



NATIONAL INSTITUTE
FOR HEALTH AND WELFARE

Perinatal health monitoring in EU+3: data sources

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Aim

- An inventory of existing perinatal health data sources in 26 countries (25 EU + Norway) was done with the 2004 data.
 - Gissler M, Mohangoo A, Blondel B, Chalmers J, Macfarlane A, Gaizauskiene A, Gatt M, Lack N, Sakkeus L, Zeitlin J for the EURO-PERISTAT group: Perinatal health monitoring in Europe: results from the EURO-PERISTAT project. Informatics for Social and Health Care 35 (2): 64-79, 2010.
- The problems in comparisons of perinatal health indicators within Europe will be re-analysed.



Data collection 2010

- Update for 30 countries with 2010 data:
 - No data (yet): Bulgaria, Denmark, Iceland, Greece, Slovak Republic.
 - UK data refers to Scotland, other data pending.
 - Belgian data refers to Brussels, Flanders and Wallonia.
 - Spanish data has also some data on Catalonia and Valencia.



Data sources: 92, mean 3.7 per country (range 1-7)

A Register-based data sources

1. Civil registration based on birth and death certificates, causes-of-death
2. Medical Birth Registers/Perinatal Databases, Quality Registers
3. Combined MBR and data from civil registration
4. Other registers: congenital anomalies, hospital discharges and DRGs, induced abortions, morbidity-specific registers, premature newborns

B Survey data

1. Perinatal surveys
2. Other routine surveys: breastfeeding and parturients
3. Confidential enquiries/audits: maternal deaths, stillbirths, infant deaths

C Aggregate data sources

1. Statistics on ART, induced abortions and miscarriages



Results: Data availability and problems

Questions complicating international comparisons

1. Registration criteria
2. Coverage of data collection
3. Data collection by other definitions than recommended
4. Denominators and numerators
5. Missing data
6. Random variation



92 data sources

- Coverage:
 - Country-level 92%, regional 3%, other 5%
 - Population-based 58%, hospital-based 30%, other 13%
- Data collection:
 - Obligatory 79%, voluntary 21%
 - Death cohort (deaths that occurred in 2010) 60 %, birth cohort deaths (babies born in 2010) 40 %,



Registration criteria

- Fetal deaths

- 32% only gestational age criterion
- 30% gestational age OR birthweight criterion
- 15% only birthweight criterion
- 4% gestational age AND birthweight criterion
- 19% other criteria

- Livebirths

- 68 % no
- 7 % only gestational age criterion
- 5 % gestational age OR birthweight criterion
- 2 % only birthweight criterion
- 18 % other



Discussion

- Improvement since 2004:
 - Strengths and limitations will be studied.
- Main messages:
 - Perinatal health data can be improved everywhere.
 - Indicators have to be developed further, also with other groups
 - International comparisons have to be improved.
 - What is the best way to collect perinatal data?
 - Registers, aggregated statistics, surveys



The way forward

- How to establish a routine collection of perinatal health data?
 - Commission of European Union (DG Health and Consumers or Eurostat)
 - EU Institutes (European Centre for Disease Prevention and Control ECDC)
 - launching a new organisation, such as European Perinatal Health Monitoring Centre.
 - Active research networks to promote more research.
 - Collaboration with EUPHA

