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Health Care Community Comes Together to Improve Infant Outcomes in Oklahoma by Reducing Elective Deliveries before 39 Weeks

“Every Week Counts” initiative brings together experts, hospital teams

(Oklahoma City, OK) – Because early elective inductions and early scheduled cesarean births in women who have not completed 39 weeks of pregnancy are known to contribute to problems for newborns, including premature birth and low birth weight, a collaborative of hospitals and others in the health care community joined to kick off an initiative today to improve infant outcomes in Oklahoma.

Scheduling a baby’s date of delivery without a medical reason even just one to two weeks before their due date increases their risk for issues such as breathing and feeding problems, sometimes requiring admission to an NICU and separation from mothers and families. The “Every Week Counts” collaborative is urging expectant mothers and their physicians to work together to complete at least 39 weeks of pregnancy for improved health outcomes for their babies.

In 2008, 68 percent of births in Oklahoma occurred before the full-term 40 weeks of pregnancy were completed. In fact, the usual week in which babies are born in Oklahoma and nationwide has decreased by one full week since 1995. While some conditions in the mother or baby may require early delivery, the practice of inducing labor or scheduling a cesarean birth before 39 weeks of pregnancy is common and has been increasing.

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“Every week counts in the last weeks of pregnancy,” said ***Karen Littlejohn, MMHS, regional program director, March of Dimes, West Region.*** “At 35 weeks, the brain is only two-thirds of what it will weigh at 40 weeks.”

The “Every Week Counts” collaborative brings together teams from 55 hospitals, under the leadership of the March of Dimes Oklahoma Chapter, the Oklahoma Hospital Association, the Oklahoma State Department of Health, and the OU Health Sciences Center Office of Perinatal Quality Improvement to help ensure elective deliveries are not scheduled early unless a medical reason exists.

A preterm birth rate of 13.8 percent has earned Oklahoma a grade of F from the March of Dimes annual Premature Birth Report Card. Oklahoma ranks 46th in the U.S. for its infant mortality rate of 8.5 deaths per 1,000 births.

“The prematurity rate in Oklahoma has increased by about 20 percent over the last two decades,” said ***Secretary of Health and Human Services Dr. Terry Cline.*** “Most of this increase was among late preterm births, those infants born at 34-36 weeks. Prematurity is a complex issue, but we know waiting to schedule elective deliveries until after 39 weeks gestation is a proven part of the solution.”

The Every Week Counts collaborative will utilize the March of Dimes’ *Elimination of Non-Medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age Toolkit* that includes best practice articles and protocol tools to educate and train obstetric teams to improve processes of care and outcomes for appropriate scheduling of inductions and cesarean births.

“Improving practices collaboratively in this way has proven to be an effective way to bring about improvement,” said ***Craig W. Jones, president, Oklahoma Hospital Association.*** “Hospitals in Oklahoma are committed to doing their part to improve infant outcomes in Oklahoma. Future parents also have a role in educating themselves to the risks of early scheduled deliveries.”

The American College of Obstetrics and Gynecology has long-standing recommendations against the practice of elective deliveries before 39 weeks, yet these account for 10-15 percent of all births in the U.S. Early elective deliveries are associated with increased neonatal morbidity with no benefit to the mother or infant.

“Pregnant women are encouraged to have a discussion with their doctors about the risks of delivering early,” said ***Dana Stone, MD, past chair of the Oklahoma Section of the American College of Obstetricians and Gynecologists.*** “Women often naturally give birth earlier than the normal length of pregnancy, which is 40 weeks, and in some cases medical problems require an early delivery. However,

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problems may occur when babies are born before they are ready. Families certainly have busy lives, women get uncomfortable during pregnancy and it can be more convenient to schedule a delivery date, but making the choice to wait until labor starts on its own can be a healthy choice.”

For more information on these risks, go to the March of Dimes website at www.marchofdimes.com. For more information on Every Week Counts, go to www.oumedicine.com/opqi.

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The March of Dimes is the leading nonprofit organization for pregnancy and baby health. With chapters nationwide and its premier event, March for Babies, the March of Dimes works to improve the health of babies. For the latest resources and information, visit marchofdimes.com or nacersano.org.

The Oklahoma Hospital Association represents more than 130 hospitals and health care entities across the state of Oklahoma. OHA's primary objective is to promote the welfare of the public by leading and assisting its members in the provision of better health care and services for all people. For more information, go to www.okoha.com.

The Oklahoma State Department of Health's "Preparing for a Lifetime, It's Everyone's Responsibility" is a statewide initiative to improve birth outcomes and reduce infant deaths in Oklahoma and focuses on seven specific areas: preconception and interconception care (being healthy before and between pregnancies), tobacco use prevention, prematurity, postpartum depression, breastfeeding, infant safe sleep, and infant injury prevention. Using state and community-based level partnerships, strategies include public education, policy change, and support of health care providers and birthing hospitals through training and technical assistance.

The Office of Perinatal Quality Improvement at The University of Oklahoma Health Sciences Center, Oklahoma City, has worked with Oklahoma birthing hospitals for 27 years to improve maternal and infant care for Oklahoma families by providing education, maximizing resources and collaborating with partners to identify and remove barriers to providing safe, quality perinatal care.