Hypertension disorder in pregnancy, preeclampsia, affects about 1 in every 20 pregnancies globally and usually appears after 20 weeks of gestation. Taking low-dose aspirin can help prevent preeclampsia, but this prophylactic treatment is underused among high-risk patients. A communication gap between providers and patients is one likely cause examined in a recent study published in *JAMA Network Open*, which evaluated patient risks for preeclampsia and its treatment medication guidelines.

Specifically, University of Pittsburgh researchers examined if a prenatal care smartphone app can determine the causes underlying prophylactic low-dose aspirin underuse. About 2563 women seen in the University of Pittsburgh Medical Center system were invited to use the MyHealthyPregnancy app (Naima Health) between 23 September 2019 and 31 August 2020.

The app features tailored educational content, a fetal movement counter, a contraction timer, opportunities to document the pregnancy experience, and routine screenings for symptoms and psychosocial risks. According to user-documented information, it can connect with local health services, call 911 or the prenatal care practitioner, and notify the healthcare provider if critical health risks arise. Many of these features are integrated into Epic medical systems software for healthcare provider access. Preeclampsia risk was determined by answers to how participants answered high-risk criteria questions.

Of 411 patients with multiple risk factors surveyed through the app, only 46% received a recommendation for daily low-dose aspirin from their practitioner. Of the 124 patients with at least one high-risk factor, 27% don't recall receiving the advice for aspirin. Of 90 patients that received a recommendation as verified by their medical records, only 63% remembered receiving the advice. Collectively, this suggests frequent miscommunication between patients and healthcare providers about prophylactic low-dose aspirin.

The study’s authors conclude that mobile health tools can highlight earlier pregnant patients that may benefit from prophylactic aspirin and fill gaps caused by poor communication between the providers.
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