

WHAT DO WE LEARN FROM IBDR STUDIES?

Infant Mortality

Birth defects are the leading cause of infant mortality in the United States. In 1994 The Iowa Department of Health requested that the IBDR investigate apparently high rates of infant mortality in Polk County from 1986 to 1990. Registry staff teamed up with The University of Iowa, Geography Department in using the Geographic Information Systems (GIS) to generate birth defect, mortality, and other pregnancy outcome rates for small areas. The study identified a specific region of Des Moines where additional resources are now targeted to provide improved prenatal care and education. This work has provided a model for future investigations and cluster analysis in response to public health concerns in Iowa.

Birth Weight

Low birth weight babies have an increased risk for lung, heart and metabolic problems, which often require treatment in a special care nursery. For some time, researchers suspected that babies born to Iowa residents might be slightly heavier than the normal distribution of birth weights typically used for classification and determination of treatments for newborns. In 1997, we completed an evaluation of all babies born in Iowa and found that overall; babies born to Iowa residents are 5-10% heavier than the national average.

CURRENT STUDIES INCLUDE:

- Babies Born with Multiple Birth Defects
- Birth Defects Associated with the Quality of Public Water Supplies
- Risk Factors for Cleft Lip/Palate
- Prevention of Neural Tube Defects
- Patterns of Prenatal Diagnostic Testing in Iowa

YOU CAN FIND OUT MORE ABOUT

THE IOWA BIRTH DEFECTS REGISTRY

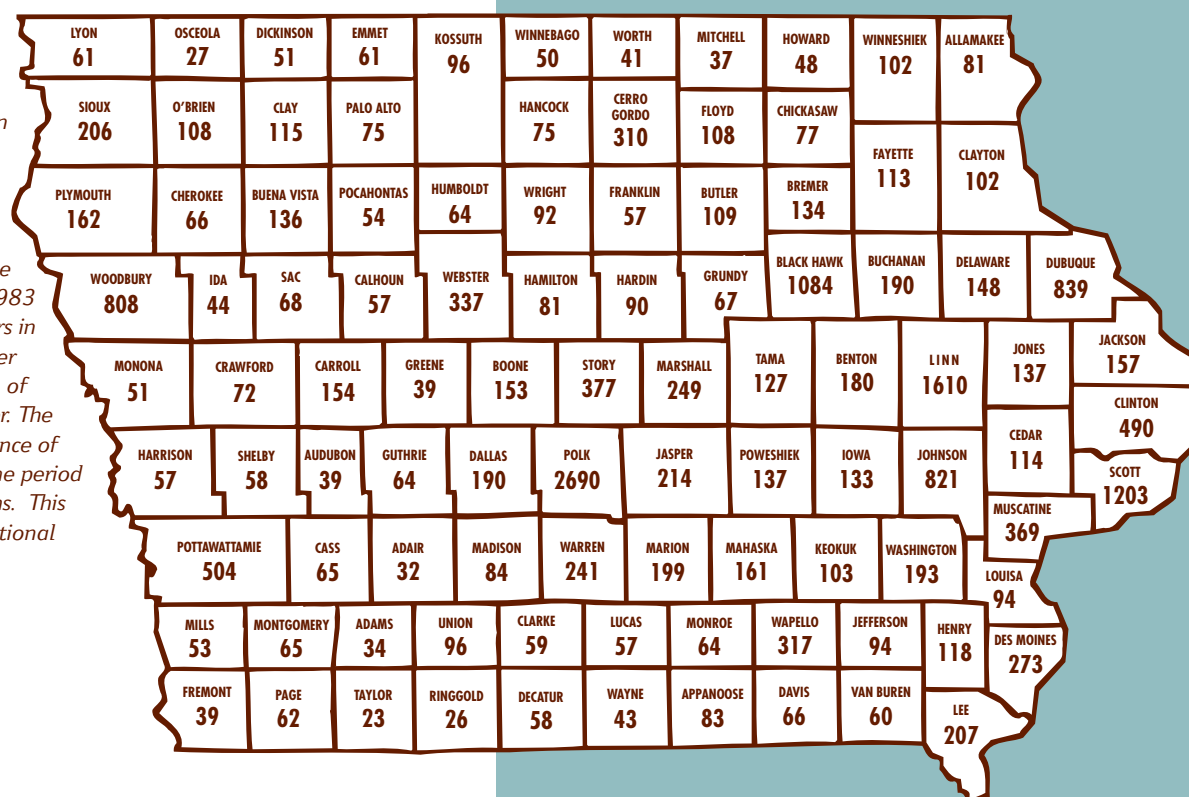
BY CALLING **(319) 335-8606**

OR WRITING TO:

Iowa Birth Defects Registry
The University of Iowa
4256 Westlawn Building
Iowa City, Iowa, 52242



Iowa has a substantial number of children born with birth defects. The map summarizes the number of children born with any birth defects by county for the fourteen-year period 1983 through 1997. Numbers in some counties are higher because the population of those counties is greater. The average rate of occurrence of birth defects for this time period is 36.9/1,000 live births. This rate is similar to the national average rate.



IBDR

The Iowa Birth Defects Registry

SERVING IOWA CHILDREN SINCE 1983



WHAT IS A BIRTH DEFECT?

For the purpose of the Iowa Birth Defects Registry, a birth defect is defined as any structural or genetic abnormality that can adversely affect the child's health and development. Examples are heart defects, abnormalities of the hands/feet or arms/legs, cleft lip, brain or kidney anomalies, etc. Genetic factors, exposure to some drugs or medications, smoking or drinking alcohol during pregnancy or a combination of factors can cause birth defects. For many birth defects, the cause is unknown.



WHAT IS THE IBDR?

The Iowa Birth Defects Registry (IBDR) is a state-wide reporting system using multiple sources to identify information about birth defects. Information is now available on over 21,000 children with major birth defects identified from more than 580,000 Iowa births. This information is available to researchers who use it to study potential causes of birth defects or new treatments for children with birth defects. The information can also be used to identify factors that can prevent birth defects. For example, taking daily multivitamins containing folic acid before and during pregnancy can prevent some types of birth defects.

The IBDR was established in 1983 as a method to monitor birth defects in the state of Iowa, through the joint efforts of:

- The University of Iowa
- The Iowa Department of Public Health
- The Iowa Department of Human Services

In June of 1986, the United States Center for Disease Control in Atlanta, Georgia, provided funding to Iowa to investigate possible causes of birth defects. In 1998, the Iowa General Assembly, through The State Board of Regents began to provide partial funding of the IBDR.

WHO IS INCLUDED IN THE IBDR?

- The baby's mother must be an Iowa resident at the child's birth.
- The abnormality must be diagnosed in the first year of the child's life.
- The baby must have been live born/stillborn on or after January 1, 1983.

HOW DOES THE IBDR GET INFORMATION?



- Trained Field Abstractors review medical records at all Iowa hospitals and specialty clinics.
- Information such as; diagnosis, prenatal testing, maternal age, etc. is collected from the medical record.
- Information is edited, coded, and stored in a computerized data system.
- Information is kept confidential using computer security measures and locked files. All researchers and staff are required to sign pledges to maintain privacy of all information collected or utilized.
- IBDR studies are overseen by annual review of the University of Iowa, Human Subjects Committee.

WHAT IS THE PURPOSE OF HAVING A BIRTH DEFECTS REGISTRY?

- To monitor trends of occurrence for specific types of birth defects and provide information to health agencies.
- To investigate clusters of birth defects in Iowa.
- To investigate causes of birth defects and improved treatments for children with birth defects
- To provide professional and public education.

Our Mission is to contribute to a healthy start in life for all babies.