

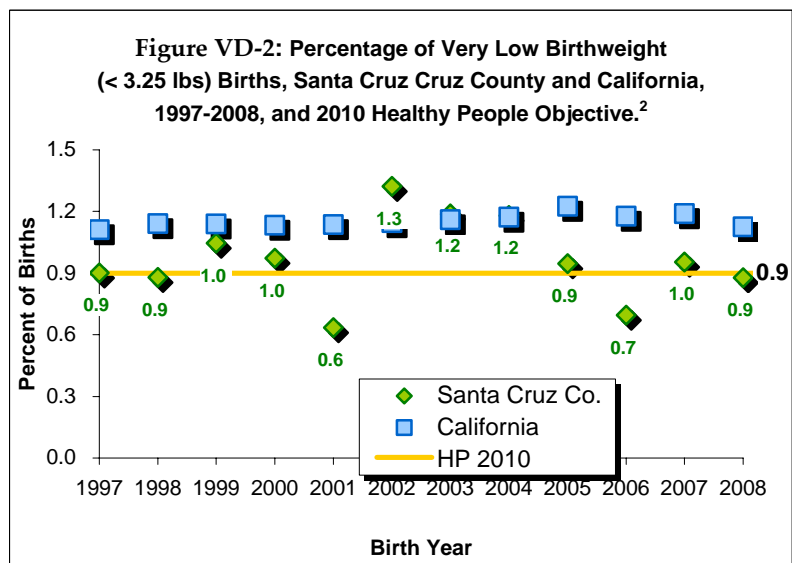
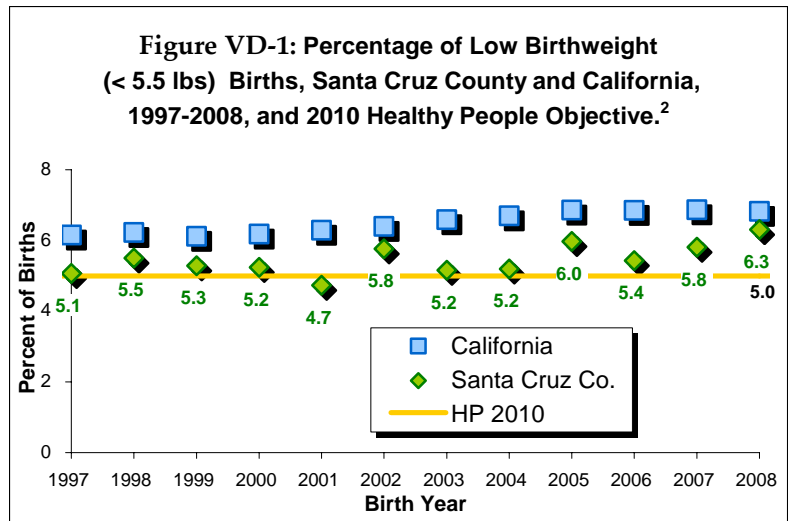
D. LOW BIRTHWEIGHT

<p>General Importance</p>	<p>About 1 in every 12 babies in the United States is born with low birthweight.¹ Advances in newborn medical care have greatly reduced the number of deaths associated with low birthweight. However, a small percentage of survivors develop mental retardation, learning problems, cerebral palsy, and vision and hearing loss.</p>
<p>General Definitions</p>	<p><u>Low Birthweight (LBW)</u>: Weight less than or equal to 2500 grams or 5.5 lbs. <u>Very Low Birthweight (VLBW)</u>: Weight less than or equal to 1500 grams or 3.5 lbs.</p>
<p>Healthy People 2010 Objective</p>	<ul style="list-style-type: none"> ▪ Reduce percent of low birth weight (< 5.5 lbs) to 5% of births ▪ Reduce percent of very low birth weight (< 2.5 lbs) to 0.9% of births

Premature labor (gestation < 37 weeks) often results in the birth of a low birth weight baby (under 2500g or 5.5 lbs).¹ Although the causes are not fully understood, there is a significantly elevated risk for mothers who previously had a premature baby, mothers pregnant with twins, triplets or more, and mothers with certain abnormalities of the uterus or cervix. Other possible risk factors include birth defects, chronic health problems in the mothers, smoking, alcohol and illicit drug use, certain infections, placental problems, inadequate maternal weight gain, and socioeconomic factors.¹

Low birth weight babies start out life with greater odds of having health problems during the newborn period as well as later in life, with greater risk of neurological problems, learning disabilities, and both acute and chronic disease.¹ Many of these babies require specialized care in a neonatal intensive care unit. Serious medical problems are most common in babies born at very low birth weight (under 1500g or 3.5 lbs).

In Santa Cruz County, there has been a significant increase in the percentage of low birth weight births from 1997 to 2008 (see Figure VD-1).² By race/ethnicity, the percentage is increasing among White mothers, while not significantly changing among Latina mothers.² This difference might be partly due to multiple births (twins/triplets), which have been more frequent among low birth weight births to White mothers than to Latina mothers. Over the past three years, 28%-50% of low birth weight births to White mothers were multiple births, compared to 17%-18% of low birth weight births to Hispanic mothers.³



<p>Primary Prevention Activities</p>	<ul style="list-style-type: none"> ▪ <u>Comprehensive Perinatal Services Program (CPSP)</u> Health care practitioners in the community provide prenatal care that also includes assessments, education, childbirth education classes, support, and referrals for other needed services. All pregnant Central Coast Alliance for Health members and pregnancy-only Medi-Cal recipients are eligible to receive services when attending a CPSP provider for prenatal care. ▪ <u>Pregnancy Outreach and Education (POE)</u> Program provides 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>Sources</p>	<ol style="list-style-type: none"> 1. Low Birthweight Quick Reference: Fact Sheet. March of Dimes. May 2008. http://www.marchofdimes.com/professionals/14332_1153.asp 2. California County MCAH Data, Santa Cruz County. Family Health Outcomes Project (FHOP). University of California, San Francisco 27 Apr 2010 http://familymedicine.medschool.ucsf.edu/fhop/htm/ca_mcah/counties/44santacruz.htm 3. 2009 Birth Certificate Data (unpublished). County of Santa Cruz, Vital Statistics.
-----------------------	---