



Society for Maternal- Fetal Medicine (SMFM) and Federally Funded Research

Members of the Society for Maternal-Fetal Medicine (SMFM) conduct research that is changing the way obstetrics is practiced both in the United States and across the world. Grant funding is generally provided by the federal government; either by the National Institutes of Health (NIH), the Centers for Disease Control (CDC), the Department of Defense (DOD), or other governmental agencies. In order to conduct this research, maternal-fetal medicine (MFM) subspecialists submit grant applications to prospective funders. Since funding for obstetric research is limited, many proposals, while important, do not receive funding or are underfunded. For example, while the number of preterm births each year approaches the number of cancer deaths in the United States, preterm birth research receives ten-fold fewer funding dollars annually from the NIH, on average (CDC and NIH websites). SMFM members

conduct research in various areas of normal and pathologic pregnancy states, ranging from basic science studies, which may examine normal or disrupted pathways at the molecular level to multicenter randomized clinical trials with thousands of patients.

The NIH is the major federal funding source for research conducted in the United States. The *Eunice Kennedy Shriver* National Institute of Child Health, and Human Development (NICHD), serves as a major source of funding for pregnancy research conducted by MFM subspecialists and is the home of the Maternal Fetal Medicine Units Network (MFMUN), a group of academic tertiary care centers with the infrastructure to conduct world-class obstetric research. SMFM is a member of the Friends of NICHD and advocates for congressional support to drive this mission.

SMFM members also conduct research funded by CDC and additionally play key roles on

numerous CDC panels, which help drive future research priorities.

Ground-breaking and formative research conducted by members of SMFM covers many topics and includes:

- Preterm birth prevention
- Preeclampsia prediction, prevention, and treatment
- Hemorrhage
- Management of labor and delivery
- Maternal mortality
- Methods for identifying genetic disorders
- Uses of ultrasound for improving fetal health
- Infections in pregnancy affecting mother and fetus
- Maternal medical conditions affecting pregnancy
- Use of cerclage among women with prior preterm birth and a shortened cervix improves outcomes
- Decreased risk of moderate or severe cerebral palsy among infants born preterm from the use of magnesium sulfate
- Microarray can identify genetic disorders not detected with standard karyotype among fetuses with structural abnormalities
- Treatment of mild gestational diabetes improves outcomes for mothers and infants
- Administration of vaginal progesterone decreases the risk of preterm birth among women with cervical shortening
- In utero repair of meningomyelocele may improve childhood outcomes

Examples of research conducted by MFM subspecialists that have changed practice and led to improved outcomes include:

The practice of medicine continues to evolve and individual circumstances will vary. This document reflects information available at the time of publication and is not intended to establish an exclusive standard of perinatal care. This publication is not expected to reflect the opinions of all members of the Society for Maternal-Fetal Medicine. For further information: www.smfm.org