

Epi Monthly Report



Office of Epidemialogy and Disease Canteal

Determinants of Preterm Births during 1998-2000 in Miami-Dade County

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Background

Preterm delivery (less than 37 weeks) of low-birth-weight (LBW) (<2,500 grams) infants remains a significant public health issue and a leading cause of neonatal death and long-term neurodevelopmental disturbances and health problems (1). During 1998-2000, two-thirds of all LBW births were among preterm births in Miami-Dade County. Multiparous births were significantly associated with births being preterm (adjusted odds ratio 19.0, 95% confidence interval=17.4-20.8). Improving and preventing preterm births could reduce the percentage of LBW births. This analysis was designed to identify determinants of preterm birth among singleton infants in order to aid in the planning and targeting of Healthy Start services in Miami-Dade County.

Subjects and Methods

Data were obtained from 1998-2000 Miami-Dade County vital records. Of the 95,416 live births, 92,211 (96.6%) had complete data for all analyzed variables. Of these, 89,601 (97.2%) of them were singleton infants and thus included in the analysis. Of these infants' mothers, 18,847 (21.0%) were non-Hispanic black, 50,507 (56.4%) were Hispanic, 5,302 (5.9%) were Haitian, 13,632 (15.2%) were non-Hispanic white, and 1,313 (1.5%) were other race/ethnicity.

Prenatal care was classified as adequate, intermediate, and inadequate based on Kessner's Adequacy of Prenatal Care Index. To examine the association between maternal demographics, medical risk factors, substance use habits, prenatal care utilization, sex of infants, and the defined outcome, crude odds ratio (OR), adjusted odds ratios (AOR), and 95 % confidence intervals (95% CI) were calculated by Chi-square test and multivariate logistic regression analyses in SAS (2). An odds ratio is statistically significant if its confidence interval excludes 1.0.

Results

Maternal race-ethnicity: Of the 89,601 live births, 7,600 (8.5%) were preterm infants. The percentage of preterm births was 12.1%, 7.4%,

11.0%, and 8.8% among non-Hispanic black, Hispanic, Haitian and other women, and was significantly



VOLUME 3. ISSUE 5 May 2002 Page-1



1

5

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Inside this issue:

Selected Reportable Diseases/Conditions in Miami-Dade County, April 2002



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higher than the percentage (6.7%) among non-Hispanic white women (AOR 1.48, 95% CI: 1.36-1.62, AOR 1.12, 95% CI: 1.03-1.21, AOR 1.49, 95% CI: 1.32-1.68, and AOR 1.43, 95% CI: 1.16-1.76 respectively).

Sex of infants and birth order: Among the 89,601 singleton infants, 45,974 (51.3%) were male, and 43,627 (48.7%) were female. Univariate and multivariate analyses showed a higher risk of being preterm among male compared with female babies (AOR 1.10, 95% CI: 1.05-1.16%). Preterm births were more prevalent among 4th and above births (11.4%) compared with first (8.62%), second (7.4%) and third births (8.7%).

Age and education of mothers: The rate of preterm births was significantly higher among women younger than 19 and older than 35 years compared with women aged 20-34 years in univariate analysis (11.1%, 9.7% vs. 7.8%). While controlling other risk factors, the adjusted odds ratio for women older than 35 years was 1.26 (95% CI: 1.18-1.35) compared with women aged 20-34 years. There was no statistically significant association found between educational level and preterm birth.

Marital status of mothers: 36,492 (40.7%) of the mothers were unmarried. Compared with married mothers, unmarried mothers were at higher risk of delivering a preterm baby (AOR 1.19, 95% CI: 1.13-1.26).

Foreign born mothers: 51,012 (56.9%) mothers were born outside of the United States. Compared with births to U.S.-born mothers, infants to foreignborn mothers were less likely to be preterm (AOR 0.88, 95% CI: 0.83-0.93).

Smoking and alcohol use: 1,638 (1.8%) women reported smoking, and 151 (0.2%) women reported using alcohol during pregnancy. Some studies have suggested that smoking and alcohol use may be underreported on birth certificates due to a variety of factors (4-6). However, only smoking had a significant association with preterm birth in the multivariate analysis (AOR 1.36, 95% CI: 1.16-1.59).

Prenatal care utilization: When classified according to the Kessner index, 75,121 (83.8%) women

received adequate care. The preterm birth rate was 7.9%, 10.5%, and 17.0% among adequate, intermediate and inadequate care users respectively. Compared with mothers who received adequate prenatal care, a significantly increased risk of having a preterm birth was found for those with intermediate (AOR 1.14, 95% CI: 1.06-1.22) or inadequate care (AOR 1.71, 95% CI: 1.52-1.92%).

Maternal weight gain: Of the 89,601 mothers, 12,184 (13.6%) reported gaining fewer than 20 pounds during the pregnancy. The rate of preterm birth was 16.3%, 9.8%, 6.6%, and 5.3% among women with maternal weight gain of fewer than 20, 20-29, 30-39, and more than 39 pounds respectively.

Obstetric/medical risk factors: Mothers who had diabetes, hydramnios/oligohydramnios, chronic hypertension, pregnancy-associated hypertension, eclampsia, incompetent cervix, previous delivery of low-birth-weight or preterm infant, and uterine bleeding were more likely to deliver preterm infants (see table).

Conclusion

Our results suggest the occurrence of preterm births may be reduced by providing more social support and care to unmarried pregnant women, increasing prenatal care utilization, and providing health education services such as nutritional instruction.

References:

- McGaw T. Periodontal disease and preterm delivery of lowbirth-weight infants. J Can Dent Assoc 2002 Mar;68 (3):165-9
- SAS Software, version 8.02. Cary, NC, USA: SAS Institute Inc., 1999.
- Mathews TJ. Smoking during pregnancy, 1990-96. National vital statistics reports; vol 47 no. 10. Hyattsville, Maryland: National Center for Health Statistics. 1998.
- Diez PM, Adams MM, Kendrick JS, Mathis MP, The PRAMS Working Group. Completeness of ascertainment of prenatal smoking using birth certificates and confidential questionnaires: Variations by maternal attributes and infant birth weight. Am J Epidemiol 1998; 148(11): 1048-54.
- 5. Buescher PA, Taylor KP, Davis MH, Bowling JM. The quality of the new birth certificate date: A validation study in North Carolina. Am J Public Health 1993; 83(8):1163-5.



Volume 3. Issue 5 May 2002 Page-2

· · · · · · · · · · · · · · · · · · ·	>=37 w	>=37 weeks		eeks	Crude		Adjusted	
	Freq.	Percent	Freq.	Percent	Odds Ratio	95% CI	Odds Ratio	95% CI
Age (yr.)								
20-34	60681	92.16	5162	7.84	1.00		1.00	
10-19	8935	88.95	1110	11.05	1.46	1.36-1.56	1.08	1.00-1.17
>=35	12385	90.32	1328	9.68	1.26	1.18-1.34	1.27	1.18-1.36
Race/Ethnicity								
White	12714	93.27	918	6.73	1.00		1.00	
Black	16575	87 .95	2272	12.05	1.90	1.75-2.06	1.49	1. 37-1.6 3
Hispanic	46793	92.65	3714	7.35	1.10	1.02-1.19	1.18	1.03-1.21
Haitian	4721	89.04	581	10.96	1.70	1.53-1.90	1.50	1.32-1.69
Others	1198	91.24	115	8.76	1.33	1.09-1.63	1.43	1.16-1.76
Educational Levels								
<=6 yr.	2299	90.19	250	9.81	1.00		1.00	
7-12 yr.	43764	90.45	4622	9.55	0.97	0.85-1.11	1.04	0.91-1.20
>=13	35938	92.94	2728	7.06	0.70	0.61-0.80	0.90	0.77-1.04
Marital Status								
Married	49307	92.84	3802	7.16				
Unmarried	32694	89.59	3798	10.41	1.51	1.44-1.58	1.19	1,13-1.26
Gender								
Female	40049	91.80	3578	8.20				
Male	41952	91.25	4022	8.75	1.07	1.02-1.12	1.10	1.05-1.56
Foreign-born Mother								
No	34945	90.56	3644	9.44				
Yes	47056	92.24	3956	7.76	0.81	0.77-0.85	0.87	0.82-0.93
Smoking								
No	80583	91.61	7380	8.39				
Yes	1418	86.57	220	13.43	1.69	1.47-1.96	1.36	1.17-1.60
Alcohol Use								
No	81873	91.53	7 57 7	8.47				
Yes	128	84. 77	23	15.23	1.94	1.24-3.03	1.06	0.65-1.72
Birth Order								
>=4th	7384	88.65	945	11.35	1.00		1.00	
3rd	12523	91,33	1189	8.67	0.74	0.68-0.81	0.92	0.84-1.01
2nd	26732	92.62	2131	7.38	0.62	0.58-0.68	0.88	0.80-0.96
lst	35362	91.38	3335	8.62	0.74	0.68-0.80	1.08	0.99-1.18
Weight Gain								
<20	10201	83.72	1983	1 6.28	1.00		1.00	
20-29	23061	90.16	2518	9.84	0.56	0.53-0.60	0.60	0.57-0.64
30-39	26008		1830		0.36	0.34-0.39		0.38-0.43
>=40	22731	94.7 1	1269	5.29	0.29	0.27-0.31	0.30	0.28033
Kessner Index								
Adequate	69200		5921		1.00	· •	1.00	
Intermediate	10758		1 261		1.37	1. 29-1.46	1.14	1.07-1.22
Inadequate	2043	83.02	418	16.98	2.39	2.15-2.67	1.72	1.53-1.93
Maternal Med. Conditions*								
Anemia		•						
No	81161		7516					
Yes	84 0	90.91	84	9.09	1.08	0.86-1.35	0.93	0.74-1.18

Determinant Factors of Preterm Births (<37 Weeks) during 1998-2000 in Miami-Dade County

(*) Maternal Medical Conditions for this pregnancy



Volume 3. Issue 5 May 2002 Page-3

			(Continued)				A	
	>=37 weeks		<37 weeks		Crude		Adjusted	
	Freq.	Percent	Freq.	Percent	Odds Ratio	95% CI	Odds Ratio	95% CI
Cardiac Disease	01007	01.50	7500	0.40	15 - C			
No	81807 194	91. 52 91.94	7583	8.48 8.06	0.05	0.58-1.55	0.91	0.54-1.54
les	194	91.94	17	8.00	0.95	0.56-1.55	0.91	0.34-1.34
Acute or Chronic Lung Dis.	01000	01.51	7604	P 40				
No	81898	91.51	7594	8.49	0.62	0.28-1.43	0.62	0.27-1.43
Yes	103	94.50	6	5.50	0.63	0.28-1.43	0.62	0.27-1.43
Diabetes	5. B1101	91.59	7440	8.41				
No	81121 880		7448 152	14.73	1.88	1.58-2.24	1.45	1.21-1.75
Yes	880	85.27	152	14.75	1.00	1.36-2.24	1.43	1.21-1.75
Genital Herpes	81773	91.51	7586	8.49				
No Yes	228	91.31	14	8.49 5.79	0.66	0.39-1.14	0.66	0.37-1.18
	240	94.21	14	5.19	0.00	0.33-1.14	0.00	0.57-1.10
Hydramnios/Oligohydramnios No	81659	91.57	7519	8.43				
Yes	342	80. 85	81	19.15	2.57	2.02-3.28	2.57	1.99-3.30
Chronic Hypertension	542	80.85	01	19.15	2.57	2.02-5.20	. 2.37	1.99-5.50
No	81838	91.58	7526	8.42				
Yes	163	68.78	74		4.94	3.75-6.50	3.55	2.64-4.77
Preg. Assoc. Hypertension	105	00.70	74	51.44		0.70 0.00	5.05	2.01
No	80691	91.76	7249	8.24				
Yes	1310	78.87	351		2.98	2.64-3.36	2.92	2.57-3.31
Eclampsia	1510	10.07	201	21.15	1.50	2.01 5.50		2.07 0.01
No	81951	91.58	7539	8.42				
Yes	50		. 61		13.26	9.12-19.29	11.91	8.01-17.69
Incompent cervix		10.00	•••					
No	81929	91.54	7571	8.46				
Yes	72	71.29	29		4.36	2.83-6.71	3.91	2.46- 6.24
Previous infant >4000 grams	/-		·					
No	81919	91.52	7594	8.48				
Yes	82	93.18	6		0.79	0.34-1.81	0.57	0.23-1.41
Prev. Preterm or SGA Infant**								1, 8 1
No	81926	91.59	7526	8.41				
Yes	75		74		10.74	7.78-14.82	9.41	6.69-13.23
Renal Disease	15	2010 /						
No	81918	91.53	7585	8.47				
Yes	83	84.69	15		1.95	1.13-3.38	1.54	0.85-2.78
Rh Sensitization						an a		
No	81974	91.52	7596	8.48				
Yes	27	87.10	4		1.60	0.56-4.57	1.44	0.46-4.54
Uterine Bleeding		2						
No	81912	91.56	7555	8.44				
Yes	89		45		5.48	3.83-7.85	5.49	3.77-8.01
Other Related Conditions	0,							
No	77583	. 91.73	6999	8.27				
Yes	4418	88.03	601		1 51	1.38-1.65	1.39	1.27-1.53

Determinant Factors of Preterm Births (<37 Weeks) during 1998-2000 in Miami-Dade County (Continued)

(**) Previous preterm or small-for-gestational age infant



Volume 3. Issue 5 May 2002 Page-4

Monthly Report Selected Reportable Diseases/Conditions in Miami-Dade County, April 2002

Diseases/Conditions	2002	2002	2001	2000	1999	1998
	this Month	Year to Date				
AIDS *Provisional	111	429	477	538	562	544
Campylobacteriosis	10	29	31	20	27	18
Chancroid	0	0	0	0	0	0
Chlamydia trachomatis	335	1316	1075	1105	1499	671
Ciguatera Poisoning	0	0	0	0	0	0
Cryptosporidiosis	1	2	5	1	3	2
Cyclosporosis	0	0	0	0	0	0
Diphtheria	0	0	0	0	0	0
E. coli , O157:H7	0	0	0	1	0	1
<i>E. coli</i> , Other	0	0	0	0	0	0
Encephalitis	0	0	0	0	0	0
Giardiasis, Acute	21	54	73	3	15	15
Gonorrhea	171	626	567	750	1056	480
Granuloma Inguinale	0	0	0	0	0	0
Haemophilus influenzae B (invasive)	0	0	1	1	0	0
Hepatitis A	30	49	51	22	17	46
Hepatitis B	3	6	13	7	11	17
HIV *Provisional	158	645	460	521	526	580
Lead Poisoning	23	71	130	N/A	N/A	N/A
Legionnaire's Disease	0	0	0	0	0	1
Leptospirosis	0	0	0	0	0	0
Lyme disease	0	0	1	2	0	0
Lymphogranuloma Venereum	0	0	0	0	0	0
Malaria	2	4	8	2	6	6
Measles	0	0	0	0	0	0
Meningitis (except aseptic)	0	2	3	6	11	7
Meningococcal Disease	3	7	6	7	5	2
Mumps	0	0	0	1	2	0
Pertussis	1	1	1	3	2	7
Polio	0	0	0	0	0	0
Rabies, Animal	0	0	0	0	0	1
Rubella	0	0	0	0	0	0
Salmonellosis	17	69	49	37	50	61
Shigellosis	23	63	28	27	38	50
Streptococcus pneumoniae, Drug Resistant	2	35	60	68	56	25
Syphilis, Infectious	15	56	63	48	24	10
Syphilis, Other	72	315	179	273	353	191
Tetanus	0	0	1	0	0	0
Toxoplasmosis	3	7	4	0	0	0
Tuberculosis *Provisional	15	73	39	80	74	111
Typhoid Fever	0	1	0	0	14	2
Vibrio , cholera	0	0	0	0	0	0
Vibrio, Other	0	0	0	0	0	0

* Data on AIDS are provisional at the county level and are subject to edit checks by state and federal agencies. ** Data on tuberculosis are provisional at the county level.

