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**AUTHOR** Powell-Griner. Eve

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### ABSTRACT

This report describes long-term trends in perinatal mortality in the United States in three basic parts: development of perinatal mortality measures, components of fetal and infant mortality, and trends and differentials in perinatal mortality. Perinatal deaths refer to the sum of spontaneous fetal deaths occurring after 20 weeks gestation plus infant deaths occurring during the first 27 days following birth. Discussed in the first part of the report are the emergence of the concept of a perinatal period, the three definitions of the perinatal period, and the use of rate or ratio as measures of perinatal mortality. Discussed next are the distribution of fetal and infant deaths and trends in fetal and infant mortality. Finally, the report presents data on perinatal mortality ratios for the white population and for races other than white for each of the years 1950-1981. The differential in birth weight distribution, sex differentials, and geographic variations are also discussed. Also included are references, technical notes, four figures, and eight tables. (TRS)

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# Perinatal Mortality in the United States: 1950-81

by Eve Powell-Griner, Ph.D., Division of Vital Statistics

### Introduction

This report describes long-term trends in perinatal mortality in the United States. Perinatal deaths refer to the sum of spontaneous fetal deaths occurring after 20 weeks gestation plus infant deaths occurring during the first 27 days following birth. Perinatal statistics by race and sex for the United States and each State are reported annually in Vital Statistics of the United States, Volume II, Mortality, Part A, beginning with 1979. They are derived from data on three vital events reported to the National Center for Health Statistics (NCHS): Fetal deaths, infant deaths, and live births. Measures of perinatal mortality supplement other statistics on fetal and infant mortality published by NCHS.

# Development of perinatal mortality measures

Components of fetal and infant mortality can be described in terms of the age at which death occurs. A fetal death refers to the death of a product of human conception prior to complete extraction or expulsion from its mother, irrespective of the duration of pregnancy. In this report, fetal deaths refer only to deaths of fetuses of at least 20 weeks gestation. Fetal deaths can be characterized as "early" (20-27 weeks gestation) and "late" (28 weeks gestation or more). An infant death refers to the death of a liveborn infant under 1 year of age. Typically, infant deaths are described in terms of neonatal (less than 28 uays of age) and postneonatal (28 days-11 months) deaths. Neonatal deaths can be further divided into "early" (less than 7 days) and "late" (7-27 days) components. Perinatal deaths refer to a combination of fetal deaths of at least 20 weeks gestation and neonatal deaths; the deaths that are included depend upon the perinatal definition being used.

The concept of a perinatal period emerged in the late 1940's in response to a growing awareness by physicians and other

researchers of the relatively large number of deaths in the period immediately before and after delivery. This concept reflected the belief that circumstances responsible for the majority of neonatal deaths arose from conditions established before delivery or from the stresses during the birth process itself. Because many of these same circumstances were responsible for fetal deaths of 20 weeks or more gestation, a concept that combined fetal deaths of at least 20 weeks gestation with infant deaths of less than 28 days seemed particularly useful in studying reproductive loss. Another factor contributing to the interest in developing a new mortality measure was the awareness that some infant deaths occurring shortly after birth were reported as fetal deaths and that fetal deaths were sometimes reported as infant deaths.

The term "perinatal mortality" was first proposed by Peller in 19483 to denote deaths of fetuses during pregnancy and labor and deaths of infants in the early days of life. In 1954 the World Health Organization supported the concept of perinatal mortality but did not specify the range of the perinatal period.4 The 1956 Public Health Conference on Records and Statistics in the United States recommended that, for general use in analysis of vital-record data within this country, the perinatal mortality rate include fetal deaths of 20 weeks or more gestation and infant deaths of less than 7 days. However, the Conference acknowledged the usefulness of perinatal mortality rates based upon fetal deaths of 20 weeks gestation or more and infant deaths of less than 28 days, particularly for evaluation of maternal and child health programs. In 1965, the world Health Organization recommended that the definition of the perinatal period include fetal deaths from the 28th completed week of pregnancy and neonatal deaths of less than 7 days. At that time, the World Health Organization also encouraged countries to extend the collection of data down to the 20th completed week of gestation and up to the 28th day of life.6

The recommendations of the World Health Organization



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and the Public Health Conference on Records and Statistics are the basis for the three perinatal mortality measures generally used in the United States. Perinatal Definition I, the most restrictive definition, refers only to fetal deaths of 28 weeks or more gestation and infant deaths of less than 7 days. The most inclusive measure, Perinatal Definition II, refers to fetal deaths of 20 weeks or more gestation and infant deaths under 28 days of age. Perinatal Definition III includes fetal deaths of 20 weeks gestation or more and infant deaths of less than 7 days.

Effective with data for 1979, NCHS began publishing statistics for all three perinatal measures; however, this report focuses upon Perinatal Definition I for the following reasons:

- Definition I limits the infant death group to those less than 7 days; during this early infant period, prenatal conditions and circumstances surrounding the delivery are more influential to nonsurvival than are postnatal factors.<sup>2</sup>
- Definition I limits fetal deaths to those of 28 weeks or more gestation; such deaths appear to be better reported than those occurring before 28 weeks gestation.<sup>7</sup>
- Almost three-fourths of all perinatal deaths by the broadest definition (II) occurred within the period encompassed by Definition I in 1981.
- Definition I is generally used for international comparisons.

Measures of perinatal mortality can be expressed as either a rate or a ratio. The perinatal rate is defined as the number of perinatal deaths per 1,000 live births and fetal deaths. The perinatal ratio is the number of perinatal deaths per 1,000 live births. Using Perinatal Definition I as an example, the perinatal rate would be computed as follows:

Fetal deaths of 28 weeks gestation or more + infant
deaths of less than 7 days in a specified year
Fetal deaths of 28 weeks gestation or more + live
births in the same year

The perinatal ratio would be calculated by:

Fetal deaths of 28 weeks gestation or more + infant

deaths of less than 7 days in a specified year

Live births in the same year

X 1,000

The perinatal rate includes fetal deaths in both the numerator and denominator; the perinatal ratio includes fetal deaths only in the numerator. The perinatal mortality rate—the preferred measure—is a closer estimate of risk of death in the perinatal eriod because for any data year the denominator more closely approximates the population at risk. However, actual numerical differences between perinatal mortality rates and ratios in the United States are small. For example, in 1981 the Perinatal Definition I rate and ratio were identical: 12.6. For most States, differences between perinatal rates and perinatal ratios are less than 1 percent. Although the text of this report emphasizes perinatal mortality rates, the detailed tables show both rates and ratios.

# Components of fetal and infant mortality

The distribution of fetal and infant deaths combined by age for 1981 is shown in figure 1. The largest proportion of these events is accounted for by early neonatal deaths (32 percent), followed by late fetal deaths (28 percent). Postneonatal deaths accounted for 19 percent of all fetal deaths (20 weeks gestation or more) and infant deaths combined. Fetal deaths of 20-27 weeks gestation (15 percent) and late neonatal deaths (6 percent) contributed least to reported fetal and infant mortality. Perinatal deaths, according to Perinatal Definition I, included well over half (60 percent) of the infant deaths and fetal deaths of 20 weeks gestation or more.

Trends in fctal and infant mortality are shown in table A. The total number of fetal deaths of 20 weeks gestation or more and infant deaths decreased from 172,087 in 1950 to 75,901 in 1981. The percentage of fetal and infant deaths comprised by Perinatal Definition I deaths was 60 percent or more for all years shown in table A. Mortality rates also declined sharply during this period (figure 2). (For definitions of rates see Technical notes.) Infant mortality declined by 59 percent, from 29.2 to 11.9 infant deaths per 1,000 live births; and perinatal mortality closely paralleled this decline. Neonatal mortality declined more sharply than postneonatal mortality—61 percent

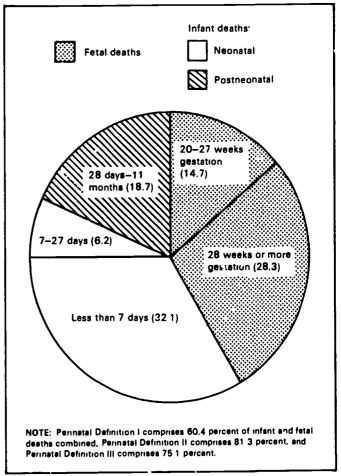


Figure 1. Percent distribution of fetal and infant deaths combined: United States, 1981

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Table A. Number and percent distribution of components of fetar and infant deaths combined: United States, 1950, 1960, 1970, 1980, and 1961

					Infant de	eths	
		Fetal	deaths	Neonatal	deaths		
Year	Fetal and infant deaths	Eerly (20–27 weeks gestation)	Lata (28 weeks or more gestation)	Early (less than 7 days)	Late (7–27 days)	Postneonatal deaths (28 days- 11 months)	Perinatal Definition (1
				Number			
1981	75,901	11,126	21,470	24,384	4,737	14,184	45,854
1980	78,879	10,754	22,599	25,492	5.12C	14,908	48,091
1970	127,528	17,170	35,791	50,821	5,458	18,238	86,612
1960	179,353	16,496	51,984	71,125	8,608	31,140	123,109
1950	172,087	14,522	53.740	63,417	9.438	30,570	117,157
			Pe	rcent distribu	tion		
1981	100.0	14.7	28 3	32.1	6.2	18 7	60.4
1980	100.0	13 6	28.7	32.3	6.5	18.9	61.0
1970	100.0	13.5	28.1	39.9	4.3	14 3	6, 9
1960	100.0	92	29 0	39 7	4.8	17.4	68.6
1950	100.0	8.4	31.2	36.9	5.5	18.0	68 1

Perinatal Definition I refers to infant deaths of less than 7 days (early neonatal) and fetal deaths with stated or presumed gestation of 28 weeks or more (late fetal)

compared with 55 percent. Although the rates of the components converged over the three-decade period, ranking of the rates remained the same: Death rates for fetuses of 28 weeks gestation or more and early neonatal deaths were higher than the mortality rates for any other component group.

# Trends and differentials in perinatal mortality

Perinatal mortality ratios are presented in this report for the white population and for the population of races other than white ("all other") for each of the years 1950-81. In addition, perinatal rates are shown separately in figure 3 for the black population for 1979-81; data on late fetal deaths for the black population are not available before 1979. Rates for the population of races other than white are a close approximation of those of the black population, which is by far the largest component of this group. In 1981, the black population accounted for approximately 82 percent of births, 89 percent of fetal deaths, and 93 percent of neonatal deaths among races other than white.

Between 1950 and 1981 the perinatal mortality rate declined 61 percent, from 32.5 to 12.6 per 1,000 live births and fetal deaths. Reductions in perinatal mortality rates were generally continuous throughout the period; however, in the latter part of the period the rate of decline accelerated. The average annual decline was 1 percent in the 1950's, 2 percent in the 1960's, and 5 percent in the 1970's (table B). This pattern of accelerating decline was shared by the white population and the population of races other than white.

Perinatal mortality differentials between the white and the all other populations remained relatively constant over the 31-

year period, reflecting similar percentage decreases for both groups (figure 3). In 1950, the perinatal mortality rate for all other races was 1.48 times that for the white population. In 1981, the ratio of rates was about the same, 1.55. A similar pattern occurred for infant mortality rates (figure 4).

The race differential in perinatal mortality rates is associated with the race differential in birth-weight distributions. In 1950, 7 percent of white live births weighed 2,500 grams or less compared with 10 percent of births to all other races. By 1981, 6 percent of white live births weighed 2,500 grams or less compared with 11 percent for all other births. The proportion of low-birth-weight infants for all other races has consistently remained higher than that of white infants. Approximately three-fourths of all neonatal deaths occur among low-birth-weight infants. 10,11

#### Sex differentials

The sex differential in perinatal mortality for both the white and the all other populations declined between 1950 and 1981 (table C). For all races combined, approximately 130 males died for every 100 females that died during the perinatal period in 1950, compared with only 119 in 1981. The perinatal mortality sex ratio was 131:100 for the white population and 129:100 for all other races in 1950. In 1981, the perinatal mortality sex ratio was 119:100 for both populations.

#### Geographic veriation

Perinatal mortality rates in 1981 were slightly higher in nonmetropolitan than in metropolitan counties (table D). The rate for nonmetropolitan counties was 12.7 deaths per 1,000

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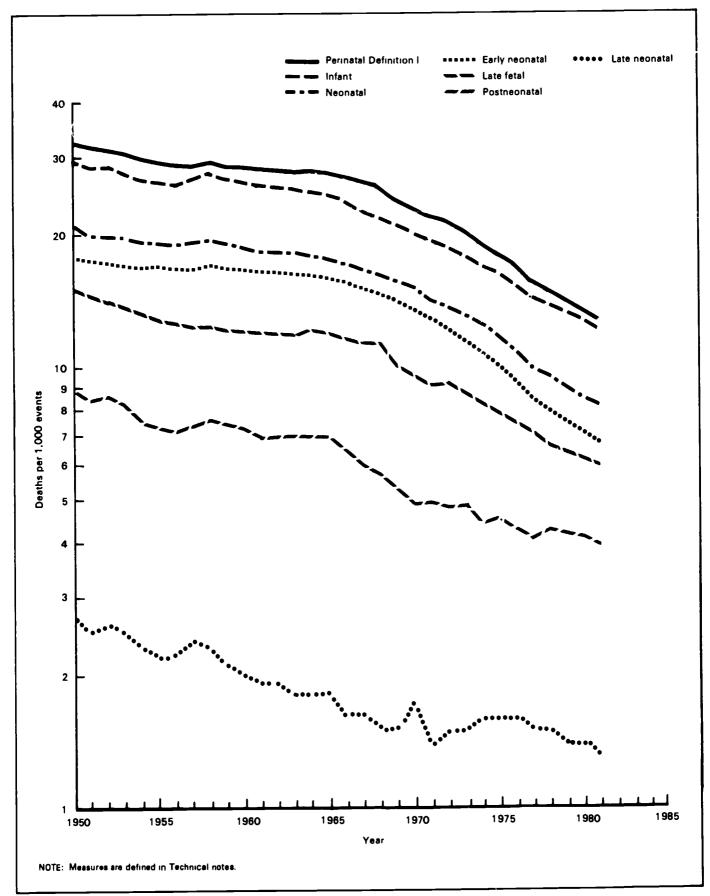


Figure 2. Fetal, perinatal, neonatal, postneonatal, end infant mortality rates: United States, 1950-81

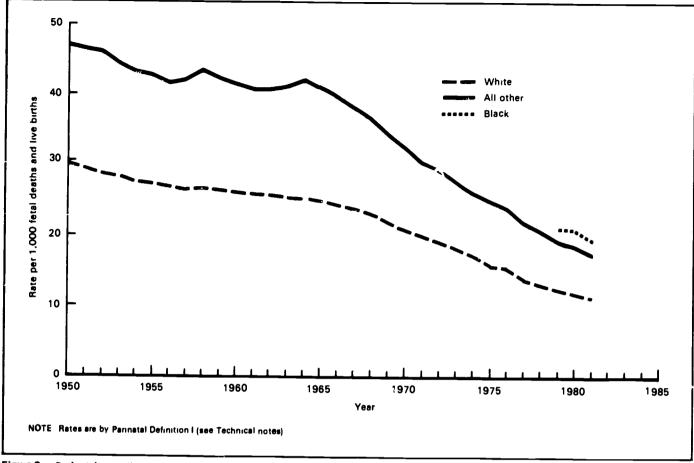


Figure 3. Perinatal mortality rates by race: United States, 1950-81

Table B. Perinatal mortality rates, percent change, and average annual percent change by race: United States, 1950, 1960, 1970, 1980, and 1981

[Rates are for Perinatel Definition 1: see Technical notes. Rates are per 1,000 live births and fetal deaths]

Year	All races	White	All other		
	Perinatal mortality rate				
1981	12.6	11.3	17.5		
1980	13.2	11.9	18.7		
1970	23.0	21.0	32.7		
1960	28.6	26.2	41.6		
1950	32.5	30.1	47.0		
	Р	ercent chang	•		
1950-81	<del>-</del> 61.2	<del>~</del> 62.5	-62.8		
1970–80	-42.6	-43.3	<del>-42.8</del>		
1960–70	-19.6	-19.8	<del>-21.4</del>		
1950–60	-12.0	-13.0	-11.5		
	Average a	innual percen	t change		
1950–81	-3.0	-3.1	<del>-</del> 3.1		
1970–80	-5.4	-5.5	-5.4		
1960–70	-2.2	<del>-</del> 2.2	-3.4 -2.4		
1950–60	-1.3	-1.4	-2.4 -1.2		

live births and fetal deaths compared with 12.5 for metropolitan counties. The small differential is partly due to the race composition of the areas. When geographic comparisons are made by race, the differential is greater: For all other races, metropolitan rates were 6 percent lower than nonmetropolitan rates and for the white population, 4 percent lower. The largest mortality differences between metropolitan and nonmetropolitan counties were for the black population (8 percent).

Perinatal mortality rates also varied by geographic division and by State. In 1981, the East South Central Division had the highest rate, about 17 percent above the national figure. Higher rates prevailed there for both race groups compared with the national average for each group: 8 percent higher for the white population and 11 percent higher for the black population. The Mountain Division had the lowest rate for the white population (9 percent below the rate for the U.S. white population), and the Pacific Division had the lowest rate for the black population (22 percent below the national figure). Geographic variation in rate of perinatal death was greater for the black than the white population. Among the 50 States and the District of Columbia, rates for the black population ranged from 11.3 to 28.3 per 1,000 live births and fetal deaths—a difference that was almost

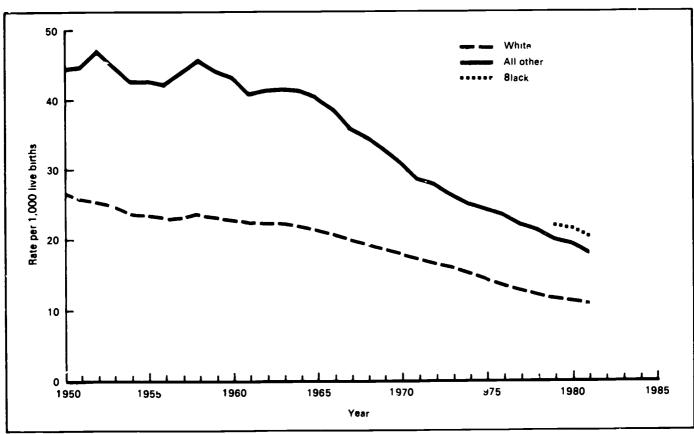


Figure 4. Infant mortality rates by race: United States, 1950-81

twice the range for the white population (8.1 to 18.1 per 1,000 live births and fetal deaths).

The analysis of geographic variation in perinatal mortality is restricted to Perinatal Definition I, which includes only fetal deaths of 28 weeks or more gestation. The usefulness of other

perinatal indices for interstate comparisons appears to be limited by the variation in completeness of reporting fetal deaths between 20 and 28 weeks gestation. Data limitations that affect geographic comparability are discussed in the Technical notes section of this report.

Table C. Perinatal mortality rates by race and sex, and sex ratios by race: United States, 1950 and 1981

[Retes are for Perinstal Definition I, ase Technical notes. Rates are per 1,000 live births and specified fatal deaths. Ratios are the number of male perinstal deaths per 100 femals perinstal deaths]

Year and race	Both sexes	Male	Female	Sex ratio
1981		Rate	_	
All races	12 6	13.3	11.8	119
White	11.3 17.5	120 188	10.7 16 2	119 119
1950				
All races	32.5	35 8	28.9	130
White	30.1 47 O	33 2 52 1	26.9 41.7	131 129

Table D. Perinatal mortality rates by race for metropolitan and nonmetropolitan counties and percent difference between metropolitan and nonmetropolitan counties: United States, 1981 [Rates are for Perinatal Dafinition I, see Technical notes. Rates are per 1,000 live births and specified fatal deaths]

Race	Total	Metropolitan counties	Non:netropolitan counties	Percent difference
All reces	12 6	12.5	12.7	-1 6
White	11.3	11.2	11.7	-4.3
All other	17.5	17 <b>3</b>	18.4	-60
8lack	19.4	19 1	20.7	<del>-7</del> .7

# References

<sup>1</sup>National Center for Health Statistics: Model State Vital Statistics Act and Model State Vital Statistics Regulations, 1977 rev. DHEW Publication No. (PHS) 78-1115. Public Health Service. Washington, D.C., May 1978.

<sup>2</sup>S. Shapiro, E. R. Schlesinger, and R. E. L. Nesbitt, Jr: Infant, Perinatal, Maternal and Childhood Mortality in the United States. Cambridge. Harvard University Press, 1968.

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<sup>4</sup>United Nations: Handbook of Vital Statistics Methods. New York. 1955.

<sup>5</sup>Public Health Conference on Records and Statistics: Background Statement on a Perinatal Mortality Index. Document No. 398, Attachment B, National Office of Vital Statistics. Washington, D.C., Jan. 1956.

<sup>6</sup>World Health Organization: Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death, Based on the Recommendations of the Eighth Revision Conference. Geneva. World Health Organization, 1967.

<sup>7</sup>National Center for Health Statistics, S. Shapiro, E. R. Schlesinger, and R. E. L. Nesbitt: Infant and perinatal mortality in the United States. Vital and Health Statistics. Series 3, No. 4. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, Oct. 1965.

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<sup>9</sup>National Center for Health Statistics: Advance Report of Final Natality Statistics, 1981. *Monthly Vital Statistics Report.* Vol. 32, No. 9 Supp. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Dec. 1983.

<sup>10</sup>National Center for Health Statistics, H. C. Chase: A study of infant mortality from linked records, comparison of neonatal mortality from two cohort studies, United States, January-March 1950 and 1960. Vital and Health Statistics. Series 20, No. 13. DHEW Pub. No. (HSM) 72-1056. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, June 1972.

<sup>11</sup>World Health Organization: A WHO Report on Social and Biological Effects on Perinatal Mortality, vol. II. Budapest. Statistical Publishing House, 1978.

<sup>12</sup>National Center for Health Statistics: Vital Statistics of the United States, Vol. I, Natality; Vol. II, Mortality, Parts A and B Public Health Service. Washington. U.S. Government Printing Office, published annually.

<sup>13</sup>National Center for Health Statistics: Vital Statistics of the United States, 1981, Vol. II, Mortality, Part A, Technical Appendix. Public Health Service. Washington. U.S. Government Printing Office. To be published.



Table 1. Perinatal mortality ratios for 3 definitions, by race: United States, 1950-81

[Perinate] Definition I includes infant deaths of less than 7 days and fetal deaths with stated or presumed period of gestation of 28 weeks or more, Perinatel Definition II includes infant deaths of less than 28 days and fetal deaths with stated or presumed period of gastation of 20 weeks or more, Perinatal Definition III includes infant deaths of less than 7 days and fat-I deaths with stated or presumed period of gastation of 20 weeks or more. Presumed gestational age not stated was changed beginning in 1969, see Technical notes. Ratios per 1,000 live births]

	Perint	etal Defini	tion I <sup>1</sup>	Perinatal Definition			Perinatal Definition III		
Year	All races	White	All other	All races	White	All other	All races	White	All othe
1981 <sup>2</sup>	126	11.4	17 6	17.0	15,1	24.6	15 7	13 9	22 8
1980 <sup>2</sup>	133	11.9	189	177	15 7	260	163	14.4	24 0
1979 <sup>2</sup>	139	126	19.5	18.3	162	267	169	15.0	24.8
1978 <sup>2</sup>	147	13.1	21 1	19.2	16.9	28 7	17.7	15.5	26 7
1977 <sup>2</sup>	155	14.0	21 9	198	17.5	29 5	183	16.2	27 1
1976 <sup>2</sup>	169	15.2	24.1	21.4	190	31 5	19.8	176	29 1
1975 <sup>2</sup>	179	*16.2	25.3	22.3	19.9	32.8	20.7	18.5	30 4
1974 <sup>2</sup>	191	17.4	26.3	23.7	21.4	34 2	22.2	20 0	31.8
1973 <sup>2</sup>	20 2	18.5	27.9	25.2	22.6	36 4	23.6	21 2	34.2
1972 <sup>2</sup>	21.4	19.5	30.0	26.3	23.5	38.7	24.8	22.2	36.4
1971 <sup>2</sup>	21 9	20.0	30 6	27.6	24.8	40.8	26.3	23.6	38 7
19702	23.2	21.1	33.2	29.3	26 2	44.0	27.8	24 9	41.7
1969	24.2	22.0	34.8	29.7	26.6	45.1	28.2	25.3	42.5
1963	261	23.8	37.7	31.9	28 5	48.6	30.4	27.3	46.0
1967	26.5	23.9	38.9	32.1	28.5	49.6	30.6	27.2	46.9
1966	27.2	24.6	39.9	32.9	29.2	50.9	31.2	27.8	47.8
1965	28.0	25.2	41.3	33.8	30 0	52.6	31.2	28.5	49.3
1964	28 4	25.5	43.2	34.3	30.3	54.7	32.5	28.8	51.2
19633	28.2	25.6	41.8	34.0	30.4	52.8	32.3	28.8	49.4
19623	28 5	26.0	41.7	34.3	30.4	52 7	32.2	29.3	49.2
1961	28.6	26.2	41.7	34.5	31.0	53.2	32.6	29.4	49.4
1960	28.9	26.5	42.4	34.8	31.4	53.2 53.6	32.8	297	49.6
1959	29 1	26.6	43.3	35.2	31.6	55.0	33.1	29.9	50.7
1958	29.6	27.0	44.5	36.0	32.3	56.5	33.6	30.4	51.9
1957	29.2	26.8	43.0	35.4	32.1	54.6	33.0	30.4	50.0
1956	293	26.9	42.8	35.4	32.1	54.0 54.2	33.1	30.2	49.8
1955	30.0	27.7	43.9	36.2	32.9	54.2 55.6	34.0	30.2	51.4
1954	30.2	27.7 27.8	43.5 44.3	36.2 36.5	32.9	55.6 55.9	34.0 34.2	31.3	51. <del>4</del> 51.5
1953	30.2	28.3	44.3 45.4	30.5 37.3	33.3 34 2	55.9 57.0		31.3	
1952	31.6	28.5 29.0	45.4 47.5				34.9		52.3
1951	31.0		-	38.1	34.6	60.3	35.6	32 5	55.2
		29.8	47.5	38.9	35.6	59 4	36.3	33.2	54.8
1950	33 0	30.5	48.1	39.7	36.4	60.0	37.0	34.1	55.3

<sup>&</sup>lt;sup>1</sup>Figures for gestational age not stated are distributed for fatal deaths; see Technical notes.



<sup>&</sup>lt;sup>2</sup>Excludes infant and fatal deaths and live births occurring to nonresidents of the United States

<sup>&</sup>lt;sup>3</sup>Figures by race exclude data for residents of New Jersey, see Vital Statistics of the United States, 1962 and 1963, Vol. II, Mortality, Part A, Technical Appendix

Table 2. Perinatel deaths and mortality ratios and rates for 3 definitions, by race and sex: United States, 1981

[Perinatal Definition I includes infant deaths of less than 7 days and fetal deaths with stated or presumed period of gestation of 28 weeks or more, Perinatal Definition II includes infant deaths of less than 28 days and fetal deaths with stated or presumed period of gestation of 20 weeks or more, Perinatal Definition III includes infant deaths of less than 7 days end fetal deaths with stated or presumed period of gestation of 20 weeks or more, see Technical notes. Ratios per 1,000 live births. Rates per 1,000 live births end specified fetal deaths]

	Penna	tel Definitio	n /²	Perinatal Definition II			Permatal Definition III		
Race and sex1	Deaths	Ratio	Rate	Deaths	Ratio	Rate	Deaths	Ratio	Rate
All races	45,854	126	126	61 717	170	16.9	56,980	15 7	15 6
Male .	24,921	134	13 3	33,702	18 1	17 9	31,066	167	165
Female	20.933	118	118	28,015	15.8	15 7	25.914	146	145
White	33,151	11.4	113	43,956	15 1	15 0	40 570	139	13.8
Male	18,006	120	120	23,992	16 1	15 9	22.077	148	147
Female	15,145	10 7	107	19,964	14 1	14 O	18,493	131	13 0
All other	12,703	176	175	17,761	24 6	24 3	16,410	228	22.5
Male	6,915	18 9	188	9,710	265	26 2	8.989	24.6	24 2
Female .	5.788	163	16.2	8.051	22 7	22 4	7,421	20 9	20 7
Black .	11,524	19 6	19.4	16,125	27 4	27 1	14,899	25.3	25 0
Male	6,296	21.1	21 0	8,852	29 7	29 3	8,199	27.5	27 1
Female	5,228	18 0	179	7,273	25 1	24 8	6,700	23.1	228

<sup>&</sup>lt;sup>1</sup>Figures for sex not stated are distributed for fetal deeths, see Technical notes

<sup>&</sup>lt;sup>2</sup>Figures for gestational age not stated are distributed for fetal deaths, see Technical notes

Table 3. Perinatal deeths and mortality ratios and rates for 3 definitions by race, for metropoliten and nonmetropoliten counties: United States, 1981

[Perinatal Definition I includes infent deaths of less than 7 days and fetal deaths with chated or presumed period of gestation of 28 weeks or more. Perinatal Definition II includes infant deaths of less than 28 days and fetal deaths with stated or presumed period of gestation of 20 weeks or more, Perinatal Definition III includes infant deaths of less than 7 days and fetal deaths with stated or presumed period of gestation of 20 weeks or more, see Technical notes. Ratios per 1,000 live births. Rates per 1,000 live births and specified fetal deaths]

	Perint	Perinatel Definition I <sup>1</sup>			Perinatal Definition II			Perinatal Definition III		
Geographic area and race	Deaths	Ratio	Rate	Deaths	Ratio	Rate	Deaths	Ratio	Rate	
United States	45.846	12.6	12.6	61,717	170	169	56 980	15 7	15 6	
White	33,147	11.4	11.3	43,956	151	150	40.570	139	13.8	
All other	12.699	17.6	17.5	17,761	24 6	24 3	16,410	228	22.5	
Black	11,521	19.6	19.4	16,125	27.4	271	14,899	25.3	25.0	
Metropolitan counties	34,192	12.6	125	46,152	17.0	168	42,562	15.7	15.5	
White	24,072	11.3	11 2	32,057	15.0	149	29,566	13.8	13.7	
All other	10,120	17.4	17.3	14,095	24.2	24.0	13,016	22.4	22.1	
Black	9.247	193	19 1	12,898	26.9	26.6	11.903	24.8	24 5	
Nonmetropolitan counties	11.654	12.8	12.7	15,565	17.1	17.0	14.398	15.8	15.7	
White	9.095	11,8	11.7	11,899	15.5	15.3	11.004	14.3	14.2	
All other	2.579	18.5	18.4	3,666	26.3	25.9	3.394	24.4	24.0	
Black	2,274	21.0	20.7	3,227	29 7	29 2	2.996	27 6	27.1	

<sup>&</sup>lt;sup>1</sup>Figures for gestational age not stated are distributed for fetal deaths; see Technical notes

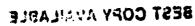


Table 4. Perinatal Definition I mortality rates and ratios by race: United States, each division and State, 1981

[Perinatel Definition | includes infent deaths of less than 7 days and fetal deaths with stated or presumed gestation of 28 weeks or more. Rates par 1,000 live births and specified fetal deaths, ratios par 1,000 live births]

		Rati	e			Rati	2		
		_	A// c	other			<i>A</i> // c	other	
Division and State	All races	White	Total	Black	All races	White	Total	Blac	
United States	12.6	11.3	17.5	19.4	12.6	11 4	17.6	19.	
New England	11.2	10 7	16.9	19.4	11 3	10.7	17.0	19.	
Maine	9.5	9.7		-	96	98	. •		
New Hampshire	9 5	9.4	*13.4	*26.3	٤ 5	9.5	°13.5	*26	
Vermont	8.1	8.1	*16.4		8 ?	8.1	*16.7		
Massachusetts	10.7	10.3	15.3	17.7	10.8	10.3	15.4 *14.3	17	
Rhode Island	129	12.7	*14 2	*138	12.9 13.6	12. <b>8</b> 12.4	20.8	*15 22	
Connecticut	13.6 12.7	12.4 11.5	20.7 17.2	22.3 18.5	12.8	11.6	17.3	18	
Aiddia Atlantic	13.2	11.8	17.2	19.2	13.3	11.9	17.8	19	
New York	11.4	10.2	15.4	16.5	11.5	103	15.5	16	
Pennsylvania	12.8	12.0	18.1	19.3	12.9	12.0	18.2	19	
East North Central	13.3	11.9	19.7	20.8	13.3	12.0	19.9	20	
Ohio	13.1	12.1	19.1	19.9	13.2	10 7	19.2	20	
Indiane	12.9	12.2	18.2	19.2	13.0	12.3	18,4	19	
Illinos	14.7	12.8	21.0	21.9	14.8	12.9	21.2	22	
Michigan	12.9	11.3	20.4	21 7	13.0	11.3	20.6	21	
Wisconsin	11.1	10.8	14.2	15.3	11.1	108	14.3	15	
Vest North Centrel	11.5	11.0	16.2	18.5	11.6	11.1	164	18	
Minnesota	10.7	10.2	16.9	23.3	10.7	10.3	17.0	2:	
lowe	10.5	10.4	12.3	°14.2	10.5	10 5	12.4	•14	
Missouri	13.1	12.4	16.7	17.7	13 2	12.5	16.8	1	
North Dekota	105	10.3	*12.6	*8.8	10.6	10.4	*12.7	••	
South Dakota	11.2	10.3	16.3	*30.3	11.2	10.4	16.4	•3	
Nebreska	10.6	10.3	14.8	17.4	10.7	10 4	14.9 17.9	1 2	
Kenses	12.2	11.5	17.8	20.1	12.2 14.6	11.6 12.0	20.5	2	
outh Atlantic.	14.5 16.9	11.9 13.5	20.3 26.9	20.9 28.1	17.0	13.5	27.2	2	
Delaware	13.6	11.4	18.1	18.9	13.7	11.5	18.2	1	
Meryland	26.5	18.1	28.2	28.3	26.7	18.2	28.5	2	
Virginie	14.1	12.0	19.8	20.8	14.2	12.1	19.9	2	
West Virginia	14.6	14.3	20.7	23.3	14.7	144	20.9	2	
North Carolina	14.4	12.1	19.3	20.0	14.5	12.2	19.4	2	
South Carolina	16,5	12.2	22.8	23.0	16.7	12.3	23.0	2	
Georgie	14.5	11.5	19.7	20.0	14.6	11.5	19.8	2	
Florida	14.3	11.8	20.8	21.5	14.4	11.9	21.0	2	
ist South Centrel	14.8	12.2	21.2	21.5	14.9	12.3	21.4	2	
Kentucky	13.6	13.1	18.3	19.2	13.7	13.2	18.5	1	
Tennessee	14.2	11.9	21.7	22.1	14.3	120	21.9	2	
Alebems	14.7	11 6	20.3	205	14.8	11.7	20.5	2	
Mississippi	17.2	12.2	22.6	22.6	17.4	12.2	22.8	2	
/est South Central	12.3	11.3	16.3	17.4	12.4	113	16.4	1	
Arkensas	12.1	9.8	18.8	19.3	12.2	9.9	19.0 18.4	11 13	
Louisiana	13.9	11.2	18.2	18.8	14.0	11.2	14.1	1:	
Oklahoma	12.5	12.2	14.0	16.1 15.9	12.6 11.9	12.3 11.4	14.9	- i	
Texas	11.9 10.5	11.3 10.3	14. <b>8</b> 11.7	18.7	10.5	104	11.8	1	
Montena	9.6	9.7	*9.1	*28 9	9.6	9.7	•9.2	•30	
Idaho	9.5	9.8	*1.6	*10.9	9.6	9.8	*1.6	•1	
Wyoming	12.9	13.2	*5.6		12.9	13.3	*5.d		
Coloredo	10.9	10.7	13.0	16.0	10.9	10 7	13.1	1	
New Mexico <sup>1</sup>	8.9	9.3	7.2	<b>*</b> 15.7	9.0	93	7.2	•1	
Arizone	11.3	10.8	13.8	23.5	11.4	10.9	13.9	2	
Uteh	9.7	9.5	13.0	<b>°</b> 21.0	9.7	9.6	13.1	•2	
Nevada	11.3	10.9	13.0	17.7	11.3	11.0	13.1	1	
ocific	10.8	10.6	11 6	15.2	10.9	10.7	11.7	1	
Washington	10.4	10.4	10.6	11.3	10.4	10.4	10.6	1	
Oregon	10.1	10.1	10.4	*19.3	10.2	10.2	10.5	• 11	
California.	11.1	10.d	12.2	15.3	11.1	10.9	12.2	1!	
Alaska,	10.3	9.0	13.3	*21.7	10.3	90	13.4	•2	
Hewan	10.2	11.1	9.9	*9.3	10.2	11.1	10.0	•	

<sup>&</sup>lt;sup>1</sup>The rate and ratios according to Perinatal Definition I may be alightly affected by a coding problem with fatal deaths occurring in New Mexico; see Technical notes.





# **Technical notes**

#### Sources of data

Counts of fetal deaths are based on data from reports of fetal deaths; counts of infant deaths are based on information from certificates of death; and counts of live births are based on information from certificates of live birth. For detailed information on the processing, classification, and tabulation of these events, see the technical appendixes of the respective volumes of Vital Statistics of the United States.<sup>12</sup>

### Classification of data

Period of gestation—The period of gestation is the number of completed weeks elapsed between the first day of the last normal menstrual period (LMP) and the date of delivery. The first day of the last normal menstrual period is used as the initial date as it can be more accurately determined than the date of conception, what usually occurs 2 weeks after LMP. Data on period of gestation are computed from information on "date of delivery" and "date last normal menses began." If "date last normal menses began" is not on the record or the calculated gestation falls beyond a duration considered biologically plausible, "gestation in weeks" or "physician's estimate of gestation" is used.

Gestation not stated—A fetal death with gestation not stated is presumed to be of 20 weeks gestation or more if (1) the death occurred in a State that requires reporting of all fetal deaths of gestational age 20 weeks or more, or (2) the fetus weighed 500 grams or more in a State that requires reporting of all fetal deaths regardless of gestational age. For Perinatal Definition I, fetal deaths with gestation not stated but presumed to be 20 weeks or more are allocated to 28 weeks or more according to the proportion of fetal deaths with stated gestational age that fall into that category. For Perinatal Definitions II and III, fetal deaths with presumed gestation of 20 weeks or more are included with those of stated gestation of 20 weeks or more. For all three definitions, fetal deaths with not-stated sex are allocated within gestational age groups on the basis of the distribution of stated cases.

Race—The race of the fetus or infant is based on the race of the parents. If the parents are of different races, the following rules apply. (1) When only one parent is white, the fetus or infant is assigned to the other parent's rac. (2) When neither parent is white, the fetus or infant is assigned to the father's race with one exception: If the mother is Hawaiian or part-Hawaiian, the fetus or infant is classified as Hawaiian.

When the race \_`one parent is missing or ill-defined, the race of the other determines that of the fetus or infant. When the race of both parents is missing, the race of the fetus or infant is allocated to the specific race of the fetus or infant on the preceding record.

NOTE: A list of references follows the text.

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## Quality of data

All States have adopted laws that require the registration of births and deaths and reporting of fetal deaths. It is believed that over 99 percent of the births and deaths occurring in this country are registered.

State requirements for reporting of fetal deaths vary. Most States require reporting of fetal deaths of gestations of 20 weeks or more. There is substantial evidence that not all fetal deaths for which reporting is required are reported.

For States having a minimum gestation period requirement, underreporting of fetal deaths may occur near the lower limit. In areas requiring the reporting of fetal deaths of 20 weeks or more, the total number reported for 20-23 weeks is lower than the number reported for 24-27 and 28-31 weeks gestation. In contrast, in areas requiring reporting of all fetal deaths, regardless of the period of gestation, the number reported for 20-23 weeks is larger than the number for 24-27 and 28-31 weeks.

To maximize comparability of data by year and by State, fetal death and perinatal mortality statistics are based on fetal deaths of 20 weeks or more gestation. Beginning with 1969, fetal deaths of not stated gestation were excluded for States requiring reporting of all products of conception except for those with a stated birth weight of 500 grams or more. In 1981 this rule applied to Colorado, Georgia, Hawaii, New York, Rhode Island, and Virginia.

Variations in fetal-death reporting requirements and practices have implications for comparing perinatal rates among States. Because reporting is generally poorer near the lower limit of the reporting requirement, States that require reporting of all products of conception regardless of gestation are likely to have more complete reporting of fetal deaths of 20-27 weeks than are other States. The larger number of fetal deaths reported by these "all peri is" States may result in higher perinatal rates compared with States for which reporting is less complete. Accordingly, reporting completeness may account, in part, for differences among the State perinatal rates, particularly differences for Perinatal Definitions II and III which use data for fetal deaths of 20-27 weeks.

Comparability problems also arise from the inconsistent application of the definition of fetal death by individual reporting units. For example, some live-born infants who die shortly after birth, particularly those born prematurely who die before the umbilical cord is severed or while the placenta is still attached, may erroneously be reported as fetal deaths. This type of error may be more of a problem in States lacking a precise definition of fetal death. Errors in application of the definition of live birth and fetal death can have the effect of increasing perinatal ratios by decreasing the number of live births in the denominator. Perinatal rates, however, are not as affected by this type of error.

Another problem that may affect comparability of perinatal rates among States involves fetal deaths with unknown gestation. Fifteen percent of all U.S. fetal death records are of

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unknown gestational age. There is considerable variation among the States in the proportion of fetal deaths of unknown gestation. These fetal deaths are allocated in the perinatal statistics to 20–27 weeks and 28 weeks or more, according to the proportion of fetal deaths with known gestation that fall into the two categories. For example, a State that requires reporting of all products of conception, and that also has a relatively high proportion of fetal deaths with unknown gestation, may have a larger proportionate share of fetal deaths allocated to 20–27 weeks than a State that has a similar proportion of fetal deaths with unknown gestation but which requires reporting only for 20 weeks gestation or more.

Gestational age of the 183 fetal deaths occurring in New Mexico was not coded in 1981 and therefore was assigned to gestational age not stated. Most of these were to residents of New Mexico. Since the fetal deaths with not stated gestation are allocated as described above, the effect of the coding problem on the number of perinatal deaths, rates, and ratios for the United States, the Mountain Division, and New Mexico is assumed to be small. A more detailed discussion is published in the Vital Statistics of the United States for 1981.<sup>13</sup>

## Computation of rates

The rates shown in figure 2 of this report were computed using the following formulas.

Infant mortality rate per 1,000 live births	Number of deaths less than 1 year of age during a period Number of live births during the same period
Neonatal mortality rate per 1,000 live births	Number of deaths less than 28  days of age during a period  Number of live births during the  same period

NOTE: A list of references follows the text.

Early neonatal mortality rate per 1,000 live births	Number of deaths less than 7 days  of age during a period  Number of live births during the same period
Late neonatal mortality rate per 1,000 live births	Number of deaths 7-27 days of age  during a period  Number of live births during the same period
Postneonatal mortality rate per 1,000	Number of deaths 28 days-11  months of age during a period Number of live births during the same period
Perinatal Definition I mortality rate per 1,000 live births and fetal deaths	Number of infant deaths of less than 7 days + number of fetal deaths with stated or presumed period of gestation of 28 weeks or more during a period  Number of live births + number of fetal deaths with stated or presumed period of gestation of 28 weeks or more during the same period
Late fetal death rate per 1,000 live births and fetal	Number of fetal deaths of 28 weeks or more stated or presumed gestation during a period Number of retal deaths of 28 weeks × 1,000 or more stated or presumed

de oths

gestation + number of live births during the same period

## **Symbols**

- --- Data not available
- ... Category not applicable
- Quantity zero
- 0.0 Quantity more than 0 but less than 0.05
- Z Quantity more than zero but less than 500 where numbers are rounded to thousands
- \* Figure does not meet standards of reliability or precision (base of measure less than 20 events)