



## Women's Health Research Consortium

### Spring Newsletter 2021

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#### 2021 Updates

Welcome to the 2021 WHRC Spring Newsletter!

The WHRC continues to be in full swing despite the ongoing pandemic. Our quarterly meetings have been held through Zoom since March 2020 and will continue to be online as we wrap up the end of this academic year. As more faculty, students, and Louisiana residents become vaccinated, we see a light at the end of the tunnel and hope to resume in person meetings for the fall semester.

We want to give a warm welcome to our new Co-Chair Elects: **Julia Power** and **Hannah Sibley**! These students serve as the primary liaison between first- and second-year medical students regarding WHRC research projects. Prior to medical school, Hannah earned her master's degree and helped Tulane faculty write educational materials for Polycystic Ovarian Syndrome. Julia has experience working in a research lab at LSU Baton Rouge studying NMR structure-function characterization of membrane bound proteins. We are excited for the contributions that they will bring to the team and are thrilled to have them on board.

We have been working with Dr. Fern Tsien, the Assistant Dean for Medical Student Research, to streamline a common roadblock to students working on research projects: hospital credentialing. Dr. Tsien gave a comprehensive, step-by-step

guide to credentialing at our partner institutions at our Q2 Consortium meeting. We look forward to continuing to work

with Dr. Tsien and our affiliated hospitals in New Orleans, Baton Rouge, and Lafayette to increase high-quality research output in women's health.

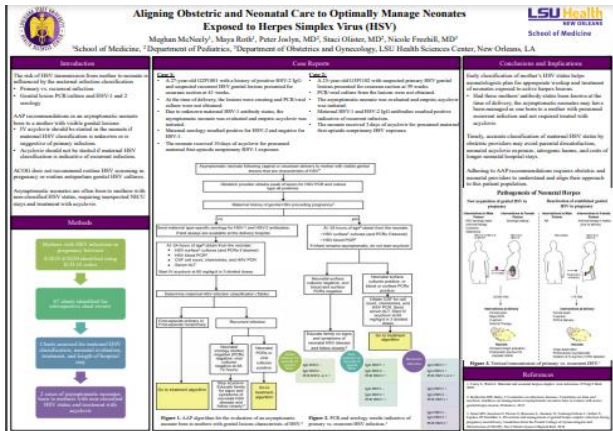
We are also excited to announce that we will be expanding our research projects to Baton Rouge through collaboration with Woman's Hospital and Sarah Buzhardt who is currently the program director for the Ob/Gyn residency in Baton Rouge. We plan to have a primary correspondent for Baton Rouge projects on our leadership board to facilitate faculty and student communication.

Finally, we are always searching for new projects and faculty advisors! We appreciate the help from all the faculty who have contributed so far. If you have research ideas or know someone who might be interested in joining our group, please email [WHRC@lsuhsc.edu](mailto:WHRC@lsuhsc.edu).

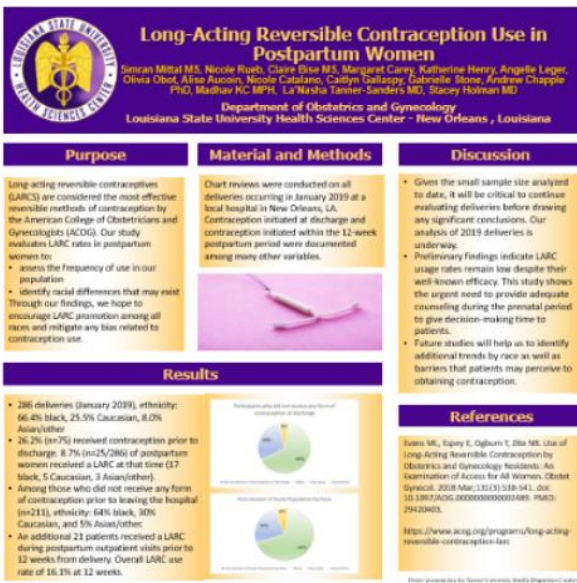
Thank you!

# Completed Projects & Poster Highlights

## Spring 2021



**Meaghan McNeely** presented her HSV poster at both AMSA and ACP 2021. The abstract was selected to be printed in the 2021 Quality Improvement Forum



**Claire Bise** presented her poster at the Xavier Health Disparities Conference

- **Simran Mittal, Nicole Rueb, Claire Bise, Margaret Carey, Katherine Henry, Angelle Leger, Olivia Obot, Alise Aucoin, Nicole Catalano, Caitlyn Gallaspy, Gabrielle Stone, Madhav KC, Andrew Chapple PhD, La'Nasha Tanner-Sanders MD, Stacey Holman MD.** "Contraception Use in Postpartum Women." *LSUHSC School of Public Health Delta Omega Poster Session.*

Virtual Meeting. April 5, 2021. Presented by Simran Mittal.

- Improving the Rate of HPV Vaccine Administration in an Urban OBGYN Resident Clinic: A Multi-Disciplinary Approach
  - **Simran Mittal and Dr. Ariella Price** will be presenting their work at the QI research forum June 2021

## Message from the Senior Advisors

Sam and I wanted to take a moment to thank everyone involved in the WHRC for giving us the opportunity to grow into leaders and contribute to a community throughout our four years at LSUHSC. Sam will be beginning her residency at Tufts for General Surgery and I will be completing my Ob-Gyn residency at Tulane. Please don't hesitate to reach out to either of us regarding research questions or general advice for applying to residency. We will miss the hard-working group of people we have had the pleasure of working with.

Sincerely, Maya Roth and Sam Kamal

## Project Spotlight

### Compliance with Postpartum Follow-up in LSU OB/GYN Prenatal Clinics

Madison Lanza<sup>1</sup>, Shannon Beermann MD<sup>2</sup>, Rose DePaula-Cox MD<sup>1</sup>, Andrew Chapple PhD<sup>1</sup>, Stacey L. Holman MD<sup>3</sup>

<sup>1</sup>Louisiana State University School of Medicine, New Orleans  
<sup>2</sup>Hennepin University School of Medicine, St. Louis  
<sup>3</sup>Department of Obstetrics & Gynecology, Louisiana State University School of Medicine, New Orleans  
<sup>4</sup>Department of Obstetrics, Louisiana State University Health Sciences Center, New Orleans

#### Introduction

- The American College of Obstetrics and Gynecologists (ACOG) has found that up to 40% of women do not attend a postpartum visit.<sup>1</sup>
- New emphasis has been placed on the "fourth trimester" since 50% of maternal mortality occurs during the postpartum period.
- ACOG currently recommends contact with a health care provider within the first three weeks postpartum in addition to a comprehensive visit no later than 12 weeks postpartum. This allows a unique opportunity to address and promote overall health of women.<sup>1</sup>
- It is important to assess the current rate of postpartum follow-up visits in each community. This baseline statistic will allow for data analysis leading to a deeper understanding of areas where interventions can improve postpartum follow-up rates and overall maternal health outcomes.
- A prior similar study showed young maternal age, African-American maternal race, and income below \$20,000 associated with lack of postpartum follow-up.<sup>2</sup>
- According to www.census.gov, the national poverty rate in 2019 is 11.8%. New Orleans poverty rate is a staggering 24.4%. In New Orleans, African-American make up 76% of the population, while the national percentage is 13.4%.<sup>3</sup> Given the national lack of population follow-up in addition to the statistics of the New Orleans population, we hypothesize that the postpartum follow-up rate will be low than for other populations.

#### Results

Table 1. Comparing New Orleans versus USA

Category	New Orleans	USA
Overall	11.8%	24.4%
White	11.8%	24.4%
Black	11.8%	24.4%
Hispanic	11.8%	24.4%
Other	11.8%	24.4%

Table 2. Factors Affecting Postpartum Follow-up

Factor	OR	95% CI
Maternal Age	1.02	0.99, 1.05
Maternal Race	1.05	0.98, 1.12
Maternal Education	1.01	0.98, 1.04
Maternal Income	1.02	0.99, 1.05
Maternal Insurance	1.01	0.98, 1.04
Maternal Parity	1.01	0.98, 1.04
Maternal Gestational Week	1.01	0.98, 1.04

#### Discussion

Our analysis revealed that New Orleans is low from the national average with only 11.7% of patients attending postpartum visits between three and twelve weeks (Table 1).

Non-attendance was associated with older maternal age (P-value= .015) as well as private insurance (P-value= .009). Increased number of postpartum visits was associated with an increased probability of attending their postpartum follow-up (OR= 1.16, 95% CI= 1.11-1.21) (Table 2 & Figure 2).

When comparing the clinics tested in this study, the St. Charles Clinic location had the least postpartum follow-up attendance at only 22%. This clinic is the only location without residents. This correlates to the finding that patients who were seen by a faculty physician only had lower follow-up rates when compared to three patients seen by both faculty and residents during prenatal care (P-value= .001) (Figure 1).

**Takeaway:** These results can now be used to identify patients at risk of not attending their postpartum visit, change our then be designed to improve how we utilize care in the "fourth trimester".

Some ideas for improvement include physician and resident education regarding these risk factors, flagging charts for patients at risk, and also implementing a phone call check-in before the routine postpartum visit. The overall goal is to move towards a postpartum care model that acts as a comprehensive resource to decrease maternal morbidity and mortality in the postpartum phase of care.

#### Methods

This is a retrospective chart review of patients who had prenatal care at one of four LSU community clinics in the span of a year.

Medical records were examined for demographic information including maternal language, average income, insurance information, as well as birth details and complications, maternal medical history, and prenatal provider training level.

Primary outcome for this analysis was overall postpartum follow-up rate as well as a breakdown for each individual clinic.

Secondary outcomes included patient factors that predict postpartum care: Postpartum visit "attended" was compared to "non-attended" and a logistic regression was fit to find factors that predicted compliance with postpartum follow-up.

#### References

1. ACOG Committee Opinion No. 716: Postpartum Care. *Obstet Gynecol.* 2019 May;133(5):e46-e50. doi: 10.1097/AOG.0000000000002631. PMID: 2968911.

2. O'Neil JN, Yu SM, Chao SM, Lu MC. Use of postpartum care: predictors and barriers. *J Pregnancy.* 2012;2012:457616. doi: 10.1155/2012/457616. Epub 2012 Aug 20. PMID: 24093413; PMCID: PMC3479481.

3. U.S. Census Bureau (QuickFacts). New Orleans city, Louisiana, Louisiana. Retrieved from <https://www.census.gov/quickfacts/new-orleans-city-la>

- **Madison Lanza** presented her work at Medical Student Research Day 2021

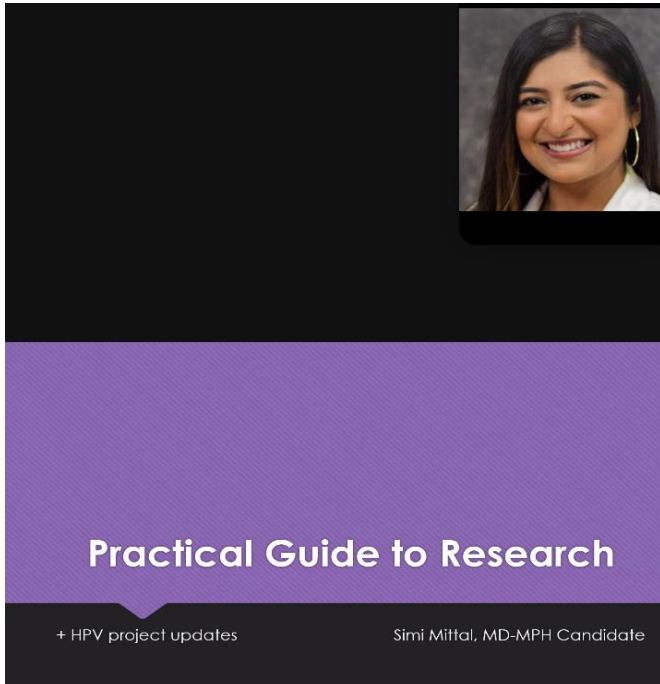
## Quality Improvement

Since the WHRC was founded, we continue to work on improving the organization. Every year the WHRC sends out an annual survey to track student satisfaction with research opportunities and barriers to completing research projects. The survey for our annual QI project was sent out this May and will be used to improve our organization as we grow. Please feel out the survey!



Hannah Sibley

Julia Power



*Simi presents a step-by-step guide for medical students new to research on how complete a successful project through the WHRC*

## Future Plans

We are planning to start a journal club in the fall semester. We hope this will spark conversation amongst faculty and students on relevant women's health topics and serve as a starting point for brainstorming of new research ideas.

On the horizon, Dr. Castellano and the WHRC committee are planning to assess perceived and improved research productivity and readiness in residency.

The new co-chair-elects: Hannah Sibley and Julia Power have transitioned into their new role. They will play a vital role in the WHRC committee for the next three years!

## 2020-2021 Leadership

### **Senior Advisors (L4)**

Maya Roth, Saman Kamal

### **Chairs (L3)**

Polly Gwan, Tina Nguyen

### **Chair-Elects (L2)**

Katie Henry, Madison Lanza

### **Resident Representative**

Yetunde Akinde

### **RISING CHAIR-ELECTS (L1)**

Hannah Sibley, Julia Power

### **Advisors**

Dr. Amelia Jernigan, Dr. Judy Crabtree, Dr. Stacey Scheib, Dr. Rebeka Gee

For more information or to join the WHRC, visit [www.medschool.lsuhsu.edu/lsuwhrc](http://www.medschool.lsuhsu.edu/lsuwhrc) or email [WHRC@lsuhsu.edu](mailto:WHRC@lsuhsu.edu).