



Perinatal Institute

march  of dimes®  
prematurity research center  

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Ohio Collaborative

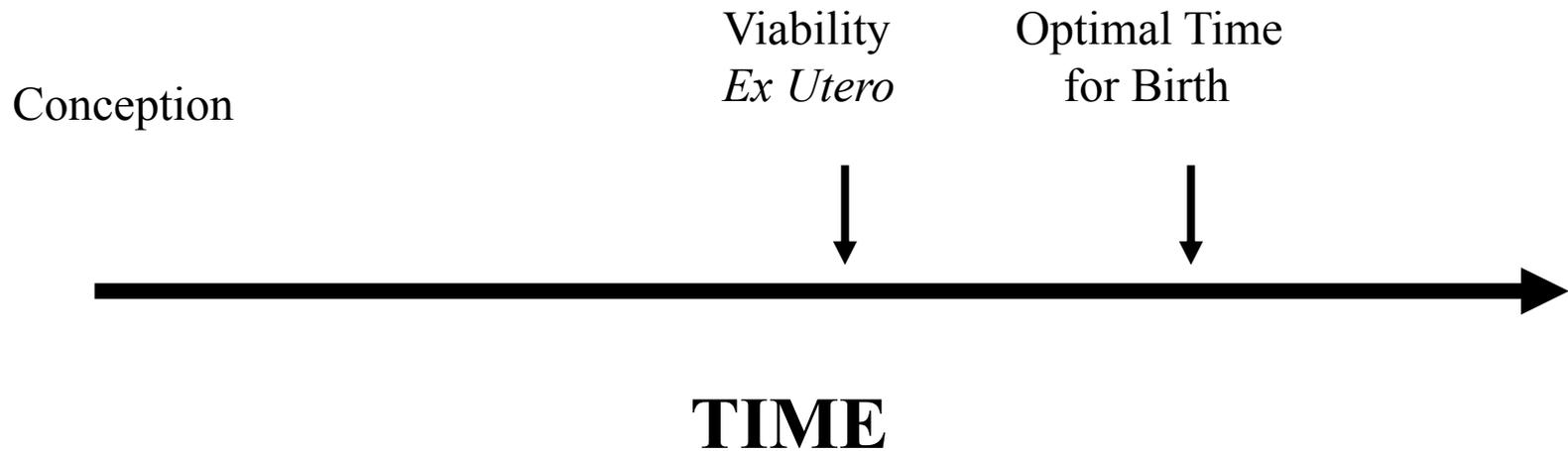
**Louis J. Muglia, MD PhD**, Coordinating Principal Investigator, Cincinnati Children's

**Charles Lockwood, MD**, Principal Investigator, Ohio State University Wexner Med Ctr

**Sam Mesiano, PhD**, Principal Investigator, Case Western Reserve University



# What determines the timing of birth?



# Many Factors Lead to Preterm Birth

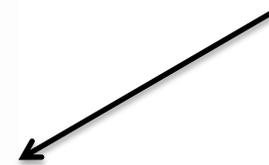
**Genetics**



**Infection/Inflammation**

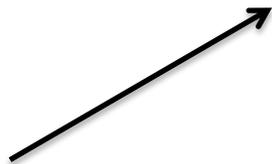


**Stress**



**PRETERM BIRTH**

**Nutrition**



**Health Behaviors**

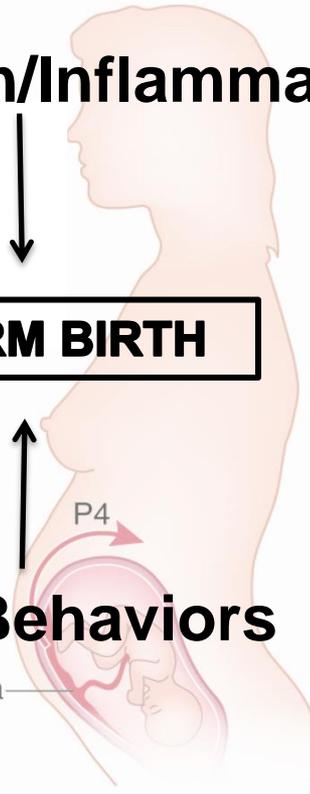


**Socioeconomic Influences**



Placenta

P4



# Cross Ohio Collaboration



 **CASE WESTERN RESERVE UNIVERSITY** EST. 1826

 **University Hospitals**  
Case Medical Center

 **MetroHealth**

 **UNIVERSITY OF CINCINNATI**

 **Cincinnati Children's**  
change the outcome®

 **THE OHIO STATE UNIVERSITY**

**Wexner Medical Center**

 **NATIONWIDE CHILDREN'S**  
*When your child needs a hospital, everything matters.™*

# Transdisciplinary and Trans-Institutional Collaboration

## Primary Institutions

- Cincinnati Children's
- University of Cincinnati College of Medicine
- University of Cincinnati McMicken College of Arts and Sciences
- The Ohio State University
- Nationwide Children's Hospital
- Case Western Reserve University
- University Hospitals Case Medical Center
- MetroHealth

## *Collaborating Investigators*

- Vanderbilt University
- University of Iowa
- Washington University in St. Louis
- Dartmouth

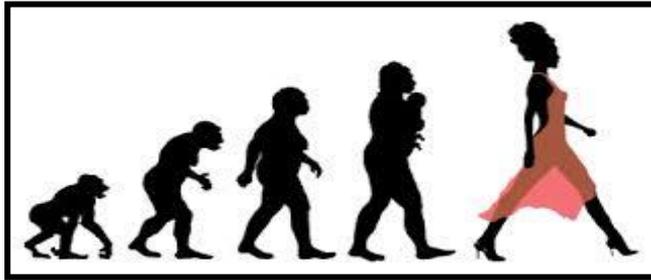
## Disciplines

- Anthropology
- Biological Sciences/Evolutionary Biology
- Biomedical Informatics
- Biostatistics/Epidemiology
- Cell Biology
- Developmental Biology
- Geography
- Health Policy
- Human Genetics
- Immunobiology
- Infectious Diseases
- Neonatology
- Neurology
- Obstetrics & Gynecology
- Nursing
- Pediatrics
- Psychology
- Reproductive Sciences
- Rheumatology
- Sociology

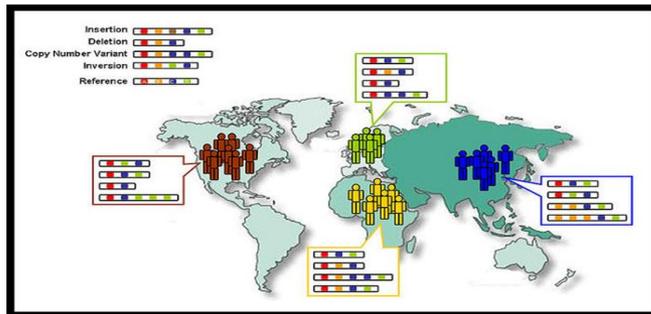
# Building Connections Across Centers and the Country



# Thematic Areas of Discovery and Innovation



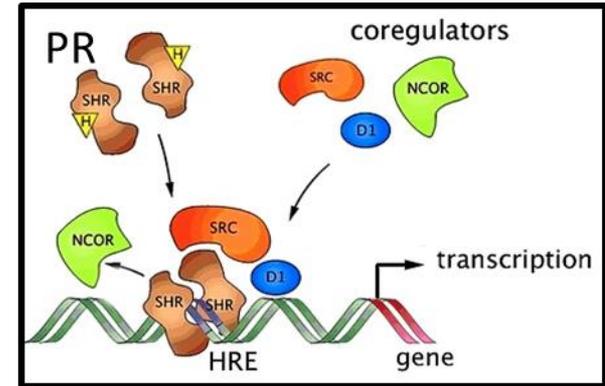
**Theme 1: Evolutionary Synthesis of Human Pregnancy**



**Theme 2: Genetics of Unique Human Populations**



**Theme 3: Molecular Developmental Biology of Pregnancy**



**Theme 4: Progesterone Signaling in Pregnancy Maintenance and Preterm Birth**

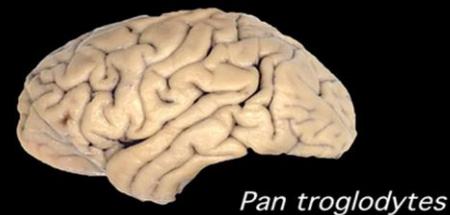
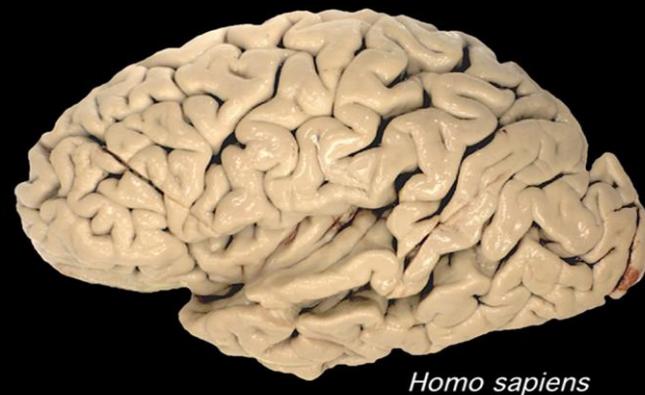
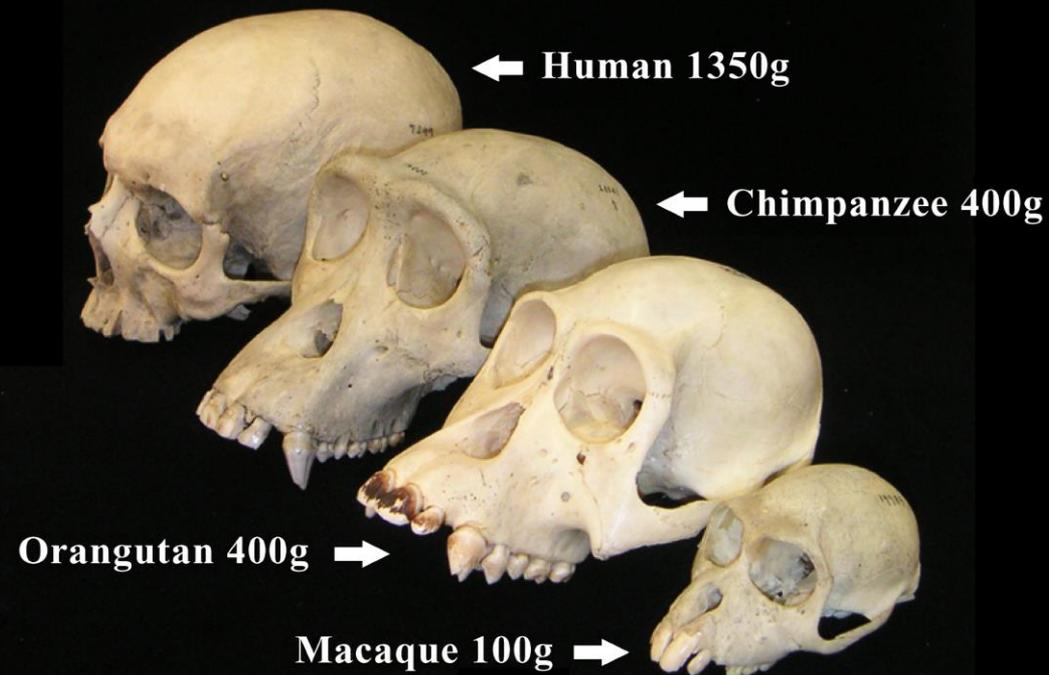


**Theme 5: Sociobiology of Racial Disparities in Preterm Birth**

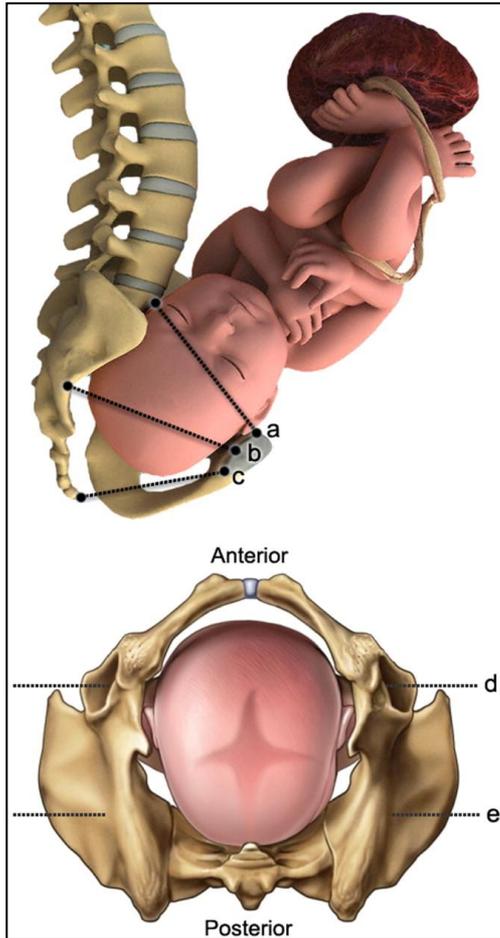
# Theme 1 – Evolutionary Synthesis of Human Pregnancy

- **Human pregnancy must accommodate specific adaptations**
  - Large head and relatively small birth canal
  - Bipedalism
- **Prediction: delivering the human fetus at a relatively earlier gestational age still mature enough for survival will be beneficial**
  - Humans will be relatively immature at birth compared to other primates
    - Dentition
    - Vision

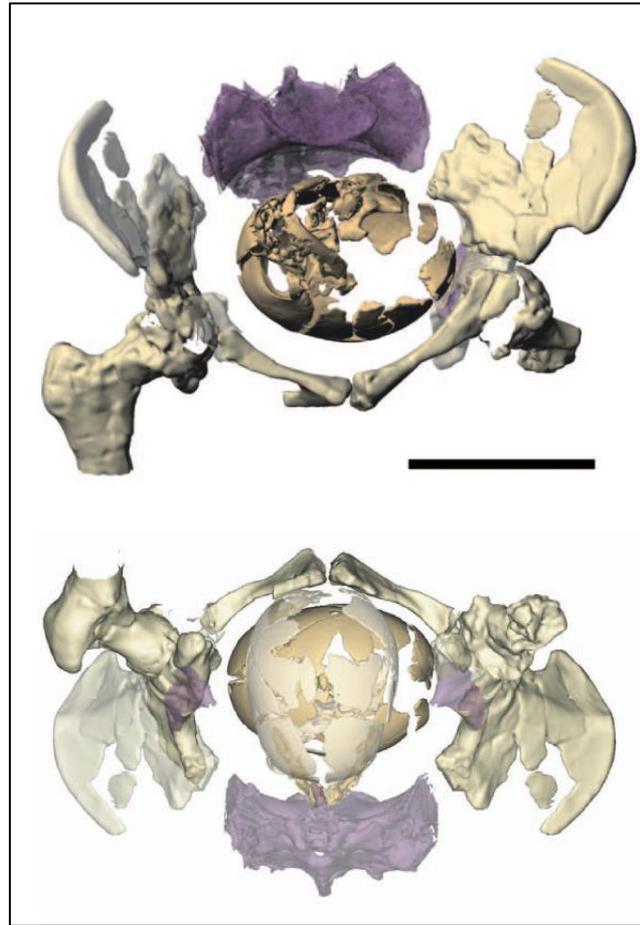
# Theme 1 - Becoming Human and Birth Timing



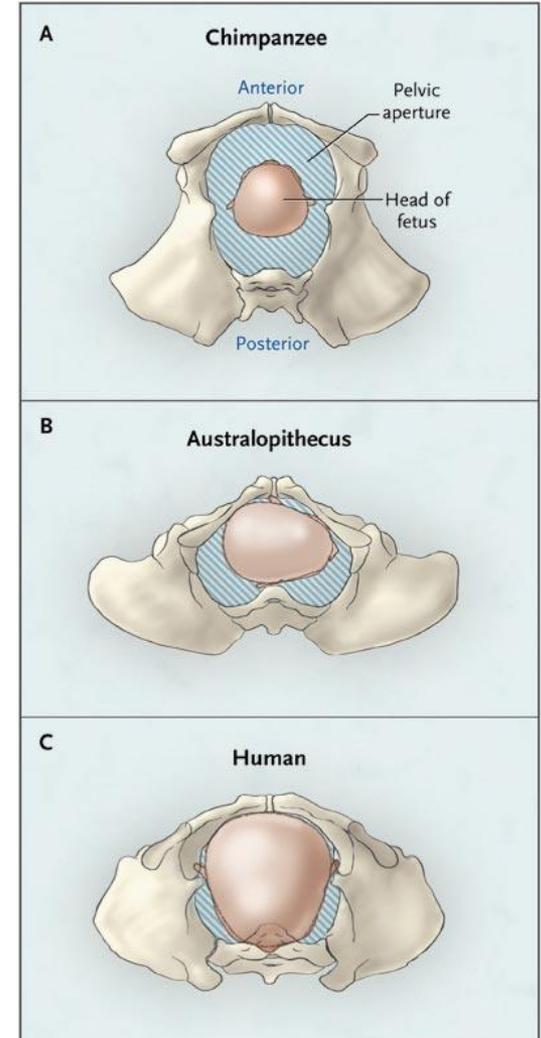
# Human Birth - What makes us different?



**Modern Humans**



**Neanderthals**





# ARTEMIS – An Evolutionary Encyclopedia of Preterm Birth

## *Existing knowledge and thematic contributions*

Genetic

Functional  
Data

Phenotype

Environment

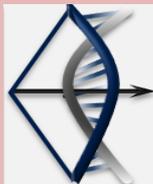
## *Analysis, research and prediction*

Evolutionary  
History

Pathways &  
Function

Phenotype  
Correlations

Environment  
Effects

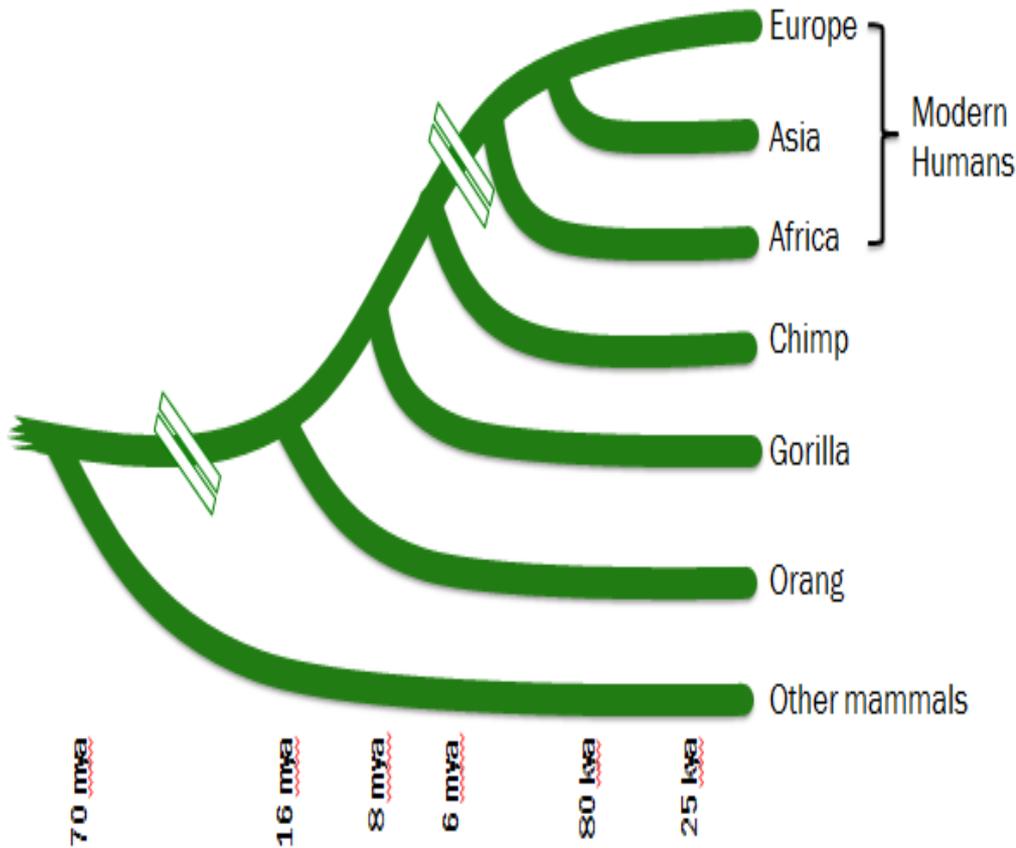


**ARTEMIS**

*The Evolutionary Encyclopedia of Pre-term Birth*

march  of dimes®

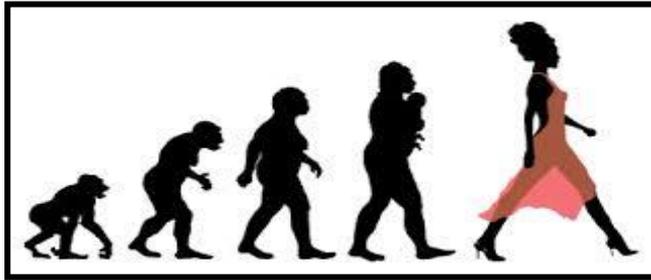
# Theme 2: The Genetics of Unique Human Populations



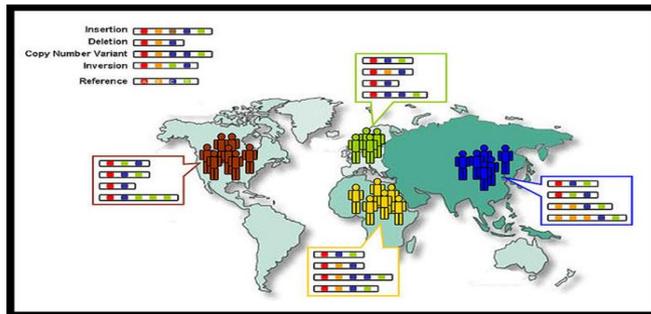
# Hypothesis

- Genetic variations that differ between different populations will be highly enriched for genes that affect the normal timing for birth and risk of preterm birth.

# Thematic Areas of Discovery and Innovation



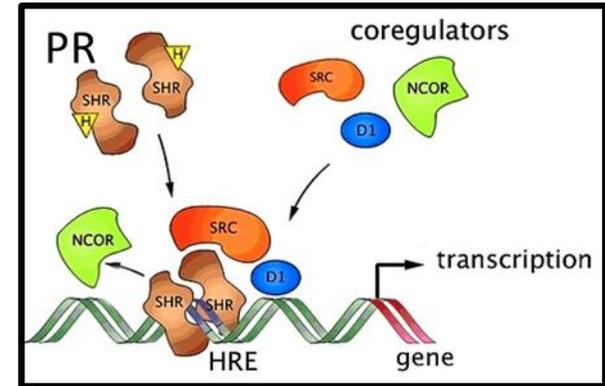
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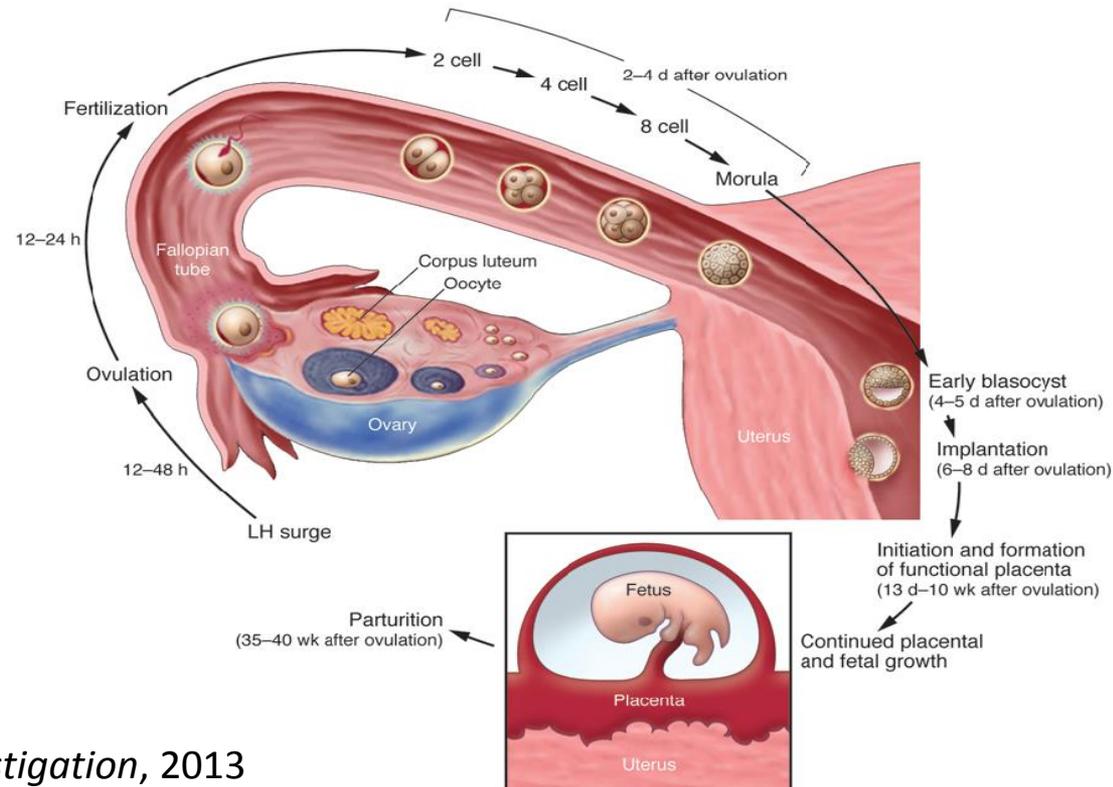
# Combinatory approaches prevent preterm birth profoundly exacerbated by gene-environment interactions

Jeeyeon Cha,<sup>1</sup> Amanda Bartos,<sup>1</sup> Mahiro Egashira,<sup>2</sup> Hirofumi Haraguchi,<sup>2</sup> Tomoko Saito-Fujita,<sup>2</sup> Emma Leishman,<sup>3</sup> Heather Bradshaw,<sup>3</sup> Sudhansu K. Dey,<sup>1</sup> and Yasushi Hirota<sup>1,2,4</sup>

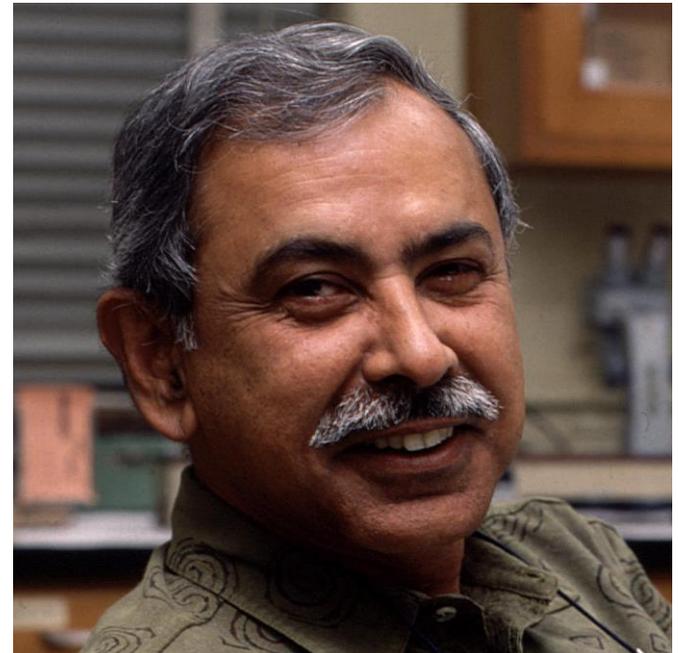
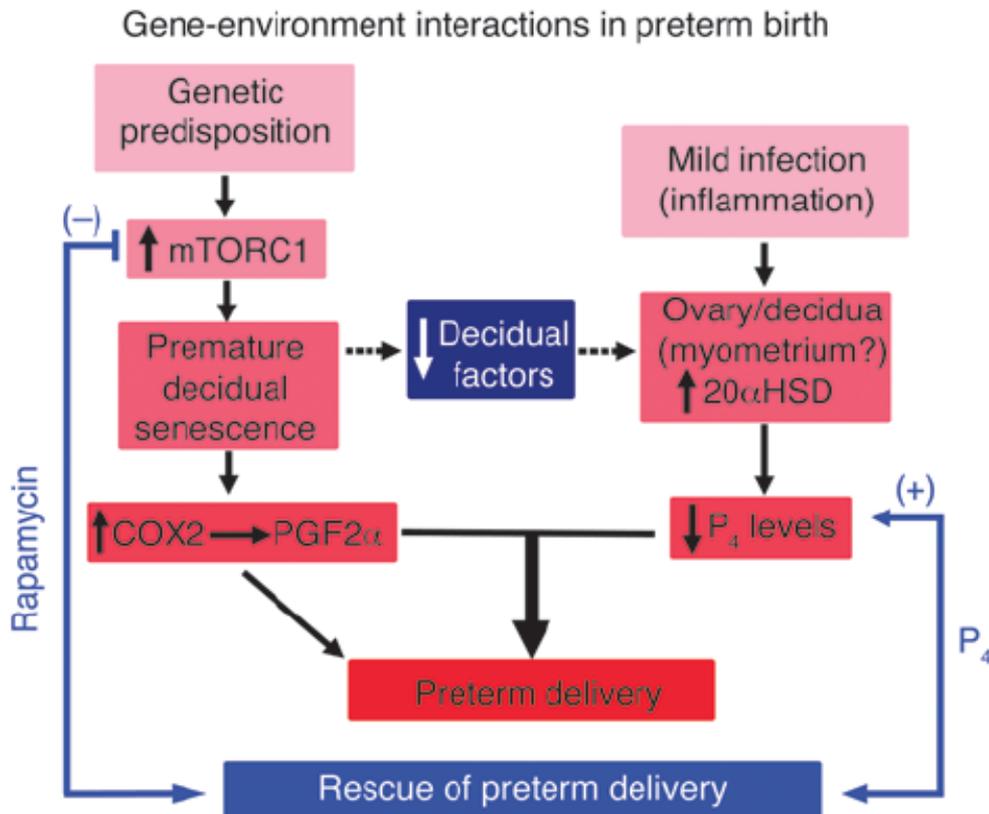
<sup>1</sup>Division of Reproductive Sciences, Perinatal Institute, Cincinnati Children's Research Foundation, Cincinnati, Ohio, USA.

<sup>2</sup>Department of Obstetrics and Gynecology, Graduate School of Medicine, University of Tokyo, Tokyo, Japan. <sup>3</sup>Department of Psychological and Brain Sciences, Kinsey Institute for Research in Sex, Gender, and Reproduction, Indiana University, Bloomington, Indiana, USA.

<sup>4</sup>Precursory Research for Embryonic Science and Technology (PRESTO), Japan Science and Technology Agency, Saitama, Japan.



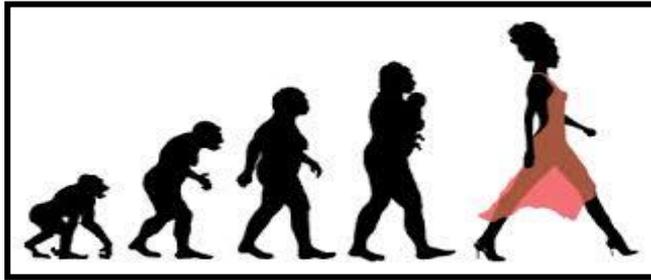
# Identification of Progesterone and Rapamycin as Potential Prevention Strategies



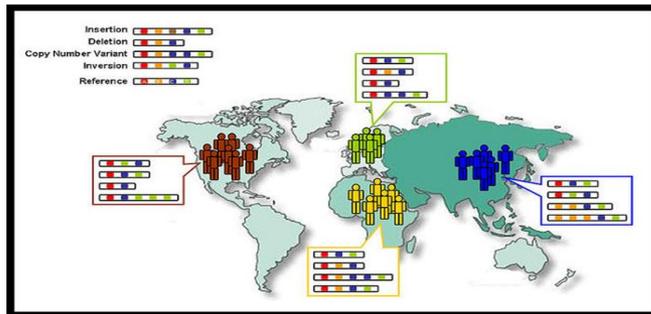
**SK Dey, PhD**

Cincinnati Children's, Univ. Cincinnati  
Theme 3 Leader

# Thematic Areas of Discovery and Innovation



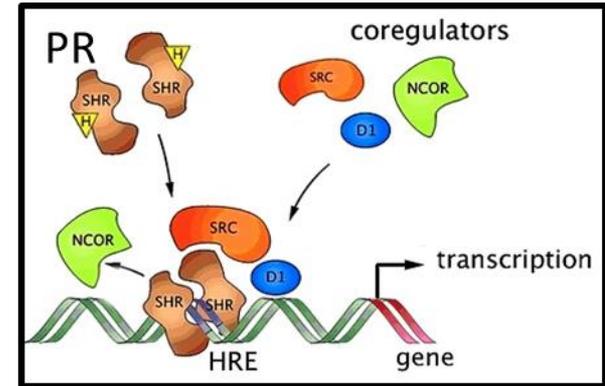
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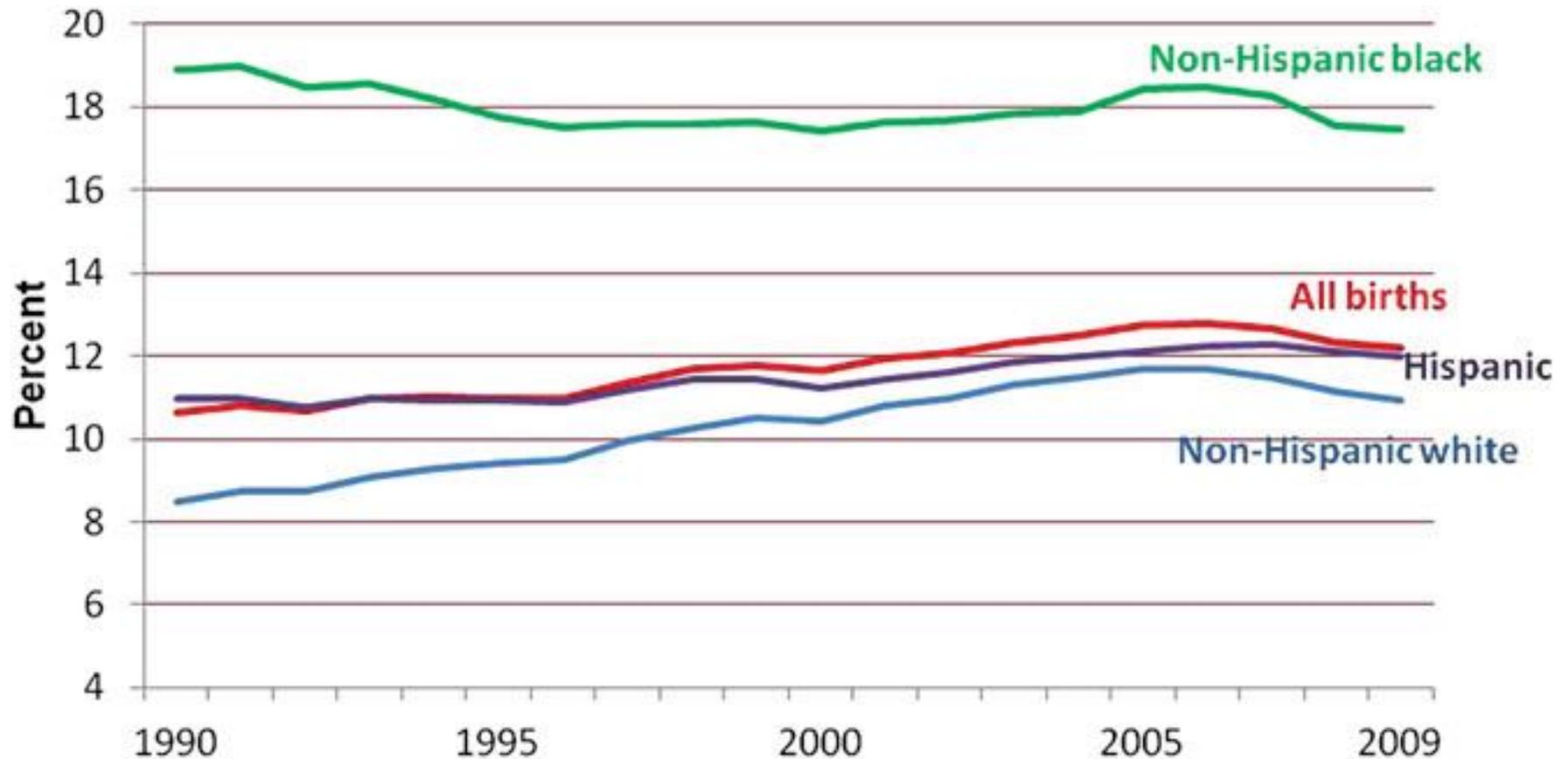


Theme 4: Progesterone Signaling in Pregnancy Maintenance and Preterm Birth



Theme 5: Sociobiology of Racial Disparities in Preterm Birth

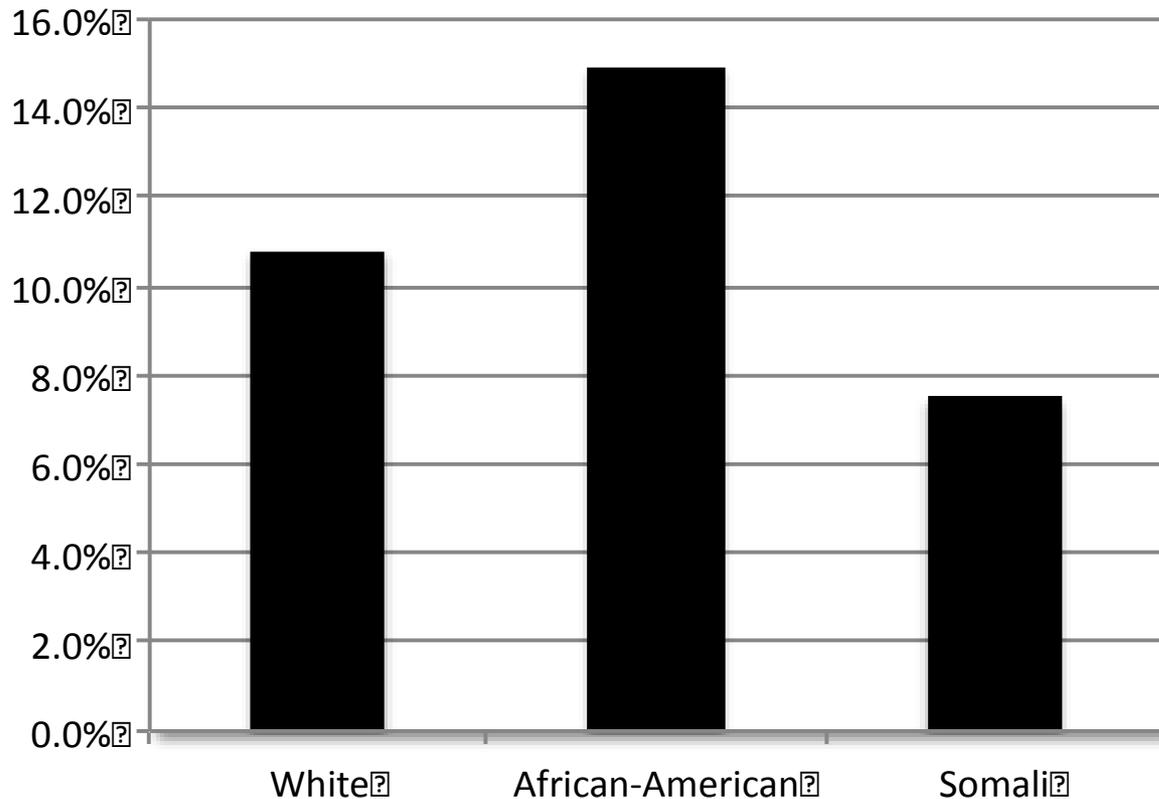
# Theme 5 – Sociobiology of Racial Disparities in Preterm Birth



*African Americans have about twice the rate of preterm birth of other racial and ethnic groups even after adjusting for other risk factors.*

# Theme 5 – Sociobiology of Racial Disparities in Preterm Birth

## The Paradox of Somali Pregnancy



**Irina Buhimschi, MD**  
Nationwide Children's, Ohio State Univ.  
Theme 5 Leader

# Theme 5 – Sociobiology of Racial Disparities in Preterm Birth

## The Paradox of Somali Pregnancy



# Learning from Unique Populations

## The Paradox of Somali Pregnancy

- Protective social environment?
- Distinct health behaviors?
- Nutritional differences?
- Differences in overall genetic make-up?



# *What do we see as the time line for real change in outcomes and prevention of prematurity?*

- Important new insights from laboratory and population studies over the next 1-2 years
- Preclinical testing to determine if safe and effective strategies have emerged over next 2-4 years
- Implementation of measures to reduce preterm birth over next 3-5 years