

## TALKING POINTS for ADVOCACY MEETINGS re: THE RIGHT TO MATERNAL HEALTH CARE

- **Introduce yourself**
  - Introduce yourself, explain where you are from, what you do, the kinds of patients you take care of, etc.
  - Thank the elected official and/or staffer for meeting with you.
  - Ask the person you are meeting with if he/she is familiar with hematology so you can gauge how to talk about the issues. If the staff person is not familiar with hematology, you can provide some examples of hematologic diseases/disorders and the patients you treat and major accomplishments of the field; if the staff person is familiar, you can briefly share some examples of exciting areas being explored and potential treatments and cures.
  
- **Indicate the issues you want to discuss:** Maternal health and hematology
  - I am here to discuss maternal health and hematology, and how the Supreme Court decision, *Dobbs v. Jackson Women's Health Organization*, which overturned *Roe v. Wade* may very well impact and impede the quality care and treatment that is in the best interest of our patients and their disease.
  - I am deeply concerned with how this decision, and trigger laws and legislation either pending or passed in nearly half the nation's 50 states, threatens the doctor-patient relationship and the ability of health care professionals, including hematologists, to provide medical care and counsel to their patients according to their training and ethical obligations.
  - I am especially concerned about [reference laws/legislation of concern in your state].
  - There is an urgent need to preserve the right to full reproductive and maternal health care services for patients with hematologic disorders, and to protect the confidential relationship between the patient and their physician.
  - Explain the connection between hematology and maternal health care (e.g. hemorrhage and venous thromboembolism (VTE), are two of the top five causes of death of pregnant women; postpartum hemorrhage is a leading cause of morbidity and mortality in the U.S.; women with blood cancer and women with sickle cell disease are at high risk of pregnancy related complications, including death).
  - Underscore the risks of hematologic complications of pregnancy for all women. Share the following points that support the right to maternal life and well-being:
    - Maternal health can be adversely impacted by hematologic diseases and disorders
    - Termination of a pregnancy is an important clinical consideration when the mother is at risk for serious health complications and/or death

- Access to evidence-based medical information and lifesaving medical options [procedures and treatments], including termination of a pregnancy, is a maternal right
    - Further, recognizing that those with cancer and other hematologic diseases and conditions may be faced with delaying pregnancy due to treatment for their disease, ASH strongly believes that no laws should be enacted that would prevent or prohibit patients' rights to retain their fertility through various fertility preservation measures, including in vitro fertilization, donation, or surrogacy services.
  - Share examples of clinical cases in hematology that underscore the diverse reasons that women may need access to medical abortion and demonstrate the right to maternal health in hematology:
    - Sickle Cell Disease (SCD) is a high-risk maternal condition. Some patients may not be able to safely continue pregnancy due to complications of SCD such as severe alloimmunization, strokes, or heart failure. In these cases, it is important for the hematologist to be able to discuss and to offer medically necessary termination of a pregnancy with the individual.
    - Individuals with SCD are at extremely high risk of hypertensive pregnancy complications (i.e. eclampsia). Such conditions may further worsen underlying kidney disease and lead to kidney failure, a leading cause of death in people with SCD. Termination of a pregnancy can help preserve kidney function and the life of the mother.
    - Blood cancers, such as acute leukemia or lymphoma are highly curable cancers. However, when they are diagnosed during pregnancy, these diseases represent a profound risk to maternal health. Chemotherapy given in the first trimester is associated with fetal abnormalities and pregnancy loss that poses a significant risk of life-threatening infection and/or hemorrhage to the mother. Termination of the pregnancy allows a woman to proceed with potentially lifesaving cancer therapy. For women with acute leukemia in the first trimester, termination of a pregnancy is recommended.
- **REQUEST** (*Note—this request will vary depending on the state or locality; please contact ASH staff for up-to-date information about what is going on in your state*):
  - **Oppose any laws and regulations that interfere in the confidential relationship between a patient and their physician and seek to inhibit clinicians' ability to secure healthy futures for patients and their families.**

OR
  - **Support laws and regulations that protect the confidential relationship between a patient and their physician and allows the clinicians' ability to secure healthy futures for patients and their families.**

OR

- **Support exceptions to restrictive laws that protect the life of the pregnant person.**
  - Name specific laws/legislation of concern in your state/region.
  - As a physician, I have dedicated my career and life to providing evidence-based care, delivered with quality, safety, integrity, and compassion.
  - Dangerous and ill-advised policies inhibit clinicians' ability to secure healthy futures for our patients and their families and irreparably compromise the patient-clinician relationship.
  - Health care professionals should never face civil, professional, or criminal penalties for caring for their patients.
  
- **Wrap up the meeting**
  - Summarize what you are asking for:
    - **Highlight action needed on specific laws/legislation of concern in your state/region that interferes with [or supports] the confidential relationship between a patient and their physician and seeks to inhibit [or allows the] clinicians' ability to secure healthy futures for patients and their families.**
    - **Remind them that:**
      - **Maternal health can be adversely impacted by hematologic diseases and disorders;**
      - **Termination of a pregnancy is an important clinical consideration when the pregnant person is at risk for serious health complications or death; and**
      - **Access to evidence-based medical information and lifesaving medical options [procedures and treatments] are a maternal right.**
  - Ask the person you are meeting with if he/she has any questions.
  - Invite the elected official to visit your institution. Let them know that you (and ASH) can be a resource!
  - Thank the person you are meeting for his/her time.