



Strong Hearts, Bright Future What's Pediatrics Have to Do with it?

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Disclosures

I have no disclosures or conflicts with the material presented in this discussion.

The Stories





A Labor of Love:

Putting Heart Into Maternal Health (A Women & Children Table Talk Series)

Women & Cardiovascular Disease.
Accounts for 420,000 deaths/year.



The #1 Cause of Maternal Death.

ABC
Association of Black Cardiologists, Inc.
Saving the Hearts and Minds of a Diverse America

#ABCARDIO4MOMS

Source: American College of Obstetrics and Gynecology



Table 6. Percentage of pregnancy-related deaths determined by MMRCs to be preventable, data from Maternal Mortality Review Committees in 36 US states, 2017-2019.*

	n	%
Preventable	839	84.2
Not Preventable	157	15.8

* A preventability determination was missing (n=4) or unable to be determined (n=18) for a total of 22 (2.2%) pregnancy-related deaths.

We Are The Faces of
Black
Maternal
Health™

In the **US**...

**BLACK
WOMEN**

ARE **2-3X**

MORE LIKELY TO **DIE** during
pregnancy *and* childbirth
than **WHITE WOMEN**



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OWN

#FacesOfBlackMaternalHealth #ABCardio4Moms

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Multifactorial Reasons for Disparity

- Implicit bias
- Structural racism
- Underlying chronic conditions
- Variation in quality healthcare
- Social determinants of health



A Labor of Love:

Putting Heart Into Maternal Health (A Women & Children Table Talk Series)

Black maternal health disparities are so pervasive that they permeate nearly every step of the healthcare system.

The cause is not limited to one area of medicine, but instead stems from shortcomings across the care continuum.



#ABCARDIO4MOMS



What's Pediatrics Got to Do with It?



FACT

“Among Black women ages 20 and older, nearly 59% have cardiovascular disease.”

Source: Go Red For Women

Redefining how we think of health using a life course lens: How pregnancy, a window to future health, can impact the offspring & mothers CVD risk?

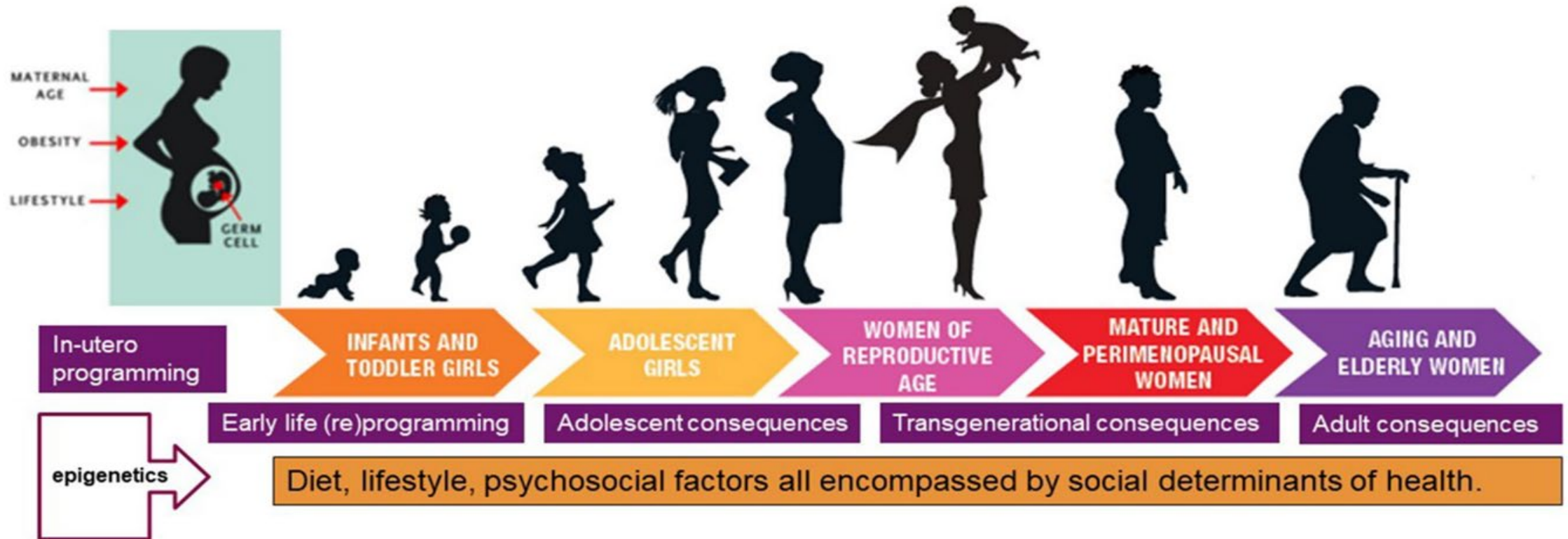
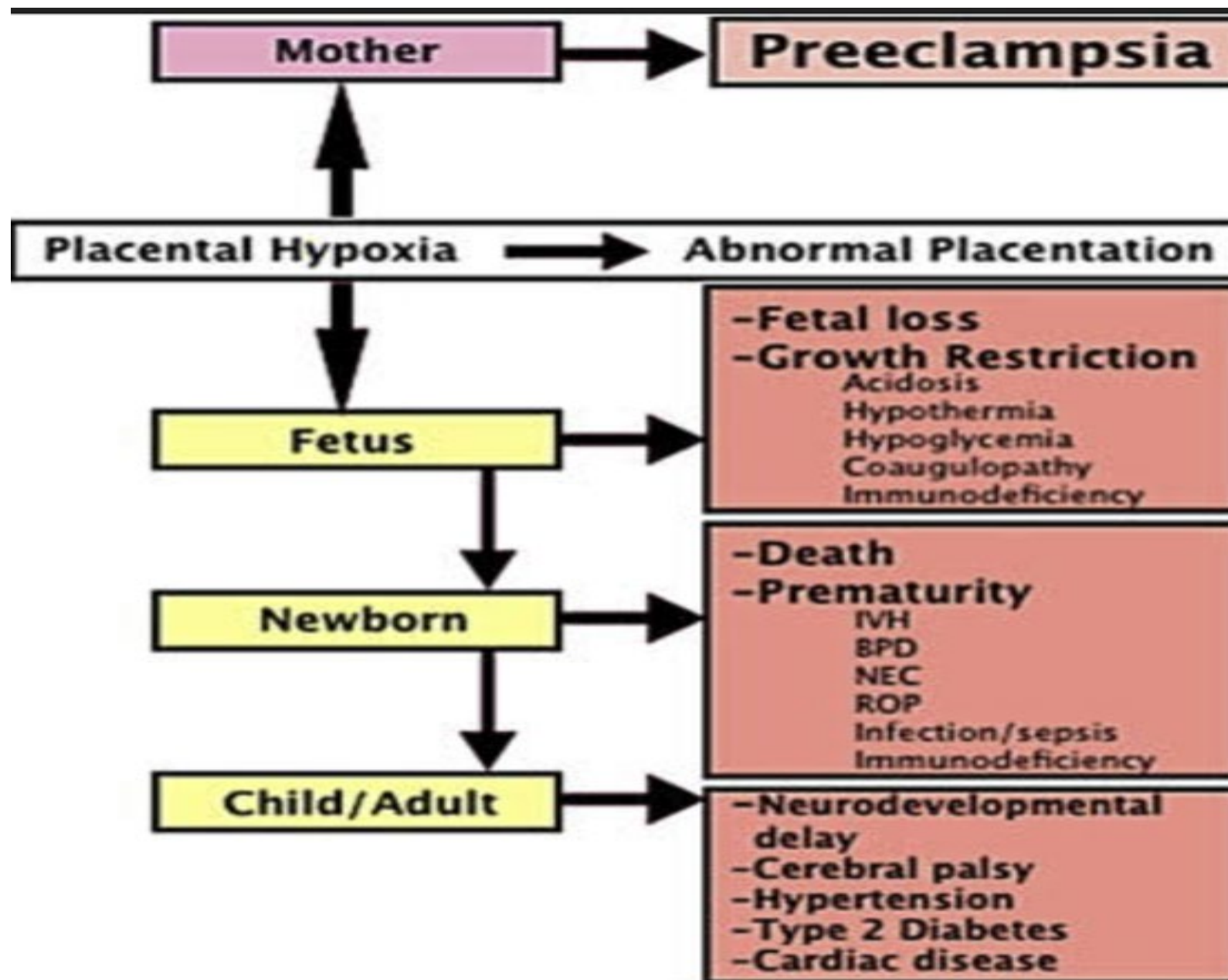


Fig. 2 Pre-conception care and re-defining how we think of health using a life course lens. Adapted from the Association of Black Cardiologist, Inc




Pre-eclampsia Effects on Children

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CHILDREN BORN TO **preeclampsic women** have a greater likelihood of **high blood pressure** and **obesity** putting them at higher risk for **heart and brain disease** as they age



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Close to **1/3**
of young adults with **high blood pressure** were born to mothers with **high blood pressure during pregnancy**

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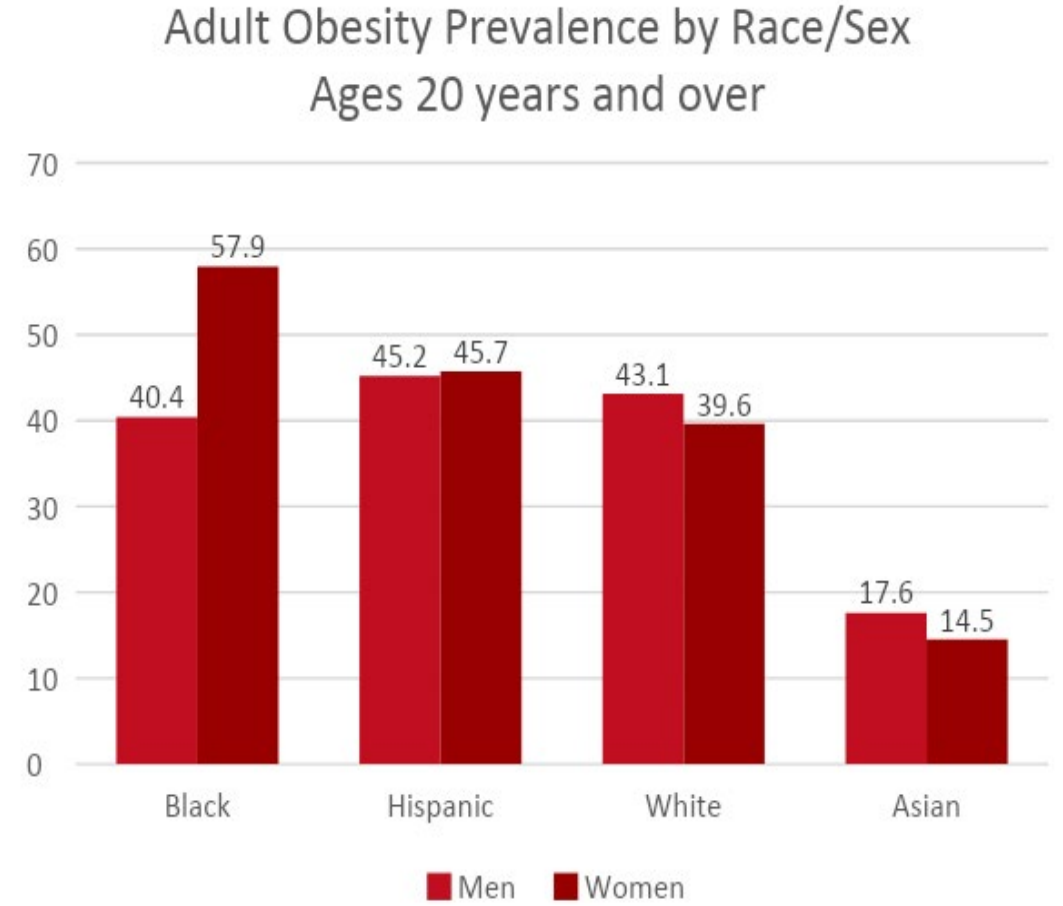
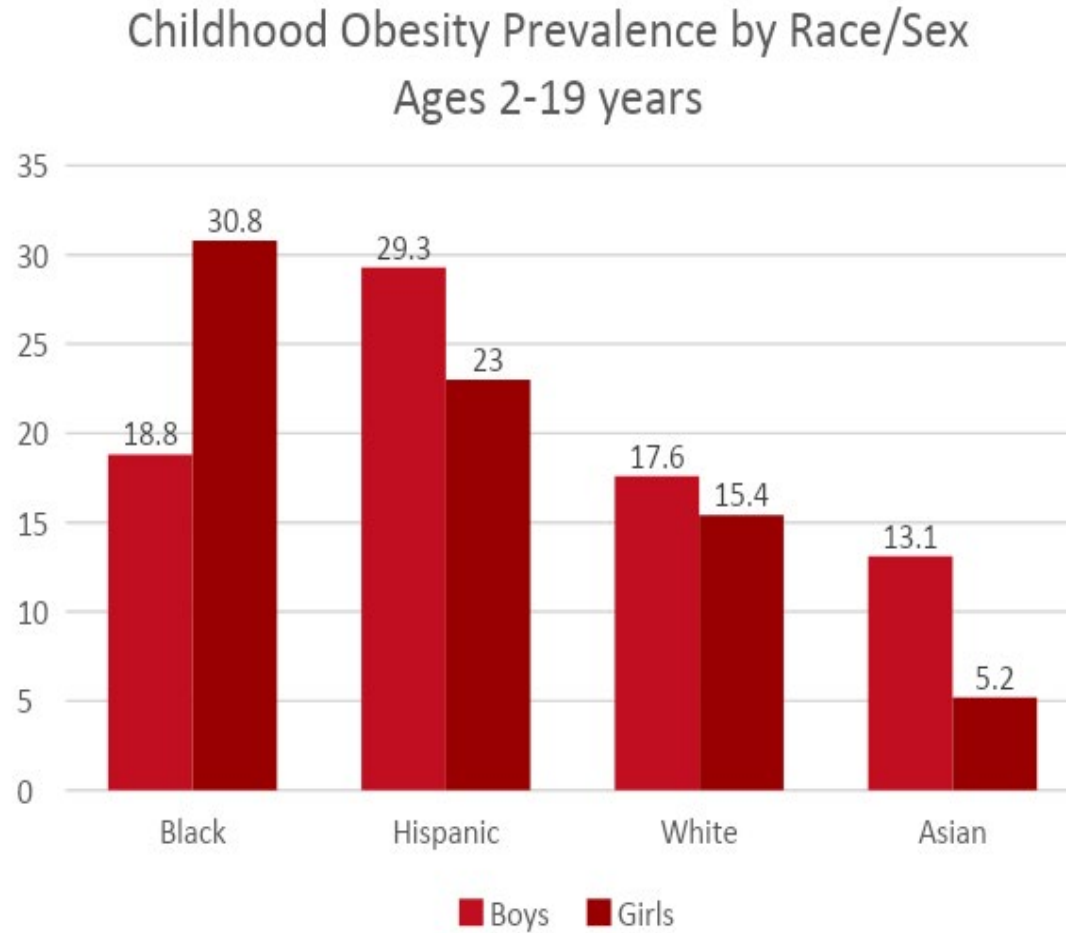


Source: Davis E, Lewandowski A, et al. Clinical cardiovascular risk during young adulthood in offspring of hypertensive pregnancies: insights from a 20-year prospective follow-up birth cohort". BMJ Open. 2015; 5(6): e008136.

Pre-preconception Model



Pre-preconception Model



Education



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ABC
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MISSION POSSIBLE *Preventing Heart Disease Early On*

**(An ABC
Women &
Children Table
Talk Series)**

Co-hosts



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Co-Chair, Cardiovascular Disease in
Women and Children Committee,
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Rachel M. Bond, MD

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Featuring



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**#ABCardio4Moms
#ABCardio4kids**

Thursday, February 10 >>> 7:00 PM ET

Register Now: <https://bit.ly/ABCMissionPossible>



Healthy Habits



7 STEPS TO A HEALTHY HEART

African Americans die of heart disease at a 30% higher rate than other Americans.

The good news is that you have control over some risk factors that cause heart disease. Get started by following these 7 Steps to a Healthy Heart.

1 Access health care services and education.
Visit your health care clinician at least once a year.

2 Take charge of your blood pressure.
Normal blood pressure is less than 120/80.

3 Control your cholesterol.
Total cholesterol should be less than 200.

4 Track your blood sugar.
Normal fasting blood sugar should be less than 100.

5 Don't use tobacco.
Make a quit plan and get lots of support.

7 Be spiritually active and reduce stress.
Practice mindfulness on a regular basis and actively engage in ways to reduce stress.

6 Eat smart and enjoy regular exercise.
Aim for at least 150 minutes of moderate physical activity each week. Enjoy balanced meals with at least four servings of fruits and vegetables each day.

Your efforts toward living a more active and fulfilling life will inspire others in your family and community.

The end goal: Better heart health for you and for the generations that follow.

abcario.org

Advocacy

The Washington Post
Democracy Dies in Darkness

What happened to P.E.? It's losing ground in our push for academic improvement.

Could smart coaches and Internet giants revive our youth with vigorous, addictive exercises?



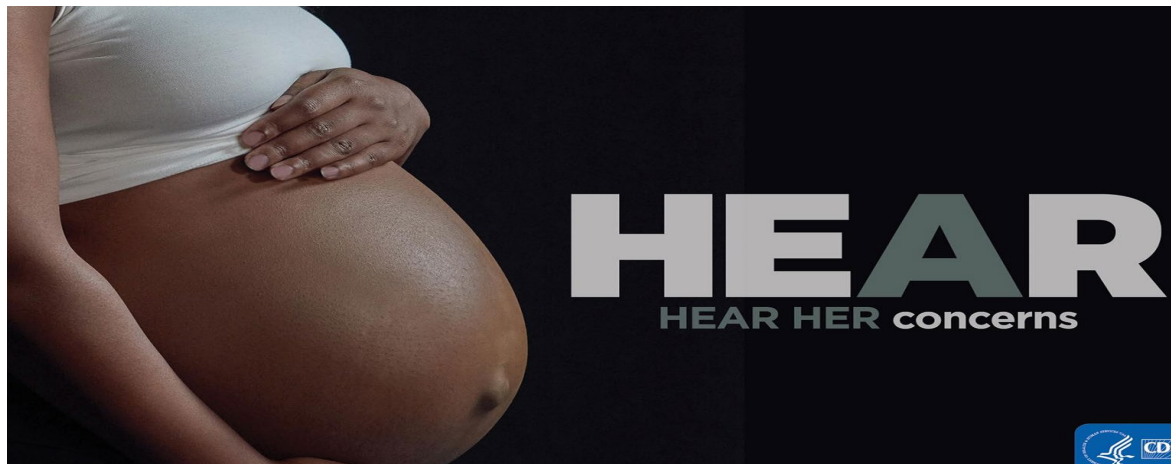
Perspective by [Jay Mathews](#)

Columnist

June 5, 2022 at 6:00 a.m. EDT



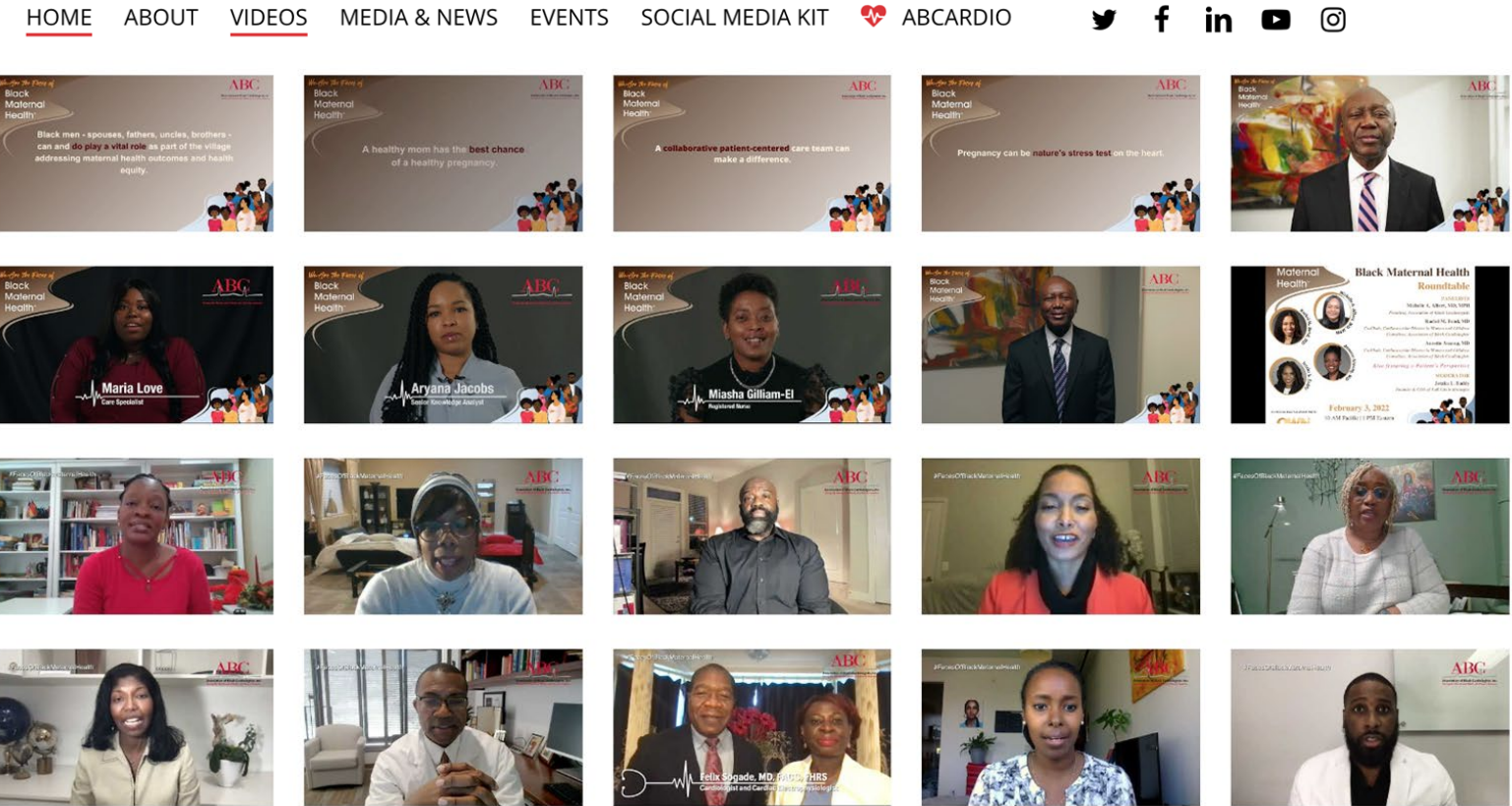
Advocacy



We Are the Faces Campaign (in partnership with OWN Media)

Campaign focus: Maternal health is intimately tied to cardiovascular health.

ABC members are uniquely positioned to address the Black maternal health crisis as representatives/advocates who are at the intersection of being either patients, relatives of patients, healthcare professionals who treat these patients or **all THREE**.



SCAN the QR CODE to view the videos

We Are the Faces Campaign

We Are The Faces of Black Maternal Health™

OWN
IN MEDIA PARTNERSHIP WITH

ABC
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Serving the Hearts and Minds of a Diverse America

A healthy mom has the best chance of a healthy pregnancy
A roadmap through your life stages for a heart healthy pregnancy & beyond

What Can YOU Do?

- Utilize ABC's guide to a healthy lifestyle with "7 Steps to a Healthy Heart"
- Know your personal and family history along with risks
- Discuss your heart, brain and maternal health risk with your clinician
- Consider monitoring blood pressure at home - with clinician guidance
- Seek out and Speak up—to a clinician who listens AND who has a history of collaborative care
- Establish care early and seek regular evaluation

We Are The Faces of Black Maternal Health™

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Serving the Hearts and Minds of a Diverse America

A collaborative patient-centered care team can make a difference
A blueprint approach through your life stages for a heart healthy pregnancy & beyond

"What Can YOU Do?"

- Create a basic plan that can help you make the most of your appointment whether you're a new or returning patient
- Prepare a list of everything you want to discuss during your visit and prioritize your concerns
- Enlist a partner, friend, or family member as a second advocate and bring them to your appointments
- Prioritize your mental health and share your emotional/mental challenges with your clinicians
- Keep your clinicians up to date with (lived) events that may have happened in your life since the last visit
- Consider using technology to track your health (e.g. self-measuring blood pressure machines) and be sure to share results with your clinician
- Seek out and Speak up—to a clinician who listens AND who has a history of collaborative care

1 Prior to Pregnancy

Establishing care with a primary care clinician to review your risk factors and optimize your health is key.

- Early access to prenatal care is critical.
- Learn your family's heart and pregnancy history.
- Women born with a heart defect (i.e. congenital heart disease) or who develop a heart condition during their life time MUST speak with a cardiologist before pregnancy.

FYI A pregnancy heart team led by clinicians from cardiology, maternal-fetal medicine, obstetrics, anesthesiology, pharmacy, and nursing support a holistic approach to "patient care."

FYI Your family's history is just as important as knowing your own and can impact your health during pregnancy as well as long-term heart health.

FYI Did you know 40% of women do not make it to their postpartum visit, with the lowest rates in the most disadvantaged. That's concerning because 53% of maternal death occurs 7-365 days after delivery.

2 Pregnancy

Pregnancy is nature's stress test on the heart.

- It can expose undiagnosed and unknown heart issues.
- It may also lead to major health risks for individuals during pregnancy and throughout their lifespan. These include: high blood pressure during pregnancy, preeclampsia, elevated blood sugar during pregnancy, preterm labor and a child smaller than expected.
- Preeclampsia affects 1 in 25 pregnancies in the US. Know the symptoms and discuss ways to reduce your risk, if relevant, with your clinician. These may include:
 - Low-dose aspirin anytime from 12 to 28 weeks gestation (generally before 16 weeks gestation).
 - 140 minutes per week of moderate cardio including briskly walking and eating a heart healthy diet.
 - Utilize a blood pressure machine at home.
 - Request a referral to a cardiologist, if needed or look for centers or practices that offer a pregnancy heart team.

FYI Certain women are more likely to have these major health risks. This includes a first-time mom; previous experience with high blood pressure during pregnancy; women whose sisters and mothers had preeclampsia; women carrying multiple babies; women younger than 20 years and older than age 40; women who have obesity; Black women as the result of the stress from lived experiences.

3 Postpartum

The first year after delivery is an important time to re-establish your health and continue to identify your risk factors.

- Seeing your clinician within 3 weeks of delivery is SO important.
- Women with preeclampsia, high blood pressure or heart disease during pregnancy must schedule their appointments sooner - on average that happens within a week.
- Determine with your clinician when you should see your primary care clinician and/or if you should see a cardiologist.
- Ask your clinician if you would benefit from monitoring your blood pressure at home.

FYI The time between pregnancies is a critical period to make sure you are in good health before becoming pregnant again. Work with your care team to return to your pre-baby weight, monitor your risk factors and maintain a healthy lifestyle.

FYI Preeclampsia can occur up to 6 weeks postpartum. Postpartum preeclampsia occurs most commonly within the first 7 days after delivery.

4 Post Childbearing and Beyond

Post childbearing is an important time when your family is complete. Your body has undergone many changes during one or more pregnancies and births and this is an important time to continue to work with a clinician to optimize your health.

- Make physical, mental and stress management an important priority.
- Set reminders to schedule yearly well-woman visits, continue to track your numbers and maintain a healthy lifestyle.
- Tell your clinician if you had a history of any major health risks during pregnancy since this may put you at long-term risk of heart and brain disorders.

FYI Research has shown that the Mediterranean Diet decreased the risk of preeclampsia in Black women.

For more info, visit abcardio.org wearethefaces.abcardio.org

*Mohan AS, et al. J Am Heart Assoc. 2022;11:e022585. Span S, et al. Hypertension. 2012;60(6):1368-73.

1 Talking to Your Clinician About Getting Pregnant

The Preconception Visit

A preconception checkup happens prior to your pregnancy to help make sure you're healthy before you conceive. At these visits you should:

- Discuss your personal pregnancy history
- Discuss your personal and family history of major health risks, including hypertension and diabetes of pregnancy, preeclampsia, premature labor, small babies and cardiovascular disease, including stroke, blood clots, and heart attacks
- Discuss your risk factors for heart disease and how you can modify them now
- Discuss how you can reduce your risk of poor outcomes including:
 - Optimize chronic conditions such as obesity, hypertension, diabetes
 - Consult with a maternal-fetal medicine/high-risk obstetrician, cardiologist, and/or nutritionist
 - Determine if a midwife and/or doula (a professional trained to provide emotional support and advocacy) would be beneficial

FYI This discussion and the information obtained during this visit can help you and your clinician get to know each other better AND help you make the best, most informed decisions for you, your baby and your family.

2 First Trimester

How to Prepare for Your Visits

- Seek out a clinician that has a history of patient-centered care
- Be prepared to have in-depth discussions about your medical history with an emphasis on heart and brain health. Understand your reproductive health and any pregnancy related complications
- Understand your risk for preeclampsia, diabetes, hypertension, or other conditions which may impact you immediately or in the future.

3 Second and Third Trimester

Communicating with Your Clinician

Pregnancy can be nature's stress test on the heart. It is important to know the signs and symptoms for heart conditions, such as preeclampsia. Asking these questions may be helpful.

- Would I benefit from the use of low dose aspirin to reduce my risk of hypertension/preeclampsia?
- Would I benefit from changing my diet to incorporate more iron, vegetables, and fewer carbohydrates?
- Should I measure my blood pressure at home?
- Are my prescription medications and/or supplements safe for pregnancy?
- Would I benefit from the use of vitamin D supplementation?
- What should my weight goals be during my pregnancy?
- Is it safe to exercise? What type of exercise should I do and for how long?
- Are there reasons that my labor may be induced?
- How common are vaginal deliveries vs C-section for first time mothers in this practice?

FYI Data shows 140 minutes of moderate cardio (i.e. briskly walking) daily can decrease risk of preeclampsia.

4 Fourth Trimester

The Postpartum Visit

The fourth trimester is the 12-week period immediately after you have had your baby. It is a time of great physical and emotional change as you adjust to your new life. This is an important time for you to continue to see your healthcare professionals. Important questions to ask include:

- Should I continue to see the cardiologist and when should I follow up with my OB?
- How or by when should I start considering losing the weight I gained in pregnancy?
- How can I best space my pregnancies and/or how should I plan for the next pregnancy?
- What health goals should I set for the next year?

FYI If you have any blood pressure concerns you should ideally see a clinician within the first week of discharge.

FYI data suggests breastfeeding lowers the risk of developing diabetes, high cholesterol, high blood pressure and heart disease. Discuss these benefits with your healthcare professional.

FYI Your heart health while pregnant may have a significant impact on your child's cardiovascular health throughout their childhood and adolescence. When you communicate with the pediatrician, it is important to mention any pregnancy related complications such as high blood pressure, preeclampsia, gestational diabetes, etc.

FYI data has shown that mothers who fail to lose their baby weight within a year of giving birth are at a much greater risk of developing diabetes and heart disease.

For more info, visit abcardio.org wearethefaces.abcardio.org

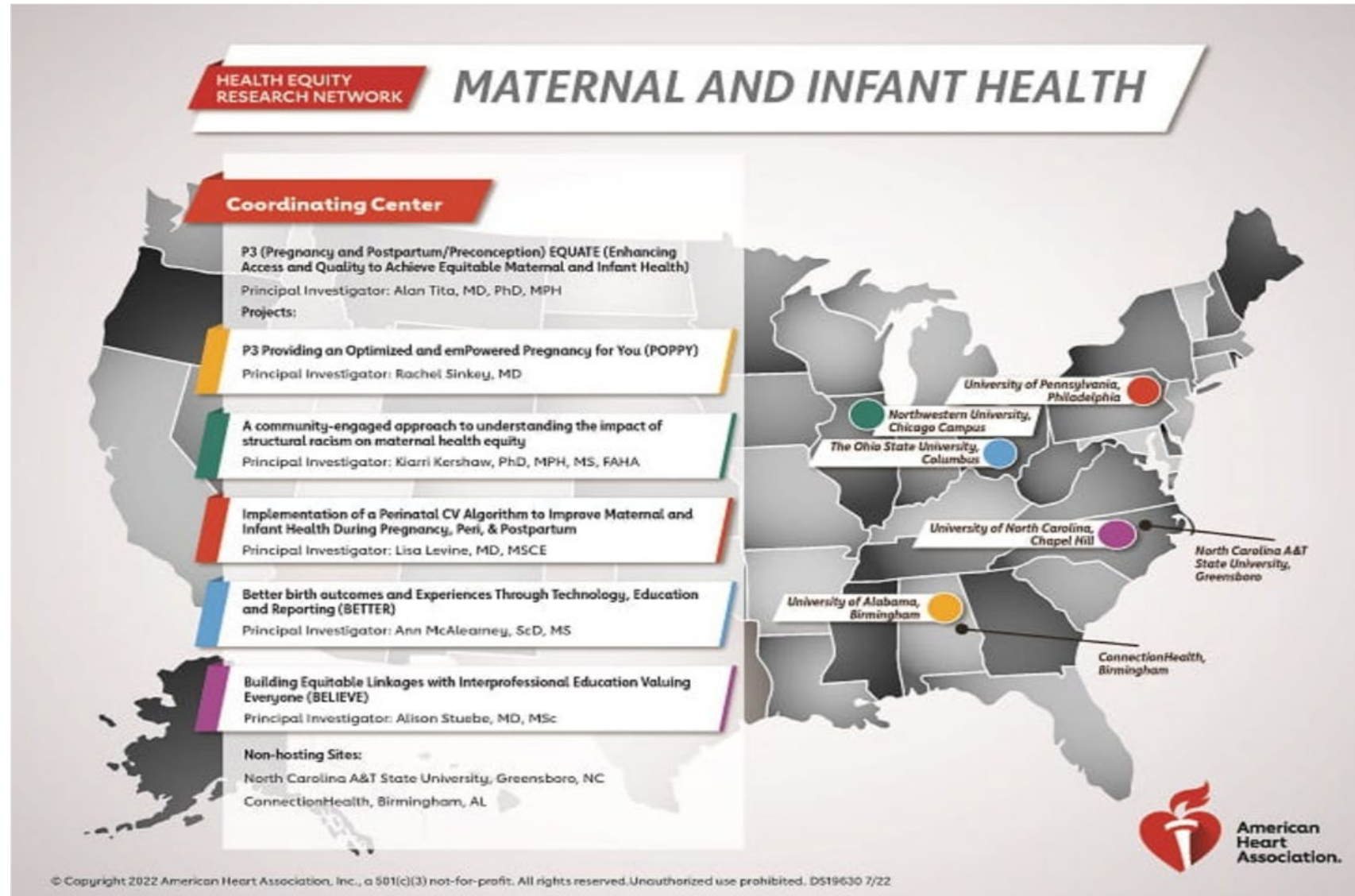
*For more info and access to the resources referenced in this guide, please scan the QR Code or visit the website.

Downloadable Infographics - Shared Decision-Making guides for Patients and Healthcare Professionals published on the campaign microsite.



SCAN the QR CODE to view these resources

Research



ABC Maternal Health Publications

Working Agenda for Black Mothers: A Position Paper From the Association of Black Cardiologists on Solutions to Improving Black Maternal Health

Shining a Light on the Superwoman Schema and Maternal Health

Cardiovascular Health of Black Women Before, During, and After Pregnancy: A Call to Action and Implications for Prevention



A Position Paper From ABC on Solutions to Improving Black Maternal Health

Working Agenda for Black Mothers Association of Black Cardiologists

Rachel M. Bond, MD; Kecia Gaither, MD; Samar A. Nasser, PhD, MPH; Michelle A. Albert, MD, MPH; Keith C. Ferdinand, MD; Joyce N. Njoroge, MD; Biljana Parapid, MD, PhD; Sharonne N. Hayes, MD; Cheryl Pegus, MD, MPH; Bola Sogade, MD; Anna Grodzinsky, MD; Karol E. Watson, MD, PhD; Cassandra A. McCullough, MBA; Elizabeth Ofili, MD, MPH, Association of Black Cardiologists

Overview

Amidst rising maternal mortality rates, especially affecting Black women, the Association of Black Cardiologists convened the Black Maternal Heart Health Roundtable to address this crisis. The round table was designed to recognize the critical need for diversity in healthcare, and efforts to enhance racial and ethnic representation in the medical workforce are emphasized. The discussants agree that metrics must be instituted to overcome recruitment, retention, and advancement barriers, promoting equity in healthcare delivery for Black mothers.

Ways to Incite Change

This publication affords simple offerings to incite change that can impact health equity.

1. Collaborative care, particularly effective for Black mothers, significantly reduces morbidity and mortality in pregnancy and the postpartum period, emphasizing the necessity of coordinated healthcare approaches.
2. Extending insurance coverage beyond the immediate postpartum period, especially for Medicaid recipients, could substantially decrease late maternal deaths, highlighting a critical policy intervention to improve healthcare access.
3. Utilizing multidisciplinary teams throughout pregnancy and postpartum care is essential, underlining the importance of comprehensive and integrated healthcare approaches to support maternal health.



ABC Other Publications



Nurturing Diverse Medical Workforce Association of Black Cardiologists Roundtable

Norrisa A. Haynes, MD, MPH, MSHP; Michelle Johnson, MD, MPH; Sabra C. Lewsey, MD, MPH; Kevin M. Alexander, MD; D. Edmund Anstey, MD, MPH; Tierra Dillenburg, BS; Joyce N. Njoroge, MD; Debra Gordon, MS Elizabeth O. Ofili, MD, MPH; Clyde W. Yancy, MD, MSc; Michelle A. Albert, MD, MPH

Overview

The COVID-19 pandemic exposed the consequences of systemic racism in the United States with Black, Hispanic, and other racial and ethnic diverse populations dying at disproportionately higher rates than White Americans. To tackle this issue, the Association of Black Cardiologists hosted a roundtable designed to discuss key issues pertaining to medical workforce diversity and to identify strategies aimed at racial and ethnic diversity across medical education and leadership levels.

Key Discussion Area

The roundtable discussion areas covered a spectrum of topics noted below and concludes with overall strategies for addressing inequity in healthcare.

1. Diversity defined.

2. Understanding the history of the medical school workforce pertaining to Black persons.

3. Identifying the bottlenecks.

4. Graduate medical education.
5. Disparities in the academic settings.

6. Nurturing diverse generations of the medical workforce: recommendations.

7. Recommendations for developing a successful pipeline.



LINK:
<https://abcario.org/wp-content/uploads/2024/02/Nurturing-Diverse-Generations-of-the-Medical-Workforce-for-Success-With-Authenticity-An-Association-of-Black-Cardiologists-Roundtable.pdf>

Promoting Cardiovascular Health Equity Association of Black Cardiologists Practical Model for Community-Engaged Partnerships

Courtney Bess, MD, MS, Daphne Ferdinand, RN, PhD, Paul Underwood, MD, Donnell Ivy, MD, MPH; Michelle A. Albert, MD, MPH; Anekwe Onwuanyi, MD; Cassandra McCullough, MBA; LaPrincess C. Brewer, MD, MPH, ABC Community Programs Committee

Prioritizing Health Equity
Prioritizing health equity within the contemporary, cardiovascular care delivery model is crucial. According to Mital, et al., a multipronged strategic approach that includes: 1) recognizing structural inequalities; 2) diversifying clinical trials; 3) training a workforce in culturally humility; and 4) addressing social drivers or determinants of health (SDoH) should be considered. Implementation of these measures through community engagement and culturally congruent education programs may foster a culture of health, eliminate CVD disparities, and advance health equity.¹

Article Overview
This publication sought to 1) illustrate how a medical professional society, the Association of Black Cardiologists, Inc (ABC), designed and implemented a practical model for developing sustainable community partnerships focused on promoting cardiovascular health equity in underserved communities and 2) issue a call to action for medical professional and health care organizations to embrace and integrate such partnerships into their core mission.

FOR MORE INFORMATION, VISIT:
<https://abcario.org/wp-content/uploads/2024/02/Promoting-Cardiovascular-Health-Equity-Association-of-Black-Cardiologists-Practical-Model-for-Community-Engaged-Partnerships.pdf>

Improving Health Care Access and Outcomes Minority and High-Risk Populations

Overview
The Association of Black Cardiologists (ABC) convened a roundtable dedicated to advancing equity and addressing health disparities in cardiovascular health. Attended by a diverse group of nearly 60 stakeholders, including government officials, clinicians, researchers, and patient advocates, the symposium focused on the "Improving Health Care Access and Outcomes for Minority and High-Risk Populations." Participants delved into the challenges hindering racial/ethnic populations and high-risk patients from accessing high-quality, affordable care. Guided by a definition of "access to care" from the National Academies of Sciences, Engineering, and Medicine, the discussion aimed to identify barriers and propose actionable steps for stakeholders to promote equity in heart health nationwide.

Recommendations
This white paper offers recommendations that advances the ABC's aim to eliminate health disparities.

1. Increase access to timely and affordable care, including prescription therapies and support services.
2. Address challenges facing cardiovascular clinicians and patients.
3. Utilize technology effectively while being mindful of its limitations.
4. Advocate for healthcare payment and delivery reform to promote equity.
5. Support federal efforts to improve health equity and address social determinants of health (SDOH).

LINK: <https://abcario.org/wp-content/uploads/2024/02/Improving-Health-Care-ABC-2023-Access-to-Care-Roundtable.pdf>



Generational Health





THANK YOU



Audience Questions & Insights