



Severe Hypertension in Pregnancy Safety Bundle

Our Call to Action

The Kansas Department of Health and Environment (KDHE) and the Kansas Perinatal Quality Collaborative (KPQC) are committed to improving maternal and infant outcomes in our state. Together, we are launching quality initiatives to reduce maternal and infant morbidity and mortality.

Addressing Maternal Hypertension Outcomes in Kansas

Data from the Kansas Maternal Mortality Review Committee (2016-2020) reveals that cardiovascular conditions and hypertension are the two leading causes of pregnancy-related deaths in Kansas. According to the 2022 Natality Report, preeclampsia ranks as the second-leading cause of Severe Maternal Morbidity (SMM) in Kansas.

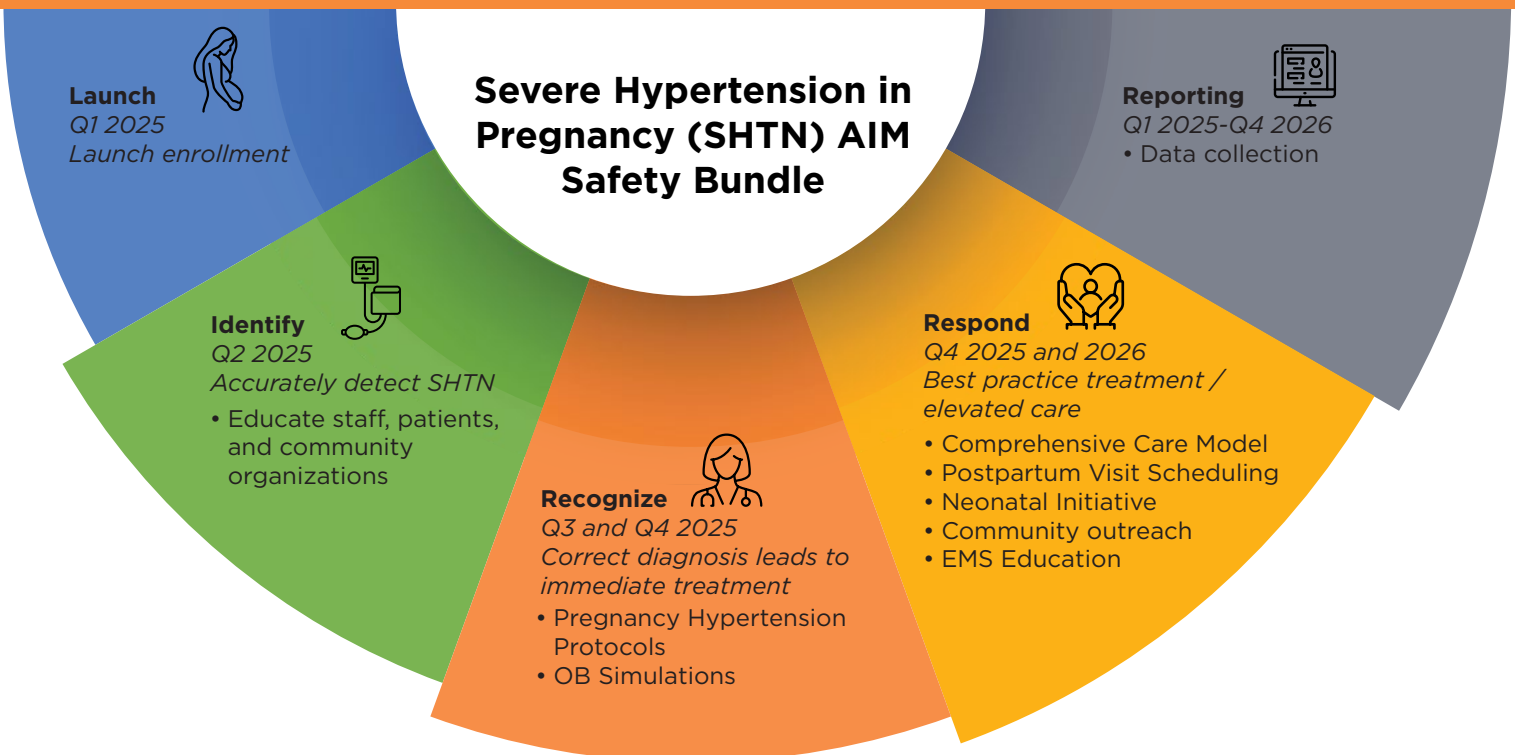
An intentional intervention to address severe hypertension in pregnancy and the postpartum period is needed. Beginning Jan. 2025, Kansas will enroll hospitals in the Alliance for Innovation on Maternal Health (AIM) Safety Bundle, [“Severe Hypertension in Pregnancy,”](#) as a statewide initiative to address this and other maternal adverse outcomes.

The Impact on the Newborn

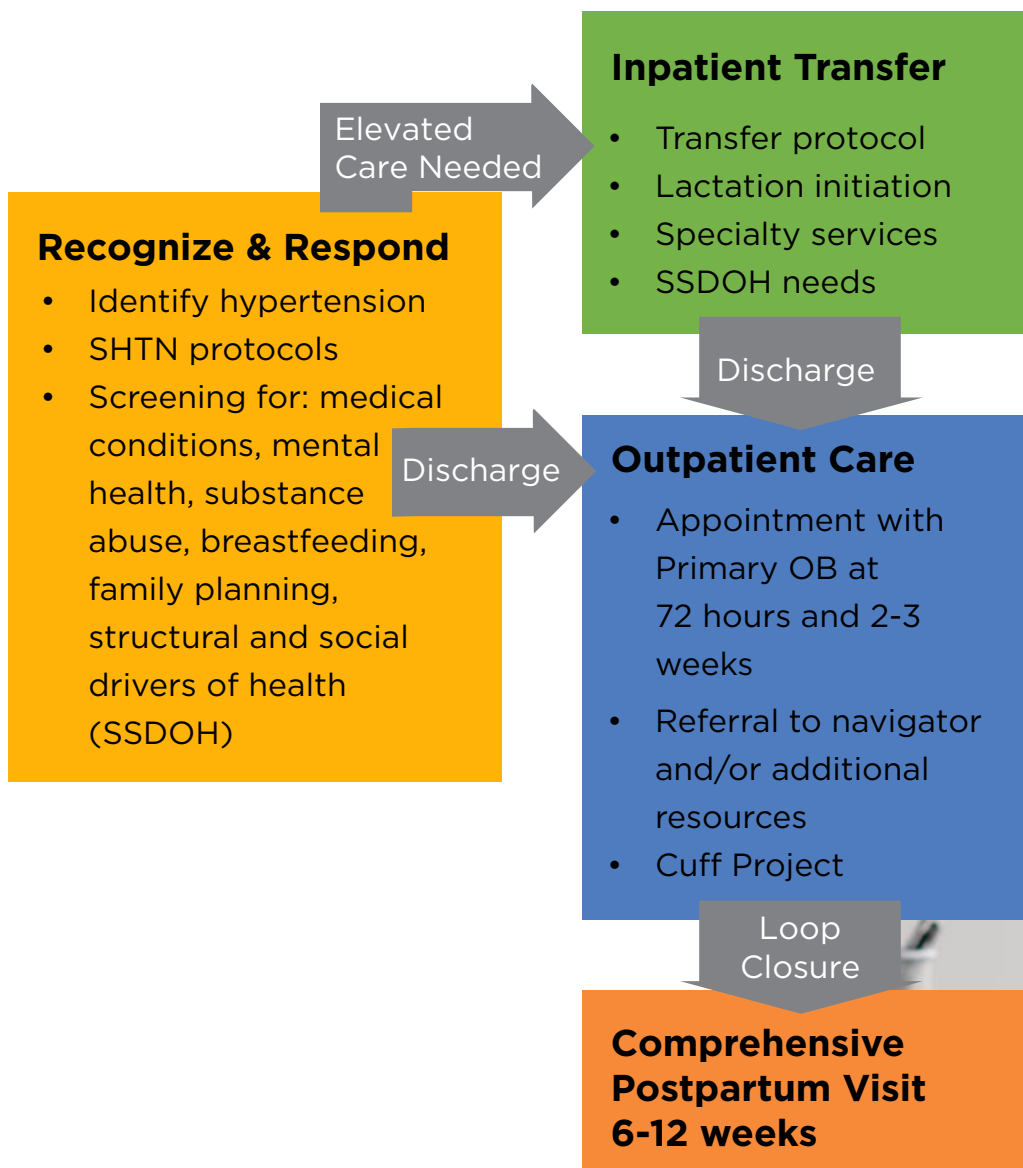
Maternal hypertensive disorders significantly increase the risk of preterm delivery. In 2022, 10.5% of infants were delivered preterm (<37 weeks) in Kansas. Breastmilk provides optimal nutrition and is an immune-boosting substance for preterm newborns. Premature newborns face higher health risks, making early maternal lactation a critical, evidence-based intervention to support neonatal well-being.

What's Next?

Addressing maternal hypertension is a crucial part of improving health outcomes for both mothers and infants in Kansas. Through collaboration, education, and evidence-based strategies, KDHE and the KPQC are working to create safer pregnancies and healthier futures for families in our state.



NEW: Severe Hypertension in Pregnancy Model for Kansas



For questions or to enroll, contact kari.smith@kansaspqc.org



To learn more, visit kansaspqc.org.

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