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Dear Supporter,

We are deep in summer, deep in our reflections on the World Cup, and as always, deep into our research. Here's your July brief.

Awards

Take an opportunity this month and next to look into our open awards and grants:

Our March of Dimes Discovery Grants, awarded to scientists proposing translational research in the field of maternal-fetal health, are up for grabs until September 8.

Our March of Dimes Agnes Higgins Award in Maternal-Fetal Nutrition, an annual award honoring a leading pregnancy and infant nutrition researcher,

educator, or clinician, is open for nominations until September 16.

And finally, we're accepting nominations for our achievement award, the March of Dimes Richard B. Johnston, Jr., MD Prize, until October 2.

Blog

This month's featured blog details research from a group of scientists, including several funded by March of Dimes, that has identified a new cell type linked with two of pregnancy's most dangerous complications: preeclampsia and placenta accreta. The new uterine cell type regulates the proper invasion of fetal cells into maternal uterine tissue during placental development. This invasion is a complex and important process that can either go perfectly, leading to proper placental attachment, or wrong in two opposite ways: attachment that is too shallow can lead to preeclampsia, while too deep attachment can lead to placenta accreta, a dangerous condition that carries a risk of excessive bleeding before and during delivery. Read more about how this new uterine cell type insight, as well as others from their paper, could lead to the development of prediction tools and drugs to combat adverse pregnancy outcomes.

Read more here.

Podcast

We've got a big MODCAST this month announcing a new Randomized Controlled Trial (RCT) at our Prematurity Research Center (PRC) at Stanford. The trial is testing two common over the counter drugs — lansoprazole, an acid reflux medication, and aspirin— as possible therapeutics to prevent spontaneous preterm birth. Dr. Brice Gaudillière, an investigator at the Stanford PRC and the scientist leading the global trial (sites will likely include the U.S., Africa, and South Asia), explains in this MODCAST a key technology powering the study: the 'digital twin' system that predicts a pregnant woman's reaction to a medication from a sample of her blood. One of the requirements to be enrolled in the trial is to be deemed a 'responder' to both medications by the digital twin. This is important, because the trial's purpose is to test whether

women at high risk of preterm birth who would respond to the medications have lower rates of preterm birth thanks to the medications compared to controls. The hypothesis is they will, because prior analyses have found the drug combination appears to dampen several key inflammatory pathways in preterm birth. Recruitment should start late this year or early next.

Listen to or watch our latest MODCAST.

Publications

Expanding vaginal microbiome pangenomes via a custom MIDAS database reveals *Lactobacillus crispatus* accessory genes associated with cervical dysplasia

HDAC inhibition sensitizes pancreatic tumors to DNA damage by global redistribution of the transcriptional machinery

Hyperemesis gravidarum and adverse pregnancy outcomes: a population-based cohort study of 2.5 million births in California

Neighborhood conditions and physical health, neurocognitive, and academic outcomes in youth with spina bifida

Resveratrol isomers with opposing activities target endonuclease G to modulate neurodegeneration and mitochondrial elimination

Nothing else for now. See you in August.

Dr. Emre Seli
Chief Scientific Advisor
March of Dimes

HEALTHY MOMS. STRONG BABIES.

MARCH OF DIMES

Donate now

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