Media information

Embargoed till 00.01 (BST) on Thursday 8th May 2008

CEMACH release: Stillbirths not on the decline but improvement seen in neonatal death rates

New findings from the CEMACH Perinatal Mortality 2006 report show that the stillbirth rate in England, Wales and Northern Ireland is not decreasing but there have been some improvements in the neonatal death rate. In particular, the number of babies dying from twin pregnancies has declined.

In 2006, the stillbirth rate was 5.3 per 1000 total births, the perinatal mortality rate was 7.9 per 1000 total births and the neonatal mortality rate was 3.4 per 1000 live births (this compares with the stillbirth rate of 5.5 per 1000 total births, the perinatal mortality rate of 8.2 per 1000 total births and the neonatal mortality rate of 3.5 per 1000 live births in 2005).

This report shows that women who have a stillbirth or neonatal death are more likely to be younger (below 20 years) or older (above 40 years), or from deprived circumstances (over one-third of all stillbirths and babies who died in the neonatal period) or from an ethnic minority. Additionally, 26% of the mothers who had a stillbirth and 22% of mothers who had a neonatal death were obese (BMI >30). Previous studies have shown an association between stillbirths, neonatal deaths, and obesity. CEMACH is currently running a national enquiry on this important issue.

Post mortems can provide useful information for families as well as for doctors, both in caring for individual patients and for better understanding the causes of perinatal deaths, including stillbirths. The report points to the poor uptake of post mortem examinations for stillbirths (38% in 2006 compared with 48% in 2000).

Common causes of intrapartum death were:

- Placental abruption (20% stillbirths; 15% neonatal deaths)
- Cord prolapse and compression (8% stillbirths; 4% neonatal deaths)
- Malpresentation or ruptured uterus (3% stillbirths; 12% neonatal deaths)
- Maternal infection (8% stillbirths)

In 2006, there were 18,132 live births at home in England, Wales and Northern Ireland. The CEMACH study looked at the 87 perinatal deaths (stillbirths and neonatal deaths) that occurred when a baby was born at home. Most of the deaths of babies born at home had not been planned to take place at home (61% were booked hospital births and 29% were unbooked). Thus, nine (10%) of these perinatal deaths at home had been planned as a home birth. A further 11 perinatal deaths occurred in hospital but had, at the onset of labour, been intended to deliver at home.

Immaturity is the main cause of neonatal death when there is a home birth. The causes for stillbirths are mostly found in conditions occurring generally during the prenatal period such as congenital malformation, antepartum haemorrhage, and infection.

Richard Congdon, Chief Executive of CEMACH said, "The report presents encouraging data in areas such as reducing rates of neonatal mortality and perinatal deaths in twin pregnancies. On the other hand, we have repeated the points we

made last year that the stillbirth rate is not improving and about the reduction in the number of post mortems carried out in recent years. We also report that few of the perinatal deaths that occur at home are the result of planned home births. It will be important to continue to monitor this position should the number of home births increase in the future."

Professor Sabaratnam Arulkumaran, President of the RCOG said "The death of a baby is a tragic occasion for all involved – parents, relatives and equally for healthcare professionals. The RCOG supports good research that examines why these deaths occur and will work with others to reduce the perinatal mortality rate.

"We would like to see increased investment in midwifery and senior consultant staffing to help improve outcomes for mothers and their babies. Increasingly, the provision of maternity services requires multidisciplinary teamwork and this new CEMACH report is a result of good working partnerships formed with neonatal networks".

Ends

Notes

To view the full report online report, please go to www.cemach.org.uk.

Confidential Enquiry into Maternal and Child Health (CEMACH) Perinatal Mortality 2006: England, Wales and Northern Ireland. CEMACH: London, 2008.

The Confidential Enquiry into Maternal and Child Health (CEMACH) aims to improve the health of mothers, babies and children by carrying out confidential enquiries on a nationwide basis and by widely disseminating its findings and recommendations. CEMACH started in 2003 and its remit includes conducting studies into maternal deaths, stillbirths and deaths in infancy. For more information, please visit www.cemach.org.uk.

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