

May 28, 2019

The Honorable Derek Merrin Chairman House Health Committee 77 S. High Street, 13th Floor Columbus, OH 43215

Re: HB 11 – Prenatal Care

Dear Chairman Merrin:

As President of the Academy of Medicine of Cleveland & Northern Ohio (AMCNO), an organization representing more than 5,000 physician, resident and medical student members in Northern Ohio, I am writing on behalf of the organization and our members to voice our support for HB 11 – a bill that includes important efforts to improve health outcomes tied to infant mortality rates in Ohio including pre-natal health-smoking cessation, dental hygiene, lead education, and group pre-natal care.

According to the American College of Obstetricians and Gynecologists (ACOG) smoking is the one of the most important modifiable causes of poor pregnancy outcomes in the United States, and is associated with maternal, fetal, and infant morbidity and mortality. Smoking during pregnancy is a public health problem because of the many adverse effects associated with it. These include intrauterine growth restriction, placenta previa, abruptio placentae, preterm premature rupture of membranes, low birth weight, perinatal mortality and ectopic pregnancy. An estimated 5–8% of preterm deliveries, 13–19% of term deliveries of infants with low birth weight, 23–34% cases of sudden infant death syndrome (SIDS), and 5–7% of preterm-related infant deaths can be attributed to prenatal maternal smoking. The risks of smoking during pregnancy extend beyond pregnancy-related complications. Children born to mothers who smoke during pregnancy are at an increased risk of asthma, infantile colic, and childhood obesity.

ACOG has also published data showing that prenatal lead exposure has known adverse effects on maternal health and infant outcomes across a wide range of maternal blood lead levels. Adverse effects of lead exposure are being identified at lower levels of exposure than previously recognized

in both children and adults. In 2010, the Centers for Disease Control and Prevention issued the first guidelines regarding the screening and management of pregnant and lactating women who have been exposed to lead.

Group prenatal care is a model that takes place in a group setting, allowing patients to spend more time with their healthcare providers. In this group setting pregnant patients share their concerns in a supportive environment which allows increased time with their health care team, patient participation and engagement in their own care, interactive education, social support and community building within the group, as well as improved pregnancy outcomes including decreased preterm births.

The AMCNO has been working together with First Year Cleveland and other organizations to reduce infant mortality rates in the Cleveland area and we believe HB 11 has the potential to definitely improve health outcomes in our community and across the state of Ohio. The AMCNO supports this important legislation, and we ask for the support of the members of the House Health Committee as well.

Sincerely,

Mehrun K. Elyaderani, MD

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AMCNO President

Cc: Members of the House Health Committee