Indicators of perinatal health in Catalonia 2018



Executive report

27/01/2020

Authors:

Mireia Jané, Sub-directorate General for Epidemiological Surveillance and Public Health Emergency Response. Public Health Agency of Catalonia.

M^aJosé Vidal, Sub-directorate General for Epidemiological Surveillance and Public Health Emergency Response. Public Health Agency of Catalonia.

Zoa Tomás, Sub-directorate General for Epidemiological Surveillance and Public Health Emergency Response. Public Health Agency of Catalonia.

Mar Maresma, Sub-directorate General for Epidemiological Surveillance and Public Health Emergency Response. Public Health Agency of Catalonia.

Gemma Rosell, Sub-directorate General for Epidemiological Surveillance and Public Health Emergency Response. Public Health Agency of Catalonia.

Some rights reserved

© 2020, Government of Catalonia. Ministry of Health



The contents of this work are subject to a Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International.

The license can be consulted at: http://creativecommons.org/licenses/by-nc-nd/4.0/deed.ca

Published by:

Sub-directorate General for Epidemiological Surveillance and Public Health Emergency Response. PHAC.

Edition: Barcelona, january 2020

Assessorament lingüístic:

Language Planning Service. Ministry of Health.

URL:

http://canalsalut.gencat.cat/ca/professionals/vigilancia-epidemiologica/vigilancia-perinatal/

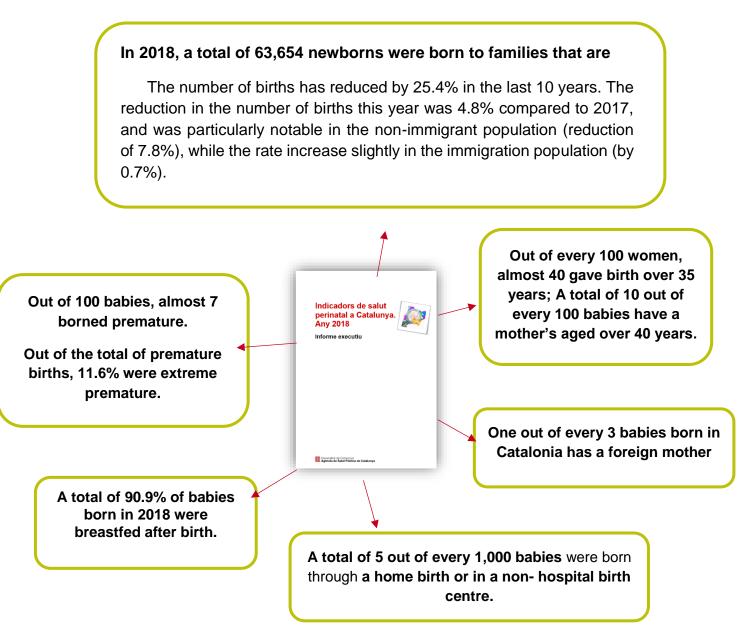
INDEX

Ex	ecutive summary: notable aspects	4
1.	Evolution in the number of births	5
2.	Mother's age: births to mothers aged over 35 years	5
3.	Origin of the mother and father	6
	3.1. Evolution in the number of live births by origin of the mothers	6
	3.2. Percentage of live births to immigrant mothers and fathers	6
	3.3. Distribution of origin of mothers	7
	3.4. Distribution of births among girls aged 14 to 17 by origin	7
4.	Evolution of prematurity	8
	4.1. Overall premature birth rate (<37 weeks of gestation) out of the total number of babies	8
	4.2. Extreme prematurity (<32 weeks of gestation) out of the total of premature births	8
5.	Evolution of low birth weight	8
	5.1. Overall evolution of low birth weight (< 2,500 g) out of the total of babies	8
	5.2. Evolution of extremely low birth weight (< 1.499 g) out of the total number of low bir weight babies	
6.	Evolution of babies born by Caesarian 1	10
7.	Distribution of births according to the ownership of the maternity centre 1	10
8.	Tobacco consumption in mothers before and at the end of pregnancy 1	11
9.	Evolution of breastfeeding at birth by nationality of the mother	11

Executive summary: notable aspects

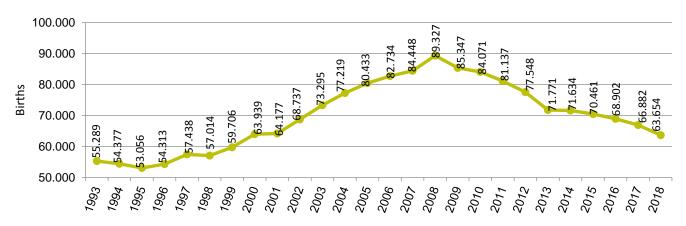
The data presented in this document are drawn from the register of babies complied by the Sub-directorate General for Epidemiological Surveillance and Public Health Emergency Response of the Catalan Secretariat for Public Health. This register has been kept since 1993 and is based on the bulletin of neonatal screening for congenital metabolic diseases.

The register of babies covers 100% of live births at maternal health centres in the Integrated Public Health System of Catalonia (SISCAT) and private centres. Since 2011, the register has also gradually included births at home and non-hospital birth centres.



1. Evolution in the number of births

In 2018, a total of 63,654 babies were born in Catalonia. The chart shows that one quarter in the newborns' number have reduced in the last 10 years.



The number of births to 2000.

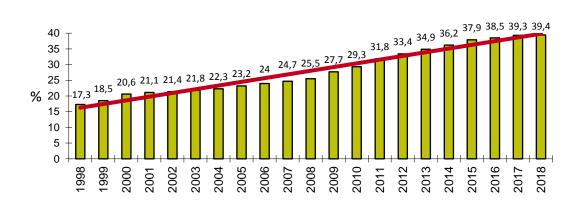
2. Mother's age: births to mothers aged over 35 years



The percentage of births among women aged over 35 years continued to rise, and stood up at 39.4%. In the last decade, the relative increase was 42.2%.

A total of 10 out of every 100 babies born in Catalonia has a mother over 40 years. The percentage of births among women aged over 40 years has increased almost 25% in the last 5 years and 59% in the last decade.

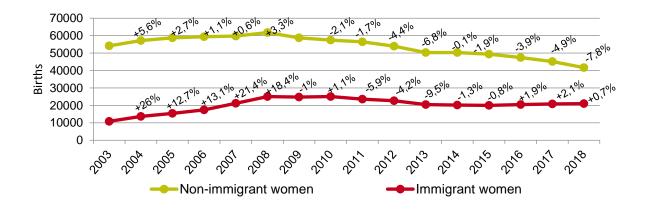
By maternal origin, percentage of mothers aged over 35 years were higher in non-immigrant mothers and mothers from EU countries (44.3% and 50.4%, respectively). In contrast, the lowest percentage were found among mothers from Maghreb and the Nile valley and Asia (25.8% and 19.3%, respectively).



3. Origin of the mother and father

3.1 Evolution in the number of live births by origin of the mothers

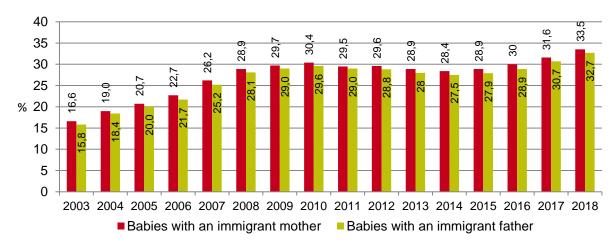
The number of births in 2018, compared to the previous year, went down 4.8% in the non-immigrant women and rose 0.7% in the immigrant women.



3.2 Percentage of live births to immigrant mothers and fathers

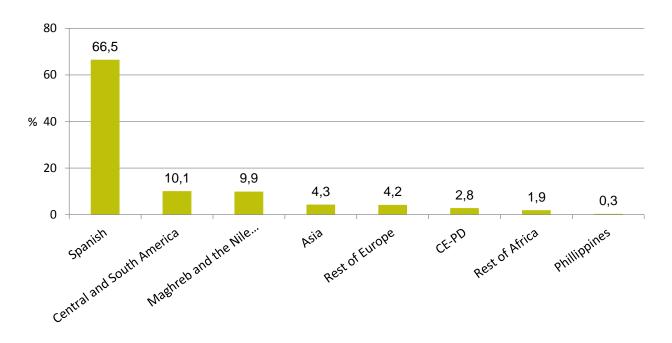


In 2018, almost 34 out of every 100 babies had a foregin mother; and almost 33 out of every 100 babies, a foreign father.



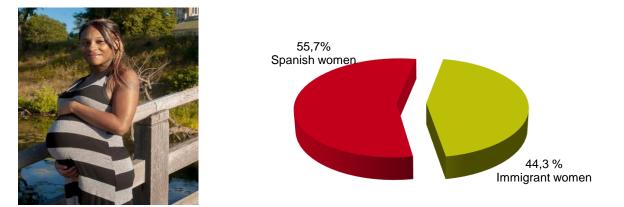
1. Distribution of origin of mothers

Among mothers from other countries, there was a high percentage from the Central and South America and Maghreb and the Nile valley, at 10.1% and 9.9%, respectively.



2. Distribution of births among girls aged 14 to 17 by origin

In 2018, a total of 44.3% of births to young mothers aged between 14 and 17 years corresponded to immigrant women.

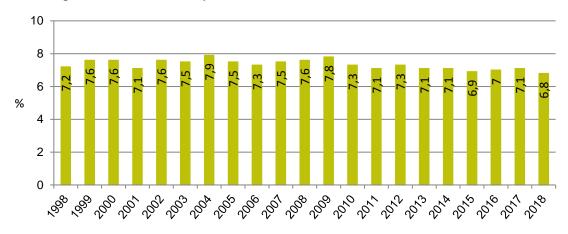


3. 4. Evolution of prematurity

4.1 Overall premature birth rate (<37 weeks of gestation) out of the total number of babies

In 2018, the premature birth rate was 6.8%, showing a stabilizing trend.

The rate was higher for the women from the rest of Philippines, Africa and Central and South America, at 7.7%, 7.5% and 7.2%, respectively. The rate among women from Maghreb and Nile valley was lower at 5%.

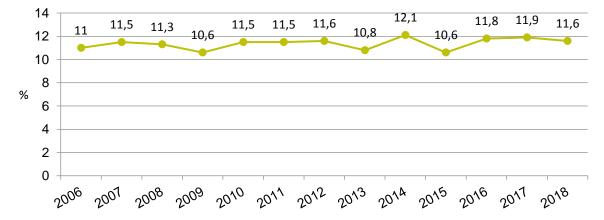


4.2 Extreme prematurity (<32 weeks of gestation) out of the total of premature births

-



The rate of extreme prematurity reduced by 2.5% compared to the previous year.

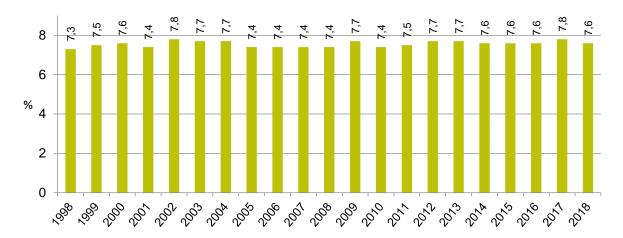


5. 5. Evolution of low birth weight

5.1 Overall evolution of low birth weight (< 2,500 g) out of the total of babies

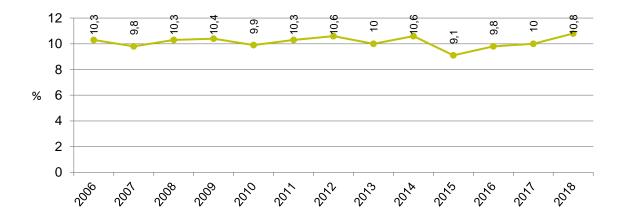
In 2018, the low birth weight stood at 7.6%. Although it has increased by 2.5% compared to 2017, in recent years low birth has remained stable.

Women from the rest of Africa, Asia and Spanish women have the highest low birth rate, at 8.7%, 8.5% and 8.1%, respectively. Women from Maghreb and the Nile valley had the lowest rate of low birth weight, at 4.3%.



5.2 Evolution of extremely low birth weight (< 1.499 g) out of the total number of low birth weight babies

In 2018, extreme low birth weight stood at 10.8%. There was an increase in the extremely low weight of 8% compared to previous year.

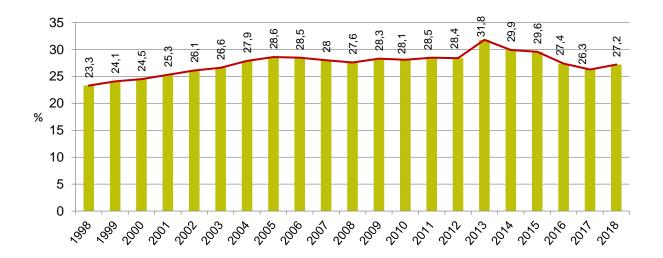


6. 6. Evolution of babies born by Caesarian

In 2018 the percentage of live births by Caesarean increased to 3.4% compared to the previous year, to stand at 27.2%.



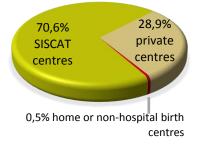
Women aged 35 or over had a highest percentage of Caesarean (33.1%). Spanish women had the highest percentage of Caesarean, at 29%. Women from the Maghreb and the Nile valley had the lowest percentage, at 18.5%.



7. Distribution of births according to the ownership of the maternity centre

In 2018, a total of 70.6% of births in Catalonia took place at hospitals belonging to the Integrated Public Health System of Catalonia (SISCAT). This percentage has remained stable over the years.

Women from EU and developed countries, followed by Spanish women, are those with highest percentage of births in private centres, at 43.2% and 37.7%, respectively.

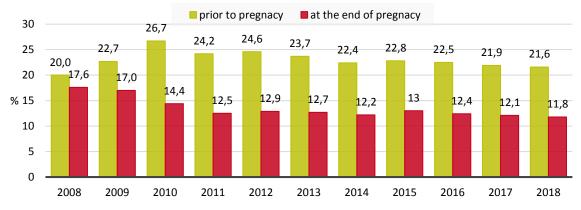


Five out of 1,000 babies were born at home or at a non-hospital birth centre.

8. Tobacco consumption in mothers before and at the end of pregnancy

In 2018, the prevalence of tobacco use at the start of pregnancy was 21.6%, representing a relative reduction by 1.4 compared to 2017.

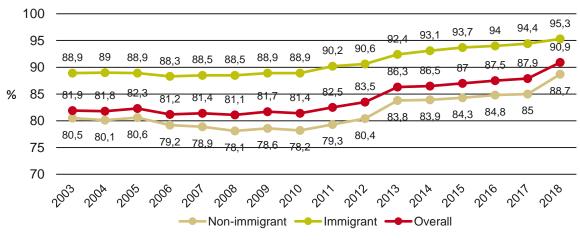
A total of 45.4% of mothers who smoked gave up tobacco during gestation. The reduction in tobacco use during pregnancy has come to a standstill.



*: Given that maternity units have gradually incorporated this variable and the registre was not complete, the annual values are not directly comparable.

9. Evolution of breastfeeding at birth by nationality of the mother

In 2018, the prevalence of breastfeeding at birth was 90.9% and continued to increase. The percentage of breastfeeding was 7.4% higher among immigrant women than among non-immigrant women. Specifically, women from the Maghreb and the Nile valley and Central and South America had the highest percentages at 97%, 95.9%, respectively.



11 de 11