

PERINATAL NEWS

The *Perinatal News* is published four times per year by the *South Carolina Perinatal Association*. The newsletter's mission is to keep SCPA members, and other interested persons, informed of state, local, and regional events in the field of perinatal care. The views and opinions presented are not necessarily endorsed by the *South Carolina Perinatal Association*.

To submit comments, letters, and articles, call Laureen Lattin at 843-293-0049, or email at lattinlaureen@yahoo.com.

Inside this Issue:

Public Affairs Update	Page 2
MOD Public Affairs Agenda	Page 2
NPA Update	Page 3
MOMS Trial	Page 4
Caring Cassaroles	Page 5
Triple Option	Page 6
MOD Lobby Day Flyer	Page 8
MOD Lobby Day Form	Page 9
Membership Update	Page 10
Membership Form	Page 11
Haiti Disaster Relief	Page 12



FROM THE KEYBOARD OF OUR PRESIDENT...

Each January I have such plans for keeping my New Year's resolutions. I always try to pick resolutions I can actually keep and strategically go public with my intentions. I recently read a list of top-ten resolutions for 2010. The list included the predictable usual: lose weight, exercise more, spend more time with family and friends, etc.

Ok. I'm not going public with my personal resolutions, but as SCPA President, I am going public with my SCPA resolutions: learn more about current state legislative issues, attend all of the free education provided to SCPA members, support March of Dimes more, help to recruit more members in 2010 and continue to lead SCPA so our organization remains one of the largest

and most active perinatal associations in the country.

Now I would not be so presumptuous to ask anyone to help me with my resolutions. However, I would ask each SCPA member to make and keep this one resolution: Stay involved with SCPA in 2010. If you're not a member, join today. Together, we can make a difference in perinatal outcomes in South Carolina.

The number nine resolution on that 2010 top-ten New Year's resolution list was help others. As health professionals, we do this everyday. Mark that resolution as complete. See, it's easy!

Best,

*Mary Mathes,
SCPA President*

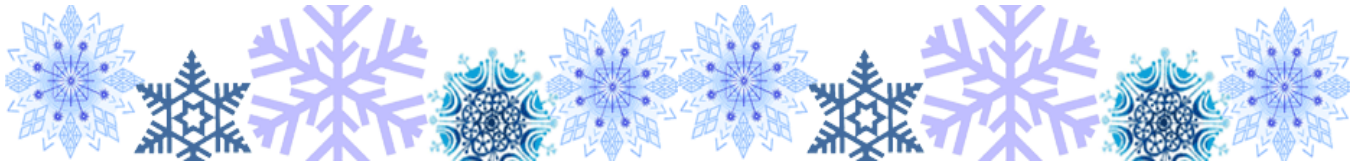


PUBLIC AFFAIRS UPDATE

by Meg Jewell

The state Legislature is back in session for 2010. With the enormous budget challenges facing our state this year, we ALL need to make sure our elected officials know that SCPA considers the health of mothers and babies in our state a PRIORITY.

See below for updates by March of Dimes for ways you can get involved. Remember you can find your legislators' names/contact information at www.scstatehouse.gov.



MARCH OF DIMES, SOUTH CAROLINA CHAPTER 2010 PUBLIC AFFAIRS AGENDA

by Megan Branham

March of Dimes Focus Areas:

The March of Dimes Public Affairs agenda focuses on public policies and programs that relate to the Foundation's mission -- improving the health of infants and children by preventing birth defects, premature birth and infant mortality. This focus is separated into three areas of programmatic work:

- Access to health care for women of childbearing age, infants and children;
- Research to prevent prematurity, birth defects and infant mortality; and
- Prevention and treatment to improve maternal, infant and child health.

South Carolina Chapter Priorities:

From these focus areas, the South Carolina Chapter has chosen two priorities for 2010:

- Access to health care by coordinating a public education campaign to ensure that eligible pregnant women are enrolled in the state's Medicaid program so that they may receive appropriate prenatal care.
- Support of the cigarette tax to fund Medicaid to ensure that pregnant women and children have continued access to health care so that there will be better outcomes thus reducing the incidences of prematurity, birth defects and infant mortality.

Why the South Carolina Chapter Has Chosen These Priorities:

Access to Health Care:

When compared to other states, South Carolina has limited options to educate pregnant women about Medicaid services. The enrollment process can be complicated and information is sometimes not clear.

To address these challenges, MOD, SC Chapter will coordinate efforts with other statewide advocacy groups to prepare and distribute an easy to understand informational brochure to assist pregnant women with the enrollment process. MOD, SC Chapter will also assist in training volunteers around the state to assist applicants.

Cigarette Tax:

South Carolina has the lowest cigarette tax in the nation. Increasing the cigarette tax to fund Medicaid will provide a much needed influx of funds into our state's Medicaid system and will help stabilize the program. In other states, increasing cigarette taxes has proven to reduce smoking levels and increase state revenues. Tobacco use is the leading preventable cause of disease and death in South Carolina. Nearly 23% of the state population smokes cigarettes. Smoking costs the state Medicaid program \$393 million per year. Annual health care costs in South Carolina directly caused by smoking total \$1.09 billion.

NPA UPDATE

by Meg Jewell



On November 13-14, 2009, I was privileged to represent SCPA at the National Perinatal Association (NPA) annual meeting in Ft. Worth, TX. The theme for the 2009 NPA meeting was “Focusing on Families”. It was interesting to note almost all speakers (representing the states of TX, MA, MD, NY, &

CA), expressed the same frustrations, concerns, & challenges to providing family-centered care in the perinatal setting that we see in SC.

A full listing of topics & presenters from this conference can be found on the NPA website at www.nationalperinatal.org Additionally, NPA is currently looking for both plenary & workshop speakers for their 2010 annual meeting, entitled, “Bridging Gaps----Healthcare, Ethics, Technologies and Politics in Neonatology & Perinatology” on November 4-6, 2010 in Washington, DC. I hope you will consider sharing some of our SC perinatal expertise at NPA.

While in Texas, I also attended the State Forum on 11/13/09. This meeting is designed to allow state perinatal attendees to network and talk about their state associations’ successes & challenges. According to NPA, there are only about 16-18 active state perinatal associations in the country; five of them participated in the 2009 state forum, including KY, NY, CA, WI, and SC.

Believe it or not, SC is one of the **LARGEST & MOST ACTIVE** state perinatal associations in the country! All of the forum attendees were impressed with SCPA’s large membership, our educational cafes, annual conference, and newsletter. All of us should be very proud of our organization and the work it does on behalf of mothers and babies in our state. Our collective time, talents, dedication, and resources really DO make a difference.

Congratulations and thanks to all our SCPA members who support our organization and make it a model for other states!!!



Just Another Day at the Beach1
Photographer Unknown

MOMS TRIAL: NIH-SPONSORED STUDY OF WOMEN CARRYING A BABY WITH SPINA BIFIDA

by Jessica Ratay

The Management of Myelomeningocele Study (MOMS), a randomized, controlled clinical trial, continues to enroll pregnant women. Health care professionals can play an important role by helping to identify and refer candidates for this study funded by the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD). The trial is designed to compare the safety and efficacy of prenatal versus postnatal closure of myelomeningocele. Approximately 160 women have been enrolled with another 40 needed. For the duration of the study, prenatal surgery for spina bifida is not available outside of the trial. Participating MOMS Centers are: The Children's Hospital of Philadelphia, Vanderbilt University Medical Center in Nashville, and the University of California at San Francisco. The George Washington University Biostatistics Center serves as the Coordinating Center and performs the centralized screening.

Patients can begin the evaluation process as soon as the diagnosis is made. For the initial screening process, women or their health care providers should contact Ms. Jessica Ratay (see below). Ms. Ratay, a genetic counselor, can explain the trial at length and/or provide information on spina bifida. If a patient remains interested in participating and consents to be screened, her medical records will be reviewed for inclusion and exclusion criteria. Healthcare providers are also encouraged to contact Ms. Ratay for information about this fetal condition and the trial.

Qualifying participants are referred to a MOMS Center for further screening where they are evaluated for eligibility and decide if they wish to enroll. If so, they are randomly assigned to either the prenatal or postnatal surgery group of the trial.

Participants in the prenatal group undergo surgery to repair the myelomeningocele between the 19th and 25th week of pregnancy and remain at the MOMS Center until cesarean delivery at 37 weeks. Those assigned to postnatal surgery go home after randomization and return to the MOMS Center at 37 weeks for cesarean delivery and myelomeningocele repair. Follow-up evaluations are performed at the center on all infants at 12 and 30 months of age. All travel, food and lodging costs are covered by the research study.

To refer a patient or for information:

Contact the Study Coordinator, Jessica Ratay, MS, CGC at:

1-866-ASK MOMS (1-866-275-6667)

E-mail: MOMS@bsc.gwu.edu

Website: www.spinabifidamoms.com



CARING CASSEROLES AN INSPIRING STORY OF HOW ONE PERSON CAN MAKE A DIFFERENCE

By Marlena Clary, RNC, BSN

Regardless of where you work in the perinatal setting; inpatient or outpatient hospital setting, doctor's office, clinic, home health, etc., you quickly become aware of the many needs this patient population has. If you are anything like me you have great intentions but quickly become overwhelmed with where to begin and thoughts of how can one person make a difference. I want to introduce you to April Smith, a CRNA and parent of a NICU baby who didn't let these concerns stop her from making a difference. I know her story will inspire you, but I hope it helps us all realize that no matter how small or insignificant we feel our contribution will be, we have to start somewhere!

Here is an excerpt from her website: www.caringcasseroles.org/about:

Our daughter Isabel was born and admitted to the Neonatal Intensive Care Unit (NICU) at Palmetto Health Baptist Hospital. My husband Holcombe and I were not prepared emotionally for this. The love, prayers and food that we received helped make this journey bearable. While Isabel was in the NICU, Holcombe and I befriended another family whose son, Tyler, was in the NICU next to Isabel. In one week we shared an array of feelings that you only experience when your child is on life support.

Holcombe and I were able to take Isabel home after ten long days, but Tyler remained in the NICU.

I was so moved by the simple gift of food, that I made some for Tyler's family and gave it to them with a note of hope and love. I knew that this made a difference to them, and I wanted to replicate this small act of kindness for all parents who have to leave the hospital without their baby. Tyler's parents later sent me a note saying, "Thank you from the bottom of my heart. You are definitely God-sent. I am so glad to have met you and Holcombe."

I started Caring Casseroles in order to be able to provide each family that has to leave their baby in the NICU at Palmetto Health Baptist with a meal to take home. A local appliance store, Columbia Appliance, donated a freezer, and the hospital donated the space and additional resources. Our goal is to have 40 casseroles on hand each month for the 30-40 patients the NICU discharges each month. This small gift of food can make an enormous difference for a family.

I hope this story helps emphasize how something that sounds so small can have such a big impact and mean so much to someone going through a difficult time. Kimberly McGhee, an Assistant Nurse Manager in the NICU at Palmetto Health Baptist, can't say enough wonderful things about April; "What she is doing is amazing. I feel very honored to be such a small part of something so great. She is my hero!"

Please visit April's Caring Casseroles website at www.caringcasseroles.org, and find out how you can help her "pay it forward"!



TRIPLE OPTION

OBSTETRICIANS' HIGH RISK PREGNANCY PRACTICE GETS PLENTY OF TWINS AND TRIPLETS

Anthony “Tony” Gregg, MD has been seeing triple—as in triplets. Lots of them. Gregg, an associate professor of obstetrics/gynecology for the School of Medicine, is director of maternal/fetal medicine and medical director of the Division of Genetics. He and his new partner, Paul Browne, MD, an associate professor in obstetrics/gynecology, receive high-risk obstetric referrals across the mid-state of South Carolina that includes a 16-county area surrounding the Midlands.

Many private-practice obstetricians refer their patients to Gregg and Browne when multiple-birth pregnancies or other high-risk factors are involved. That’s how the two became the primary physicians for five mothers who were all pregnant with triplets at the same time earlier this year.

“I’d never had the opportunity to care for so many patients with twins and triplets at one time until I came to the University of South Carolina School of Medicine,” said Gregg, who has been providing obstetrical care of mothers with high-risk pregnancies for the past five years at the School of Medicine’s University Specialty Clinics and at Palmetto Health Richland Hospital. “There are different views on how to manage twin and triplet pregnancies—we take an extremely vigilant approach.”

For Gregg and nurse manager Heidi Mason, that means providing an initial counseling session to mothers who are often overwhelmed but ecstatic at the prospect of a multiple birth.

“What most mothers don’t understand at first is that carrying triplets means they are at high risk for being hospitalized for some time during the pregnancy, that they likely will have low birth weight babies, and that there is a higher risk for their newborns to have

cerebral palsy or to experience neonatal death,” Gregg said. “Sharing that information is a reality check that gets them prepared for the road ahead.”

The statistics are sobering: Triplets have a 17-times greater risk of suffering from cerebral palsy than singletons. They also are 20-times more likely to die in the first year; have an average birth weight of less than four pounds each; and an average-length stay of 30 days in a neonatal intensive care unit. The pregnancies can tax families emotionally and financially.

But Gregg’s intensive approach to high-risk pregnancy management—he provides his cell phone number to mothers (and fathers) and encourages them to call with any concern—pays dividends. Nearly all of his patients carrying twins and triplets approach their gestational targets—35-36 weeks for triplets; 36-37 for twins—and avoid long and expensive hospitalizations for themselves and their newborns.

“The rocky road for a triplet pregnancy starts at 18-20 weeks. That’s when the uterine volume and fetal size begin to conflict”, he said. “Dr. Browne and I start seeing these patients almost weekly after 18 weeks of pregnancy to monitor the condition of the cervix, which can thin much faster with a multiple pregnancy and to review patient symptoms and address psycho-social stresses.

“This approach results in many more office visits than with a singleton pregnancy, but the extra attention can prevent weeks of expensive care in the neonatal intensive care unit. We’re also vigilant about making sure our patients get adequate nutrition, rest and supplementation with vitamins, iron and folic acid during the pregnancy.”



TRIPLE OPTION

OBSTETRICIANS' HIGH RISK PREGNANCY PRACTICE GETS PLENTY OF TWINS AND TRIPLETS
(Continued)

Along with expectant mothers carrying multiples, Gregg and Browne also see patients who are diabetics, have high blood pressure or some other underlying health condition that threatens to complicate the pregnancy. Managing their care often translates into 14-hour days.

"I'm excited to come to work every day and I go home with a sense of fulfillment," Gregg said. "The patient population I am privileged to care for makes my job exciting and patients are usually extremely appreciative."

Wendy is one of the five mothers of triplets who were under Gregg's care at the same time. She gave birth to three healthy girls in June.

"Dr. Gregg is very conservative; he never wants you to become complacent about doing all the right things while you're pregnant," she said. "You make it to 24 weeks, and he immediately starts encouraging you not to let your guards down—to shoot for 28 weeks, then 32 weeks. It was always like, 'You're doing good, Wendy, but...' And it worked—I made it!"

Wendy's husband, Nate, called Gregg several times during the pregnancy, and Linda, whose triplets were born in October, has called after hours, too. *"He said it's OK to call any time. That's good peace of mind,"* she said.

Article reproduced with permission from *South Carolina Medicine*—Winter 2009



SAVE THE DATE!
March 24, 2010
MARCH OF DIMES LOBBY DAY



Each year March of Dimes volunteers gather to talk to their elected officials about maternal and child health needs in South Carolina.

This year, we need YOU! It will take just a few moments of your time to share your personal stories and state facts with your representative on March 24, 2010.

In a new format this year, a FREE training for all volunteers interested in participating will be held the morning of Lobby Day, March 24th, from 10am-11am at the USC School of Law , Room 335.

We will provide you with all the tools and information necessary to craft an effective message to deliver to your legislator! After the training, volunteers will be meeting with their elected officials to discuss the importance of March of Dimes Advocacy Issues (including access to health care and increase in cigarette tax).

Interested? Here's what you need to do:

Complete the attached interest form and email or fax to:

ATTN: Megan Branham

mbranham@marchofdimes.com or 803.799.4549

Help the March of Dimes speak for families that are not able to speak for themselves.

BE AN ADVOCATE FOR ALL BABIES ON MARCH 24TH!



**South Carolina March of Dimes
2010 Lobby Day
Volunteer Interest Form**

Name: _____

Organization/Affiliation: _____

Address: _____

Phone number: _____

Fax number: _____

Email: _____

County of Residence: _____

Senate district: _____ House district _____

(Found on your voter registration card)

Have you attended previous March of Dimes legislative events?

Yes _____ No _____

**Please FAX or E-MAIL completed form to MEGAN BRANHAM at
(803) 779-4549 or mbranham@marchofdimes.com by MARCH 5, 2010.**

*Once your completed form is received, we will contact you with information for next steps (including how to set up a meeting with your elected official) and other legislative day specifics.

Thank you for volunteering to speak for the 62,000 babies born annually in South Carolina that are unable to advocate for themselves!

MEMBERSHIP RENEWAL REMINDER

By Cheryl Suttles, Chair, Membership Committee

Happy New Year! I hope everyone enjoyed the holidays and is staying warm! For those who have not yet renewed your membership for 2010 it's not too late.

You will need to complete a 2010 membership form and send it with payment to the address at the top of the membership form. If you do not have a current membership form on hand, you can use the form included in this issue of the newsletter or you can always access the form on the website (www.scperinatal.org under the "Join SCPA" tab).

If you need additional information about membership you may contact me or any membership committee member listed below.


Thank you,

Cheryl Suttles, RNC
Membership Chair
864-560-2221
[Csuttles2@srhs.com](mailto:Csuttlles2@srhs.com)

Anthesnia Ervin, BJ McMorris, Bob Barnwell, Bridget Allen, Cathy Griffin, Chaka Davis,
Danny Dearybury, Gail Morrow, Kathy Hornsby, Phyllis Walters



The New Day...Artist Unknown


SCPA
 SOUTH CAROLINA PERINATAL ASSOCIATION
PO Box 5247, Columbia, SC 29250

Membership Renewal For year 2010 Member # _____
 Annual Membership renewal is \$35.00 Make check to SC Perinatal Association

New Membership **Please Print**

Name	
Degree(s)	
Home Address	
City, St, Zip	
County	
Region (Check One)	Low Country _____ Midlands _____ Pee Dee _____ Piedmont _____
Home Phone	
Home E-mail	
Affiliation/Employer	
Work Address	
City, St, Zip	
Work Phone	
Work E-mail	
Recruited by:	
	Yes! I would like to receive information about SCPA Committees.

Mailing Preference: Work Home E-mail Preference: Work Home

HELPING HAITI'S WOMEN AND CHILDREN: EARTHQUAKE DISASTER RELIEF

by Breana Lipscomb



It seems that since January 12, 2010, the entire world's news media outlets have been consumed with images and reports of the people of Haiti and their struggle to figure out where to begin rebuilding their already impoverished nation. The massive earthquake that shook the southern portion of the country caused catastrophic damages. Homes, government buildings, stores, hospitals, and lives were completely destroyed in a matter of minutes.

Ever since the earthquake occurred, many organizations and people have rallied together to provide immediate aid to people in Haiti directly affected by the natural disaster. Although there are numerous reputable organizations providing aid to Haiti, it seems important to highlight some of the organizations that have a vested interest in the health and well-being of women and children, much like the mission of SCPA. I encourage you to donate your time or financial resources to organizations that are serving Haitian women and children.

UNICEF has released a statement that "Children are always the most vulnerable population in any natural disaster, and UNICEF is there for them. According to their website, "100% of every dollar you give will support UNICEF's work for children in Haiti." Visit the website for more information: www.unicefusa.org

The **March of Dimes** has pledged \$100,000 to UNICEF to continue their efforts in helping the women and children in Haiti affected by the earthquake. This money is specifically being used to help pregnant women, breastfeeding women, and babies who are in

need of clean water, food, formula, diapers, clothing, etc. In addition to the \$100,000 already granted to UNICEF, the March of Dimes is also encouraging people to text the word **BABY** to 20222. When doing so, a donation of \$5 towards the March of Dimes will be charged to your phone.

Save the Children is an organization that has provided emergency aid to children and families in Haiti since 1985. Their current focus is sending emergency response teams out via motorbike in Port-au-Prince and surrounding areas. Visit the website for ways that you may help: www.savethechildren.org

CARE is another organization that has provided aid to Haiti for numerous years. CARE'S programs have been in Haiti since 1954 and have focused on governance, HIV/AIDS, reproductive health, maternal and child health, education, food security, and water sanitation. Since the earthquake this year, CARE has developed the "Haiti Emergency Response Fund". Their goal is to raise \$40 million to support a five-year plan of providing both immediate relief and long-term rehabilitation of the country. Visit CARE's website for ways that you may help: <http://www.care.org/emergency/haitiearthquake/spreadtheword.asp>

Other organizations that provide relief to the general population include: The Bush Clinton Haiti Fund, American Red Cross, and Partners in Health.

Please keep the people of Haiti in your thoughts as they strive to rebuild their nation!

