

## Significantly more boys born to Indian mothers in Canada than to Canadian-born mothers

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Mothers born in India but living in Canada are significantly more likely to have male babies for their second and third births compared with women in Canada, found a new study of male:female ratios in *CMAJ* (*Canadian Medical Association Journal*).

"Our findings raise questions about why there are more male liveborns than female liveborns among Indian <u>couples</u> who have had two or more previous babies," states Dr. Joel Ray, St. Michael's Hospital and University of Toronto.

Researchers from St. Michael's Hospital and the University of Toronto looked at all <u>singleton</u> live births in Ontario — 766 688 births — between 2002 and 2007. They used the mother's country or region of birth to categorize each birth, with 486 599 from Canada, Europe (58 505), <u>India</u> (31 978), China (23 818), rest of East Asia (18 971), Pakistan (18 018), South Korea (3663) and others. They calculated male:female <u>live births</u> by country or region and the number of previous deliveries the mother had at the current birth (0, 1, 2, 3 or more). They also looked at the country of birth for fathers.

For most women, the male:female ratio was 1.05, and the ratio did not change with increasing numbers of previous births. However, women from India and South Korea who had previous children were significantly more likely to give <u>birth</u> to males. For Indian-born women



with more than one prior child, the male:female ratios were even more pronounced.

Previous research conducted in India and a study looking at Canadian census data for South Asian and East Asian immigrants show similar patterns of higher male: female ratios linked to increasing numbers of children, especially when the prior offspring were girls.

"Whether this difference in <u>sex</u> ratios was the result of prenatal sex selection should be determined by direct study of practices of sexselected preimplantation and pregnancy termination among individuals from various world regions," conclude the authors. "In addition, an analysis of the duration of residence in Canada, access to fertility care, family income and parental preferences would be of value in describing factors that might influence prenatal sex selection."

The study was limited to singleton births and could not account for any sex selection in multiple pregnancies from fertility treatments. The researchers also could not determine the sex of older siblings born to the same mother.

*CMAJ* published an editorial on the topic of sex-selective abortions in Canada earlier this year.

More information: Online: www.cmaj.ca/lookup/doi/10.1503/cmaj.120165

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