Low Birth Weight in Connecticut

Significance & Definition

Low birth weight is strongly associated with infant mortality, and the overall well-being of a society is reflected in the health of its infants (Enotes, 2008). The Healthy People 2010 goal is to reduce the rate of low birth weight to 5%.

The low birth weight rate is the number of births occurring in a calendar year with a birth weight less than 2,500 grams (or about 5.5 pounds), per 100 live births, and is often expressed as a percent. Data in this report show maternal demographics, and except where noted, use birth records to Connecticut residents.

A pregnancy can be singleton (a single developing fetus) or multi-fetal (multiple developing fetuses).

Incidence of Low Birth Weight

Among all singleton and multi-fetal births from 2003-2005 combined, Connecticut ranked well across the nation in its low birth weight rate, but dramatic minority race/ethnicity disparities existed, and no racial/ethnic group attained the Healthy People 2010 goal of 5% low birth weight.

- In Connecticut, the low birth weight rate was 7.8% among all race/ethnicities, 6.6% among non-Hispanic White/Caucasians; 13.0% among non-Hispanic Black/African Americans; and 8.5% among Hispanics.
- The rate of low birth weight among non-Hispanic White/Caucasians was lower in Connecticut relative to that of the Northeast states and the U.S.
- Among Hispanics, the rate of low birth weight in Connecticut was greater than that of the Northeast states and the U.S.

Risk Factors for Low Birth Weight

Low birth weight is the result of either premature birth (before 37 weeks gestation) or fetal growth restriction (March of Dimes, 2009). Many of the risk factors for low birth weight can be detected, and either treated or controlled, with preconception and prenatal care. Risk factors for low birth weight include:

- History of low birth weight
- Multi-fetal pregnancy
- Uterine, cervical or placental problems
- Birth defects
- Chronic or pregnancy-induced hypertension
- Inadequate weight gain during pregnancy
- Short interval between pregnancies
- Smoking during pregnancy
- Alcohol or substance abuse
- Low socio-economic status; teen, unmarried, low educational level, low income level
Singleton Low Birth Weight Trends

Annual trends in low birth weight rates within Connecticut among singleton births from 2000-2006 demonstrate that, despite current efforts to address low birth weight, this public health problem persists.

- Low birth weight rates among all singleton births in the state increased steadily from 2000-2006, with a more dramatic increase in recent years.
- Low birth weight rates among HUSKY A enrollees, despite a decreasing trend, were significantly higher than statewide rates (p < 0.05).

Evidence-Based Interventions

To reduce low birth weight and its disparities within Connecticut, coordinated strategies are needed that encourage evidence-based interventions (DPH, 2009), such as:

- Healthy Start Program enrollment
- WIC Program participation
- Centering Pregnancy® implementation (CHI, Inc, 2009)

In addition, CDC recommendations should be encouraged, including:

- Preconception Care
- 18 month inter-pregnancy interval

References


DPH (2009) Strategic Plan within the Family Health Section Addressing Low Birth Weight Outcomes and Low Birth Weight Disparities in Connecticut. Connecticut Department of Public Health, Hartford, CT.


