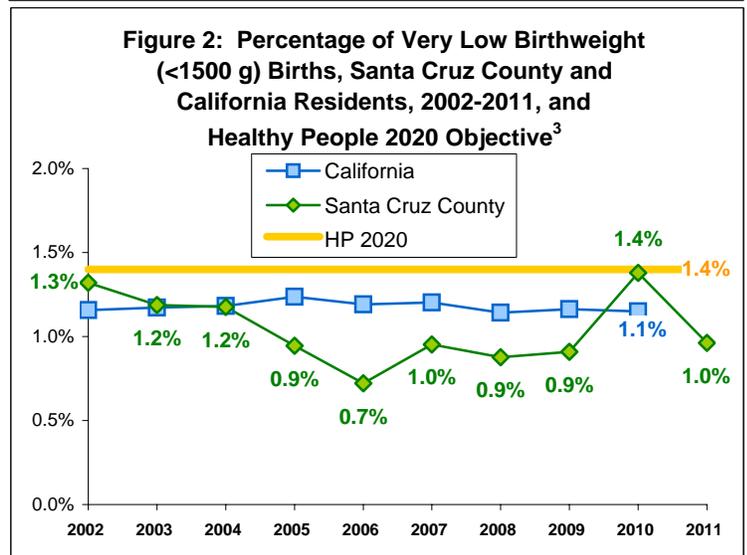
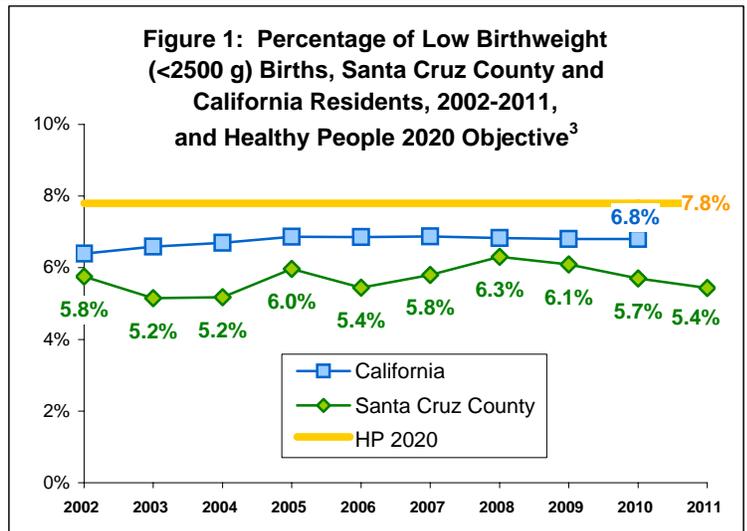


# LOW BIRTHWEIGHT

<b>Importance</b>	Low birthweight (LBW) reflects both the infant's current and future morbidity as well as maternal exposure to health risks. For the infant, LBW indicates whether a child has had a "healthy start" because LBW is a predictor of mortality and morbidity over the life course. For example, LBW has been associated with developmental and growth problems, a higher risk of cardiovascular disease later in life, and a greater rate of respiratory problems. Maternal exposures of concern includes the mother's health behaviors, access to health care, and the social and economic environment to which she is exposed. <sup>1</sup>
<b>Definitions</b>	<p><u>Low Birthweight (LBW)</u>: weight less than or equal to 2500 grams (5 lbs 8 oz).</p> <p><u>Very Low Birthweight (VLBW)</u>: weight less than or equal to 1500 grams (3 lbs 5 oz).</p>
<b>Healthy People 2020 Objectives</b>	<p>Reduce:</p> <ul style="list-style-type: none"> <li>- Low Birthweight to 7.8% (MICH 8.1)</li> <li>- Very Low Birthweight to 1.4% (MICH 8.2)</li> </ul>

The primary cause of low birthweight (LBW) is being born premature (<37 weeks gestation), which means the baby had less time to grow and gain weight. Another cause of LBW is intrauterine growth restriction (IUGR), which occurs when the baby does not grow well during pregnancy due to the mother's health, placental problems, or birth defects.<sup>2</sup> Full-term babies with IUGR may be physically mature, but tend to be small and weak. Premature babies with IUGR are both very small and physically immature. Smaller babies have a more difficult time eating, gaining weight, fighting infections, and meeting developmental milestones. Other factors associated with the risk of LBW include race, mother's age, multiple births (e.g. twins), and mother's health. For example, Black babies are twice as likely to be LBW compared to White babies, teen mothers are at a higher risk of having a LBW baby, twins are often premature, and babies born to mothers who used drugs or who had poorer prenatal care are at an increased risk for being LBW.<sup>2</sup>

Prenatal care is a key factor in preventing premature and LBW babies. During prenatal care visits, the health of the mother and fetus can be monitored. It is also recommended that pregnant women eat a healthy diet, gain the proper amount of weight, and avoid alcohol, tobacco, and other drugs to prevent LBW.



Over the last ten years, the percentage of LBW babies born to Santa Cruz County residents has been lower than the state, and both the county and the state have been better than the new Healthy People 2020 Objective (see Figure 1). Very low birthweight (VLBW) rates are more variable at the county level, due to small numbers, but state rates are more stable, and both have consistently been lower than the Healthy People 2020 Objective (see Figure 2). In 2011, 70% of the county's LBW babies were also premature (<37 weeks gestations). Among the 116 multiple births in 2011, 45% were premature, and of those, 79% were LBW.<sup>3</sup>

# LOW BIRTHWEIGHT

<p><b>Primary Prevention Activities</b></p>	<p><b>Comprehensive Perinatal Services Program (CPSP):</b> A statewide program that provides enhanced reimbursement for a wide range of services to Medi-Cal eligible pregnant and post-partum women. Assessments, reassessments, treatments, interventions, and referrals are provided in the areas of obstetrics, nutrition, health education, and psychosocial services.</p> <p><b>Pregnancy Outreach and Education (POE):</b> Program providing education, information, referrals, and coordination to assist pregnant women in obtaining early and comprehensive prenatal health care and other needed services. In particular, the program assists pregnant women with substance use and/or mental health concerns.</p>	
<p><b>Helpful Websites</b></p>	<p>March of Dimes</p>	<p><a href="http://www.marchofdimes.com/professionals/medicalresources_lowbirthweight.html">http://www.marchofdimes.com/professionals/medicalresources_lowbirthweight.html</a></p>
	<p>Lucile Packard Children's Hospital at Stanford</p>	<p><a href="http://www.lpch.org/DiseaseHealthInfo/HealthLibrary/hrnewborn/lbw.html">http://www.lpch.org/DiseaseHealthInfo/HealthLibrary/hrnewborn/lbw.html</a></p>
	<p>Centers for Disease Control and Prevention (PedNSS)</p>	<p><a href="http://www.cdc.gov/pednss/how_to/interpret_data/case_studies/low_birthweight/what.htm">http://www.cdc.gov/pednss/how_to/interpret_data/case_studies/low_birthweight/what.htm</a></p>
	<p>A.C.O.G. ("Start Strong" Initiative)</p>	<p><a href="http://www.acog.org/About_ACOG/News_Room/News_Releases/2012/ACOG_Supports_Start_Strong_Initiative">http://www.acog.org/About_ACOG/News_Room/News_Releases/2012/ACOG_Supports_Start_Strong_Initiative</a></p>
<p><b>Sources</b></p>	<p>(1) County Health Rankings and Roadmaps. BIRTH OUTCOMES. <a href="http://www.countyhealthrankings.org/health-outcomes/birth-outcomes">http://www.countyhealthrankings.org/health-outcomes/birth-outcomes</a>.</p> <p>(2) Lucile Packard Children's Hospital at Stanford. Low Birthweight. <a href="http://www.lpch.org/DiseaseHealthInfo/HealthLibrary/hrnewborn/lbw.html">http://www.lpch.org/DiseaseHealthInfo/HealthLibrary/hrnewborn/lbw.html</a>.</p> <p>(3) AVSS: Automated Vital Statistics System, Birth Certificate Data Request (unpublished), County of Santa Cruz, Health Services Agency, Public Health Department. 2011 Jan 1 - 2011 Dec 31, data extracted on 2012 Feb 7.</p>	