



COMMONWEALTH OF PENNSYLVANIA  
OFFICE OF THE PHYSICIAN GENERAL

March 16, 2022

Dear Pennsylvania hospital administrators, obstetricians, nurses, midwives, and doulas,

Thank you for your tremendous efforts to keep Pennsylvanians safe and healthy while providing quality care to your pregnant patients.

I am proud to announce that the Pennsylvania Maternal Mortality Review Committee (PA MMRC) has recently published [the 2021 Report](#). I strongly encourage maternal health providers to review the findings and recommendations from the report. The PA MMRC found that accidental poisonings, including drug-related overdose, was the top cause of maternal death in Pennsylvania, and made several recommendations to prevent accidental poisonings based on the deaths reviewed.

Following these findings, it is important to share a reminder to all that pregnancy is a great time to engage people in treatment for SUD and recovery. It is also important to continue supporting them into the postpartum period as this is a vulnerable and stressful time for parents. Studies have shown that many pregnant people who were in recovery during their pregnancy relapse postpartum. It is important that we continue to support pregnant people in the postpartum period and equip them and their family and friends with the ability to save their life if they relapse.

Additionally, two of the recommendations from the PA MMRC found the following strategies to be beneficial to preventing overdose deaths:

- 1) “Standardizing discharge plans for all hospital stays for pregnant and postpartum patients with OUD, or a prescription for an opioid, to include distribution or prescription for naloxone, instructions on how to use and where to get naloxone when needed,” within healthcare provider offices and hospital systems.
- 2) “Increasing community knowledge of naloxone, including information on procurement and instructions for use” for community-based organizations.

On February 22, 2022, I reissued Pennsylvania’s Naloxone Standing Order. The updated order was expanded to include an 8 mg naloxone nasal spray as more overdoses are occurring due to the presence of Fentanyl and higher doses of naloxone might be needed. The reduced availability of some brands of naloxone makes it harder for people to access. Expanding the order to include 8mg naloxone and generic brands as they come on the market will help to improve access.

I want to take this opportunity to engage maternal health providers in the use of naloxone, and the potential for it to save your patients’ lives. Please review the Department of Health’s website to learn more about [naloxone](#) and the [standing order](#). There is also a [training](#) video available to teach the public how to administer naloxone. Improving patients’ knowledge of naloxone, how to use it, and where to get it can save lives and reduce maternal mortality. I encourage patients to have it on hand for either themselves or a loved one who is either taking a prescription or misusing opioids.

While addressing maternal mortality, it is also important that we address maternal morbidities. One such morbidity on the rise is early syphilis in women of childbearing age and congenital syphilis in Pennsylvania. In 2010 there were 29 cases of early syphilis in females in Pennsylvania (excluding Philadelphia), which jumped to 211 cases in 2021. A similar increase has been seen in the resulting congenital syphilis cases. For many years there were no cases of congenital syphilis in Pennsylvania, including as recent as 2016, but in 2020 we saw eight cases. This alarming increase requires us all to take an active role in preventing, screening, and treating syphilis.

The department recommends that providers screen all pregnant people for syphilis at the first prenatal visit, third trimester, and delivery. To screen at appropriate times, it is also recommended that this screening cadence be integrated into the electronic medical records, so providers are prompted to screen. For the past several years, the department has alerted providers to this increase in syphilis and other STDs through the [PA Health Alert Network](#), most recently in [February of 2022](#). If you are not currently registered to receive these alerts, please [register](#) today. Additional information on testing and treating STDs, including syphilis, for all populations can be found online at the department's [STD program page](#). Healthcare providers needing additional information are asked to call the department's Division of TB/STD at 717-787-3981.

It is important that all pregnant patients in Pennsylvania receive quality care before, during and after childbirth, and that they are treated with dignity and respect. There are many techniques you can employ to improve your patient's experience and outcomes and [reduce stigma](#), including using [de-stigmatizing language](#), addressing implicit biases through [training](#), and strengthening your [clinical skills](#) to provide empathetic care.

As you know, addressing maternal mortality and morbidity is not only a priority for the Department and Governor Wolf, but also a deep personal passion of mine as well. By combining our efforts, we can achieve safe, respectful, empathic, and quality care for pregnant patients in Pennsylvania.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Denise A. Johnson'.

Denise A. Johnson, M.D., FACOG, FACHE  
Physician General