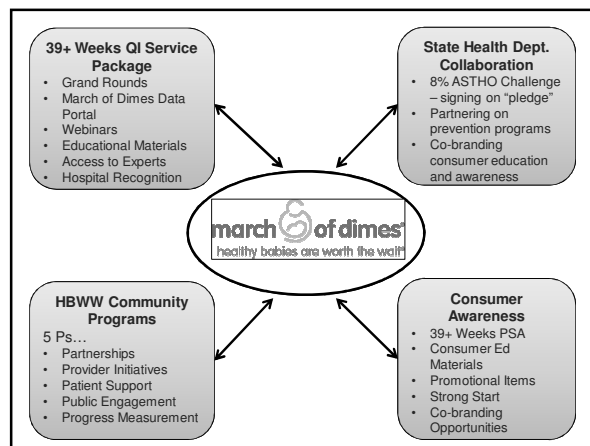
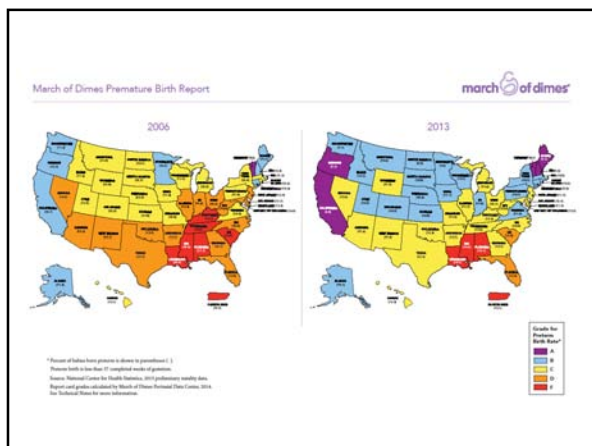
Preterm Birth – U.S., 1970-2013



Preterm is less than 37 completed weeks gestation. Beginning in 1981, weeks of gestation have been imputed for records with missing day of last menstrual period (LMP) when there is a valid month and year. Reporting areas before 1980 vary, and rates are based on a sample of births; therefore, differences between years should be interpreted with caution. Source: National Center for Health Statistics, final natality 1970-2012, preliminary data 2013. Prepared by March of Dimes Perinatal Data Center, May 2014.


Prematurity Awareness Month November

- November 6: Issue Premature Birth Report Cards
- November 1 – 30:
 - Awareness campaigns
 - Social media (Twitter, Facebook)
 - Public relations outreach
 - Print ads
 - Billboard
 - Emails
 - Collaborate with global organizations and parent groups
- November 17: World Prematurity Day

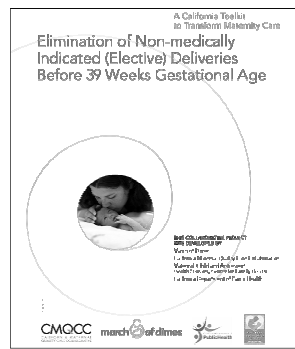


39+ Weeks QI Service Package

- Grand Rounds
- March of Dimes Data Portal
- Webinars
- Educational Materials
- Access to Experts
- Hospital Recognition



Elimination of Non-medically Indicated (Elective) Deliveries Prior to 39 Weeks



A California Toolkit to Transform Maternity Care

Elimination of Non-medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age

Best collaborative practice with the support of the Institute of Medicine (IOM) and the American College of Obstetrics and Gynecology (ACOG) is a key to improving the quality of care for women and infants.

CMQCC march of dimes

Big 5 States – Data by States

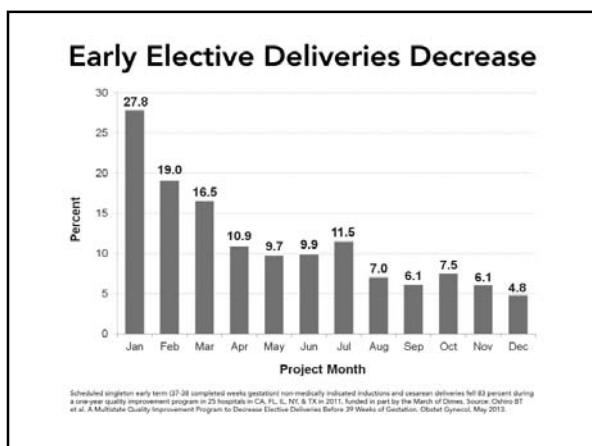
| | Birthing Hospitals | Births | Preterm Births | C-Sections |
|------------|--------------------|---------|----------------|---------------|
| California | ~300 | 510,198 | 50,355 9.9% | 168,417 33.0% |
| Texas | 220 | 386,118 | 50,696 13.1% | 135,599 35.1% |
| New York | 138 | 244,375 | 28,124 11.5% | 84,377 34.7% |
| Florida | 119 | 214,590 | 28,551 13.3% | 81,046 37.8% |
| Illinois | 122 | 165,200 | 20,052 12.2% | 51,435 31.2% |

Source: National Center for Health Statistics, 2010 final natality data

A Multistate Quality Improvement Program to Decrease Elective Deliveries Before 39 Weeks of Gestation

Bryan T. Oshiro, MD, Leslie Kovalevski, BS, William Sappenfield, MD, MPH, Caroline C. Alter, MS, Vani R. Bettigoude, MHS, Rebecca Russell, MSPH, John Curran, MD, Lori Reeves, MPH, Marilyn Kacia, MD, MPH, Nelson Andino, MPA, Peyton Mason-Marik, MPH, Dennis Crouse, MD, PhD, Susan Knight, MA, Karen Littlejohn, MMIS, Sharyn Malotk, MPA, Donald J. Dudley, MD, and Scott D. Berns, MD, MPH

- **Published in the April 8 online edition of Obstetrics & Gynecology Vol. 121, No. 5, May 2013.**



Outcomes and Lessons Learned

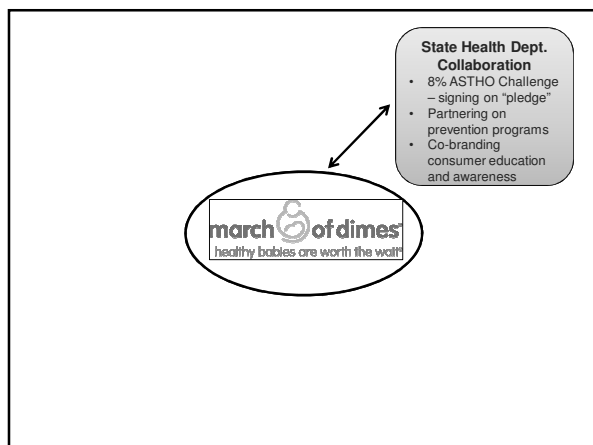
- A total of 29,030 scheduled singletons at 34 weeks of gestation or higher were delivered in the participating hospitals between January 2011 and December 2011
- The rate of elective early term deliveries fell significantly from 27.8 to 4.8 % (83% decline)
- Multistate, hospital - based quality improvement programs can be remarkably effective at reducing early elective deliveries of babies
- Best practices model for other hospitals

March of Dimes 39 + Weeks QI service package

- Developed based on lessons learned from the Big 5 Hospital Network
- Complements the Toolkit and supports hospitals in implementing a 39 + weeks QI initiative

March of Dimes 39 + Weeks QI service package

- 15 - month project that includes:
 - Secure web - based data portal called the Perinatal Quality Improvement portal (PQIp)
 - Webinars focused on implementation guidance
 - Access to experts
 - Grand Rounds
 - Discount on consumer education materials



ASTHO Challenge

- March of Dimes forms new partnership with State Health Departments through challenge from Dr. Howse
 - In the ASTHO Challenge, Dr. Howse asked State ASTHO officials to agree to partner with MOD to reduce the rate of Prematurity to 11.2% by 2014
 - This represented a minimum 8% reduction

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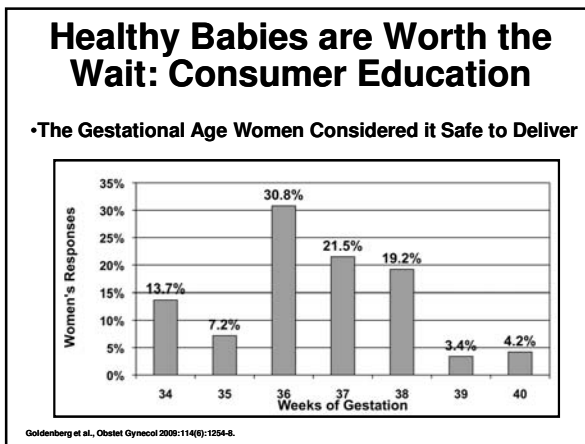
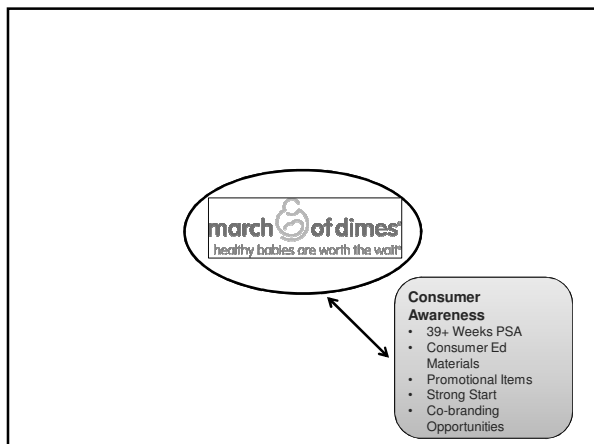
Prematurity Report State Activity

Alabama

- Reducing infant mortality is a priority for Alabama. Strategies, programs, policies, and specific initiatives to address the many factors that contribute to infant mortality are ongoing within the state. Factors that are believed to have contributed to the decrease in the infant mortality are as follows:
 - Efforts to reduce elective early term deliveries prior to 39 weeks without a medical indication
 - Increased levels of prenatal care and

Prematurity Report State Activity

- Better family planning with the utilization of long acting reversible contraceptives." The infant mortality rate for births with less than a two-year interval was 11.4 per 1,000 live births versus a rate of 6.9 for births of a two-year or greater interval between births.
- Also, Alabama actively participates in the CoIN initiative that was launched July 2012. A CoIN director was appointed to coordinate the efforts within the state and nationally. A state team was created for each of the five strategies (Early Elective Deliveries, Interconception Care, Perinatal Regionalization, Safe Sleep, and Smoking Cessation). Therefore, we continue to work on all five strategies.



Consumer Messages

**"Babies aren't fully developed until at least 39 weeks in the womb.....
If your pregnancy is healthy, wait for labor to begin on its own."**

Campaign Components

- Educational materials
- Advertising, marketing, publicity
 - TV and print ads
 - State Health Department co - branding
 - Transit / Outdoor digital billboards
 - Banner ads
 - Mobile app – Cinemama

say cheese
Line up your daily photo with the simple belly grid. CineMama even helps with tools to edit new and existing photos.

Campaign Components

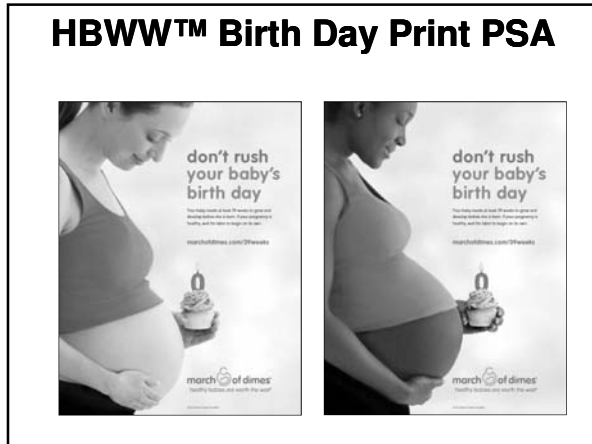
- Social media outreach
 - Twitter hashtag and chats
 - Facebook
- Search engine marketing
- OB/GYN offices
 - Message on monitors in 2,500 waiting rooms

say cheese
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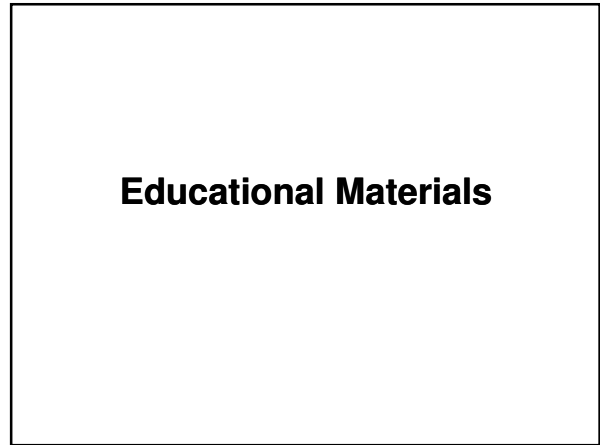
TV PSA Time Lapse Pregnancy

www.marchofdimes.com/39weeks

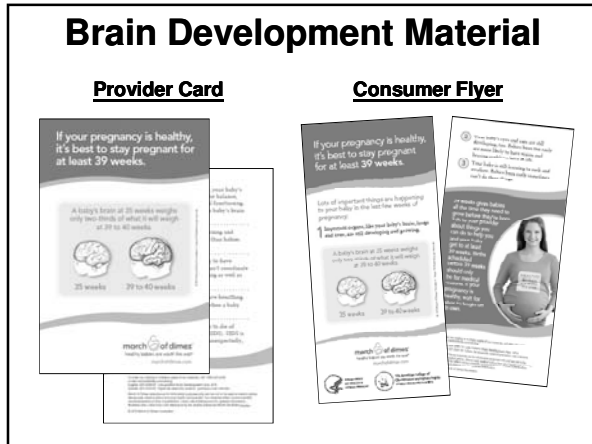
HBWW™ Birth Day Print PSA



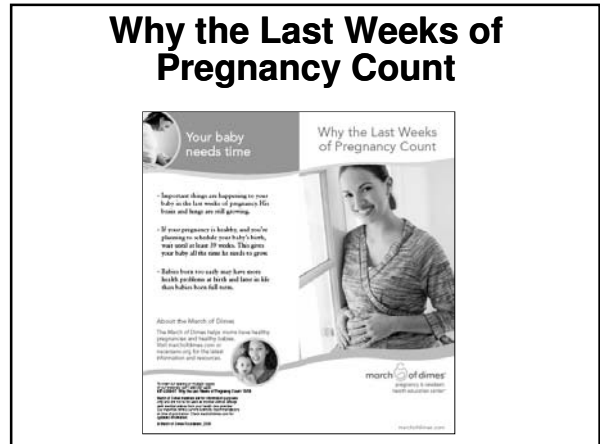
Digital Billboard

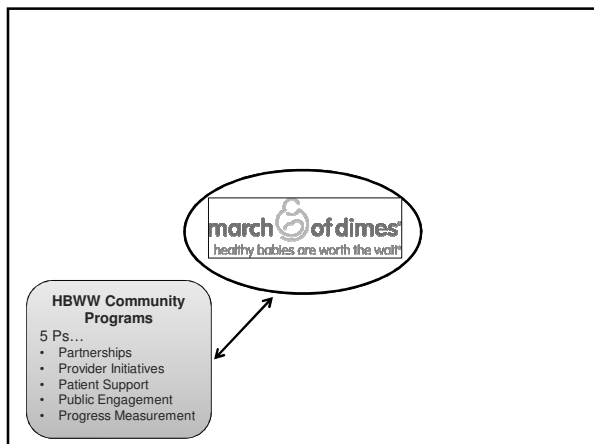


Brain Development Material



Why the Last Weeks of Pregnancy Count

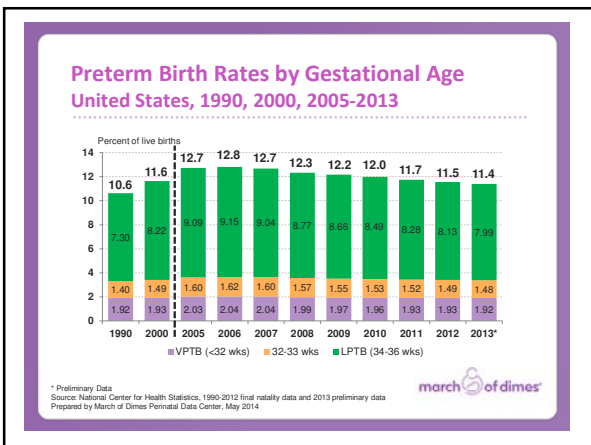




Healthy Babies Are Worth the Wait Community Program

- **March of Dimes community program aimed at reducing preterm birth**
- **Partnership among key entities: March of Dimes chapter, health department, clinic / hospital, and the community**
- **Includes these critical elements: clinical & public health interventions, provider & patient education, and community awareness**
- **Efforts are focused on results and include process and pregnancy outcome measures**

But We Still Have More Work...



Prematurity Research Centers

- **Brilliant Minds**
- **Team Science**
- **A Great Endeavor**
- **The Time is Right**

Our Future is Bright

- **“We are recruiting investigators not heretofore in this field. We have engineers and computer scientists applying the latest technologies, like imaging and bioinformatics, working with academic obstetricians and pediatricians to discover the causes of preterm birth.”**

- Dr. Joe Leigh Simpson
Sr. Vice President, Research & Global Programs, March of Dimes

Prematurity Research Centers



march of dimes[®]
prematurity research center
at Stanford University



march of dimes[®]
prematurity research center
Ohio Collaborative

new this month....



Washington
University in St. Louis

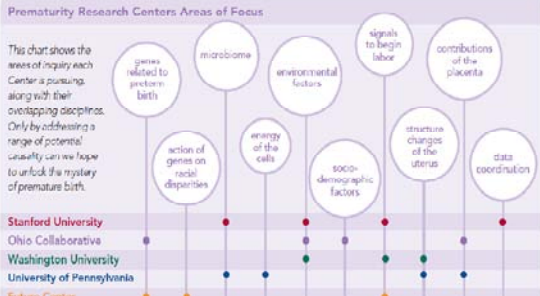


Penn
UNIVERSITY of PENNSYLVANIA

Prematurity Research Centers Areas of Focus

Prematurity Research Centers Areas of Focus

This chart shows the areas of inquiry each Center is pursuing, along with their overlapping disciplines. Only by addressing a range of potential causes can we hope to unlock the mystery of premature birth.



● Stanford University
● Ohio Collaborative
● Washington University
● University of Pennsylvania
● Future Center

Preterm Birth Prevention is Working

- Eliminate EEDs before 39 weeks
- Progesterone Therapy
- Reform ART Practices
- 100% Access to “Maternity” Care
- Eliminate Material Smoking

