

Perinatal News & Events

Cincinnati Children's Perinatal Outreach Program/Region I



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Center for the Prevention of Preterm Birth New Perinatal Institute Co-Director to Lead Research Team

Medical science has achieved tremendous advances in helping infants as tiny as one pound survive premature birth. But much less progress has been made in preventing such early births from occurring in the first place.

Louis Muglia, MD, PhD, is on a mission to change that. Dr. Muglia officially started in his role as director of the new center, co-director of the Perinatal Institute at Cincinnati Children's and professor of pediatrics at the University of Cincinnati College of Medicine on January 1st. He comes to Cincinnati Children's from Vanderbilt where he served as professor of Pediatrics and Molecular Physiology and Biophysics and vice chair for Research Affairs in Pediatrics at Vanderbilt University Medical Center.

The center will identify and address causes of preterm birth, from the molecular pathways that affect the timing of birth to the epidemiologic trends influencing pregnancy including the biological, socio-economic, and cultural determinants of prematurity.

The challenge is clear. Premature birth ranks as the second-leading cause of infant mortality in the United States, behind congenital malformations. Preterm birth rates in America exceed most other developed nations. And despite our improving technology, the actual cause goes unexplained in as many as 50 percent of all preterm births.

This means researchers, policymakers and front-line physicians have a great deal of work to do to reduce America's current preterm birth rate -- 12.2 percent -- to 7.8 percent by 2020. That's the target set by Healthy People 2020.

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Center for the Prevention of Preterm Birth *continued from page 1*

A national leadership role

A first initiative for the Center for the Prevention of Preterm Birth at Cincinnati Children's will be to develop innovative interactions across research disciplines in response to the March of Dimes call for establishment of transdisciplinary centers to lead the battle to prevent preterm births. At least 30 scientists will be involved in the planned center, Muglia says.

"Prematurity is the single most important problem right now in maternal and child health," Muglia says. "The bottom line is we still don't know what the key signals are for the normal timing of birth in humans and we don't know what the most common causes of preterm birth are in humans."

Research to focus on five areas

The Center for the Prevention of Preterm Birth will pursue five critical research areas: the genetics of unique human populations, the evolutionary biology of the child birth process, the molecular and developmental biology of pregnancy, host-microbe interactions and adverse pregnancy outcomes, and perinatal epidemiology and nutrition. With the combined talents of this team, including individuals from Cincinnati Children's, University of Cincinnati College of Medicine, The McMicken College of Arts and Sciences at UC, and other leading research institutions around the country, Muglia believes Cincinnati Children's can take understanding and preventing prematurity to the next level.

"We've already made some progress," Muglia says. "I think we will make much more progress in the next five years."

*Excerpted from Research Horizons
Cincinnati Children's Hospital*

OPQC Update

OPQC was highlighted at the Vermont Oxford Network's 2011 Annual Meeting and Quality Congress. OPQC's Lead

Neonatologist, Dr. Michele Walsh, presented about "The Promise of Statewide Quality Collaboratives" demonstrating to VON members how statewide collaboratives are using Improvement Science to improve outcomes. The other speakers were Peter Grubb from Tennessee and Marty McCaffrey from North Carolina. During the VON meeting, representatives from 14 states met together to identify value and potential benefits specific to state collaboratives and foster the development and growth of participating collaboratives. We learned that we are not alone, other states have similar challenges and are working on similar projects. We plan to continue to learn from each other. Visit <http://pqcnc.org/> to learn more about North Carolina and <http://www.tipqc.org/> to learn more about Tennessee's perinatal collaboratives.

CDC Visit - In fall 2011, three states (OH, NY, CA) were awarded three years of funding by the CDC to *enhance established* statewide perinatal quality efforts. A meeting was convened in early December with OPQC and other states' project members, staff and leaders from the CDC Division of Reproductive Health, and the Maternal & Infant Health Bureau. ZsaKeba Henderson MD, Program Officer for the perinatal grants, guided the meeting which focused on the work over next 36 months. She reported that this is a critical juncture federal and state funded work as there is momentum for improving birth outcomes and reducing infant death in the US. There was considerable enthusiasm towards the perinatal improvement work of OH, NY and CA with an emphasis on learning and sharing techniques, ideas, and tools.

Mariea Taylor
Project Coordinator



2011 Family Survey Results – Down Syndrome Association of Greater Cincinnati

The Down Syndrome Association of Greater Cincinnati (DSAGC) has just completed a follow-up survey of the families giving birth to a baby born with Down syndrome in the Greater Cincinnati area. The purpose was to repeat a survey that was conducted in 2008. Results of the 2008 survey revealed some areas in which families felt that perhaps their birth experience could have been more positive. From 2008 to 2011, through a generous grant from the Charles H. Dater Foundation, the DSAGC set out to alleviate some of the distress that new parents may encounter by emphasizing the importance of increased sensitivity and careful selection of language used with new parents.

Personal visits were made to over 35 Ob/Gyn offices to offer gift packages for newly diagnosed parents. Over 200 obstetricians were mailed “How To Share the News that A Baby Has Down Syndrome” handout, “Sebastian” cards which explained the diagnosis of Down syndrome were provided to several Ob/Gyn offices to share with their patients and our email newsletter for healthcare professionals, *ds medpress*, was sent three times annually to our growing list of over 160 local physicians, nurses and other medical professionals.

The goal of this outreach to the medical community was to provide information to help create a more positive experience for newly diagnosed families. To assess the effectiveness of our efforts, the same online survey was completed by families whose child was born between 2008 and 2011.

What did we learn? Did our efforts make a difference? The answer is yes.

- There is a significant increase in parent’s positive perception of how they were treated by both their OB and nurse 12% and 17% respectively.
- In the 2011 survey, the number of families reporting a very negative overall birth experience was only 4. This means that the

remaining 36 families (90%) had a satisfactory experience at minimum vs. 77% in 2008.

- In 2011, there were **many** more positive and hopeful comments made regarding the attitude of the healthcare professionals toward the baby with Down syndrome and no reported expressions of sorrow and pity.
- Parents frequently reported that their doctor followed the DSAGC recommended guidelines for sharing the diagnosis, namely, holding the baby, pointing out some of the physical characteristics which might indicate Down syndrome and waiting until blood work was completed before a confirmed diagnosis could be made.
- When asked to rate overall birth experience, each of the five Greater Cincinnati hospitals with three or more births in the 2011 survey, received over a 3.0 average on a 4 point scale. In 2008 only 2 of the hospitals scored over a 3.0
- In the prenatal group there was a loss of 8% satisfaction in the manner in which they were given the diagnosis. However, in the postnatal group there was an increase of 9% in satisfaction in how the family received their diagnosis.

The DSAGC believes that these efforts have made a positive impact on our local community however, there is still more to be done and the outreach needs to be sustained. We intend to continue to build upon this success to help preserve the momentum that has been created. For a copy of the full survey, please contact sally@dsagc.com.

*Sally Tilow, Outreach Coordinator
DSAGC*



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Our mission is to improve the health of newborn infants through innovation in clinical care, education and research.

www.cincinnatichildrens.org

REGION I

Delivery Hospitals

Atrium Medical Center
Bethesda North Hospital
The Christ Hospital
Clinton Memorial Hospital
Dearborn County Hospital
Fort Hamilton Hospital
Good Samaritan Hospital
Highland District Hospital
Margaret Mary Community Hospital
McCullough Hyde Memorial Hospital
Meadowview Regional Hospital
Mercy Hospital Anderson
Mercy Hospital Fairfield
St. Elizabeth Healthcare Edgewood
Southwest Regional Medical Center
The University Hospital, Inc.

Announcements

Regional Perinatal Nurse Manager Meeting

Wednesday, February 29, 2012

8:00 a.m. – 12:00 noon.

Mercy Fairfield Hospital Healthplex

Please contact Danielle Bolton with questions:

(513) 803-0957 or Danielle.Bolton@cchmc.org

2012 Neofest – Neonatal Encephalopathy

Friday, March 9, 2012

Fifth Third Bank Auditorium, Cincinnati Children's Hospital

Please contact Janel Chriss with questions:

(513) 636-5470 or Janel.Chriss@cchmc.org

Butler County Perinatal Substance Abuse Forum

Friday, March 16, 2012

8:00 a.m. – 12:00 noon

Butler County Educational Service Center

Please contact Kendra Hall with questions:

(513) 896-2117 or khall@sojournerrecovery.org

Neonatal Abstinence Syndrome: Sharing Best Practices

Friday, May 11, 2012 (tentative)

11:30 a.m. – 4:00 p.m

Shawnee State University, Portsmouth, Ohio

Please contact Kathy Hill with questions:

(513) 636-8225 or kathy.hill@cchmc.org

Fetal Programming and Environmental Exposures: Implications for Prenatal Care and Pre-Term Birth

Monday & Tuesday, June 11-12, 2012

The New York Academy of Sciences, New York, NY

For further information go to:

www.nyas.org/FetalProgramming

Brown County General Hospital is Changing it's Name



Brown County General Hospital is changing its name to **Southwest Regional Medical Center** and has announced an affiliation with The Christ Hospital.

For more information, go to:

<http://www.swrmed.org/>

