Stillbirth Rate and Perinatal Mortality Rate, Michigan, 2010-2017

Prepared by Maternal Child Health (MCH) Epidemiology Section,
Michigan Department of Health and Human Services (MDHHS)
Data source: Michigan Resident Live Birth Files (12/12/2018), Infant Mortality Files (1/23/2019),
and Fetal Death Files (07/29/2019), Division for Vital Records and Health Statistics, MDHHS
October 2019



11/22/2019

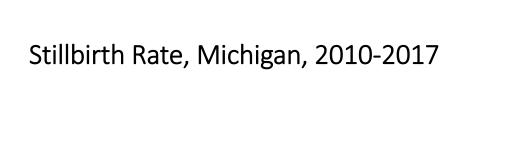
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This presentation provides updated stillbirth and perinatal mortality statistics for the State of Michigan.

This presentation was prepared by the Maternal and Child Health Epidemiology Section, Michigan Department of Health and Human Services (MDHHS)

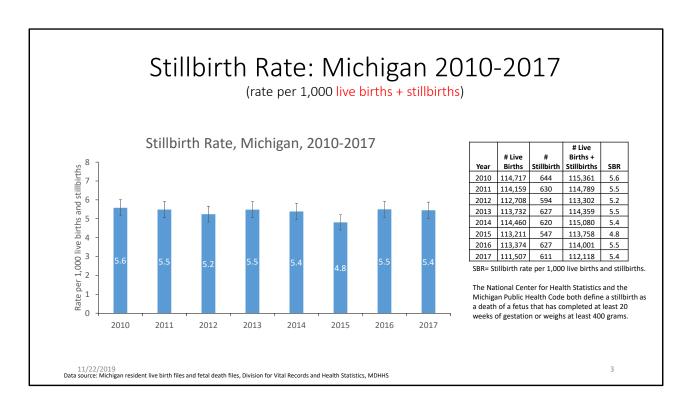
Data source: Michigan Resident Live Birth Files (12/12/2018), Infant Mortality Files (1/23/2019), and Fetal Death Files (07/29/2019), Division for Vital Records and Health Statistics, MDHHS

Revised: October 2019

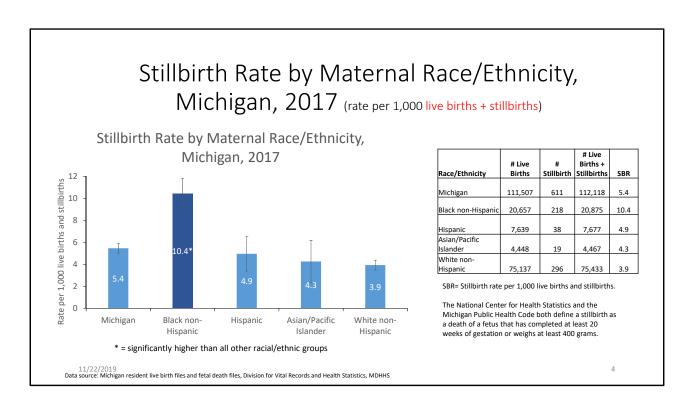


The next several slides contain updated stillbirth statistics for the State of Michigan.

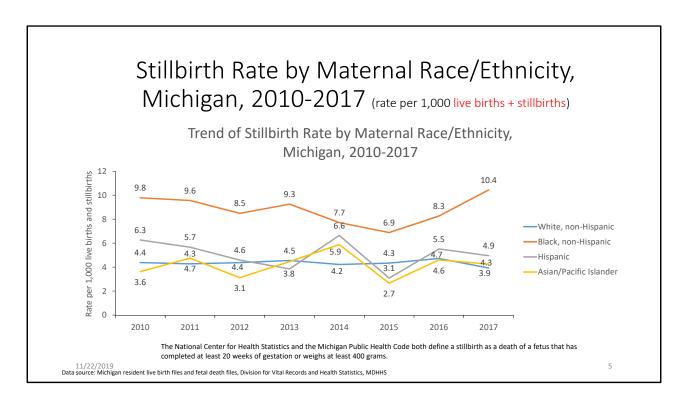
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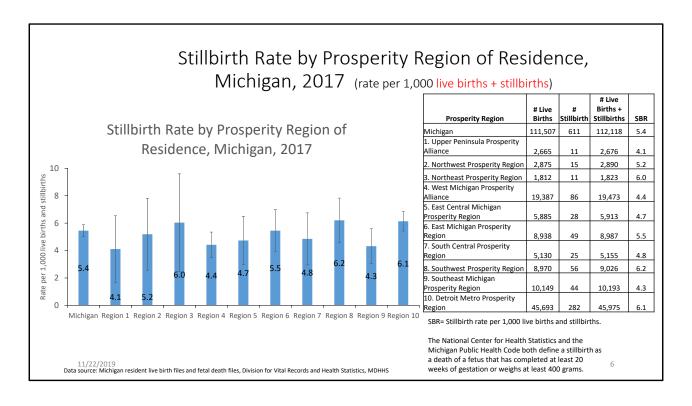
Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the stillbirth rates within Michigan from 2010 to 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, but the rate is now expressed per 1,000 live births and stillbirths. The stillbirth rate has fluctuated a bit over the last eight years, but there were no statistically significant changes. In 2017, the stillbirth rate was 5.4 per 1,000 live births and stillbirths.



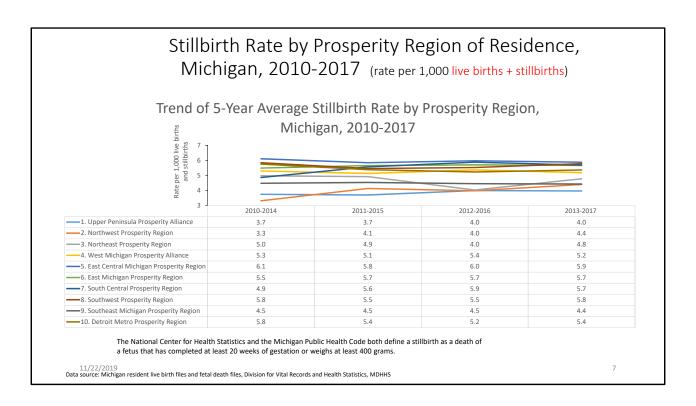
Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the stillbirth rates by maternal race/ethnicity within Michigan in 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, but the rate is now expressed per 1,000 live births and stillbirths. In 2017, there was over a two-fold difference in stillbirth rates by maternal race and ethnicity, from a high of 10.4 per 1,000 live births and stillbirths for Black non-Hispanic women to a low of 3.9 per 1,000 live births and stillbirths for White non-Hispanic women. The stillbirth rate among Black non-Hispanic women was significantly higher than the rate among other racial/ethnic groups.



Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the trend of stillbirth rates by maternal race/ethnicity within Michigan from 2010 through 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, but the rate is now expressed per 1,000 live births and stillbirths. The stillbirth rate has fluctuated quite a bit over the last eight years by maternal race/ethnicity with Black non-Hispanic women experiencing a steady increase in their stillbirth rate since 2015.



Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the stillbirth rates by prosperity region of residence at birth within Michigan in 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, but the rate is now expressed per 1,000 live births and stillbirths. In 2017, the stillbirth rate was the highest (6.2 per 1,000 live births and stillbirths) in the Southwest Prosperity Region and was the lowest in the Upper Peninsula Prosperity Alliance (4.1 per 1,000 live births and stillbirths), but there were no statistically significant differences among prosperity regions.

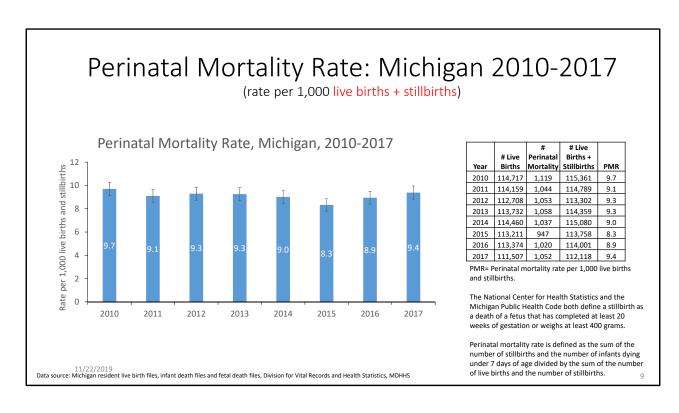


Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the trend of 5-year average stillbirth rates by prosperity region of residence at birth within Michigan from 2010 through 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, but the rate is now expressed per 1,000 live births and stillbirths. The stillbirth rate has fluctuated a little bit over the years by prosperity region. In 2013-2017, the average stillbirth rate was the highest in the East Central Prosperity Region (5.9 per 1,000 live births and stillbirths) and was the lowest in the Upper Peninsula Prosperity Alliance (4.0 per 1,000 live births and stillbirths).

Perinatal Mortality Rate, Michigan, 2010-2017

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The next several slides contain updated perinatal mortality statistics for the State of Michigan.

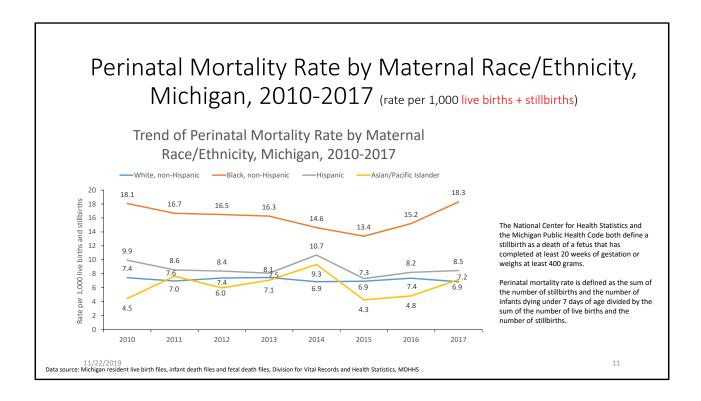


Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the perinatal mortality rates within Michigan from 2010 to 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, and perinatal mortality rate is defined as the sum of the number of stillbirths and the number of infants dying under 7 days of age divided by the sum of the number of live births and the number of stillbirths and expressed per 1,000 live births and stillbirths. The perinatal mortality rate has fluctuated a bit over the last eight years, but no statistically significant changes were observed. In 2017, the perinatal mortality rate was 9.4 per 1,000 live births and stillbirths.

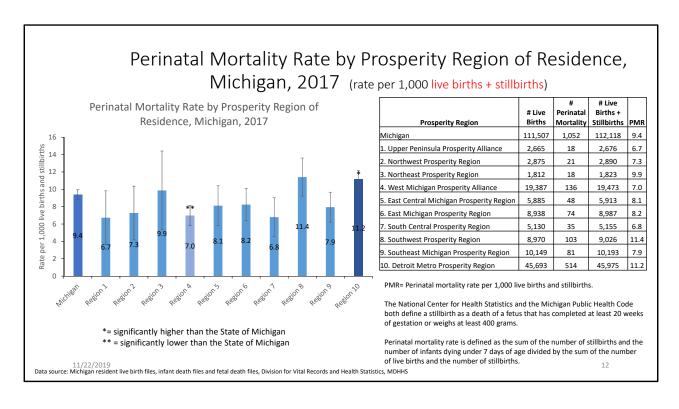
Perinatal Mortality Rate by Maternal Race/Ethnicity, Michigan, 2017 (rate per 1,000 live births + stillbirths) # Live # Live Perinatal Births + Perinatal Mortality Rate by Maternal Race/Ethnicity Births Mortality Stillbirths Race/Ethnicity, Michigan, 2017 Michigan 111.507 112.118 9.4 22 Black non-Hispani 20,657 382 20,875 18.3 7,639 7,677 8.5 Hispanic Asian/Pacific Islander 4,448 4,467 7.2 10 8 6 White non PMR= Perinatal mortality rate per 1,000 live births and stillbirths. The National Center for Health Statistics and the Michigan Public Michigan Black non-Hispanic Asian/Pacific White non-Health Code both define a stillbirth as a death of a fetus that has Hispanic Islander Hispanic completed at least 20 weeks of gestation or weighs at least 400 * = significantly higher than all other racial/ethnic groups Perinatal mortality rate is defined as the sum of the number of stillbirths and the number of infants dying under 7 days of age divided by the sum of the number of live births and the number of stillbirths.

Rate per 1,000 live births

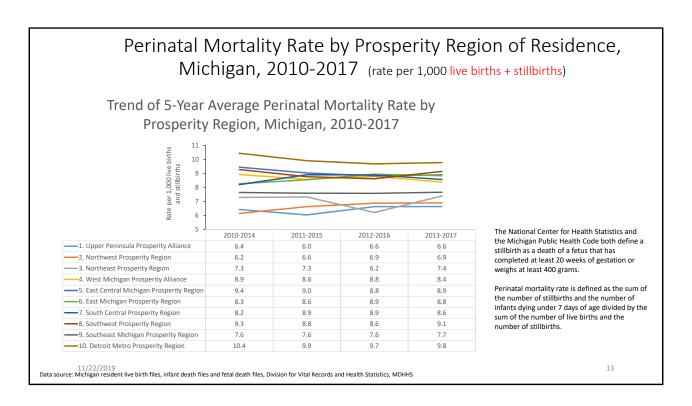
Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the perinatal mortality rates by maternal race/ethnicity within Michigan in 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, and perinatal mortality rate is defined as the sum of the number of stillbirths and the number of infants dying under 7 days of age divided by the sum of the number of live births and the number of stillbirths and expressed per 1,000 live births and stillbirths. In 2017, there was over a two-fold difference in perinatal mortality rates by maternal race and ethnicity, from a high of 18.3 per 1,000 live births and stillbirths for Black non-Hispanic women to a low of 6.9 per 1,000 live births and stillbirths for White non-Hispanic women. The perinatal mortality rate among Black non-Hispanic women was significantly higher than the rate among other racial/ethnic groups.



Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the trend of perinatal mortality rates by maternal race/ethnicity within Michigan from 2010 through 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, and perinatal mortality rate is defined as the sum of the number of stillbirths and the number of infants dying under 7 days of age divided by the sum of the number of live births and the number of stillbirths and expressed per 1,000 live births and stillbirths. The perinatal mortality rate has fluctuated quite a bit over the last eight years by maternal race/ethnicity. In 2017, there was over a two-fold difference in perinatal mortality rates by maternal race and ethnicity with Black non-Hispanic women experiencing a steady increase in their perinatal mortality rate since 2015.



Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the perinatal mortality rates by prosperity region of residence at birth within Michigan in 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, and perinatal mortality rate is defined as the sum of the number of stillbirths and the number of infants dying under 7 days of age divided by the sum of the number of live births and the number of stillbirths and expressed per 1,000 live births and stillbirths. In 2017, the perinatal mortality rate was the highest in the Southwest Prosperity Region (11.4 per 1,000 live births and stillbirths) and was the lowest in the Upper Peninsula Prosperity Alliance (6.7 per 1,000 live births and stillbirths). The perinatal mortality rate was significantly higher in Detroit Metro Prosperity Region, and was significantly lower in West Michigan Prosperity Alliance, when compared to the rate within the State of Michigan.



Using data from the Michigan Department of Health and Human Services, Division for Vital Records and Health Statistics, this slide shows the trend of 5-year average perinatal mortality rates by prosperity region of residence at birth within Michigan from 2010 through 2017. The National Center for Health Statistics and the Michigan Public Health Code both define a stillbirth as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams and is expressed as a rate per 1,000 live births. Within the remaining slides, stillbirths are still defined as a death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams, and perinatal mortality rate is defined as the sum of the number of stillbirths and the number of infants dying under 7 days of age divided by the sum of the number of live births and the number of stillbirths and expressed per 1,000 live births and stillbirths. In 2013-2017, the average perinatal mortality rate was the highest in the Detroit Metro Prosperity Region (9.8 per 1,000 live births and stillbirths) and was the lowest in the Upper Peninsula Prosperity Alliance (6.6 per 1,000 live births and stillbirths).

Limitations of Stillbirth Reporting

- It is suspected that stillbirths are under-reported by some Michigan hospitals. However, the records that are reported by the Division for Vital Records and Health Statistics do undergo a series of data checks.
- The stillbirth rates may fluctuate due to small numbers.
- Another limitation is the lack of information on etiology. The causes of many stillbirths are unknown. Known causes of stillbirth generally fall into one of three broad categories: problems with the baby (birth defects or genetic problems); problems with the placenta or umbilical cord (this is where the mother and baby exchange oxygen and nutrients); and certain conditions in the mother (for example, uncontrolled diabetes, high blood pressure, or obesity). However, we are unable to confirm the causes for all stillbirths.

11/22/2019

This slide shows the limitations of stillbirth reporting.

It is suspected that stillbirths are under-reported by some Michigan hospitals. However, the records that are reported by the Division for Vital Records and Health Statistics do undergo a series of data checks.

Stillbirth rates also tend to fluctuate a bit from year to year due to small numbers.

Another limitation is the lack of information on etiology. The causes of many stillbirths are unknown. Known causes of stillbirth generally fall into one of three broad categories: problems with the baby (birth defects or genetic problems); problems with the placenta or umbilical cord (this is where the mother and baby exchange oxygen and nutrients); and certain conditions in the mother (for example, uncontrolled diabetes, high blood pressure, or obesity). However, we are unable to confirm the causes for all stillbirths.