



# BLACK WOMEN'S HEALTH STUDY



*Working together  
to improve the health of  
Black women*

- NIH continues support of the BWHS
- Passing the baton: New BWHS leadership
- Research results: MGUS in the BWHS
- New research on irritable bowel syndrome

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# HAPPY NEW YEAR

We hope 2023 will be a good and healthy year for all of you, despite the continuing challenges brought on by the COVID pandemic. We hope you and your loved ones are coping well and that protection with vaccines and masks is readily available to you.

## BWHS LEADERSHIP: PASSING THE BATON

This newsletter focuses mostly on news about the future of the BWHS. The study has received renewed funding, and the leadership team has changed. One constant remains—the BWHS is the biggest and longest-running epidemiologic study of Black women ever conducted, and it is going strong, thanks to the dedication of BWHS participants.

**We'd like to connect with you more often and the most economical (and fastest) way is via email.**

Please be sure that we have your current email address so that we can update you on BWHS and other health news. Send us your email address at [bwhs@bu.edu](mailto:bwhs@bu.edu), or use the address update card on the back cover of this newsletter.



**BWHS Questionnaire Update.** BWHS participants will be asked to fill out a new health questionnaire in early 2024. Because of budget cuts from NIH, new questionnaires will go out every 3 years instead of every 2 years as in the past. We will keep in touch with newsletters and by email in the meantime.

### CONTACT INFORMATION

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Additional copies of this newsletter are available on request.

## LOOKING AHEAD



*Women Who Look Ahead, Monica Stewart*

We are happy to share the news that the Black Women’s Health Study has received funding from the National Institutes of Health (NIH) to continue for another five years. The BWHS has now been funded continuously since it began more than 25 years ago. The renewed funding supports “infrastructure”—

the sort of work that keeps the study going. The funds pay the expenses for creating questionnaires and newsletters; mailing costs for questionnaires, newsletters, and medical records; costs of obtaining data from public and private sources such as the National Death Index, state cancer registries, Medicare files, and hospitals; storage of biospecimens such as blood and tissue samples; the salaries of the staff who carry out all of these activities; and the necessary computers, telephones, and other hardware needed to do the work.

The grant from NIH does not support scientific analyses based on the data, such as the scientific results we report in medical journals. Funding for that research comes from additional grants from NIH, foundations (such as the research described on page 7 of this newsletter), and various other institutions, through a competitive process. An investigator submits a written proposal to one of those institutions explaining the importance and the methods of their proposed analysis of BWHS data; a review committee of experts considers the proposal along with proposals from many other investigators and gives each proposal a score, reflecting how good they judge the research to be and how likely it is that it will produce useful information for disease prevention or better treatments of disease. Only a small proportion of grant proposals are funded.

The renewed funding by the NIH is a vote of confidence in the BWHS and in the importance of continuing to collect data for studies of disease and wellness in Black women. The BWHS is remarkable in the commitment of its thousands of participants, who continue to complete health surveys, provide biologic samples, allow access to their medical records, send in good ideas for research, and cheer on the investigators and staff with their supportive letters and emails.

## A CHANGE IN BWHS LEADERSHIP

As the new five-year BWHS grant begins, there will be a change in the leadership of the BWHS. Dr. Lynn Rosenberg, an initiator of the BWHS in 1995 and a leader of the study since then, is stepping down from that role. She had already been a leading epidemiologist in the field of women's health when the BWHS began, and since then she has devoted all of her research efforts to addressing health conditions that disproportionately affect Black women. She has developed research programs on ovarian cancer, lupus, and sleep. Most recently, she has begun a study of Alzheimer's disease in the BWHS. She has helped early-stage investigators to develop their own research programs in areas such as uterine fibroids, sarcoidosis, and cardiovascular diseases and she will continue to mentor new investigators. Dr. Rosenberg will continue to conduct research in the BWHS, which currently includes studying Alzheimer's disease and developing a prediction model for lung cancer.

Dr. Lucile Adams-Campbell of the Georgetown University Lombardi Cancer Center is also stepping down from her role in the study. Dr. Adams-Campbell, who was director of the Howard University Cancer Center when the BWHS began, has participated in guiding research directions for the BWHS since then. She also carried out important research that demonstrated the accuracy of reports by BWHS participants, such as a study in which her findings showed that participants accurately report their weight and height as well as their physical activity. This information has supported the many studies in the BWHS of how body size and physical activity affect the risk of various illnesses. Dr. Adams-Campbell will now devote her full attention to the research programs she has established at Georgetown University, with a focus on clinical trials and lifestyle interventions.



The new leadership team of the BWHS consists of Dr. Julie Palmer, who will continue as a principal investigator, joined by two of her BWHS colleagues, Dr. Yvette Cozier and Dr. Kimberly Bertrand. Dr. Palmer is a Professor at Boston University while both Drs. Cozier and Bertrand are Associate Professors. They are highly regarded scientists, well-positioned to lead the BWHS into the future.

## INTRODUCING THE NEW LEADERSHIP TEAM



The research of **Dr. Julie Palmer** focuses on understanding the complex factors that lead to triple-negative breast cancer in Black women. She is also developing risk prediction tools that can be used to identify women who are at highest risk so that they can have access to breast cancer screening regardless of age. In 2017, she was honored by the largest cancer research organization, the American Association for Cancer Research, for her accomplishments in reducing cancer health disparities. Dr. Palmer has previously

led BWHS research on risk factors for diabetes and is currently mentoring investigators who are beginning BWHS research on heart disease and stroke.



**Dr. Yvette Cozier** joined the BWHS as a research coordinator when the study first began in 1995. While working on the study, she completed her doctoral degree, established her own research program as a faculty member, and became the Associate Dean for Diversity, Equity, Inclusion, and Justice at the Boston University School of Public Health. She has expertise in the area of social epidemiology—studying how factors outside the individual, like neighborhood disadvantage, can affect health. She has initiated

BWHS research on understudied diseases such as lupus, sarcoidosis, Parkinson's Disease, and inflammatory bowel disease (IBD).



**Dr. Kimberly Bertrand** was a faculty member at Harvard Medical School when she was recruited to the BWHS to expand our program in cancer research. Dr. Bertrand is leading efforts to understand how information from mammograms can be used for earlier detection of breast cancer in Black women. She is also conducting research on uterine cancer and multiple myeloma, cancers that disproportionately burden Black women.

# STUDYING MGUS IN THE BWHS

Black Americans are more than twice as likely as White Americans to develop multiple myeloma, a rare cancer of the white blood cells. They are also at higher risk of a more common condition that occurs before myeloma, called monoclonal gammopathy of undetermined significance (MGUS). While MGUS may in rare instances progress to myeloma, it is considered a benign condition that does not require treatment. Previous studies have estimated that MGUS occurs in 3 to 4% of Black women ages 50 and older, but these estimates were from small studies carried out many years ago. To get a recent estimate, we examined blood samples collected from 1706 BWHS participants ages 50-79 during the BWHS blood collection effort in 2014-2017. MGUS was found in 9% of the samples examined, higher than the estimates from earlier studies. Ongoing BWHS research seeks to identify factors that might explain the high rates of MGUS in Black women. More information about MGUS can be found at <https://www.mayoclinic.org/diseases-conditions/mgus/symptoms-causes/syc-20352362>.

## Prevalence of monoclonal gammopathy of undetermined significance (MGUS) in US Black women

Bertrand KA, Zirpoli G, Niharika Pillalamarri B, Szalat R, Palmer JR, Kataria, Y  
Slope Epidemiology Center at Boston University and Boston University School of Medicine, Boston, MA

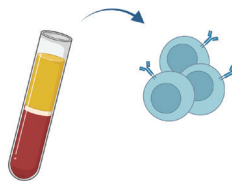
### Study Population

1706 participants ages 50-79 from the Black Women's Health Study



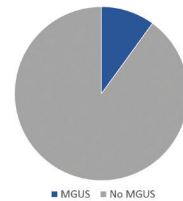
### Methods

Serum protein electrophoresis and immunofixation to identify MGUS



### Results

162 cases were identified; Age-adjusted prevalence of MGUS was 9.0% (95% CI: 7.6, 10.4)



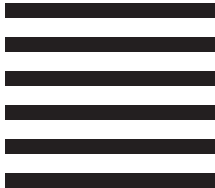
# A NEW BWHS STUDY: IBD

Inflammatory bowel disease (IBD), including ulcerative colitis and Crohn's disease, are inflammatory diseases of the gastrointestinal tract. Approximately three million individuals in the United States are living with IBD. Since 2001, the occurrence of IBD has increased steadily in some populations, including Black Americans, but most research to date has focused on White populations in the US and Europe. Little is known about the epidemiology and disease characteristics of IBD in Black individuals. The limited available data suggest that IBD among minority populations is more severe and more likely to require surgical intervention. Dr. Yvette Cozier in collaboration with researchers at Massachusetts General Hospital in Boston has received funding from the Crohn's and Colitis Foundation to study IBD in the BWHS.

**Are you interested in other BWHS research studies and findings? If so, you can go to [www.bu.edu/bwhs/research/publications](http://www.bu.edu/bwhs/research/publications). There you will find brief descriptions of the results of all published BWHS papers. At the time of the printing of this newsletter, there are currently 343 BWHS publications.**



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