

Report on stillbirth and neonatal death rates across the UK

June 22 2017

Research published today shows that the stillbirth rate in the UK has reduced by almost 8% over the period 2013 to 2015. A current Government ambition is to halve the rates of stillbirth and neonatal death in England by 2030. These findings indicate that things are moving in the right direction.

The MBRRACE-UK report focuses on rates of stillbirth and neonatal death across the UK for babies born at 24 weeks of gestation or more. The report found that in 2015 the stillbirth rate was 3.87 per 1,000 total births, a fall from 4.20 per 1,000 total births in 2013. Nevertheless, despite this reduction UK stillbirth rates still remain high compared to many similar European countries and there remains significant variation across the UK that is not solely explained by some of the important factors that influence the rate of death such as poverty, mother's age, multiple birth and ethnicity.

The fall in the stillbirth rate was focussed in those born at term. Professor Elizabeth Draper, Professor of Perinatal and Paediatric Epidemiology at the University of Leicester said: "Whilst the overall findings are good news, as two thirds of all stillbirths are born preterm we need to identify the extent to which preterm stillbirths are avoidable to enable the development of practices and policies to prevent these stillbirths and to reduce any variation in the quality of care across the UK".

Over the same period the neonatal death rate has remained fairly static

with a fall between 2013 and 2015 from 1.84 to 1.74 deaths per 1,000 live births, indicating that more work is required to prevent these deaths in the future. Data for the Neonatal Networks shows that neonatal mortality rates vary between 1.15 and 3.21 deaths per 1,000 [live births](#). Much of this variation is accounted for by differences in the proportion of babies dying from a major congenital anomaly.

Broadly similar NHS Trusts and Health Boards have been grouped together by their type of care or size in order to provide an appropriate comparison of their mortality rates. A traffic light system has been used to highlight those where action needs to be taken to improve outcomes.

Dr Brad Manktelow, Associate Professor at the University of Leicester, who led the statistical analysis said: "Those Trusts and Health Boards identified with high rates of [stillbirth](#) or neonatal [death](#) rates should review the quality of the care they provide. Work commissioned by the Healthcare Quality Improvement Programme is underway to develop a standardised perinatal mortality review tool to support and improve the quality of review of all stillbirths and [neonatal deaths](#) within all Trusts and Health Boards in the future".

Provided by University of Leicester

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