Late Preterm Births in Delaware

According to analyses by the National Center for Health Statistics (NCHS) the steady increase in preterm births is largely due to a rise in late preterm births. Although infants born in the late preterm period are considered to have a lower risk for complications than those born prior to 34 weeks gestation, they are physiologically and metabolically immature compared to full-term infants, and as a result, they have a higher incidence of medical complications such as respiratory distress, hypoglycemia, jaundice, feeding difficulties, and temperature instability.  

In Delaware, late preterm births accounted for 70 percent of all preterm births in 2007; nationally, this proportion is closer to 75 percent. From 1989-1993 to 2003-2007, the rate of late-preterm births increased 28 percent, from 7.4 to 9.6 per 100 births. Looking at the data by plurality shows a larger increase in the rate of late preterm births among singleton, as opposed to multiple, births.

Figure 1. Change in the Rate of Births born Preterm, by Plurality and Preterm Category

Notes:
1. Very preterm births are defined as <32 completed weeks' gestation.
2. Moderately preterm births are defined as 32-33 completed weeks' gestation.
3. Late preterm births are defined as 34-36 completed weeks' gestation.
Source: Delaware Health Statistics Center
Though the rate increase was greater for singletons, late preterm birth rates for multiple births were nearly 4 times that of singletons in 2003-2007.

Figure 5. Five-year Late Preterm* Birth Rates by Plurality

*Births at 34-36 completed weeks' gestation.
Source: Delaware Health Statistics Center
References:


If you have comments, suggestions, and/or questions, please contact the Delaware Health Statistics Center at (302) 744-4541.

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