The Burden of Small Babies

n 2006–2007, more than 54,000 babies across Canada were born preterm or small for their gestational age (SGA) - one in seven Canadian births.

Risk factors for pre-term babies:

- Multiple-birth babies were nearly 17 times as likely to be born preterm as singleton babies.
- Mothers who were diagnosed with hypertension and/or diabetes were up to six times more likely to deliver a preterm baby compared to women without those conditions.
- In 2006–2007, mothers age 35 and older had a preterm birth rate of nearly 10%, compared to 8% for those age 20 to
- The preterm birth rate was also significantly higher for babies delivered by Caesarean section (13.3%) compared to induced (6.9%) or non-induced vaginal deliveries (6.5%).

Risk factors for small-for-gestational-age babies:

- Mothers living in urban areas were 1.3 times or 30% more likely to have a small-for-gestational-age (SGA) birth, while mothers living in low-income neighbourhoods were also at increased risk (1.5 times or 50% more likely compared to mothers living in high-income neighbourhoods).
- Women with hypertension were almost twice as likely to deliver an SGA baby. Diabetes, on the other hand, was not shown to result in a higher rate of SGA births.

The lower the birth weight or gestational age of a newborn, the higher the hospital costs.

- In 2005–2006, the average in-hospital cost for a low birth weight baby (less than 2,500 grams or five and a half pounds) was more than 11 times higher than for those weighing 2,500 grams or more (\$12,354 compared to \$1,084).
- Average hospital costs were nine times higher for pre-term babies than for full-term babies (\$9,233 versus \$1,050). Among multiple-birth babies who were also preterm, the average cost was about seven times higher (\$12,479 versus \$1,871).
- SGA babies had an average hospital cost less than twice that of a non-SGA baby \$2,297 versus \$1,407.

SOURCE: Canadian Institute for Health Information: Too Early, Too Small: A Profile of Small Babies Across Canada. <www.cihi.ca>.



CIHI has additional statistics on various childbirth indicators that can be easily accessed through QuickStats at www. cihi.ca. Highlights from the 2007-2008 indicators (excluding Quebec) include the following:

Primary Caesarean section rates

- In 2007-2008, Newfoundland and Labrador and Prince Edward Island had the highest rate of primary Caesarean sections (or women having a C-section for the first time), with 22.8% and 22.6% of all live births delivered by primary C-section.
- Manitoba and Saskatchewan had the lowest primary Csection rates, at 13.4% and 15.6%, respectively.

Epidural rate for vaginal deliveries

- In 2007-2008, 58.2% of vaginal deliveries in Ontario and 51.3% of vaginal deliveries in Nova Scotia were preceded by an epidural, the highest among the provinces.
- British Columbia and Prince Edward Island had the lowest epidural rates for vaginal delivery, at 29.4% and 33.5%, respectively.