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"It just seems like people are talking about menopause, but nobody has a solution": A qualitative exploration of menopause experiences and preferences for weight management among Black women

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OBJECTIVES/GOALS: A qualitative study was performed to characterize experiences of Black and White women going through menopause, as well as identify barriers and facilitators for participating in a lifestyle program targeting weight management during menopause. This abstract includes data from Black women. Results from White women will be available by ACTS 2022. METHODS/STUDY POPULATION: Perimenopausal and postmenopausal Black women with a self-reported desire to lose or maintain weight during menopause participated in a total of six focus groups. Women were asked about their past experiences with diet, exercise, and weight management; their menopause experiences; as well as specific components and considerations for developing a lifestyle program for weight management. Thematic analysis was conducted on coded transcripts and four main themes emerged, each containing three to seven subthemes. RESULTS/ANTICIPATED RESULTS: Twenty-seven Black women (age 54±4 years, BMI 35.1±9.0 kg/m2) were enrolled. Overall, women felt unprepared for the changes they experienced during menopause and had difficulty maintaining or losing weight. While women were receptive to trying different diets and exercises, they wanted a diet that was flexible with their lifestyle and exercises that considered their existing health status. Women were also interested in learning about menopause alongside other women, stating that medical professionals did not provide them with adequate information or help. Social support, accountability, and seeing results were perceived critical to achieve long-lasting behavioral change. DISCUSSION/SIGNIFICANCE: Women were interested in receiving menopause information and improving their overall health as part of a lifestyle program during menopause. Associating with other women affected by menopause will allow for the creation of more sustainable lifestyle programs during menopause.

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A Knowledge Chasm: Preoperative Mental Illness Impact on New Onset Postoperative Atrial Fibrillation

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OBJECTIVES/GOALS: To date, no reviews have been published combining the topics of pre-operative mental illness and postoperative atrial fibrillation (POAF). For adult cardiac surgical procedures, therefore, this scoping review provides an overview of the published evidence for this novel topic. METHODS/STUDY POPULATION: A combination of MESH terms and text words were used to capture all papers analyzing any risk factors for atrial fibrillation development after any cardiovascular surgery, and thus, 4,203 search results were initially identified. Papers were manually screened for relevance, resulting in 69 articles that analyzed risk factors associated with POAF. As a separate analytical step, all included publications were used to identify additional citations and Web of Science PubMed identification number-based (i.e., PMID) specific

backwards citation searches were performed to ensure comprehensive coverage. For each of the three articles analyzed, moreover, these PMIDs were further evaluated using individual google scholar searches to assure no other relevant literature was inadvertently found. RESULTS/ANTICIPATED RESULTS: For the 69 relevant articles found with multivariable risk models predicting new onset POAF during this scoping review, a wide variety of patient risk factors were reported. The statistically significant predictors reported for new POAF included age (57 papers), hypertension (22 papers), tobacco use (15 papers), LVEF-related characteristics (14 papers), COPD (13 papers), and patient gender (13 papers). All other factors were found to be significant 10 times or fewer; importantly, no multivariable models evaluated mental illness-related factors as predictors of new onset POAF. Only 3 articles even considered the potential influence of mental illnesses. DISCUSSION/SIGNIFICANCE: Mentally ill patients have been documented to have increased incidence of cardiovascular disease and adverse cardiac outcomes, however, very few articles evaluated mental illness associations with POAF. This comprehensive review has demonstrated the urgent need for new research focused on mental illness impacts.

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Follow-up for Evaluation for Nerve Repair Surgery: The Role of Socioeconomic and Geographic Factors in Victims of Violent Nerve Injury

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OBJECTIVES/GOALS: We have created the first-ever database for all patients who have acute peripheral nerve injuries. Our goal is to use this data to construct two clinical scoring systems to facilitate triaging by emergency room physicians by 1.) identifying patients who would likely benefit from a nerve surgery, and 2.) identify patients who are less likely to follow up. METHODS/STUDY POPULATION: Based on 2,606 consult emails from the Washington University in St. Louiss Division of Plastic and Reconstructive Surgery, from 2013 to 2019, we have identified more than 600 patient cases in which patients presented after an injury with any kind of nerve deficit. We have defined nerve deficits as any abnormality on motor or sensory exam of the extremities, excluding those younger than 18 years old and those with other disease processes that may affect function of the peripheral nervous system. Data for these patients was collected from electronic medical records and include handedness, nerve injured, operative details, area deprivation index decile, mechanism of injury, insurance and employment status, and whether injuries were a result of work or violence. RESULTS/ANTICIPATED RESULTS: Our plan is to provide the first descriptive statistics for such a population, as well as multiple regression analysis for our two endpoints, loss to follow up and need for surgery. Following regression analysis, we also look to perform cluster analysis to further study co-occurring clinical and social features that affect our endpoints. We are excitedly awaiting to perform the analysis after the final data has been collected. DISCUSSION/SIGNIFICANCE: Nerve injury is a common symptom of penetrating injuries. Many of the socioeconomic factors associated with increased risk for violent injury are also risk factors for decreased rates of follow up. This problem is particularly worrisome given that nerve repair surgery is only viable as an option to return function within the first year after injury.