



Euro-Peristat Meeting

April 4th and 5th 2016, Paris

Jennifer Zeitlin



**Institut national
de la santé et de la recherche médicale**



New members

Bulgaria

Rumyana Kolarova

Directorate “National health data and e-health” at the National Center for Public Health and Analysis

Croatia

Urelija Rodin

Croatian Institute of Public Health
School of Public Health, School of
Medicine, University of Zagreb

Boris Filipović-Grčić

Clinical Hospital Center Zagreb, School of
Medicine University of Zagreb

Cyprus

Theopisti Kyprianou

Ministry of Health, Health Monitoring Unit

Norway

Mette Tollånes

Medical Birth Registry of Norway,
Norwegian Institute of Public Health
Department of Global Public Health and
Primary Care, University of Bergen, Norway

Slovenia

Nataša Tùl Mandic

University Medical Centre
Department of Obstetrics & Gynecology -
Perinatology Unit

EURO-PERISTAT COUNTRY TEAMS

Austria



Belgium



Bulgaria



Croatia



Cyprus



Czech Rep.



Denmark



Estonia



Finland



France



Germany



Greece



Hungary



Iceland



Ireland



Italy



Latvia



Lithuania



Luxembourg



Malta



Netherlands



Norway



Poland



Portugal



Romania



Slovakia



Slovenia



Spain



Sweden



Switzerland



UK



Austria

Gerald Heidinger

UK: Scotland

Rachel Wood

Estonia

Luule Sakkeus

Slovakia

Jan Cap

Hungary

Helga Feith

Istvan Berbik

Other institutions and projects

European Board & College of Obstetrics & Gynaecology (EBCOG)

Tahir Mahmood

European Midwives Association

Mervi Jokinen

European Foundation for the Care of Newborn Infants (EFCNI)

Nicole Thiele

Alliance for Maternal Health Equality

Jacqueline Bowman-Busato

Bridgehealth project participants

French Institute for Public Health Surveillance

Isabelle Grémy

Directorate for Research, Studies, Evaluation and Statistics (DREES), French Ministry of Social Affairs and Health

Muriel Moisy

Forecasting and Research Direction General for Health Ministry of Social Affaires and Health

Alain Fontaine

Objectives of the meeting

- Share information about Euro-Peristat and new developments in perinatal health reporting in Europe
- Discuss our goals and priorities in the short and long term
- Make connections with other key actors to make our work more relevant and sustainable
- Participate in Bridgehealth's vision for a health information system in Europe

➤ **Generate discussion and exchange**



Monday April 4th 8:30 to 17:30

8:30:-9:00 Welcome and updates

- Presentation of new member countries (Croatia and Bulgaria) and new scientific committee representatives (Cyprus, Norway, Slovenia)
- Updates and highlights from recent Euro-Peristat publications

9:00-10:00 Euro-Peristat and the Bridge Health project

- Brief overview of the Bridge Health project,
- Euro-Peristat objectives, deliverables and work plan,

10:00-10:30 Coffee break

10:30-12:30 Improving the quality and use of indicators

- Data Linkage
- Microdata

Lunch

Monday April 4th 8:30 to 17:30

13:30-15:30 **New analyses of maternal and child health**

- 6 presentations
- Discussion

15:30-16:00 Coffee break

16:00-17:30 **Next steps**

- Analyses and dissemination of Euro-Peristat results
- The next report(s): preparation, methods, financing and calendar

19:00 Dinner together (Restaurant Contre Allée, 83 Avenue Denfert-Rochereau, 75014 Paris)

Tuesday April 5th 8:30 to 16:00

8:30-10:30 **Ties with international organisations and societies**

10:30-11:00 Coffee Break

11:00-12:45 **Other collaborations and research projects**

12:45-13:45 Lunch

13:45-16:00 **Bridge Health : sustainable health information**

Dinner together for those staying Tuesday night



**Why European-wide data collection
for maternal and newborn health?**

A priority for surveillance

- ≈ 40,000 stillbirths and infant deaths yearly in Europe
- ≈ 40,000 children with severe impairments, many of perinatal origin
- Health inequalities between and within countries
- Adult health affected by pregnancy and infancy
- Medical advances carry risks and ethical questions
 - Increased survival of extremely preterm infants, sub-fertility treatments, prenatal screening
- A key challenge is to benefit from new technology without over-medicalizing pregnancy and childbirth

But how

Some simple questions without answers for Europe

- What is the multiple birth rate?
- What is the percent of babies born preterm?
- What is the mortality of these babies?
- What percent of women smoke during pregnancy
- Do women receive sufficient antenatal care?
- Are obstetrical interventions increasing for low risk women?

The EURO-PERISTAT Project

- Aim : to monitor perinatal health in the EU based on valid and reliable routinely collected indicators
- Scope : Maternal, fetal and infant health associated with pregnancy, delivery and the postpartum period
- Funded by the DG-SANTE

Indicators

- 10 Core
- 20 Recommended
- Four categories
 - Fetal/neonatal, child health
 - Maternal health
 - Population characteristics
 - Health services

FETAL, NEONATAL, AND CHILD HEALTH

- C1: Fetal mortality rate by gestational age, birth weight, and plurality
- C2: Neonatal mortality rate by gestational age, birth weight, and plurality
- C3: Infant mortality rate by gestational age, birth weight, and plurality
- C4: Distribution of birth weight by vital status, gestational age, and plurality
- C5: Distribution of gestational age by vital status and plurality
- R1: Prevalence of selected congenital anomalies
- R2: Distribution of Apgar scores at 5 minutes
- R3: Fetal and neonatal deaths due to congenital anomalies
- R4: Prevalence of cerebral palsy

MATERNAL HEALTH

- C6: Maternal mortality ratio
- R5: Maternal mortality by cause of death
- R6: Incidence of severe maternal morbidity
- F7: Incidence of tears to the perineum

POPULATION CHARACTERISTICS/RISK FACTORS

- C7: Multiple birth rate by number of fetuses
- C8: Distribution of maternal age
- C9: Distribution of parity
- R8: Percentage of women who smoked during pregnancy
- R9: Distribution of mothers' educational level
- R10: Distribution of parents' occupational classification
- R11: Distribution of mothers' country of birth
- R12: Distribution of mothers' prepregnancy body mass index (BMI)

HEALTHCARE SERVICES

- C10: Mode of delivery by parity, plurality, presentation, previous caesarean section, and gestational age
- R13: Percentage of all pregnancies following treatment for subfertility
- R14: Distribution of timing of first antenatal visit
- R15: Distribution of births by mode of onset of labour
- R16: Distribution of place of birth by volume of deliveries
- R17: Percentage of very preterm babies delivered in units without a neonatal intensive care unit (NICU)
- R18: Episiotomy rate
- R19: Births without obstetric intervention
- R20: Percentage of infants breast fed at birth

Specificity of EURO-PERISTAT project

- Use a common data collection protocol with careful attention to comparability
- Collect data using sub-groups making it possible to analyze indicators in more depth
- Bring together a network of specialists to participate in interpretation



Data Collection

○ For the year 2000

- *the European Journal of Obstetrics and Gynecology*, Vol 111, Supp 1, 28 November 2003

○ For the year 2004

- European Perinatal Health Report (2008)

○ For the year 2010

- European Perinatal Health Report (2013)



➤ *Data available on our website: www.europeristat.com*

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Lithuania



Luxembourg



Malta



Netherlands



Norway



Poland



Portugal



Romania



Slovakia



Slovenia



Spain



Sweden



Switzerland



UK



ARTICLES

Heino A, Gissler M, Hindori-Mohangoo AD, Blondel B, Klungsøyr K, Verdenik I, Mierzejewska E, Velebil P, Sól Ólafsdóttir H, Macfarlane A, Zeitlin J. [Euro-Peristat Scientific Committee. Variations in Multiple Birth Rates and Impact on Perinatal Outcomes in Europe](#). PLoS One. 2016 Mar 1;11(3):e0149252. doi: 10.1371/journal.pone.0149252. eCollection 2016.

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BETTER STATISTICS FOR BETTER HEALTH
for pregnant women and their babies

EURO-PERISTAT NEWSLETTER

Issue n°1 - March 2016

NEWS: The first Euro-Peristat Newsletter

We are pleased to introduce this first issue. Our aim is to share data and analyses about the health and care of pregnant women and babies in Europe and to encourage discussion and debate about these results.

We welcome your comments about this issue and ideas for future issues, planned at 4 to 6 per year.

WHAT is the Euro-Peristat network ?



The Euro-Peristat network brings together perinatal health professionals from **31 European countries** to compile and to analyse data on **30 perinatal health indicators from national routine data systems**.

Our purpose is to provide information for national, European and international stakeholders who make decisions about the health and care of pregnant women and newborns.

NETWORK UPDATE: Welcoming CROATIA



We are pleased to announce Croatia as a new participating member country. We welcome Croatian team members:

- Urelija Rodin, MD, PhD, Assist. Prof., specialist in public health working at the National Institute of Public Health and the School of Public Health "Andrija Štampar" in Zagreb
- Boris Filipović-Grčić, MD, PhD, Prof. of Pediatrics, a neonatologist working at Clinical Hospital Center Zagreb, School of Medicine University of Zagreb.

They recently **published on key perinatal indicators in Croatia** and give us more insight into characteristics of the Croatian perinatal health surveillance system **here**.

LATEST PUBLICATIONS from Euro-Peristat



BMC
Pregnancy & Childbirth

Marked social inequalities in stillbirth exist in Europe.

Monitoring these should be a priority.

See article

Mortality has declined, but not equally across Europe.

These declines also raise the question: how low can perinatal mortality go?

See article

Broader adoption of data linkage could yield substantial gains for perinatal health research and surveillance.

See article

percentage of women delivering low birth weight babies

2001 2004

EU trend in 2001-2004: 25% to 22%

Country	2001 (%)	2004 (%)
Ireland	24.0	22.0
Italy	23.0	20.0
Spain	22.0	20.0
Germany	21.0	19.0
Switzerland	20.0	18.0
Sweden	19.0	17.0
Ireland	18.0	16.0
United Kingdom	17.0	15.0
United Kingdom	16.0	14.0
United Kingdom	15.0	13.0
United Kingdom	14.0	12.0
United Kingdom	13.0	11.0
United Kingdom	12.0	10.0
United Kingdom	11.0	9.0
United Kingdom	10.0	8.0
United Kingdom	9.0	7.0
United Kingdom	8.0	6.0
United Kingdom	7.0	5.0
United Kingdom	6.0	4.0
United Kingdom	5.0	3.0
United Kingdom	4.0	2.0
United Kingdom	3.0	1.0
United Kingdom	2.0	0.0
United Kingdom	1.0	0.0
United Kingdom	0.0	0.0

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COLLABORATIONS: The Lancet's Ending Preventable Stillbirths Series

THE LANCET

January 11, 2014

www.thelancet.com

Ending preventable stillbirths

An Executive Summary for The Lancet's Series



"At the core of public health programmes for women's and children's health... high quality antenatal and intrapartum care protects the mother and her baby, and represents a quadruple return on investments, saving the lives of mothers and newborns, preventing stillbirths, and additionally, improving child development."

The Lancet Series calls for collective action to end preventable stillbirths and to improve bereavement care for families who experience a stillbirth.

We contributed to the Series by analyzing data on socioeconomic inequalities in stillbirths.

**What are the implications of this call?
[read more here](#)**

Lancet stillbirth series

- Highlights the importance of data on stillbirths
 - Including stillbirths with common definitions
 - Implementing perinatal audits
- Focus on early stillbirths before 28 wks GA
 - Can we include them in our analyses?
- The importance of social inequalities in maternal and newborn outcomes
 - more comprehensive data
- Better understanding of risk factors
 - fetal growth restriction

