



MATERNAL HEALTH DISPARITIES

**Healing Past Traumas & Improving Outcomes for
Mothers in the Era of COVID-19**

Presented by:
Marshala Lee, MD, MPH

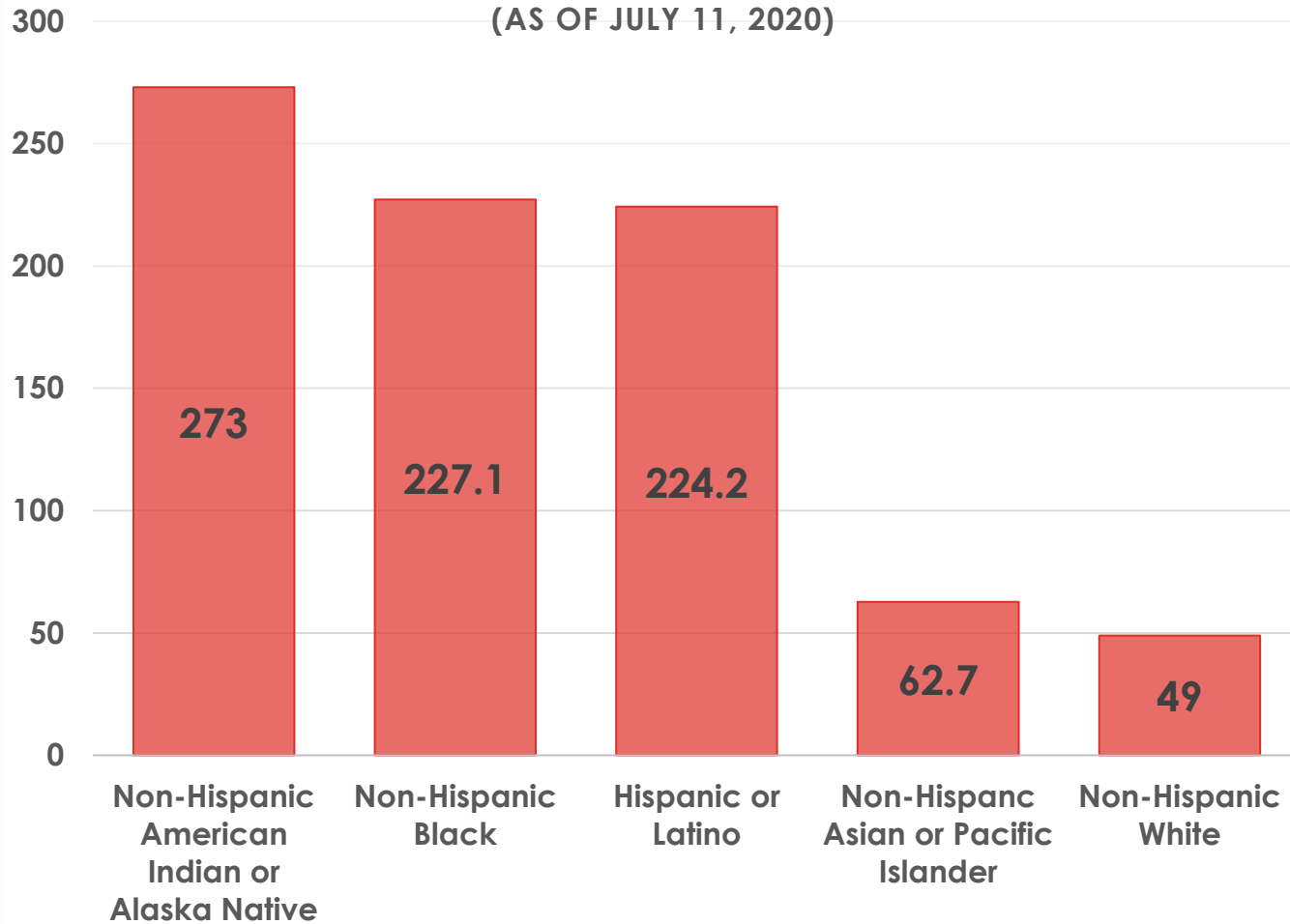
PRESENTATION OVERVIEW

- COVID-19 Disparities
- Maternal Health Disparities
- COVID-19 and Maternal Health
- Recommendations



COVID-19 DISPARITIES

RATE OF COVID-19 HOSPITALIZATIONS PER 100,000 POPULATION (AS OF JULY 11, 2020)



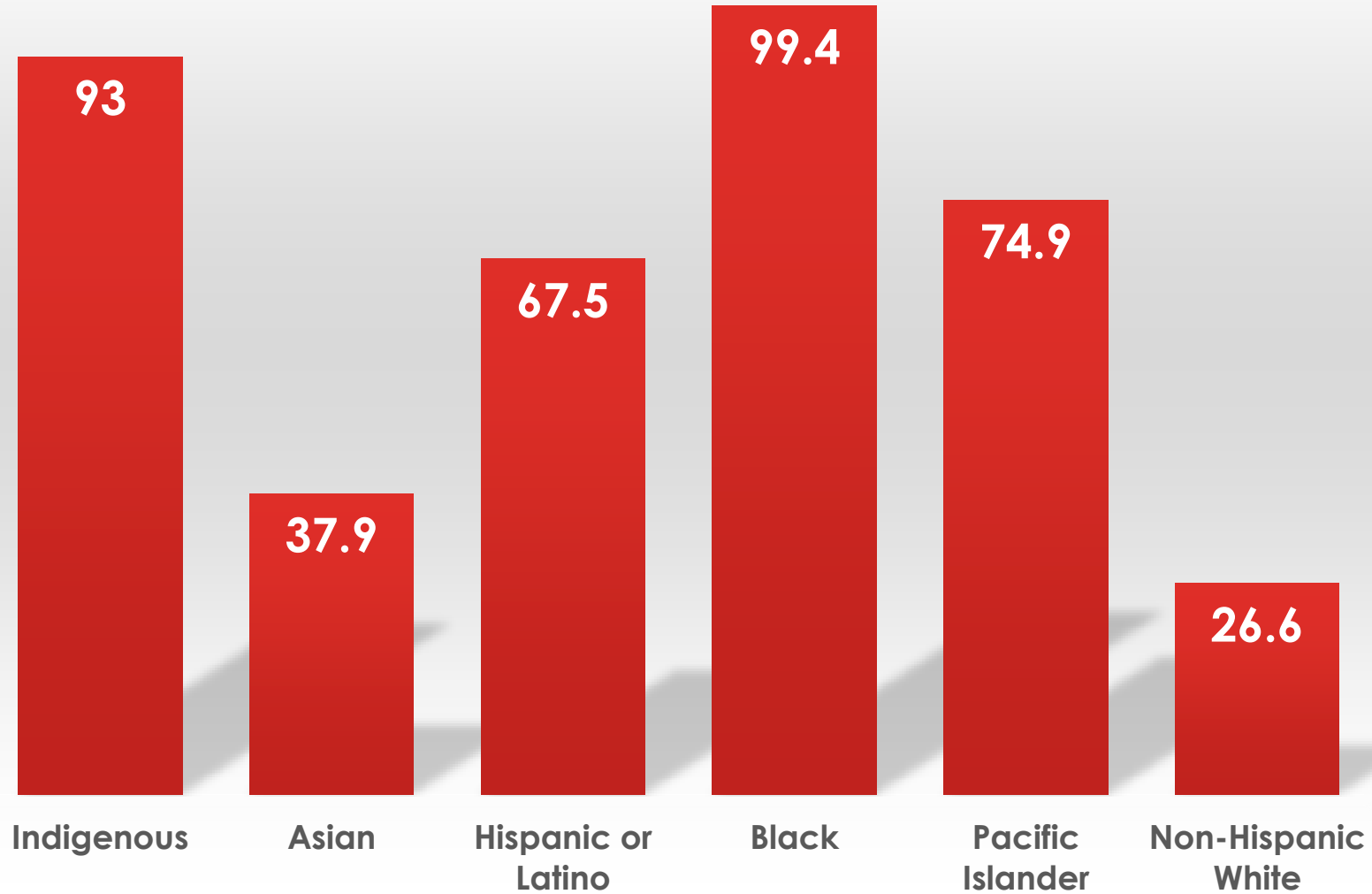
COVID-19 DISPARITIES

Statista 2020

<https://www.statista.com/statistics/1127489/covid-19-us-hospital-rate-by-ethnicity/>

COVID-19 DISPARITIES

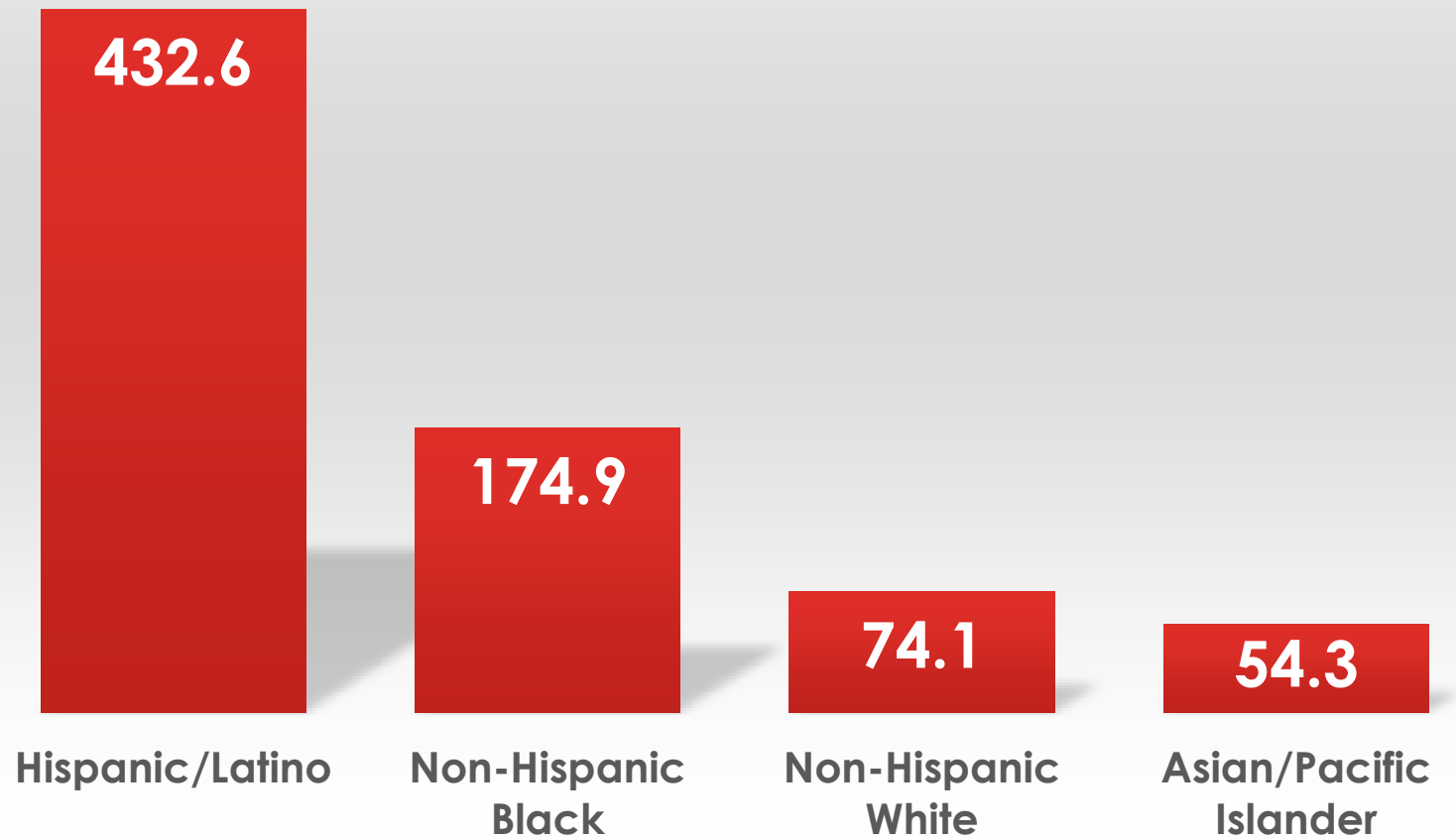
COVID-19 Deaths in the United States Age-Adjusted per 100,000 (as of 7/21/20)



Source: APM Research Lab
<https://www.apmresearchlab.org/covid/deaths-by-race>

COVID-19 DISPARITIES

Rate of COVID-19 Cases in Delaware by Race/Ethnicity per 100,000 people (as of 7/28/20)



Source: My Healthy Community Delaware
<https://myhealthycommunity.dhss.delaware.gov/locations/state>

COVID-19 DISPARITIES

Chronic Disease Disparities

Increased Exposure

- Frontline Occupations
- Residential Crowding
- Public Transportation
- Poverty

Testing & Treatment

- Unequal Access
- Affordability & Health Insurance Gaps
- Provider Bias & Racism
- Lack of Trust & Stigma
- Miscommunication

**Higher
COVID-19
Incidence &
Mortality
Among
Minorities**



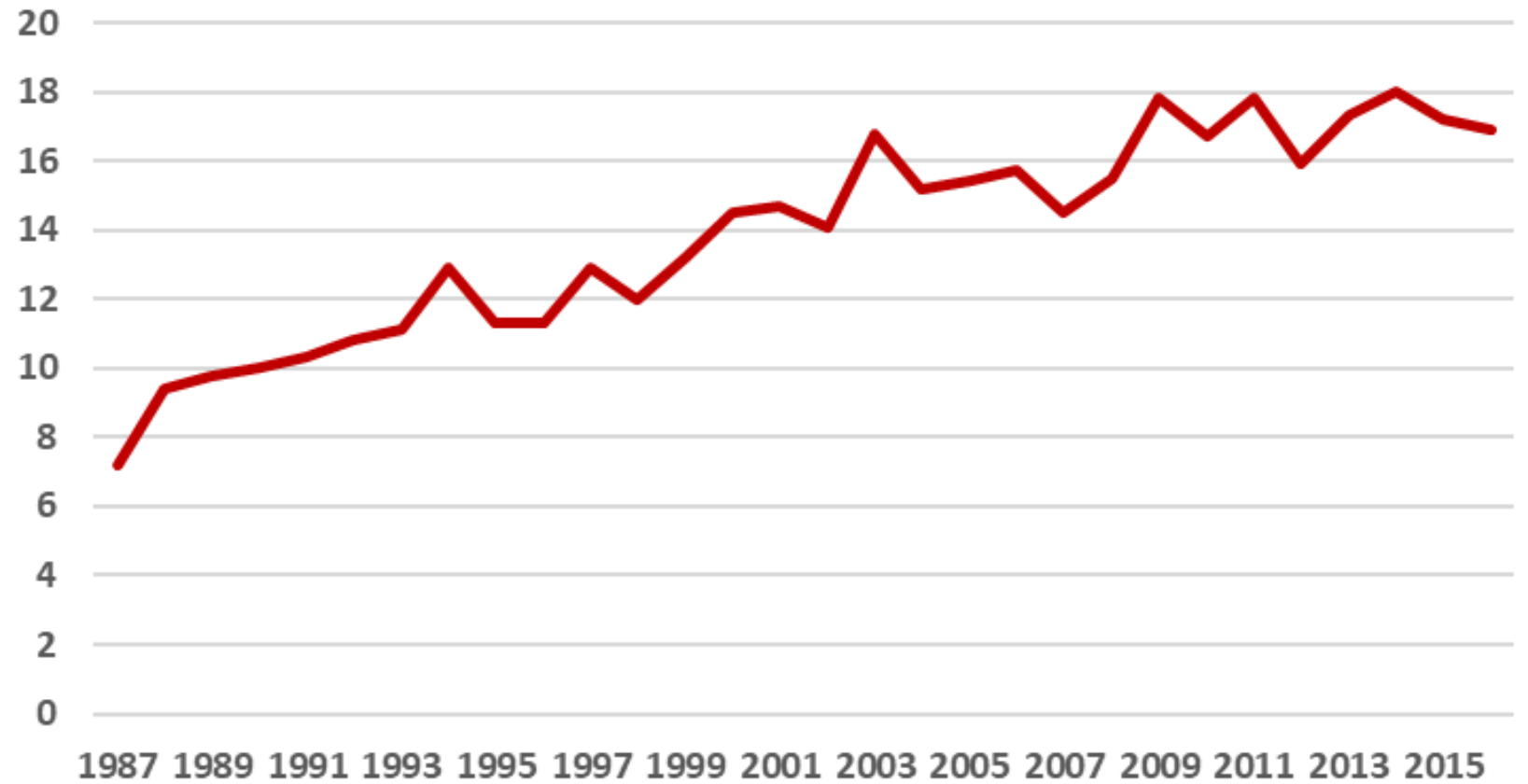
MATERNAL HEALTH DISPARITIES

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- Maternal mortality rates in the U.S. are the highest in the developed world.
- Approximately 700 women in the U.S. die each year from pregnancy or delivery-related complications.¹
- More than half of maternal deaths are preventable.³

UNITED STATES STATISTICS

Pregnancy-Related Deaths per 100,000 Live Births



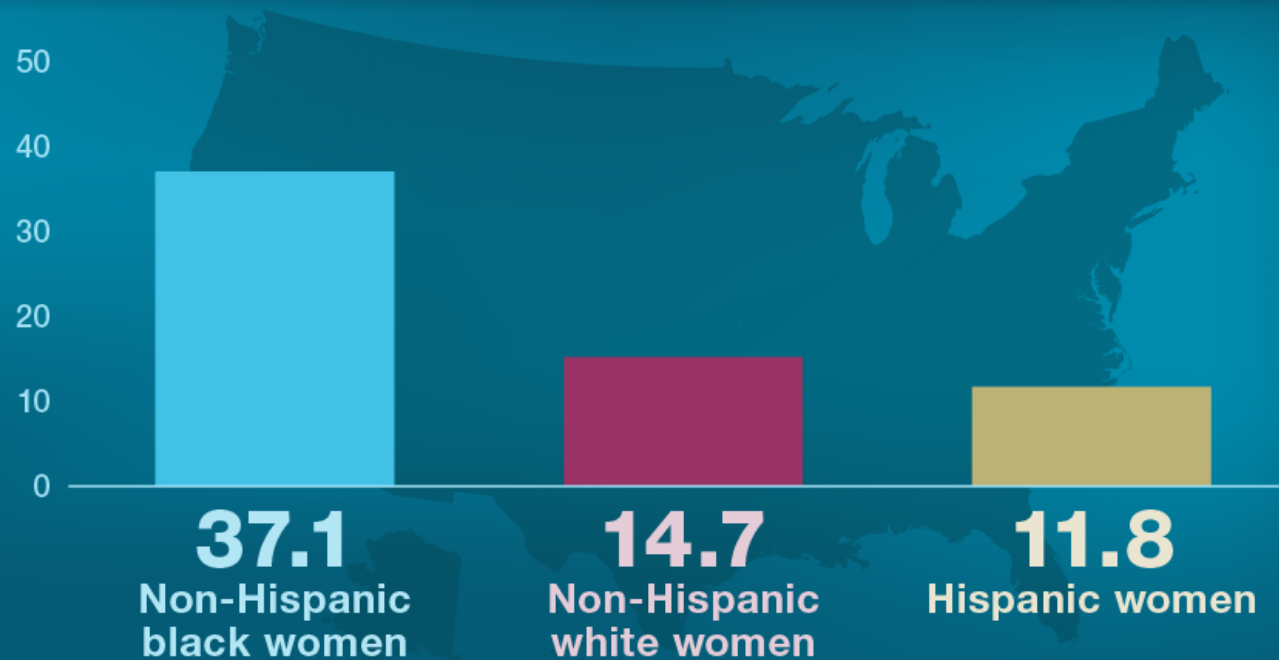
UNITED STATES MATERNAL MORTALITY DISPARITIES



2018 MATERNAL MORTALITY STATISTICS HIGHLIGHT WIDE RACIAL AND ETHNIC GAPS



Death rate
(per 100,000 live births)



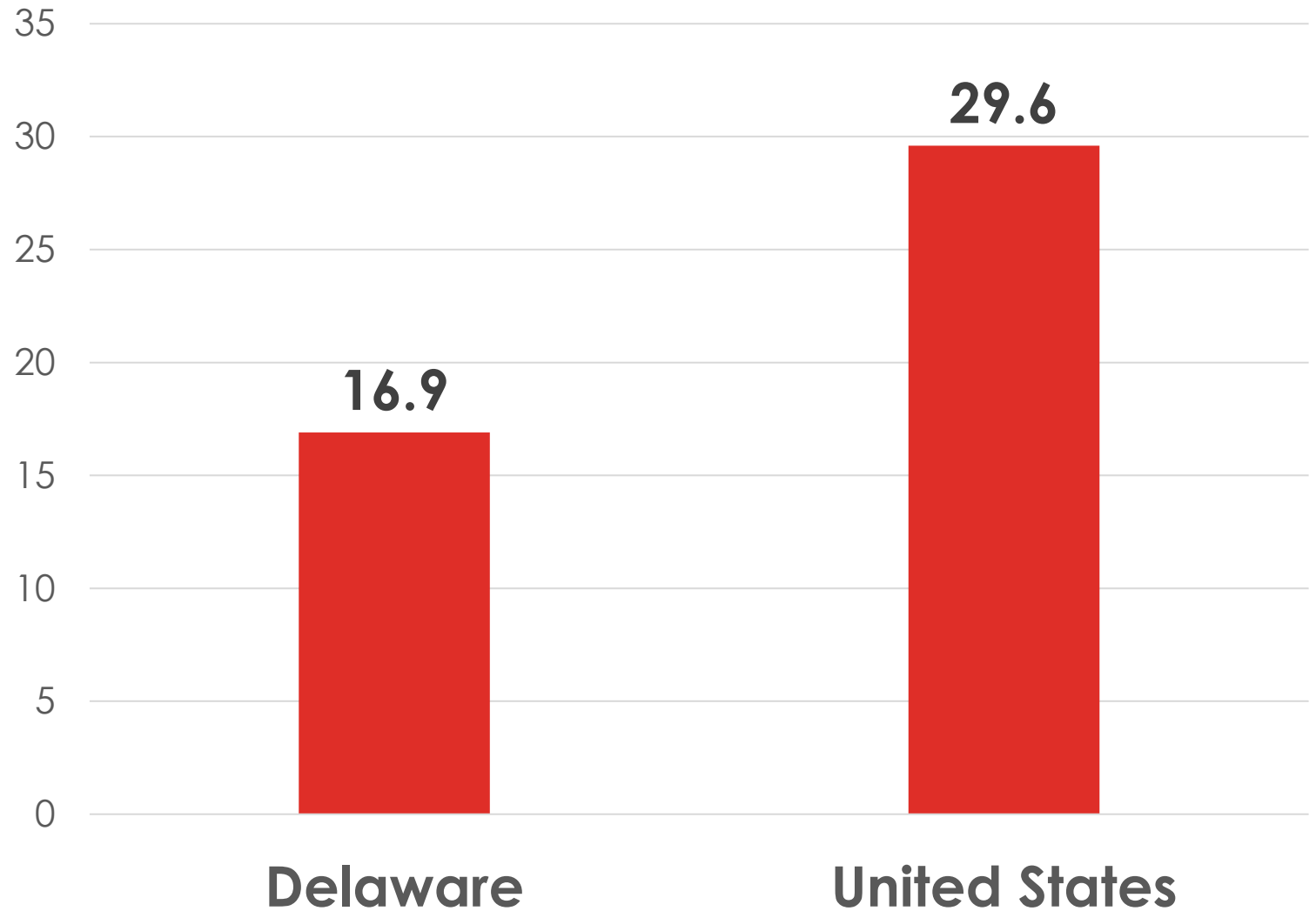
SOURCE: National Center for Health Statistics. National Vital Statistics System.
For more information, visit <https://www.cdc.gov/nchs/maternal-mortality/>.

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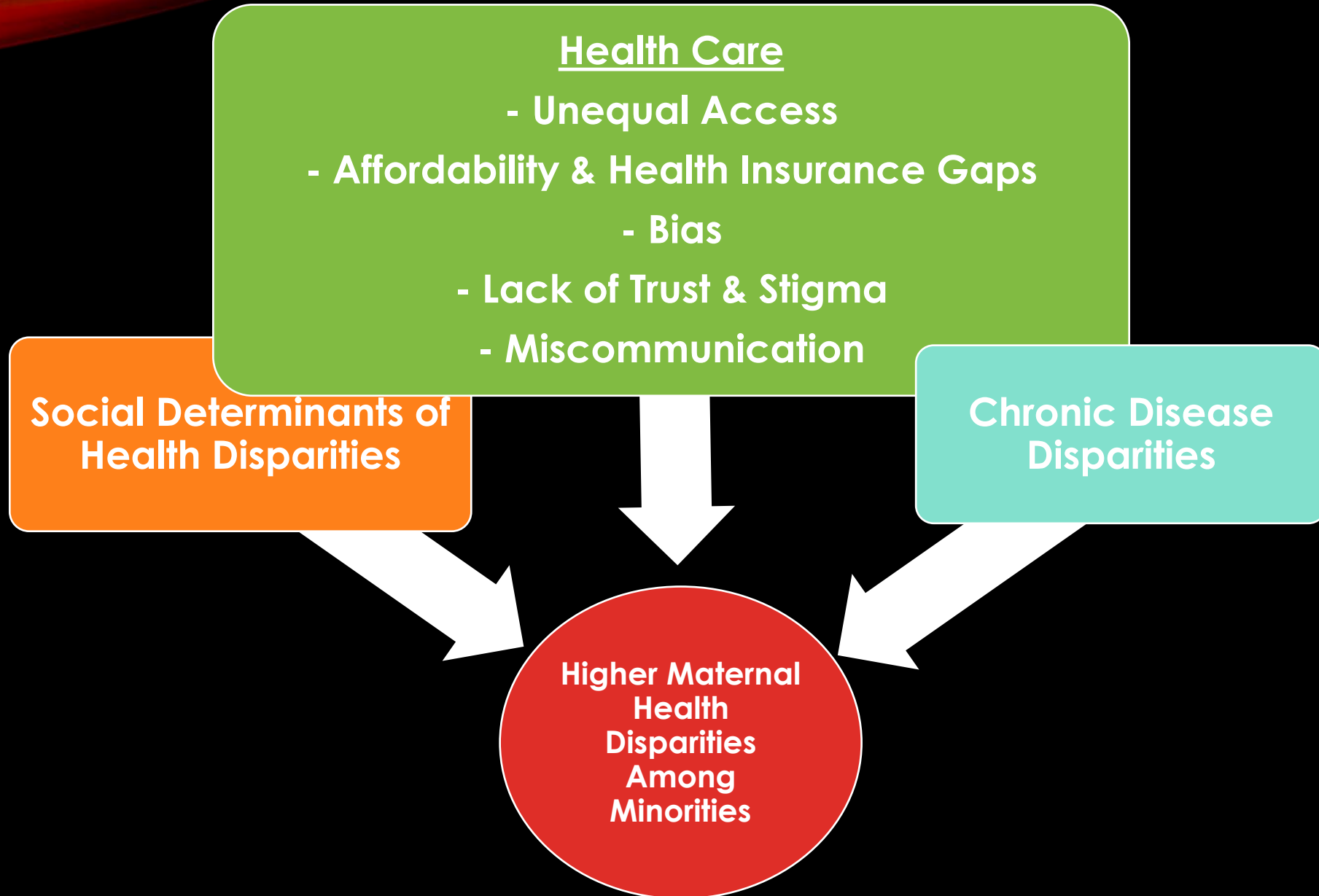


DELAWARE

5-year Estimate of Maternal Mortality Rates Deaths per 100 Live Births (2019 Edition)



MATERNAL HEALTH DISPARITIES





**With all of the successes of modern medicine,
why are Black mothers and infants dying?**



COVID-19 AND MATERNAL HEALTH

COVID-19 AND MATERNAL HEALTH

Pregnant women **may be at increased risk** for severe illness from COVID-19 compared with non-pregnant women



Pregnant women and their families should take steps to **stay healthy** and **reduce their risk** for getting COVID-19

CDC.GOV

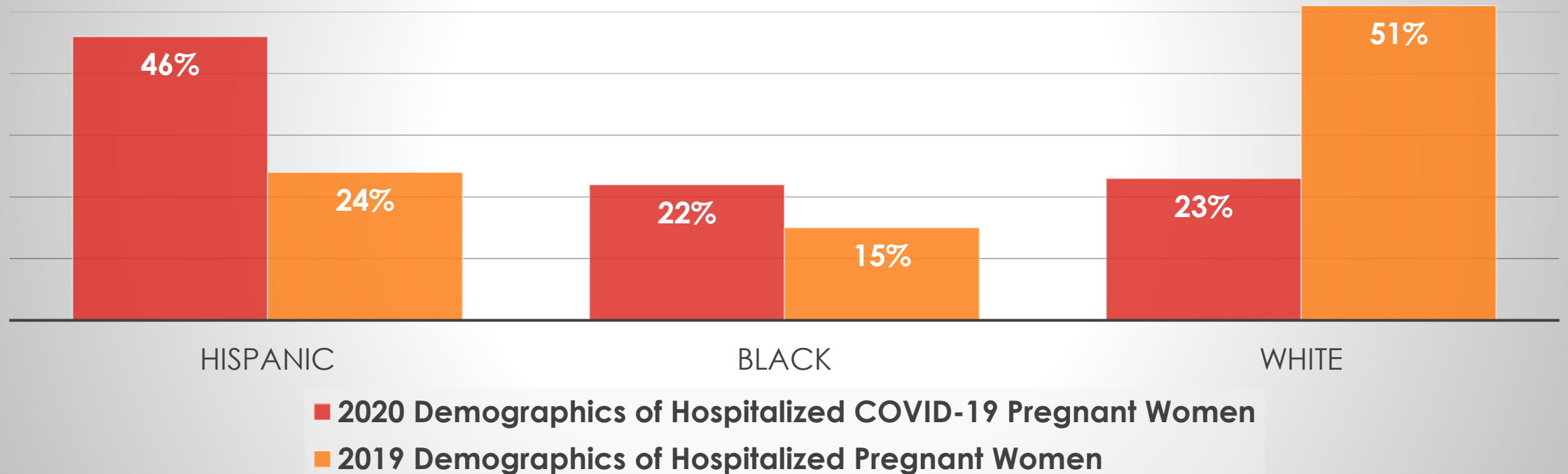
bit.ly/MMWR62520

MMWR

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6925a1.htm>

EMERGING COVID-19-RELATED MATERNAL HEALTH DISPARITIES

Comparison of Hospitalized Pregnant Women Before and During the COVID-19 Pandemic



Ellington S, Strid P, Tong VT, et al. Characteristics of Women of Reproductive Age with Laboratory-Confirmed SARS-CoV-2 Infection by Pregnancy Status — United States, January 22–June 7, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69:769–775. DOI:

<http://dx.doi.org/10.15585/mmwr.mm6925a1>

HIGHER INCIDENCE OF STILLBIRTH DURING COVID-19 PANDEMIC?

- Investigators at St George's University Hospital in London compared pregnancy outcomes from October 1, 2019 - January 31, 2020 and February 1, 2020, to June 14, 2020.
- There were 1,681 births during the first period and 1,718 births during the pandemic period.
- No differences were found in preterm birth, cesarean delivery, or neonatal unit admissions.
- Stillbirth incidence was higher during the pandemic (n = 16 [9.31 per 1,000 births]) than prior to the pandemic (n = 4 [2.38 per 1,000 births]), a difference of 6.93 per 1,000 births (95% CI, 1.83 to 12.0; P = .01)
- The significant difference remained after excluding late terminations for fetal abnormalities (6.98 vs. 1.19 per 1,000 births, a difference of 5.79 [95% CI, 1.54 to 10.1]).

Khalil A, von Dadelszen P, Draycott T, et al. Change in the incidence of stillbirth and preterm delivery during the COVID-19 pandemic [published online July 10, 2020]. JAMA. 2020.

<https://jamanetwork.com/journals/jama/fullarticle/2768389>

HIGHER INCIDENCE OF STILLBIRTH DURING COVID-19 PANDEMIC?

- None of the women who experienced stillbirth had symptoms of COVID-19.
- Autopsies and placental examinations show evidence of COVID-19 infection.
- Women were not tested for COVID-19, so they may have had asymptomatic infections.
- Nineteen pregnant women were hospitalized for COVID-19, and none of these women had stillbirths.
- Possible explanations: asymptomatic COVID-19 infection, inferior prenatal care during the pandemic, or more high-risk referrals to St George's Hospital during the pandemic.
- Limitations: Single site, small sample size, retrospective.

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RECOMMENDATIONS

RECOMMENDATIONS FOR ELIMINATING MATERNAL HEALTH DISPARITIES

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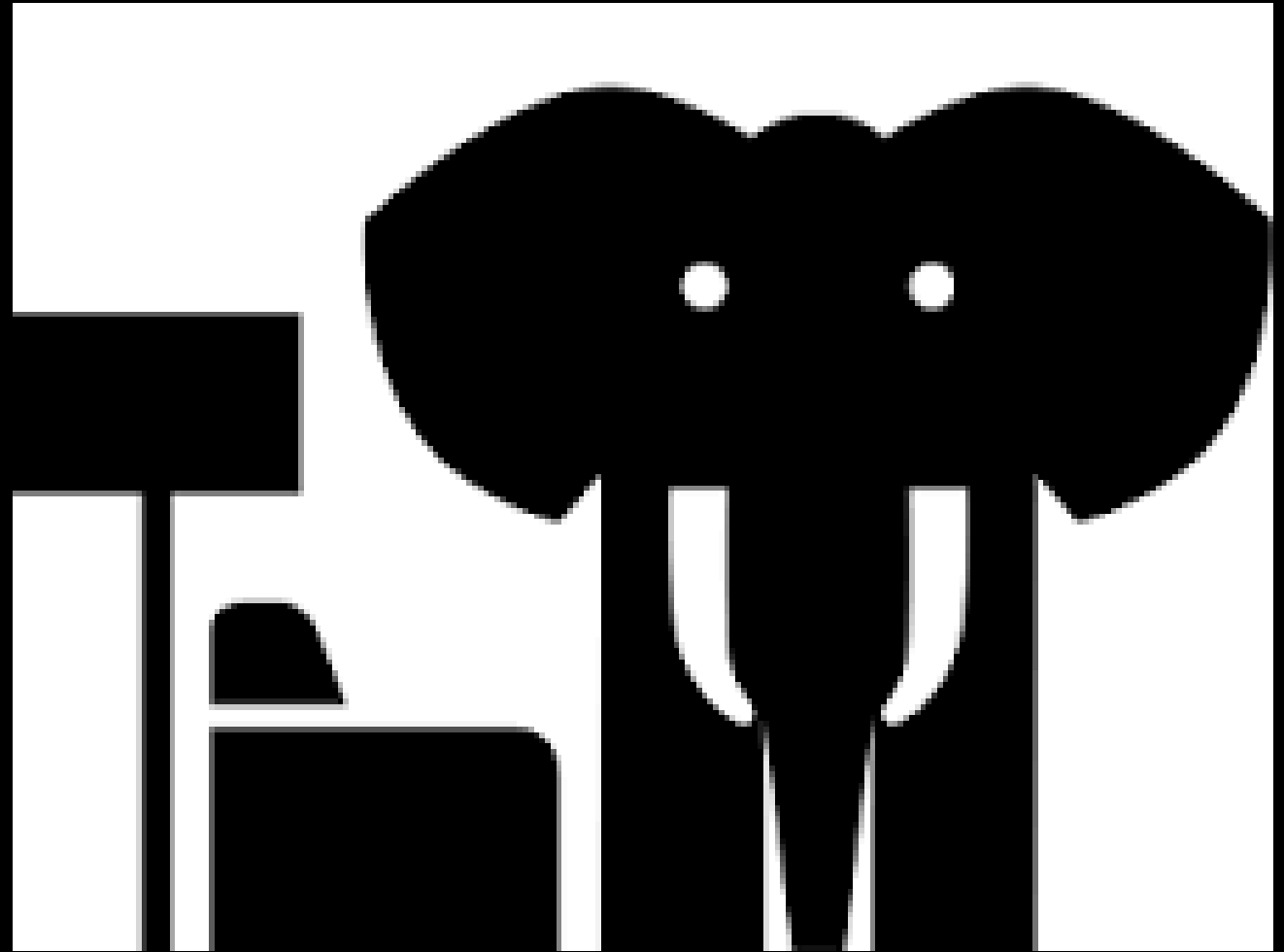
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RECOMMENDATIONS FOR ELIMINATING MATERNAL HEALTH DISPARITIES

- Establish trusting relationships with Black Women. Listen to Black Women!!!!
- Empower women to achieve the best birth outcomes possible. DOULAS!
- Expand and maintain access to health coverage.
- Provide quality, patient-centered care that is responsive to the needs of Black women.
- Address the social determinants of health.
- Expand paid family leave, medical leave, and protections for pregnant workers.
- Invest in health care monitoring, safety, and quality improvement initiatives.
- Provide incentives!

**RACISM &
NOT RACE
AS A SDOH**



CONTACT INFORMATION



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