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ABC MISSION:

To promote the prevention and treatment of cardiovascular disease including stroke, in Blacks and other minorities and to achieve health equity for all through the elimination of disparities.

January 10, 2023

David W. Niebuhr, M.D., M.S., M.P.H.
Task Order Officer
Center for Evidence and Practice Improvement
Agency for Healthcare Research and Quality
5600 Fishers Lane
Rockville, MD 20857

Sent Via Email to: epc@ahrq.hhs.gov

Dear Dr. Niebuhr:

As members of Association of Black Cardiologists' (ABC) Cardiovascular Disease in Women and Children Committee, we welcome the opportunity to comment on the Agency for Healthcare Research and Quality's (AHRQ) draft comparative effectiveness review, "Management of Postpartum Hypertensive Disorders of Pregnancy."

Maternal mortality is overwhelmingly driven by cardiovascular disease, especially for Black mothers. In 2020, ABC convened "A Working Agenda for Black Mothers: Black Maternal Heart Health Roundtable." The roundtable was just the first step in launching a collaborative task force to tackle pressing issues that influence Black maternal health. The endeavor brought together a diverse group of expert leaders from different areas, including state agencies, faith-based communities, industry, maternal health specialists, other health care specialties, as well as media and partner organizations. An outgrowth of the roundtable was the publication of a paper^{1,2} in *Circulation: Cardiovascular Quality and Outcomes*.

ABC held a second black maternal health roundtable in February 2022 as part of its "We Are The Faces of Black Maternal Health" campaign through which Black cardiologists and medical professionals shared professional and personal experiences with Black maternal mortality and morbidity – the health of women during preconception, pregnancy, childbirth, and postpartum – as well as the impact it has on families. A second phase of the campaign will be launched in February 2023.

¹News Release: A Collaborative Community Approach is Key to Improving Black Maternal Health Crisis, says Position Paper by the ABC. Feb. 17, 2021. <https://abcario.org/recent-news/news-release-a-collaborative-community-approach-is-key-to-improving-black-maternal-health-crisis-says-position-paper-by-the-abc/>

² A Working Agenda for Black Mothers: A Position Paper from the Association of Black Cardiologists on Solutions to Improving Black Maternal Health. R.M.Bond, K.Gaither, S.A.Nasser, M.A.Albert, K.C.Ferdinand, J.N.Njoroge, B.Parapid, S.N.Hayes, C.Pegus, B.Sogade, A.Grodzinsky, K.E.Watson, C.A.McCullough, E. Ofili on behalf of the Association of Black Cardiologists; *Circ Cardiovasc Qual Outcomes* 2021;14:e007643. DOI: 10.1161/CIRCOUTCOMES.120.007643 <https://pubmed.ncbi.nlm.nih.gov/33563007/>

In 2021, ABC held a series of virtual table talks addressing Black maternal and infant health. Addressing hypertension and prevention of preeclampsia, which lead to poorer maternal and infant health outcomes, including increased mortality, have been important components of these discussions. The ABC Virtual Table Talk series has been recorded and episodes are available to the [public](#).

This draft comparative effectiveness review is timely given the rising rates of hypertensive disorders in pregnancy (HDP), including chronic or pregnancy-induced hypertension, which are now the leading causes of maternal deaths.³ We appreciate the opportunity to provide the following observations:

- The conclusions reached in the analysis are limited due to modest strength of evidence. As such, the data will not be sufficiently useful to inform clinical practice guidelines. With the overuse of the word "may" in the findings and conclusions, which appears necessary because of the low strength of evidence, it undermines confidence in findings. We appreciate the findings inform priorities for additional research.
- Black women encounter barriers that limit effective postpartum care, such as transportation and lack of childcare. The use of self-monitored ambulatory blood pressure machines can be an effective intervention to increase patients undergoing blood pressure readings.⁴ We appreciate that among the conclusions of the draft review is home blood pressure monitoring may improve disparities in blood pressure ascertainment between Blacks and non-Blacks.
- We are concerned with the generalized statements in the draft review about the use of diuretics for patients with hypertensive disorders of pregnancy. The document should include some level of stratification of specific underlying etiologies and co-morbid conditions. For instance, how would the use of diuretics differ for those with gestational hypertension versus those with chronic hypertension with superimposed preeclampsia or those with chronic hypertension with preeclampsia with severe features (e.g., intravascular depletion.) What considerations should be given to hypertensive patients with peripartum cardiomyopathy? The draft review could be misconstrued to suggest providers should give diuretics to all patients with hypertensive disorders in the postpartum period. Instead, it should be emphasized in the final review document that administration of diuretics should be determined on a case-by-case basis.
- With regard to shorter regimens of magnesium sulfate, while more research may be warranted, we believe the ethics of stratifying patients to 24 hours versus less time on magnesium may preclude such a study, as the risk of an adverse event (i.e. seizure activity) is high.
- The contextual look at the impact of race/ethnicity and social determinants of health was an important addition to the review, and the review does a good job of outlining issues and implications. However, few studies have addressed differential outcomes between racial/ethnic groups in incidence, detection, treatment, and outcomes of patients with hypertensive disorders of pregnancy. The final review should delineate in the section "Implications for Research" ways to organize future studies to address the contextual question and to determine real solutions to mitigate disparities.

This draft evidence review demonstrates the body of evidence on the management of postpartum hypertensive disorders of pregnancy is grossly inadequate and that future coherent, coordinated inquiry is

³ Kuehn BM. Hypertensive Disorders in Pregnancy Are on the Rise. JAMA. 2022;327(24):2387. doi:10.1001/jama.2022.9510

⁴ A Working Agenda for Black Mothers: A Position Paper from the Association of Black Cardiologists on Solutions to Improving Black Maternal Health. R.M.Bond, K.Gaither, S.A.Nasser, M.A.Albert, K.C.Ferdinand, J.N.Njoroge, B.Parapid, S.N.Hayes, C.Pegus, B.Sogade, A.Grodzinsky, K.E.Watson, C.A.McCullough, E. Ofili on behalf of the Association of Black Cardiologists; Circ Cardiovasc Qual Outcomes 2021;14:e007643. DOI: 10.1161/CIRCOUTCOMES.120.007643 <https://pubmed.ncbi.nlm.nih.gov/33563007/>

urgently needed for clear clinical guidance. The ABC offers itself as a resource to the Agency as it concludes its work and welcomes the opportunity to partner on future endeavors related to maternal health. For more information or to be put in contact with members of ABC's Cardiovascular Disease in Women and Children Committee, please contact Camille Bonta, ABC policy advisor, at cbonta@summithealthconsulting.com or (202) 320-3658.

Sincerely,

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