Poor Neighborhoods Linked to Heart Failure in New Black Mothers

Living in poor neighborhoods was associated with a 20% to 70% increased risk of developing a rare heart condition linked to pregnancy.

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Black mothers living in disadvantaged neighborhoods may have a higher risk of developing a rare form of heart failure, according to a new study published in the Journal of the American Heart Association.

Peripartum cardiomyopathy (PPCM), also known as postpartum cardiomyopathy, is an uncommon form of heart failure that occurs toward the end of pregnancy and up to five months following delivery, according to the American Heart Association (AHA). PPCM is characterized by reduced pumping ability of the heart and result in symptoms of heart failure, such as shortness of breath, fatigue, and swelling in the legs. PPCM is challenging to identify and often misdiagnosed. What's more, about 7% to 20% of U.S. mothers who develop PPCM do not survive.

Lead study author Curisa Tucker, PhD, RN, an assistant professor in the department of biobehavioral health and nursing science at the University of South Carolina, told The Conversation that her team aimed to identify factors that contribute to PPCM.

Tucker and her team examined the records of more than 7.3 million births that occurred in California between 1997 and 2019. Using a neighborhood deprivation index to measure socioeconomic disadvantage in a geographic area, the team linked hospital discharge and vital records information up to one year postpartum follow-up on each woman.

Living in poor neighborhoods with fewer resources was associated with a 20% to 70% increased risk of developing PPCM. What's more, women living in the most under-resourced neighborhoods with less access to healthy food, stable housing and quality health care had the highest risk.

While living in highly stressed neighborhoods was associated with high rates of PPCM in Black women, researchers found that Black women living in better neighborhoods were still more than three times as likely to develop the condition compared with others.

Many factors can contribute to the disproportionate impact of PPCM among Black women, including insurance gaps, limited access to care, transportation issues and health care provider bias. Chronic high blood pressure and neighborhood disinvestment also increase PPCM risk.

Tucker encourages policymakers to consider these factors when developing intervention methods for women at risk for PPCM and to redistribute resources and funding to prevent disparities in maternal health outcomes.

“My future work will focus on further identifying the key factors that influence peripartum cardiomyopathy risk, such as economic stability and the effects of environmental stressors, like pollution,” Tucker said.

To read more, click #Heart Failure or #Health Equity. There, you’ll find headlines such as “Heart Disease Remains Leading Cause of U.S. Deaths,” “Black Cancer Death Rates are Decreasing, but Disparities Still Persist” and “Black Americans More Willing to Join Clinical Trials With Diverse Leaders.”

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