

For a healthy baby

It is not possible to guarantee a healthy baby. However, there are several things that can be done to increase the chances of having a healthy baby.

Studies have shown that many birth defects occur early in a pregnancy. Every woman should do the following when thinking about a pregnancy:

- See your doctor before getting pregnant
- Control existing medical concerns (obesity, diabetes)
- Do not smoke
- Take 400 micrograms of folic acid daily
- Take care of yourself (rest, exercise, well-balanced diet)
- Avoid harmful chemicals
- Avoid alcohol and street drugs
-

Congenital Abnormalities Registry, Education and Surveillance System Goals

- Collect consistent and accurate data regarding birth defects incidence in a timely manner
 - Active case reviews conducted at all hospitals, clinics and facilities involved in birth defects
- Refer necessary information to health care agencies to ensure that infants, children and families are receiving the best care possible
- Educate health care providers and support staff about registry importance and requirements
- Study the rates and trends of birth defects in West Virginia to determine possible indicators
- Share findings on congenital abnormalities surveillance and education

CDC
Centers for Disease Control and Prevention

Department of Health and Human Resources
Bureau for Public Health
Office of Maternal, Child and Family Health
Research, Evaluation and Planning
350 Capitol Street, Room 427
Charleston, WV 25301
Phone: (304) 558-5388 or 800-642-8522
Fax: (304) 558-3510



Congenital Abnormalities Registry, Education and Surveillance System

WV Birth Defects Surveillance Program

What is a Congenital Abnormality?

It is a condition that occurs during the baby's development. Usually known as a birth defect, it could affect how the body looks, works or both. It may be found during the pregnancy, at birth or a few years after birth. Some are easily recognized, while others can only be identified by specialized testing. A congenital abnormality could range from mild to severe, even ending in death. With advanced medical technology, many congenital abnormalities can be corrected.

Where is data obtained

- Hospital records
- Birth and death certificates
- Specialty clinics
- Birthing facilities

How data is used

The data collected from active case ascertainment will be used for the following:

- **C**oordinate health services
- **A**nalyze the rates and trends of birth defects
- **R**eview data and risk factors for linkages/causal relationships
- **E**valuate timeliness/effectiveness of case ascertainment
- **S**how strengths/weaknesses in data collection process
- **S**ummarize/distribute findings in annual reports

West Virginia Specific Data

(collected from HSC Statistical Brief *Birth Defects Surveillance System 1990-1999 WV Residents Brief No. 6*)

Congenital abnormalities accounted for 11.3% of all fetal deaths.

Between 1990 and 1999, 8,096 WV residents were observed to have one or more congenital abnormalities, a rate of 37.7 per 1000 births.

Babies born to women 35 years and older had higher rates of congenital abnormalities, 42.2 per 1000 live births as compared to 37.7 for women of all ages.

Infants weighing less than 1500 grams (3 lbs, 5 oz) had a 211.6 rate per 1000 live births. Infants 2500 grams or more, only 31.8 per 1000 live births.

A rate of 31.9 per 1000 live births for infants 37 weeks or more gestational period as compared to 92.1 under 37 weeks gestational age.

Multiple births affect rates at 63.4 per 1000 compared to single births at 36.8 per 1000.

Timeliness and quality of prenatal care. Both delays in prenatal care along with infrequent prenatal visits increased the rates of congenital abnormalities.

Alcohol consumption affected rates 71.6 per 1000 live births to 37.2 per 1000 live births.

Infants of mothers who smoked had a higher risk of congenital abnormalities than those who did not smoke. This rate was 41.6 for smoking to 36.4 for non-smoking mothers per 1000 live births.

Confidentiality Assurances

HIPAA 164.512 “ A covered entity may disclose protected health information for the public health activities and purposes described in this paragraph [164.5129(b)(1)] to:

I) A **public health authority** that is **authorized by law** to collect and receive such information for the purpose of preventing or controlling disease, or disability, including but not limited to, the **reporting of disease**, injury, vital events such as birth or death and the conduct of **public health surveillance**, public health investigations, and public health interventions...”

Related Links for Office of Maternal, Child and Family Health

Abstinence Education Initiative
Access to Rural Transportation
Adolescent Health Initiative
Adolescent Pregnancy Prevention Initiative
Birth Score
Birth to Three
Breast and Cervical Cancer Screening Program
Children's Oral Health Services
Children's Reportable Diseases
Children with Special Health Care Needs
Family Planning
Genetics Project
HealthCheck
Newborn Hearing
PRAMS
Right From The Start
SIDS Project