



## **NICHD Research is Critical to Improving Pregnancy Outcomes for Both Mother and Baby**

Investment in research in pregnancy and the postpartum period is critically important to optimize the health of women and their families in the United States. The National Institutes of Health (NIH), and specifically, the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD), has consistently been the largest supporter of perinatal research in the United States. Although 21 of 27 Institutes at the NIH support at least one grant or project related to pregnancy, the NICHD supports the largest share of NIH grants on perinatal research.\* Furthermore, only NICHD houses a specific study section for pregnancy, the “Obstetric and Maternal Fetal Biology Subcommittee” (CHHD-B).

### **Research in Pregnancy Relies on NIH-Funded Research**

Unlike other medical fields such as oncology, cardiology, and psychiatry, which rely heavily on industry for research and clinical trials, much of the evidence that guides obstetric and postpartum practice is generated from studies that are funded by NICHD. In fact, the NIH acknowledged this during the Task Force Specific to Pregnant Women and Lactating Women (PRGLAC) meetings in 2017 and 2018, finding that “many of the clinical practice guidelines of the American College of Obstetricians and Gynecologists are rooted in NIH-funded studies.”<sup>1</sup>

### **NICHD-funded Research Informs Clinical Obstetric Practice**

NICHD’s support comes in various forms, including funding for single investigator basic science grants and training grants. Some of the most impactful NICHD-supported research related to pregnancy in the last decades has originated within research networks supported by NICHD, such as the Stillbirth Collaborative Research Network, the Obstetric-Fetal Pharmacology Research Unit Network, and the Maternal- Fetal Medicine Units Network. Moreover, many of the clinical practices rooted in NICHD-supported research are either cost-effective or cost-reducing. NICHD must continue to support this research to improve and optimize individual and population-level health. This imperative is particularly important given the continued rise in maternal mortality and severe morbidity. Evidence from clinical studies is desperately needed to guide prediction, prevention and management of the various pregnancy complications that lead to these dire outcomes. In addition, myriad questions remain regarding optimization of fetal , neonatal and long-term outcomes that require translational and clinical studies. Without stable funding and research – especially clinical - that targets maternal and perinatal outcomes, discoveries made in the laboratory that could prevent or cure conditions will remain isolated and promising clinical interventions will remain idle.

\*“Runners up” include NHLBI, NIAID, NIDA, NIEHS and NIDDK





**The Society for Maternal-Fetal Medicine strongly urges the NICHD to ensure the following in its strategic plan:**

- **NICHD’s research portfolio must emphasize and prioritize pregnant and postpartum women.** Given that NICHD supports the largest share of perinatal clinical research overall, and that pregnant and lactating women are largely underrepresented in clinical trials throughout the NIH, it is essential that NICHD’s research portfolio prioritizes clinical research in pregnant and lactating women.
- **NICHD must continue to support, sustain and build on the networks that fund and support research in pregnant and postpartum women.** NICHD-funded networks and projects are critical to improve clinical obstetric practice. The United States currently faces a maternal health crisis, manifested in the rising rate of severe maternal morbidity and maternal mortality. It also faces a crisis in perinatal outcomes, with infant mortality continuing to be higher in the United States than in economically comparable countries and preterm birth rates and related morbidities remaining steady or rising. Racial and ethnic inequalities in these arenas have persisted and require further attention. In addition, many of the health problems that individuals experience during their lives – including obesity, asthma, and cardiovascular disease – have been traced back to fetal conditions *in utero*. This early programming for adverse health further underscores the need for research in pregnancy and lactation and emphasizes its importance for the health of the entire population.

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<sup>i</sup> [https://www.nichd.nih.gov/sites/default/files/2017-09/NIH\\_Activities\\_TFm1.pdf](https://www.nichd.nih.gov/sites/default/files/2017-09/NIH_Activities_TFm1.pdf)

