



## PRESS RELEASE

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### IMMEDIATE RELEASE

#### **Stillbirth and infant death rates are decreasing, but still vary widely across Europe**

Rates of stillbirth and deaths in the first year of life have decreased in Europe over the five years 2010 to 2015. However, countries still vary widely, and differences persist in their populations and the maternity care provided.

This is according to a new report, co-authored by Professor Alison Macfarlane from City, University of London as part of the Euro-Peristat collaboration of over 100 contributors from all over Europe, including the four countries of the UK.

The report examined data about births and their context in all 28 current EU member states plus Norway, Iceland and Switzerland in 2015. It also examined changes between 2010 and 2015.

The report differs from other international comparisons of stillbirth and infant death (infant mortality) rates by taking account of differences in the ways that statistics are compiled to make 'like for like' comparisons. Data about births before 22 weeks of pregnancy were excluded to improve consistency of reporting, as recommended by the World Health Organisation (WHO).

#### **Key findings**

- **Stillbirth rates** at or after 28 weeks of pregnancy ranged from below 2.3 per thousand total births (in Cyprus, Iceland, Denmark, Finland, and the Netherlands) to 3.4 or more (in Latvia, Ireland, Slovakia, Romania, Hungary, and Bulgaria). The rates for the countries of the United Kingdom came between these at 3.1 per 1,000 in England and Wales, 2.8 in Scotland and 2.6 in Northern Ireland.
- **Neonatal and infant death rates:** Neonatal deaths are deaths in the first month after live birth and infant deaths are deaths in the first year. Neonatal death rates ranged from 0.7 per 1,000 live births in Slovenia to 4.4 in Bulgaria. The Czech Republic, Denmark, Estonia, Spain, Cyprus, Luxembourg, Austria, Slovenia, Finland, Sweden, Norway, Scotland and Iceland had rates below 2.0 per 1000 live births. In contrast, rates were over 3.0 per 1,000 in Bulgaria,

Croatia, Malta, Romania and Northern Ireland. The rate for England and Wales fell in between, at 2.2 per 1,000. Infant death rates showed similar patterns, ranging from 1.5 per 1,000 live births in Iceland to 7.4 in Romania and 7.6 in Bulgaria. Within the UK, Northern Ireland had the highest rate at 5.1 per 1,000 live births, while the rate was 3.2 in England and Wales and 2.9 in Scotland.

- **Multiple pregnancies:** Babies from multiple births, mainly twins and triplets, are far more likely than singletons (single births) to be born early and so have higher rates of neonatal and infant death. Scotland and Northern Ireland were among the nine countries with fewer than 15 multiple births per thousand pregnancies. Five countries had rates of over 19 per thousand. England and Wales came in between with a rate of 16.1 per thousand pregnancies.
- **Age at childbirth:** Since 2004, the average ages of women giving birth in Europe have risen. The countries of the UK are unusual in having relatively high proportions of both older and younger mothers. The percentage of mothers aged under 20 ranged from 0.8 per cent in Switzerland to 10.2 per cent in Bulgaria. Most countries, including the countries of the UK had under four per cent. The percentage of mothers aged 35 and over ranged from around 14 per cent in in Bulgaria, Poland and Romania to 36.3 per cent in Italy and 37.3 per cent in Spain. In each of the countries of the UK, just over a fifth of mothers were aged 35 or older.
- **Caesarean birth:** Rising rates of caesarean birth (c-section) are a matter of concern internationally, and in six countries, rates reached over 35 per cent of all births in 2015. In contrast, not all rates rose and a quarter of countries had rates below 21 per cent. Iceland, Finland, Norway, and the Netherlands had the lowest rates, under 18 per cent. The rates for the countries of the UK, although not the highest, were at the higher end of the range. Rates for Wales and Northern Ireland remained at 26.1 per cent and 29.9 per cent respectively, while the rate for England rose from 24.6 per cent in 2010 to 27.0 per cent in 2015, and the rate for Scotland rose from 27.8 per cent to 32.5 per cent.

### **Smoking and obesity**

The report also identifies important gaps in data about two important subjects, smoking and obesity. In most countries with data, between five and eight per cent of women smoked during pregnancy, but in the countries of the UK, from 12 to 17 per cent did so. Only 12 countries had data about body mass index (BMI). These included the UK, where over a fifth of the women who gave birth in 2015 in each of England, Wales, Scotland and Northern Ireland were obese.

Professor Macfarlane, member of the Executive Board of Euro-Peristat and of its writing group and Professor of Perinatal Health at City, University of London, said:“

This new report confirms the findings of its predecessors, that when like is compared with like, the countries of the UK do not have the highest stillbirth and infant mortality rates in Europe. All the same they show that despite welcome decreases between 2010 and 2015, rates remain substantially above the low rates seen in the Nordic countries.

“The worrying increases in the already high caesarean rates for Scotland and England may well arise from initiatives to reduce stillbirth and infant mortality rates. However, the very much lower rates of caesarean section in the Nordic countries suggests that while good clinical care is important, a wider approach which also includes social and public health policies to improve the health of childbearing women is needed.”

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#### **NOTES TO EDITORS:**

To speak to Professor Alison Macfarlane or for a copy of the study, please contact Shamim Quadir, Senior Communications Officer at City, University of London on [Shamim.quadir@city.ac.uk](mailto:Shamim.quadir@city.ac.uk) or 0207 040 8782. Alternatively, contact Professor Macfarlane directly on [A.J.Macfarlane@city.ac.uk](mailto:A.J.Macfarlane@city.ac.uk) or 020 7040 5832.

- The Euro-Peristat Collaboration was established in 1999. Its first report, based on data for the year 2000, was published in 2003 as a supplement to the Europe Journal of Obstetrics and Gynaecology and Reproductive Biology. This was followed by free-standing European Perinatal Health Reports for the years 2004 and 2010. The second European Perinatal Health Report was the most comprehensive study on the health and care of pregnant women and babies in Europe and examined births and their context in 29 European countries in 2010 and changes between 2004 and 2010.
- On November 26th, the EURO-PERISTAT project published the European Perinatal Health Report ‘Core indicators for the health and care of pregnant women and babies in Europe in 2015’ It can be downloaded free of charge as a PDF from <http://www.europeristat.com>.
- Funding: Support for the coordination of Euro-Peristat comes from the European Health Programme through the Information for Action (InfAct) Joint Action, as well as the BRIDGE Health project. Support is also provided by the participating institutions that provide routine statistical data to the Euro-Peristat coordination team and by our network of experts who contribute their time and expertise.
- The EURO-PERISTAT Project is coordinated by the Institut de la santé et de la recherche médicale (INSERM) in Paris. The project leader is Jennifer Zeitlin.
- Data for UK were provided by the Office for National Statistics, NHS Digital, the NHS Wales Informatics Service, the Welsh Government, the National Maternity and Perinatal Audit, the Information Services Division of the NHS

National Services Scotland, the Department of Health Northern Ireland, the Northern Ireland Public Health Agency and MBRRACE-UK.

- The names of the EURO-PERISTAT collaborators from each participating country and organisation, including the four countries of the UK and their contact details can be found in Appendix A on page 142 of the report.

**The third European Perinatal Health Report** 'Core indicators for the health and care of pregnant women and babies in Europe in 2015' released by the Euro-Peristat collaboration brings together data about births in 2015 from 31 countries, including all 28 current European Union member states plus Iceland, Norway and Switzerland. Euro-Peristat takes a new approach to health reporting. Instead of comparing countries on single indicators like infant mortality, taking the 'report card', 'dashboard' or 'league table' approach, our report paints a fuller picture by presenting data about mortality, low birthweight and preterm birth alongside data about health care and maternal characteristics that can affect the outcome of pregnancy. It also illustrates differences in the ways that data are collected, and explains how these can affect comparisons between countries. Because of funding constraints the new report is less wide ranging than the first two reports in the series but still provides an important update to its two predecessors.

The first free-standing Euro-Peristat report, with data for 2004, was published in 2008 and the second with data for 2010 was published in 2013. Like the earlier report for 2000, it found wide differences between the countries of Europe in indicators of perinatal health and care. Documenting these differences is important because it shows that gains are possible in most countries, provides information about alternative ways of providing care and raises important questions about the effectiveness of national healthcare policies and the role of evidence in maternity care. This second report provides the opportunity to see whether these gains have been achieved and whether inequalities between the countries of Europe have narrowed.

### **About City, University of London**

City, University of London is a global institution committed to academic excellence, with a focus on business and the professions and an enviable central London location.

It is the top higher education institution in London for student satisfaction (The Complete University Guide), is ranked 18th overall in the United Kingdom (Guardian University Guide) and is among the top five per cent of universities in the world (Times Higher Education World Rankings).

City has around 19,500 students (46% at postgraduate level) from more than 150 countries and staff from over 75 countries. More than 130,000 former students from over 180 countries are members of the City Alumni Network. City's academic range is broadly-based with world-leading strengths in business; law; health sciences; mathematics; computer science; engineering; social sciences; and the arts including journalism and music.

The University's history dates from 1894, with the foundation of the Northampton Institute on what is now the main part of City's campus. In 1966, City was granted University status by Royal Charter and the Lord Mayor of London became its Chancellor. In September 2016, City joined the University of London federation and HRH the Princess Royal became City's Chancellor. Professor Sir Paul Curran has been Vice-Chancellor and President of City since 2010.