

## Preterm Birth in Kentucky

### **Preterm birth is a problem that is common, costly and serious in Kentucky.**

More than 1,000 babies are born on an average week in Kentucky. Of those, more than 150 are born preterm – before 37 weeks gestation. That's roughly one preterm birth in Kentucky every hour.

- Preterm birth is a statewide problem: On average, one in every seven babies born in Kentucky is born before 37 weeks gestation; in some parts of the state the number is as high as one in five.
  - Kentucky's rate of preterm birth is 15 percent (2005), compared with a national rate of 12.7 percent.
  - The rate of preterm birth in Boyd County is 19.1 percent.
  - The rate of preterm birth in Fayette County is 13.6 percent.
  - The rate of preterm birth in Hopkins County is 18.5 percent.
  - Healthy People 2010, a national initiative to identify and reduce leading preventable threats to health, has a goal for preterm birth of 7.6 percent; Kentucky's current rate is twice that.
  - The rate of preterm birth in Kentucky has increased more than 24 percent in the past decade, twice as fast as the national rate has increased.
  - Kentucky has the highest preterm birth rate of all surrounding states (equal with Tennessee, higher than West Virginia, Virginia, Ohio, Indiana and Illinois).
  - Rates of delivery by Cesarean section are also rising, which increases risks for problems for mothers and babies. Roughly one-third of deliveries in Kentucky are by C-section.
- Kentucky has some of the nation's highest rates of women who smoke during pregnancy, which increases the chance of serious problems such as fetal loss, placental problems, preterm and low birth weight babies, and Sudden Infant Death Syndrome (SIDS). There are also long-term detrimental effects of smoking to both the mother and the baby.  
Nationally, an average of just one in 10 pregnant women smoke.  
In Kentucky, one in four women smokes during pregnancy. Further, in some Kentucky counties, half of all pregnant women smoke.  
In Kentucky, babies of mothers who smoke are five times more likely to die of SIDS than babies of mothers who do not smoke.
  - Women are more likely to quit smoking during pregnancy than any other time in their lives provided they are given help, support and encouragement.
  - Early, good prenatal care is important to help prevent preterm birth.
  - In Kentucky, only 75 percent of pregnant women see a doctor in the first trimester for care or go to enough prenatal visits.
  - Preterm birth is costly.  
In Kentucky in 2005, there were more than \$200 million in hospital charges for preterm births.  
Taxpayers and private and public insurers pay into these high costs, as do employers.  
Communities also pay for preterm birth later, as these children often need more developmental intervention, special education and recurring health care.

*Healthy Babies Are Worth the Wait*<sup>®</sup> is a multifaceted partnership of the March of Dimes, the Johnson & Johnson Pediatric Institute and the Kentucky Department for Public Health. The primary goal of the initiative is a 15 percent reduction in the rate of “preventable” single preterm births – particularly babies born late preterm (four to six weeks early) – in three targeted intervention sites in Kentucky: King’s Daughters Medical Center in Ashland, Trover Health System Regional Medical Center of Hopkins County and the University of Kentucky Albert B. Chandler Hospital in Lexington. Health care teams at each site provide mothers-to-be with an integrated approach of education, counseling and clinical care.

For more information, call **1-800-333-8874** or visit our Web site at **[ukhealthcare.uky.edu/obgyn](http://ukhealthcare.uky.edu/obgyn)** or the following sites:

**[www.prematurityprevention.org](http://www.prematurityprevention.org)**.

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