

Study finds Black women with sickle cell disease have worse maternal health outcomes

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Adverse pregnancy outcomes occur frequently in women with sickle cell disease (SCD) across the globe. Black women in the United States experience disproportionately worse maternal health outcomes than all other racial groups, which further negatively impacts Black women with SCD.

These findings were published recently in the *American Journal of Hematology*.

Sickle cell disease is a group of inherited red blood cell disorders that affect hemoglobin, the protein that carries oxygen through the body. More than 100,000 people in the United States and 20 million people worldwide are affected by this condition, according to the National Institutes of Health.

"Despite adjusting for social determinants of health, Black women with SCD living in California experienced significantly worse <u>pregnancy</u> <u>outcomes</u> than those without SCD," said Oyebimpe Adesina, lead author of the study and UC Davis Comprehensive Cancer Center hematologist.

The study used California's Department of Health Care Access and Information (HCAI) data from 1991-2019 to estimate the cumulative incidence of pregnancy outcomes in Black women with and without SCD. SCD cases were identified using SCD-specific ICD-9/10-CM codes from hospitalizations and emergency department visits recorded in the HCAI databases. The study identified 1,260 Black women with SCD and 469,018 Black women without SCD during their first pregnancy.

Black pregnant women with SCD were more likely to deliver at a younger age, use government insurance, and live in at-risk or distressed neighborhoods, compared to those without SCD. They also experienced



higher stillbirths and inpatient maternal mortality.

Despite adjusting for age, delivery era, comorbidities, health insurance and Distressed Communities Index scores, Black women with SCD still experienced significantly worse pregnancy outcomes than those without SCD.

"Our results highlight the importance of multidisciplinary perinatal care, ongoing studies to target SCD modification, and increased public health efforts to reduce disparities in pregnancy-related outcomes for women with SCD," Adesina said.

Other study co-authors were Ann Brunson, Anjlee Mahajan, Shaina Willen, Theresa Keegan, and Ted Wun, of UC Davis School of Medicine; Samantha Fisch, of UC San Francisco School of Medicine; and Bo Yu, of Stanford University School of Medicine and Stanford Maternal and Child Health Research Institute.

More information: Oyebimpe O. Adesina et al, Pregnancy outcomes in women with sickle cell disease in California, *American Journal of Hematology* (2023). DOI: 10.1002/ajh.26818

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