

Precision Maternity Care: A biosocial research program

Elise Erickson PhD, CNM, FACNM

Assistant Professor

University of Arizona



Primary Studies
www.mumhlab.com

Oxytocin response &
function/ variation
contributing to PPH

Physiological timeseries
data and prediction of
labor before symptoms

Midwifery-led care and
obstetric outcomes
(latent mixture modeling)



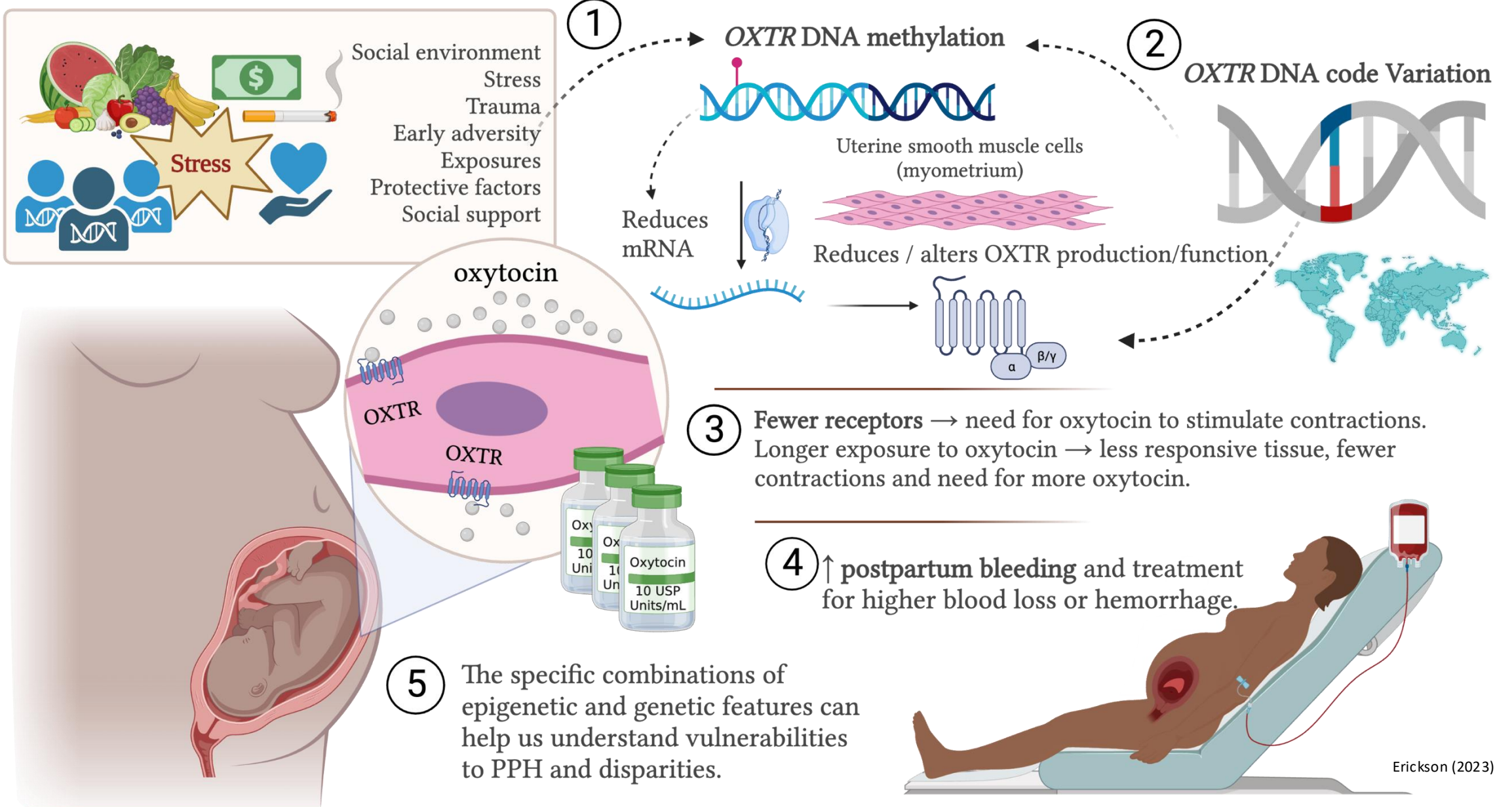
- Most people giving birth receive a medication called oxytocin either during labor/ after birth.
- Oxytocin causes the uterus to contract.
- We are studying why oxytocin may work better for some people than others, leading to easier labor or less bleeding postpartum.



Scan for an informational video



40% of PPH events are among people who are deemed "low risk" for PPH



Genetic and epigenetic perspectives on oxytocin use during labor:

This conceptual model demonstrates how studying oxytocin receptor (*OXTR*) DNA methylation or genetic variation has clinical significance for maternal health during and after childbirth.

577 Records screened for enrollment

184 ineligible

393 Approached for enrollment

119 Consented to protocol

274 Declined or did not meet criteria

69 PPH cases

50 control cases

13 DNA not obtained*

11 DNA not obtained*

56 DNA specimens

39 DNA specimens

*DNA not obtained due to COVID-19 pandemic restrictions after enrolling in study (n=6), lost to follow-up/no-show (n=17), blood not able to be drawn (n=1).

Case Control Study

- Cases defined as >1000 blood loss or use of 2nd uterotonics + atony
- Vaginal births
- Equal # induced/spontaneous

Exclusions

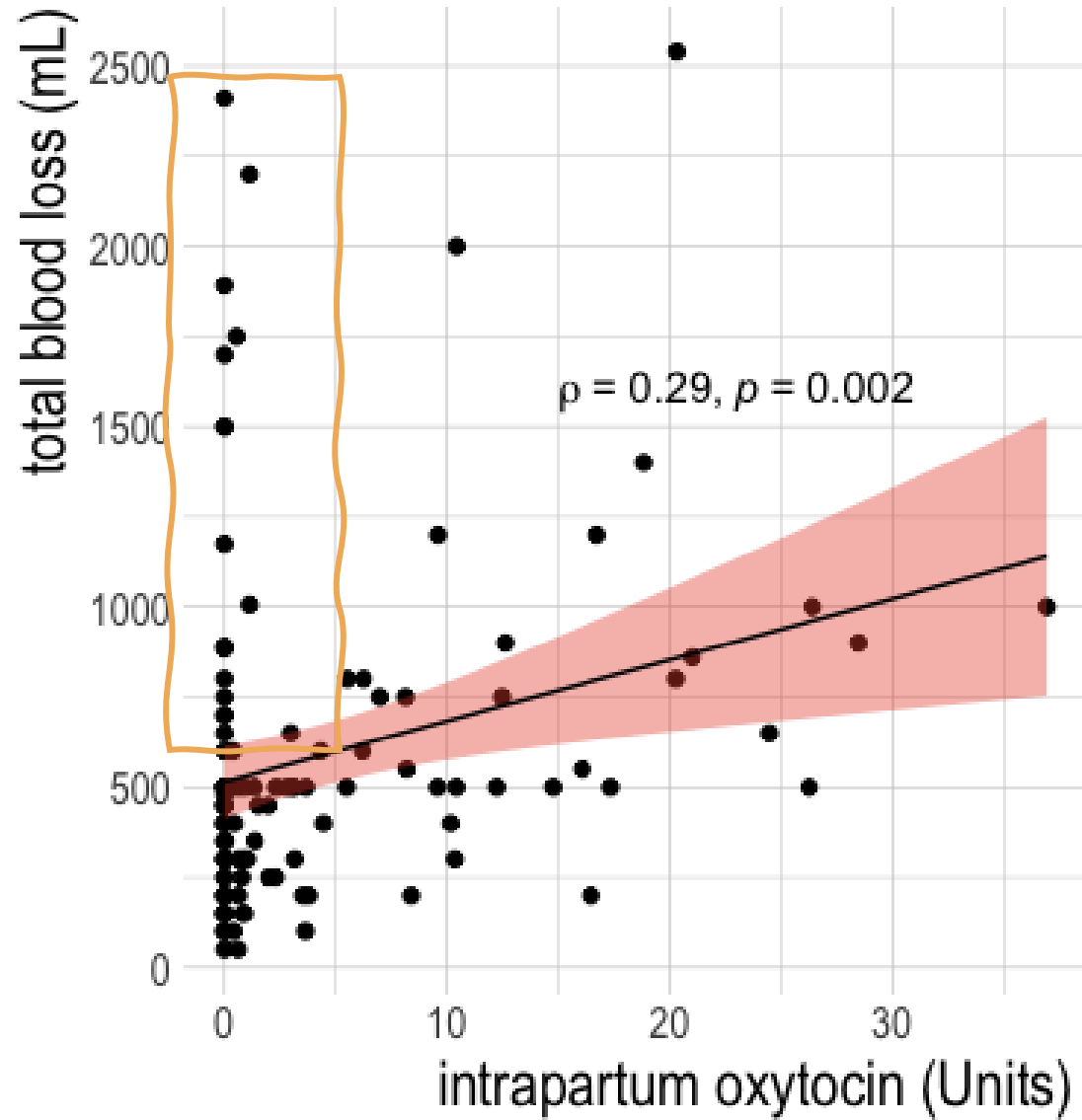
- Known coagulopathy
- HELLP
- DIC
- Mag Sulfate
- Accreta
- Low platelets
- Severe bleeding from laceration

Sample Characteristics

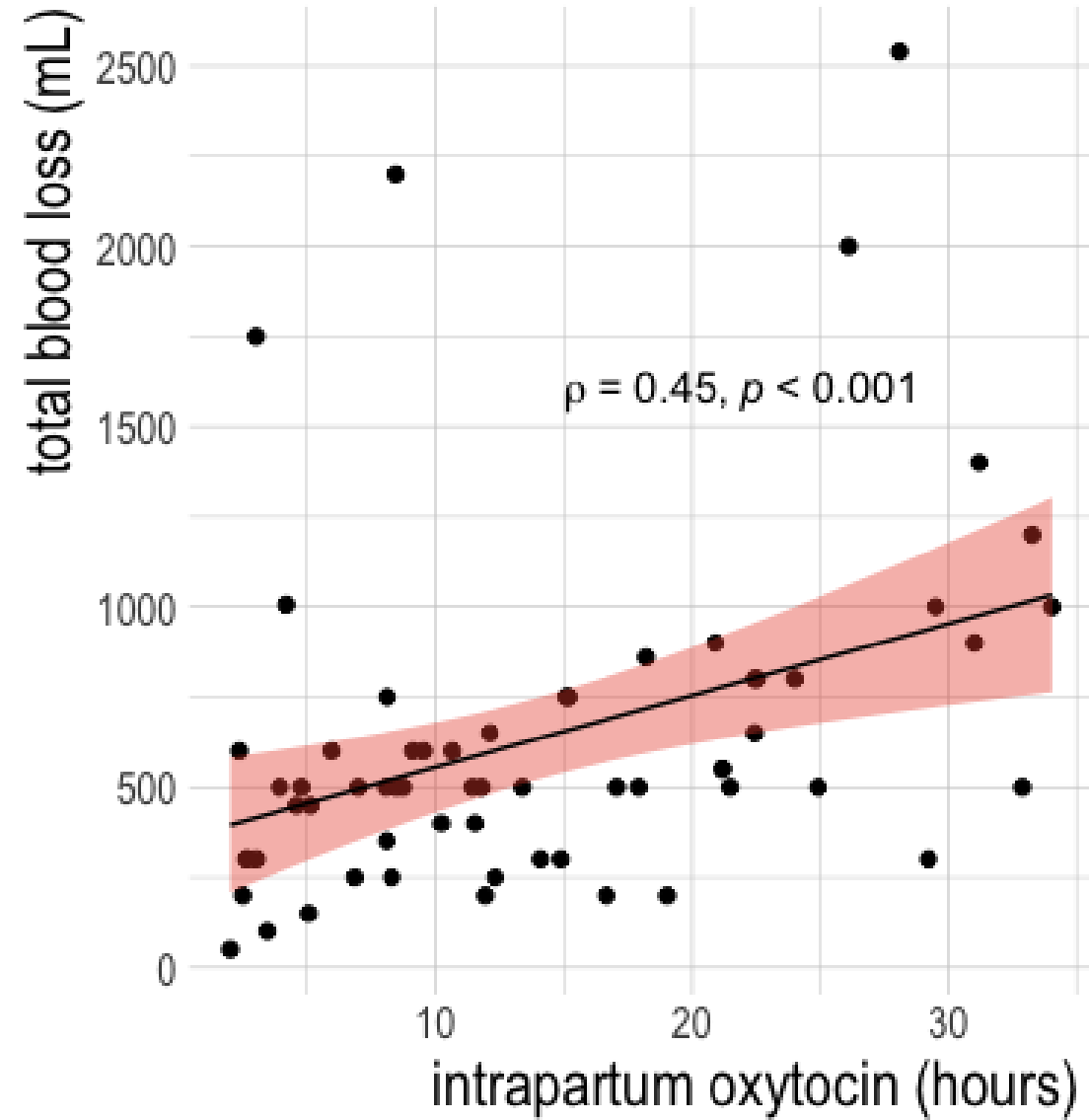
PPH cases were:

- More likely identifying as Hispanic/ Latina
- Higher BMI
- Nulliparous
- Antibiotic use (GBS+)
- Intrapartum oxytocin dosages
- Longer first stage

Cumulative intrapartum dosage



Duration intrapartum oxytocin



Higher DNA methylation

greater total oxytocin use

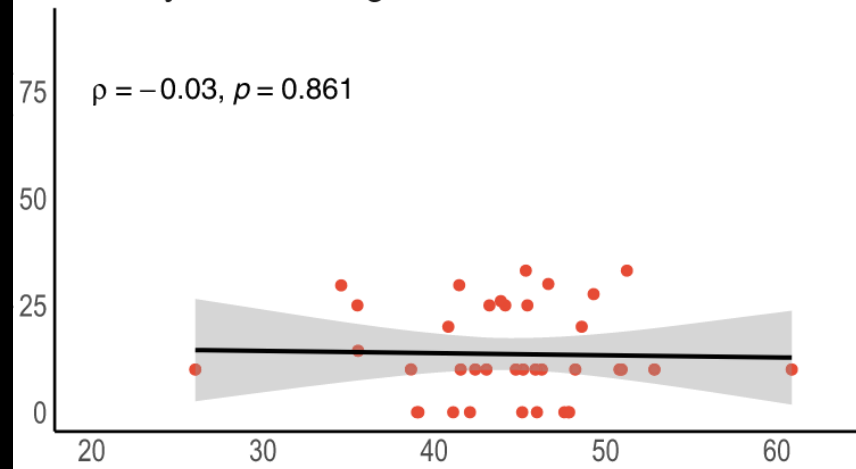


greater overall blood loss

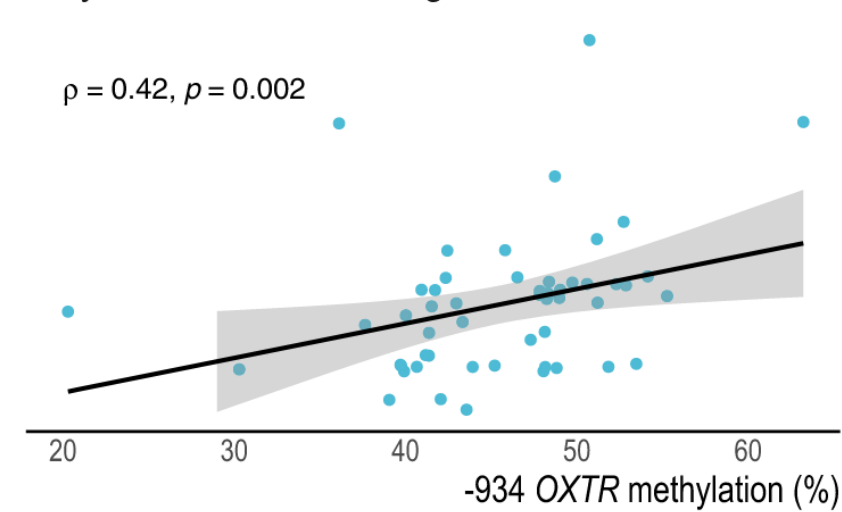
195% RR for 1000mL blood loss

TOTAL Oxytocin

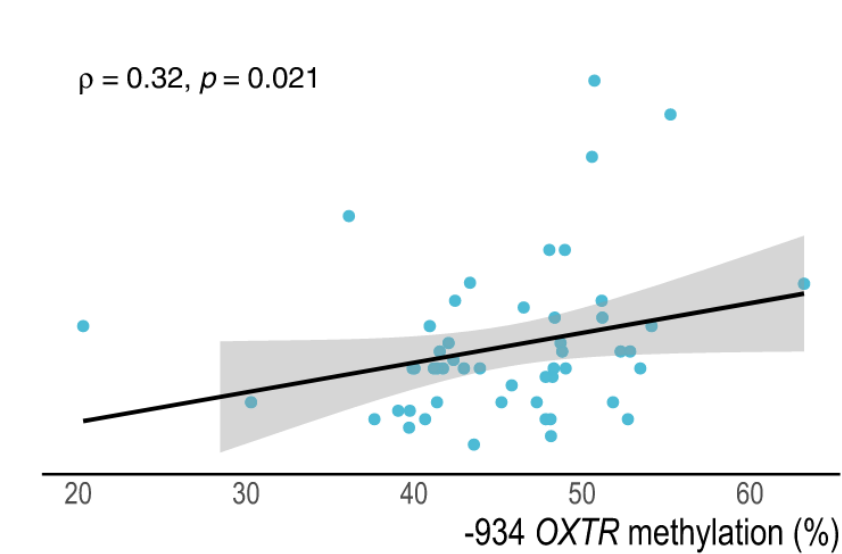
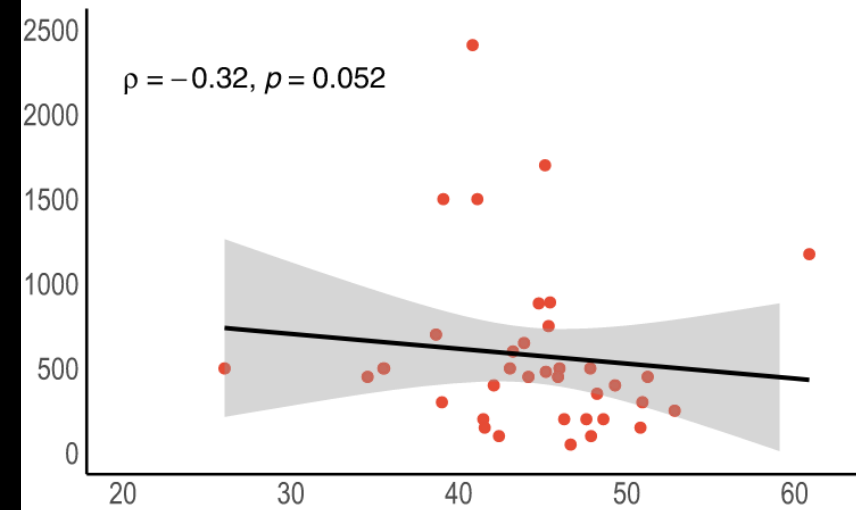
no oxytocin during labor



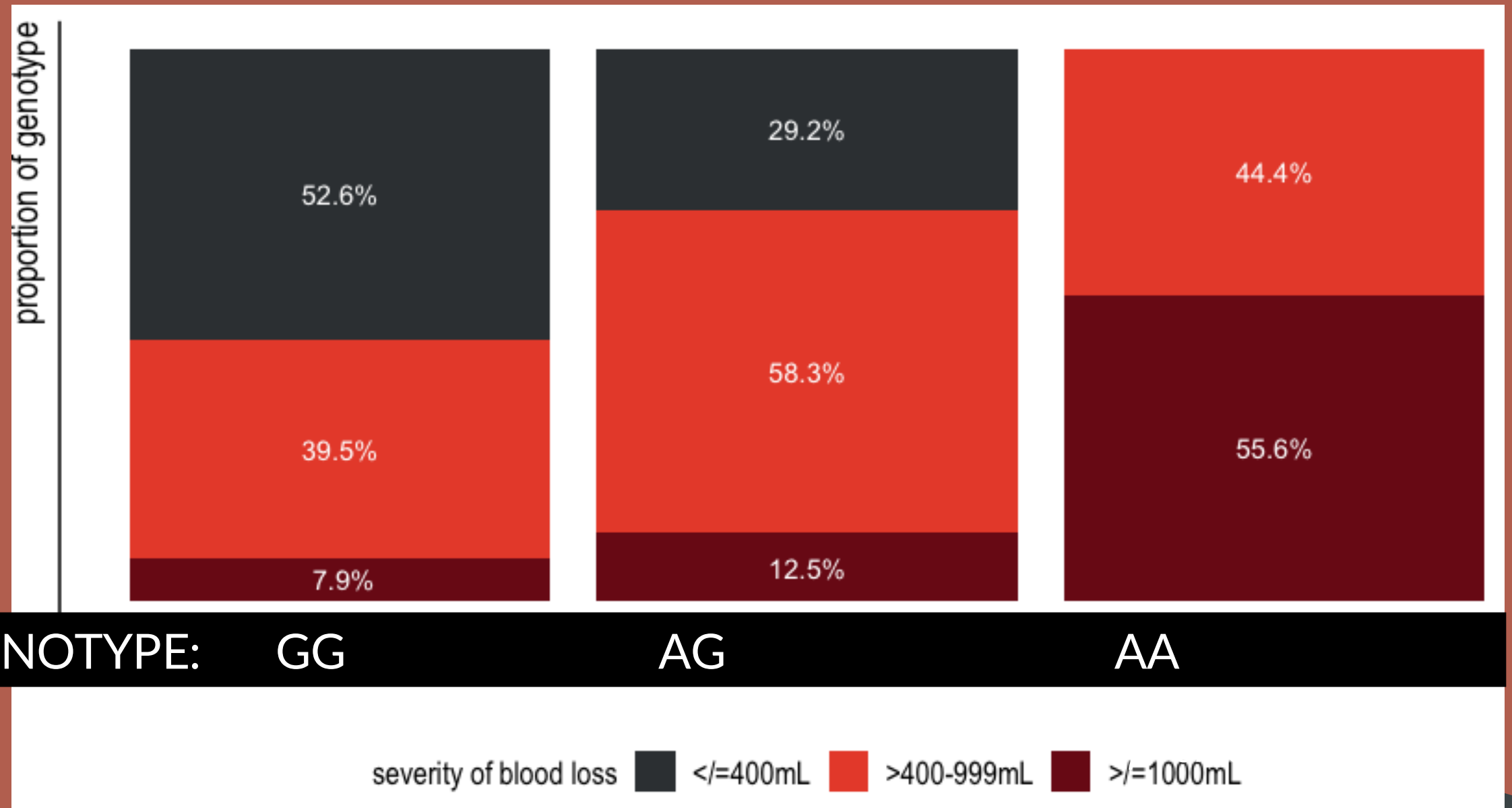
oxytocin needed during labor



mL Blood Loss



Severity of Blood Loss is Associated with rs53576 Genotype



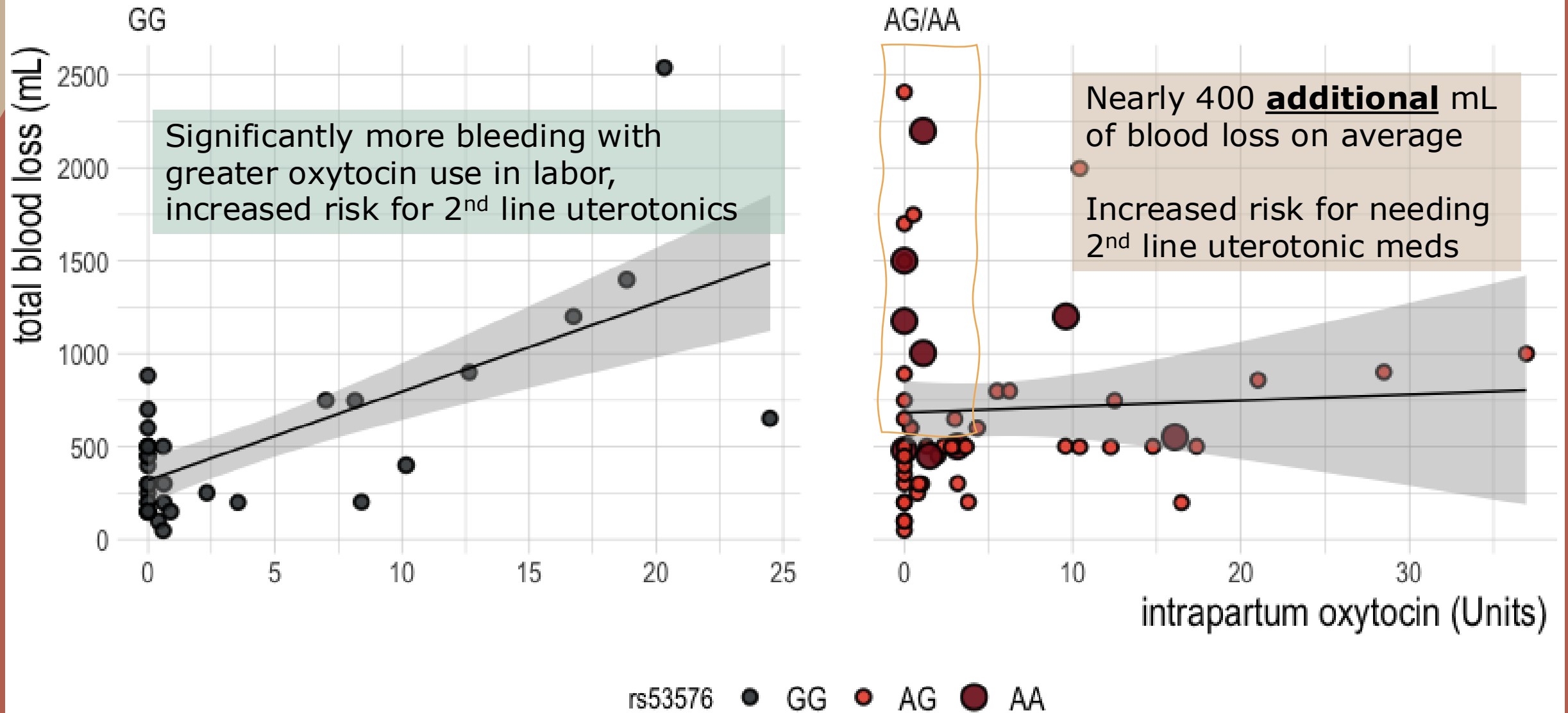
GENOTYPE: GG

AG

AA

severity of blood loss $\le 400\text{mL}$ $>400-999\text{mL}$ $\ge 1000\text{mL}$

Interaction between genotype and intrapartum oxytocin needs on blood loss after vaginal birth



RESEARCH

Open Access

Oxytocin receptor single nucleotide polymorphism predicts atony-related postpartum hemorrhage

Elise N. Erickson^{1,2*}, Kathleen M. Krol³, Allison M. Perkeybile³, Jessica J. Connelly³ and Leslie Myatt²



communications medicine

ARTICLE



<https://doi.org/10.1038/s43856-023-00244-6>

OPEN

Oxytocin receptor DNA methylation is associated with exogenous oxytocin needs during parturition and postpartum hemorrhage

Elise N. Erickson^{1,2✉}, Leslie Myatt¹, Joshua S. Danoff³, Kathleen M. Krol³ & Jessica J. Connelly³













A Common *OXTR* Risk Variant Alters Regulation of Gene Expression by DNA Hydroxymethylation in Pregnant Human Myometrium

Joshua S. Danoff^{1,2} · Travis S. Lillard¹ · Leslie Myatt³ · Jessica J. Connelly¹ · Elise N. Erickson⁴ 

GG:

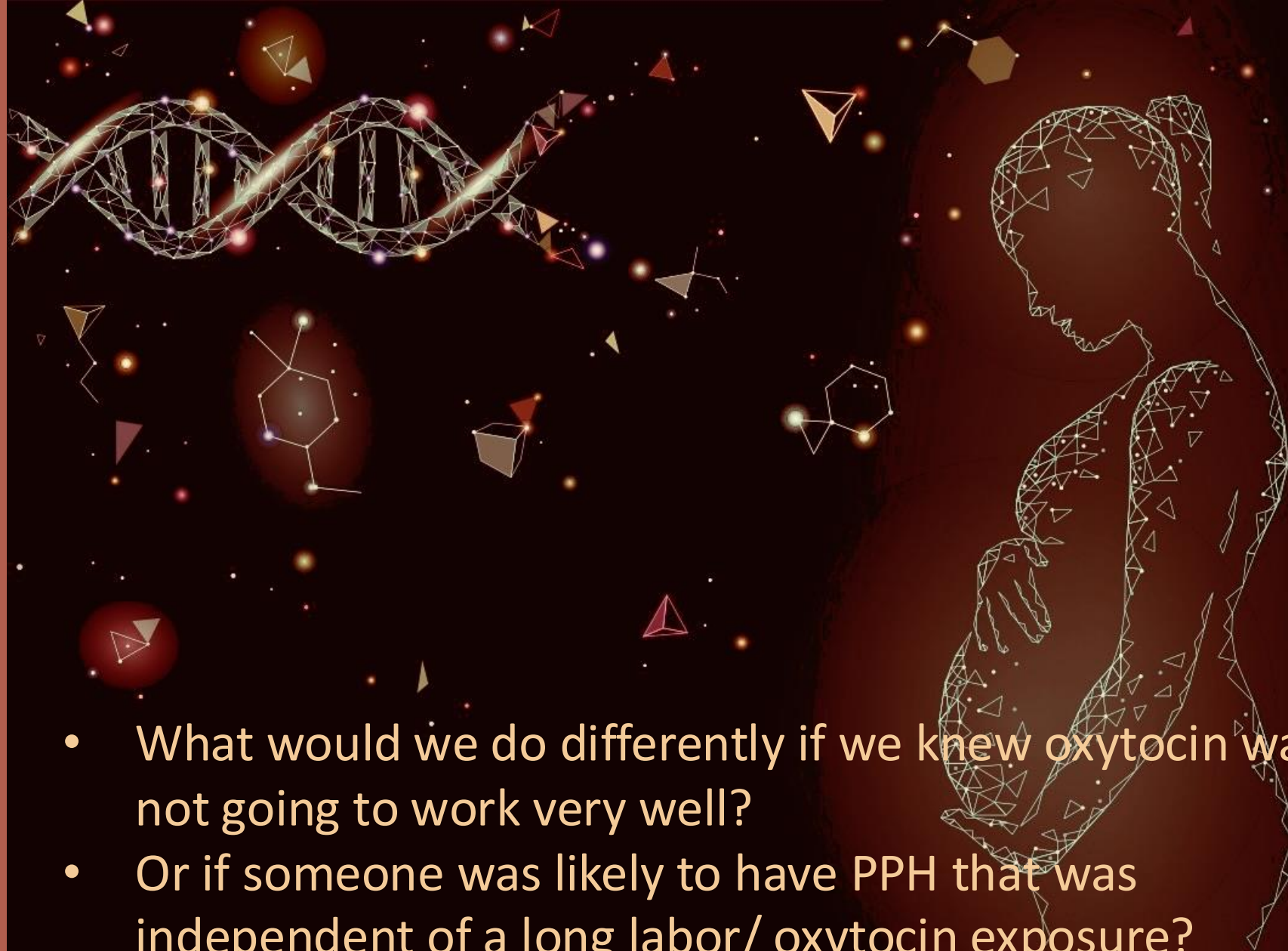
-  HYDROXYmethylation
-  gene transcription in myometrial tissue
-  Pitocin use
-  odds for PPH

AG/ AA:

-  true methylation
-  gene transcription in myometrial tissue
-  Pitocin use
-  odds for PPH



A Future for Precision Medicine in Maternity?



- What would we do differently if we knew oxytocin was not going to work very well?
- Or if someone was likely to have PPH that was independent of a long labor/ oxytocin exposure?

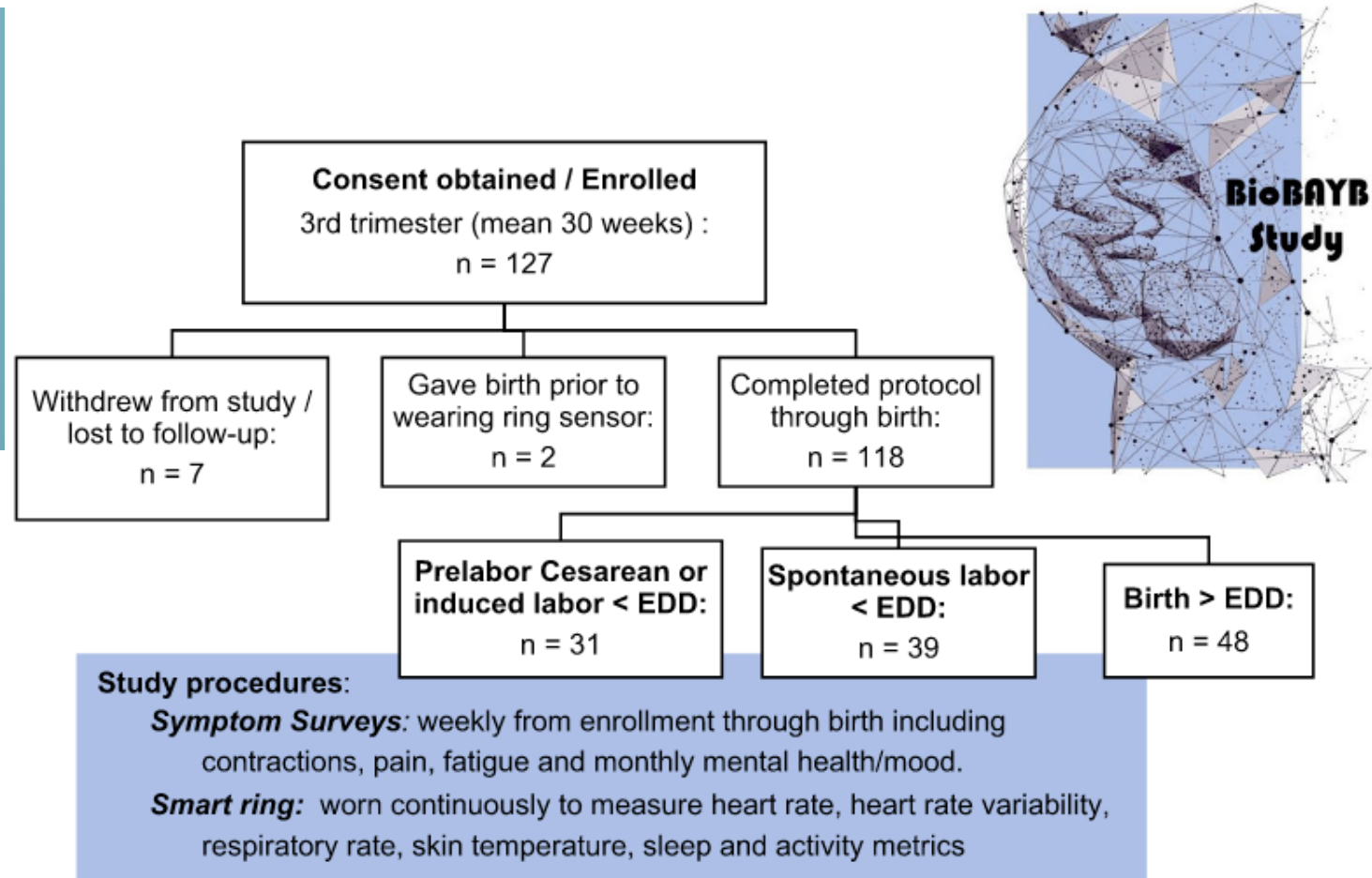
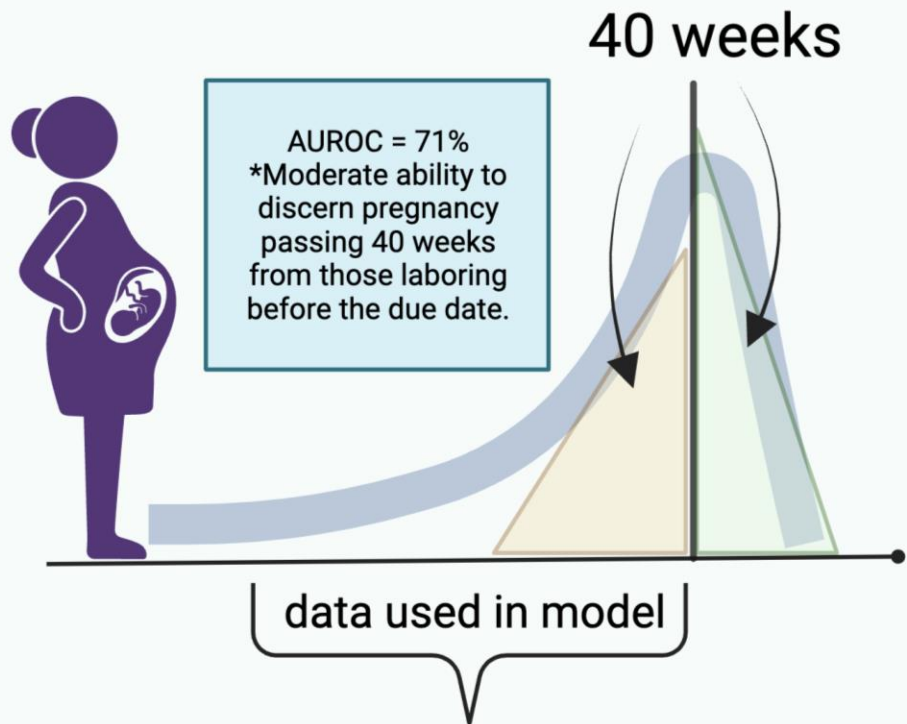


Fig. 1 Flow diagram of participants and study procedures for BioBAYB study. Of the 127 participants gave consent and enrolled into the study, 118 completed data collection with prelabor/birth data from the wearable smart ring. Comparison groups for analysis included those who gave birth prior to the Estimated Date of Delivery (EDD) through planned prelabor Cesarean or induced labor, those who experienced labor starting before the EDD and those whose pregnancies lasted beyond the clinical EDD. Study procedures listed in blue box, sent via REDCap questionnaires, smart ring metrics gathered.

Likelihood of labor starting before 40 weeks versus passing the due date using maternal physiological data gathered from a smart ring device.



Use of a boosted random forest approach. Training and testing dataset: smart ring data gathered during the span of time from enrollment until 4 days before labor started or 40 weeks, whichever occurred first.

Erickson et al (2023)

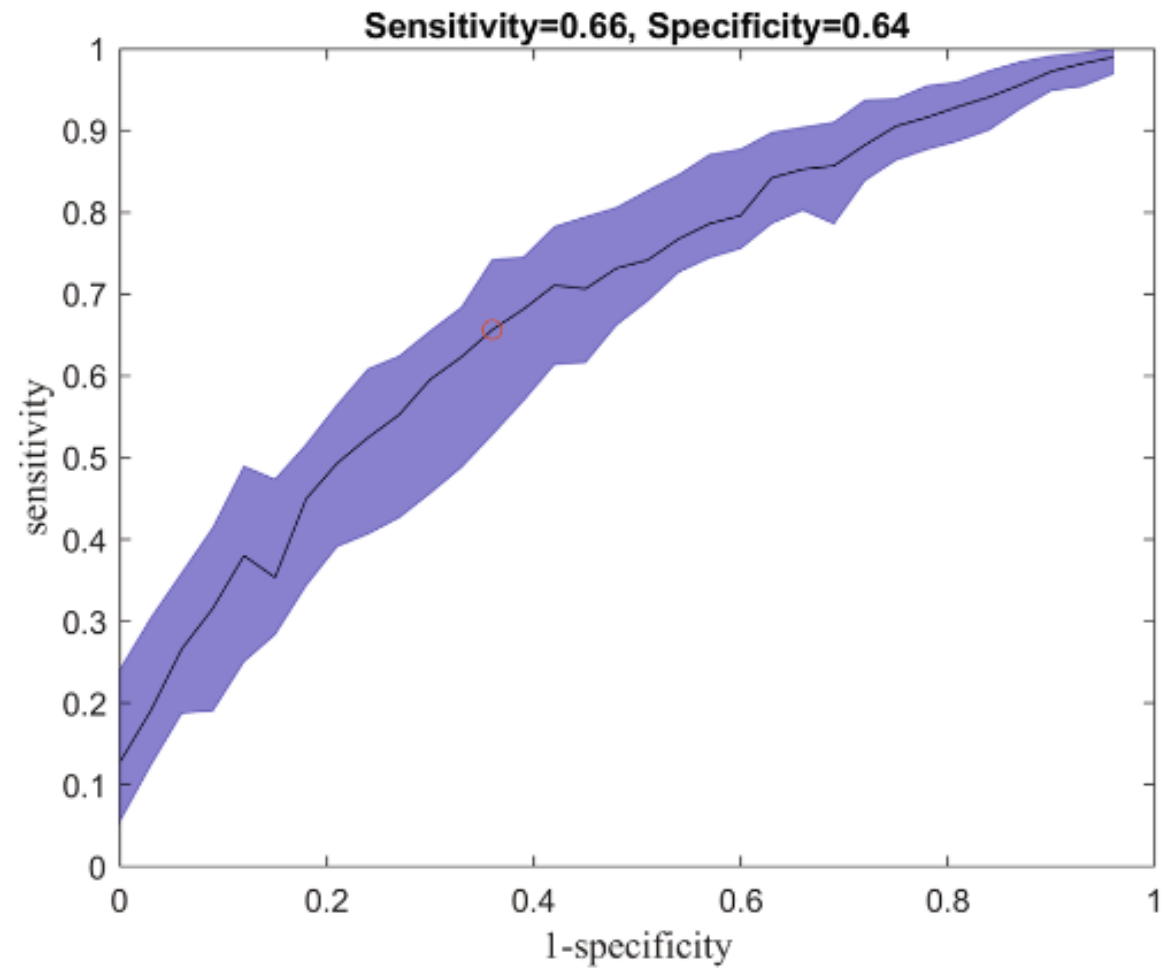


Fig. 5 Receiver operating characteristic (ROC) curve showing the sensitivity vs. 1-specificity for predicting if a pregnancy would pass the EDD. The area under the curve on average across the five folds was 0.71 with a sensitivity of 0.66 and specificity of 0.64.

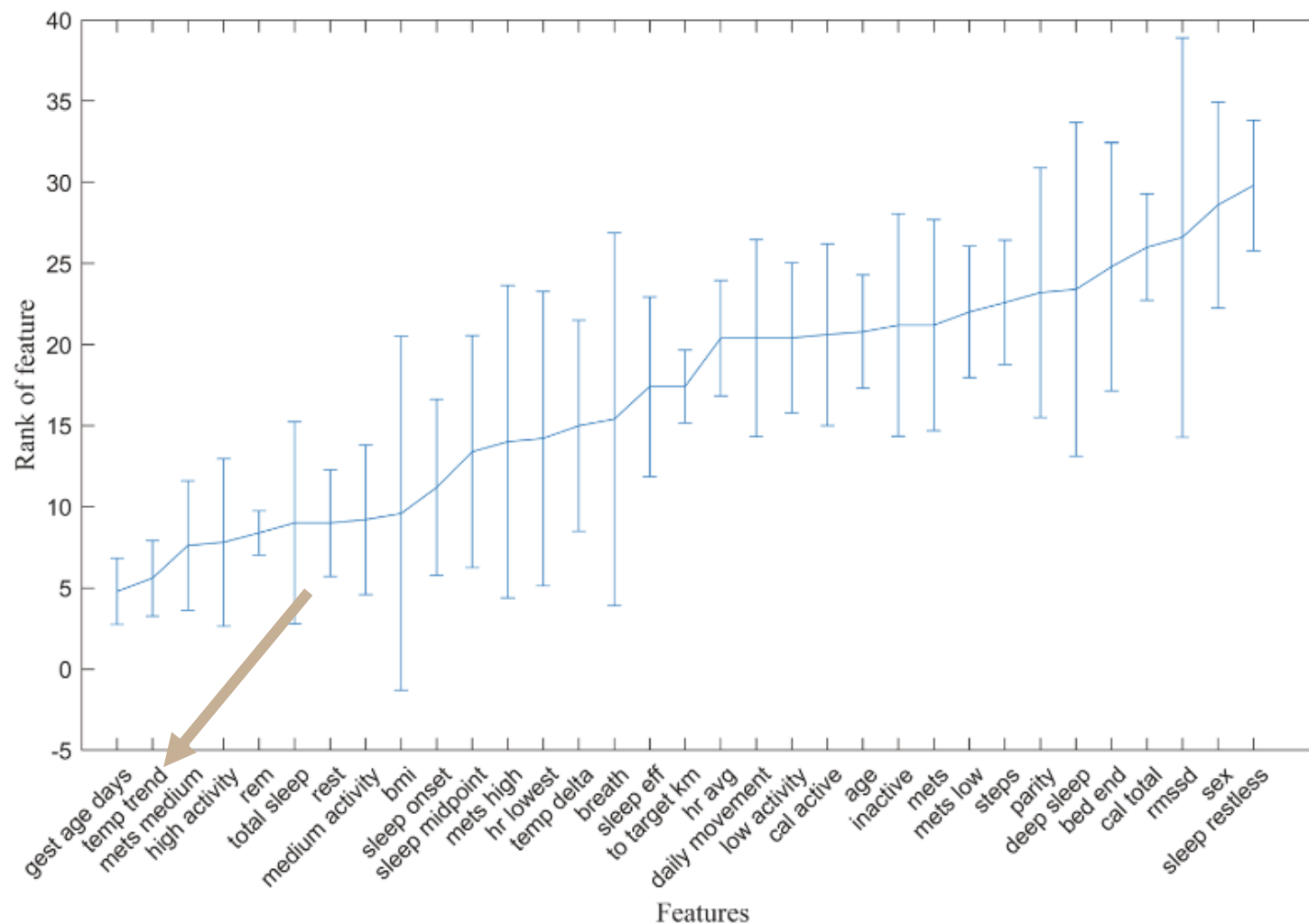
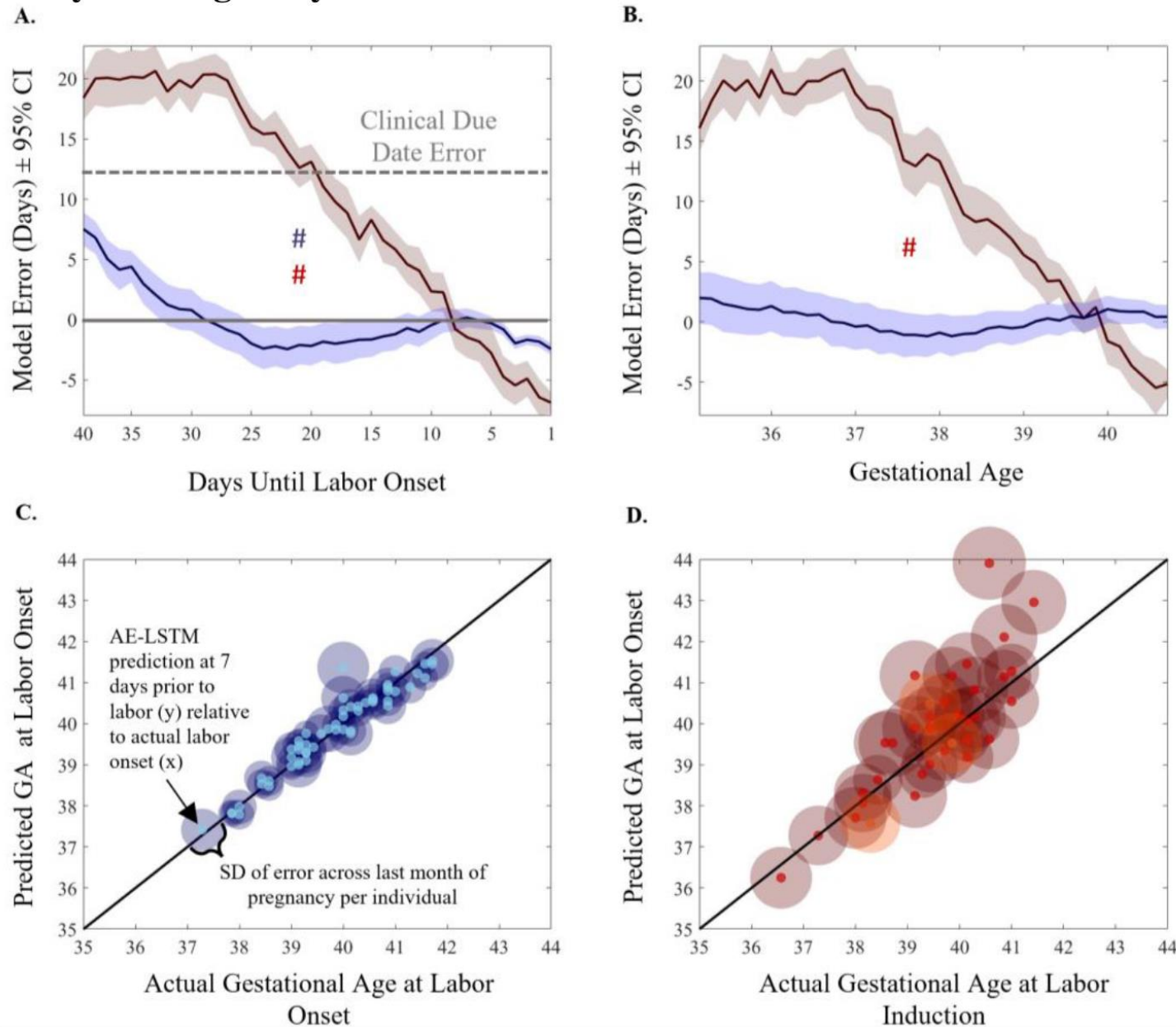


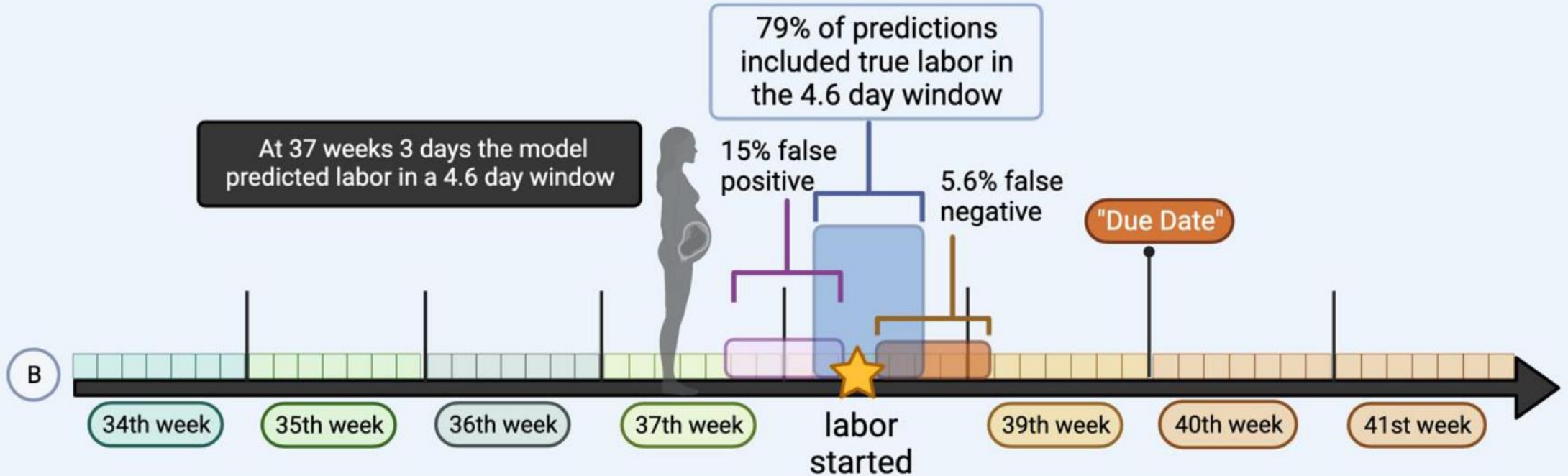
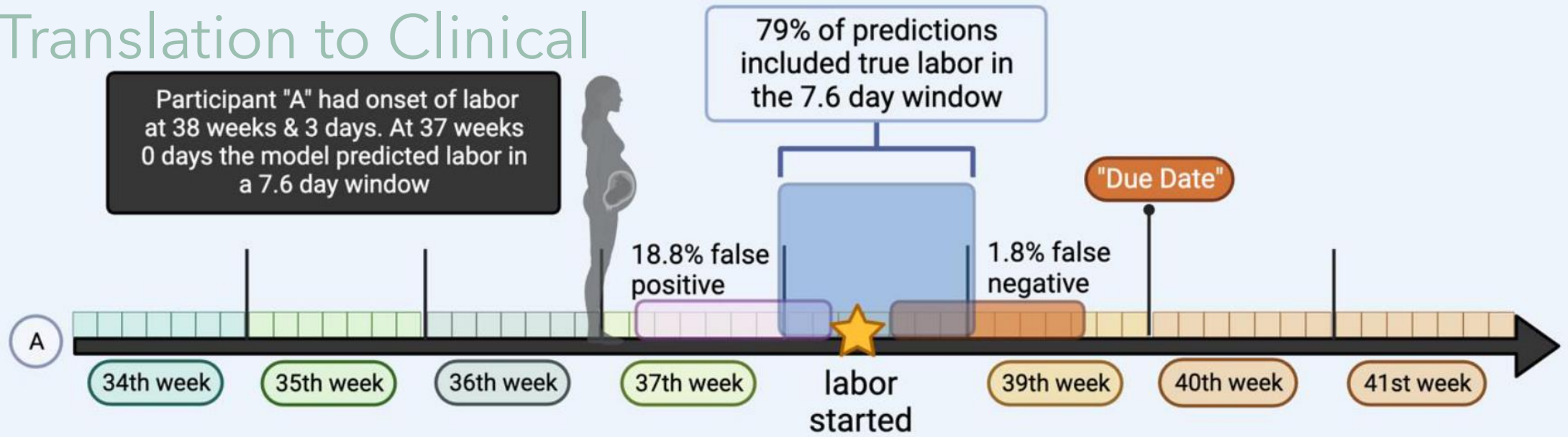
Fig. 4 Average predictive rank of features used in boosted random forest model across five runs. Features are shown based on their rank as determined by greedy search in predicting that a pregnancy would pass the EDD. The rank of the feature within the greedy search is shown on the y-axis while x-axis lists the features from left (best) to worst (right) based on the average of their rank across the five-fold cross validation. The error bars show the standard deviation of each feature's rank, indicating its consistency at that rank across the five folds.

AI/ML for predicting days until labor

Figure 6. AE-LSTM Predicts Spontaneous Labor Onset With < 2 Days of Error in the Last 8 Days of Pregnancy.



Translation to Clinical



Thank you, Team Science!

Study Participants & Funders!

Co-Investigators

Jason Karnes, PhD
Christopher Banek, PhD
Jessica Connelly, PhD
Rayna Gonzales, PhD
Shravan Aras, PhD
Chinmai Basavaraj, PhD
Azure Grant, PhD

Clinical Collaborators

Rachel Darché, MD
Steven Calvin, MD
Nick Lolli, MD
Serena Nuwar, MD

Research Coordinators

Hillary Ruvalcaba
Lily Woods
Erika Flores
Stephanie Najera
Fatima Palacios

Postdoctoral Fellow

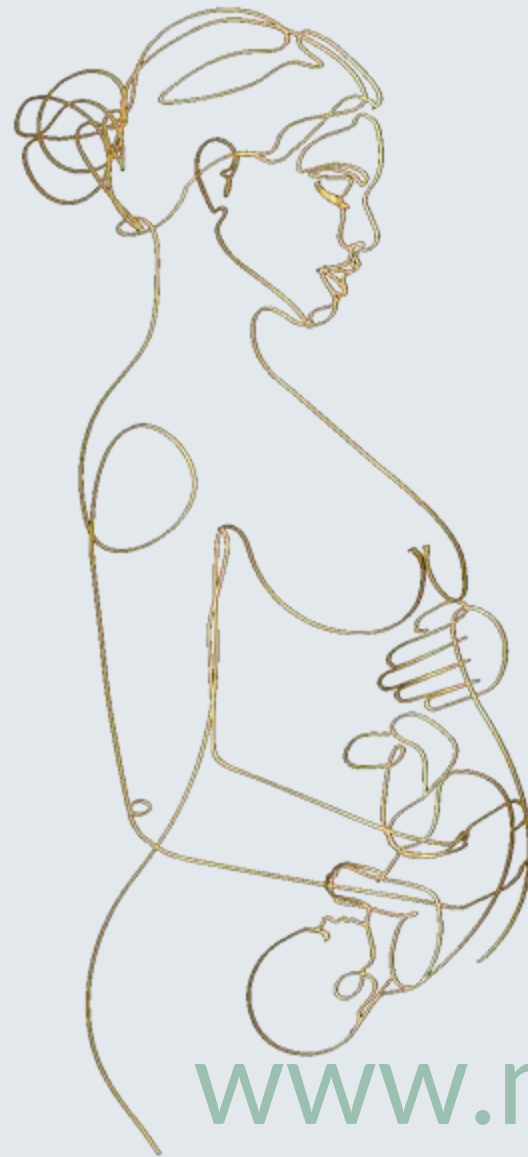
Erin George, PhD, CNM

Graduate Students

Meredith Jean-Baptiste, CNM
Stefanie Boyles, CNM
Sarah Weinstein, CNM
Natalia Leakos
Emily Harnois
Amanda Huff

Undergraduate Students

Jade Radoian
Desiree Riley
Taylor Ringling
Sydnee Wendel
Gisselle Vergara
RueShunda Jim
Thanh Hoang



www.mumhlab.com