

2003 to 2017 saw drop in infant mortality due to birth defects

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From 2003 to 2017, there was a decrease in infant mortality attributable

to birth defects (IMBD) overall, although considerable differences were seen in the decreases by maternal and infant characteristics, according to research published in the Jan. 17 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Lynn M. Almli, Ph.D., from the CDC in Atlanta, and colleagues used U.S. linked birth/infant death data from 2003 to 2017 to assess trends in IMBD.

The researchers found that during 2003 to 2017, IMBD rates declined 10 percent overall, but the declines varied by maternal and infant characteristics. IMBD rates decreased 4, 11, and 12 percent for infants of Hispanic, non-Hispanic black, and non-Hispanic white mothers, respectively, during 2003 to 2017. IMBD rates were highest and lowest among infants of black and white mothers in 2017, respectively (13.3 and 9.9 per 10,000 [live births](#), respectively). IMBD rates for infants who were born extremely preterm, full term, and late term/postterm decreased 20 to 29 percent during 2003 to 2017; for moderate and late preterm infants, rates increased 17 percent.

"Birth defects occur in approximately 3 percent of births yet are a leading cause of [infant mortality](#)," the authors write. "The results from this analysis can inform future research into areas where efforts to reduce IMBD rates are needed such as among infants born to black and Hispanic mothers and those born moderate/late preterm (32 to 36 weeks)."

More information: [Abstract/Full Text](#)

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