

Stillbirth and infant death rates are decreasing, but still vary widely across Europe

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Rates of stillbirth and deaths in the first year of life have decreased in Europe over the five years 2010 to 2015. However, countries still vary widely, and differences persist in their populations and the maternity

care provided.

This is according to a new report, co-authored by Professor Alison Macfarlane from City, University of London as part of the Euro-Peristat collaboration of over 100 contributors from all over Europe, including the four countries of the UK.

The report examined data about births and their context in all 28 current EU member states plus Norway, Iceland and Switzerland in 2015. It also examined changes between 2010 and 2015.

The report differs from other international comparisons of stillbirth and [infant death \(infant mortality\)](#) rates by taking account of differences in the ways that statistics are compiled to make 'like for like' comparisons. Data about births before 22 weeks of pregnancy were excluded to improve consistency of reporting, as recommended by the World Health Organisation (WHO).

Key findings

Stillbirth rates

Stillbirth rates at or after 28 weeks of pregnancy ranged from below 2.3 per thousand total births (in Cyprus, Iceland, Denmark, Finland, and the Netherlands) to 3.4 or more (in Latvia, Ireland, Slovakia, Romania, Hungary, and Bulgaria). The rates for the countries of the United Kingdom came between these at 3.1 per 1,000 in England and Wales, 2.8 in Scotland and 2.6 in Northern Ireland.

Neonatal and infant death rates

Neonatal deaths are deaths in the first month after [live birth](#) and infant

deaths are deaths in the first year.

Neonatal death rates ranged from 0.7 per 1,000 live births in Slovenia to 4.4 in Bulgaria. The Czech Republic, Denmark, Estonia, Spain, Cyprus, Luxembourg, Austria, Slovenia, Finland, Sweden, Norway, Scotland and Iceland had rates below 2.0 per 1000 live births. In contrast, rates were over 3.0 per 1,000 in Bulgaria, Croatia, Malta, Romania and Northern Ireland.

The rate for England and Wales fell in between, at 2.2 per 1,000. Infant death rates showed similar patterns, ranging from 1.5 per 1,000 live births in Iceland to 7.4 in Romania and 7.6 in Bulgaria. Within the UK, Northern Ireland had the highest rate at 5.1 per 1,000 live births, while the rate was 3.2 in England and Wales and 2.9 in Scotland.

Multiple pregnancies

Babies from multiple births, mainly twins and triplets, are far more likely than singletons (single births) to be born early and so have higher rates of neonatal and infant death. Scotland and Northern Ireland were among the nine countries with fewer than 15 multiple births per thousand pregnancies. Five countries had rates of over 19 per thousand. England and Wales came in between with a rate of 16.1 per thousand pregnancies.

Age at childbirth

Since 2004, the average ages of women giving birth in Europe have risen. The countries of the UK are unusual in having relatively high proportions of both older and younger mothers. The percentage of mothers aged under 20 ranged from 0.8 per cent in Switzerland to 10.2 per cent in Bulgaria. Most countries, including the countries of the UK

had under four per cent. The percentage of mothers aged 35 and over ranged from around 14 per cent in Bulgaria, Poland and Romania to 36.3 per cent in Italy and 37.3 per cent in Spain. In each of the countries of the UK, just over a fifth of mothers were aged 35 or older.

Caesarean birth

Rising rates of caesarean birth (c-section) are a matter of concern internationally, and in six countries, rates reached over 35 per cent of all births in 2015. In contrast, not all rates rose and a quarter of countries had rates below 21 per cent. Iceland, Finland, Norway, and the Netherlands had the lowest rates, under 18 per cent.

The rates for the countries of the UK, although not the highest, were at the higher end of the range. Rates for Wales and Northern Ireland remained at 26.1 per cent and 29.9 per cent respectively, while the rate for England rose from 24.6 per cent in 2010 to 27.0 per cent in 2015, and the rate for Scotland rose from 27.8 per cent to 32.5 per cent.

Smoking and obesity

The report also identifies important gaps in data about two important subjects, smoking and obesity. In most countries with data, between five and eight per cent of women smoked during pregnancy, but in the countries of the UK, from 12 to 17 per cent did so. Only 12 countries had data about body mass index (BMI). These included the UK, where over a fifth of the women who gave [birth](#) in 2015 in each of England, Wales, Scotland and Northern Ireland were obese.

Professor Macfarlane, member of the Executive Board of Euro-Peristat and of its writing group and Professor of Perinatal Health at City, University of London, said:

"This new report confirms the findings of its predecessors, that when like is compared with like, the countries of the UK do not have the highest stillbirth and infant mortality rates in Europe. All the same they show that despite welcome decreases between 2010 and 2015, rates remain substantially above the low rates seen in the Nordic countries.

"The worrying increases in the already high caesarean rates for Scotland and England may well arise from initiatives to reduce stillbirth and infant mortality rates. However, the very much lower rates of caesarean section in the Nordic countries suggests that while good clinical care is important, a wider approach which also includes social and public health policies to improve the health of childbearing women is needed."

Provided by City University London

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