



- Washington state's preterm birth rate increased about a third in the last decade
- Nearly 10,000 preterm babies are born each year in Washington state
- Stillbirths devastate hundreds of Washington families each year

Local and Global Challenges

One out of every nine babies born in Washington will be preterm — born before 37 completed weeks of pregnancy. Those who survive have increased risks for life-threatening infections, cerebral palsy, brain injury, and respiratory, vision, hearing, learning and developmental problems.

Disparities persist for black and Native American women who are more than twice as likely to deliver prematurely as whites.

Costs related to prematurity in this state exceeded \$400 million in 2005 for medical care, delivery, and lost labor and productivity. This economic burden is shouldered by the government, businesses, communities and families, and cannot reflect the personal suffering experienced by families.

About 25,000 babies are stillborn in the United States each year, dying in the womb late in pregnancy or during delivery. These fetal losses are ten times more common than Sudden Infant Death Syndrome.

Globally, an estimated 15 million babies are born preterm. A staggering 2.6 million stillbirths occur each year worldwide. For international comparison, a stillbirth occurs after 28 completed weeks of pregnancy.

U.S. Health Goals

Healthy People 2010, a health promotion and disease prevention initiative, established a nationwide goal to reduce preterm births to no more than 7.6% of all live births. In Washington state, preterm births make up 10.5% of all live-births. To address the prematurity problem, the state implemented smoking cessation programs and expanded pre-conception and prenatal care for low-income women. However, more must be done to reach the nationwide goal. GAPPS is ready to help meet this challenge.

What Can Be Done?

1. Prioritize basic and translational science efforts on pregnancy, fetal development and newborn health
2. Expand efforts to attract scientists to the fields of obstetrical and newborn research
3. Authorize a national campaign to develop national centers of excellence for the study of prematurity and infant mortality

We urgently need more research to understand causes and identify proven solutions.

Disparities Persist

Washington's average rates of preterm birth vary by race and ethnicity: Native Americans (14.8%), blacks (13.4%), whites and Asian Americans (10.4%). The causes of preterm birth and stillbirth differ by genetics, environment and gestational age.

Black infants born preterm are nearly twice as likely to die as white or Hispanic infants. In addition, black women have the highest stillbirth rate and are nearly twice as likely to have a stillbirth compared with Hispanic, Asian American, Native American or white women.

