Protocol for a Breastfeeding Support Intervention for Women with Hypertensive Disorders of Pregnancy: the sheMATTERS Trial

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For more information on the sheMATTERS study, click HERE

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Background:

- Hypertensive disorders of pregnancy (HDP) affect 5-10% pregnancies and are associated with increased risk for premature cardiovascular disease (CVD)¹.
- Although breastfeeding can lower blood pressure (BP) and other CV risk factors², women with HDP have lower rates of breastfeeding duration and exclusivity³.
- Tailored interventions to enhance maternal breastfeeding selfefficacy (BSE) can improve breastfeeding outcomes⁴, but have yet to be tested among women with HDP.

Objective:

 To assess the impact of a nurse-led breastfeeding self-efficacy intervention (BSEI) on BP and breastfeeding outcomes among women with HDP.

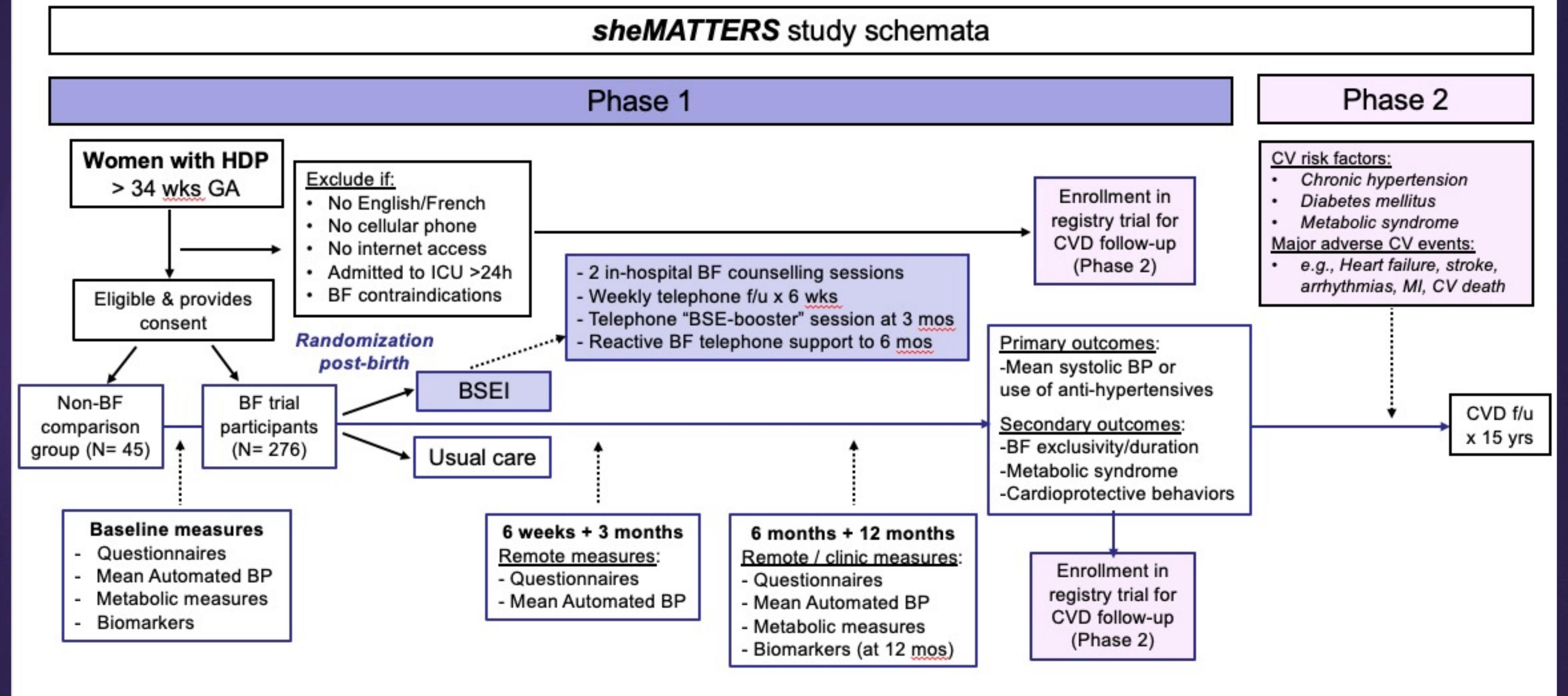
Methods:

- Multi-site, open-label, randomized-controlled trial (#NCT04580927)
- BSEI delivered by trained lactation consultants
- Data collection at baseline (post-partum hospitalization), 6 wks, 3 mos, 6 mos, 12 mos via electronic self-report questionnaires, physical measures, and medical record review
- 15-yr follow-up for CVD via health record data linkage

Conclusion:

 We expect that the BSEI will increase breastfeeding duration and exclusivity and improve CV outcomes among women with HDP.





Abbreviations: CV cardiovascular; CVD cardiovascular disease; BP blood pressure; BF breastfeeding; BSE breastfeeding self-efficacy; BSEI breastfeeding self-efficacy intervention; HDP Hypertensive disorders of pregnancy; GA gestational age; MI myocardial infarction

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