Steve Sisolak

Governor



Richard Whitley

Director

State of Nevada

Department of Health and Human Services

Title V Maternal and Child Health (MCH) Block Grant:

Data Updates

Division of Public and Behavioral Health

Kagan Griffin, MPH, RD MCH Epidemiologist

Helping people. It's who we are and what we do.





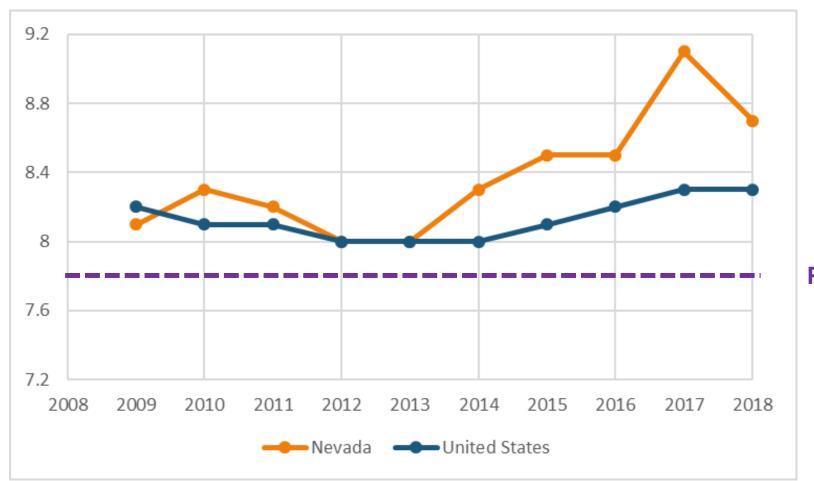
Overview

- Examine low birth weight deliveries and preterm births in Nevada stratified by mother's access to prenatal care
- Periodontal disease in a mother can cause chronic inflammation. Research indicates inflammatory mediators may pose a threat to the fetal-placental unit, resulting in adverse pregnancy outcomes such as preterm birth and low birth weight¹





NOM 4: Percent Of Low Birth Weight Deliveries (<2,500 Grams)



Healthy
People 2020
Objective



Data Source: National Vital Statistics System (NVSS)



Percent Of Low Birth Weight Deliveries (<2,500 Grams)										
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Nevada	8.1	8.3	8.2	8	8	8.3	8.5	8.5	9.1	8.7
United States	8.2	8.1	8.1	8	8	8	8.1	8.2	8.3	8.3
HP 2020 Objective		7.8								
NV% Change 2009-2018	+7.4%									





Percent Of Low Birth Weight Deliveries (<2,500 Grams) By Access to Prenatal Care

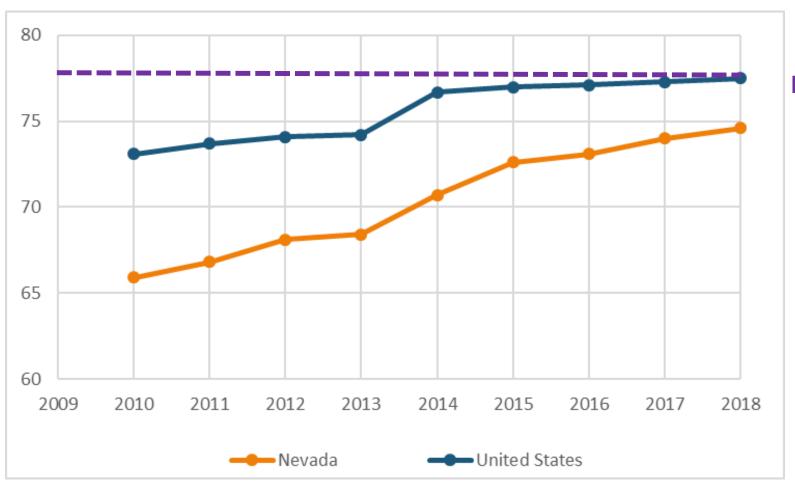
	No Care	First Trimester	Second Trimester	Third Trimester	
2019	-	8.5	8.0	6.8	
2018	12.7	8.3	8.1	6.6	
2017	14.0	8.9	8.7	7.2	

Due to small sample sizes for second and third trimester prenatal care access this data should be interpreted with caution





NOM 1: Percent Of Women Who Receive Prenatal Care Beginning In The First Trimester



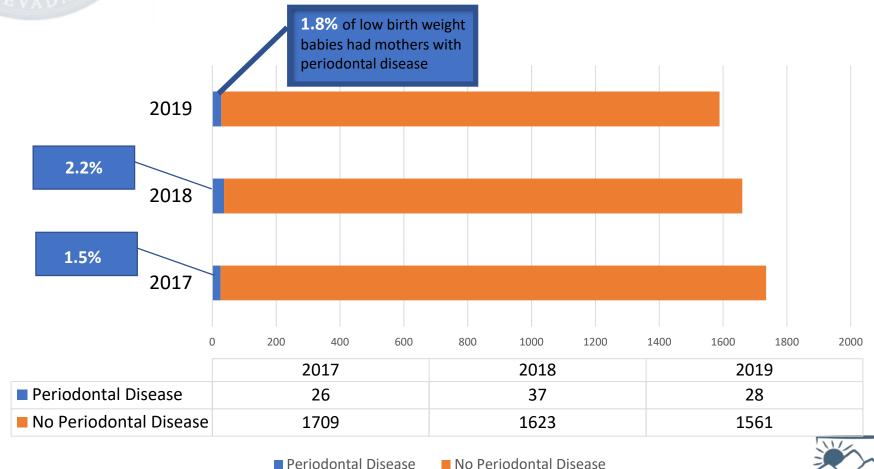
Healthy
People 2020
Objective



Data Source: National Vital Statistics System (NVSS)

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Low Birth Weight **Medicaid** Deliveries (<2,500 Grams) by Mother's Periodontal Disease

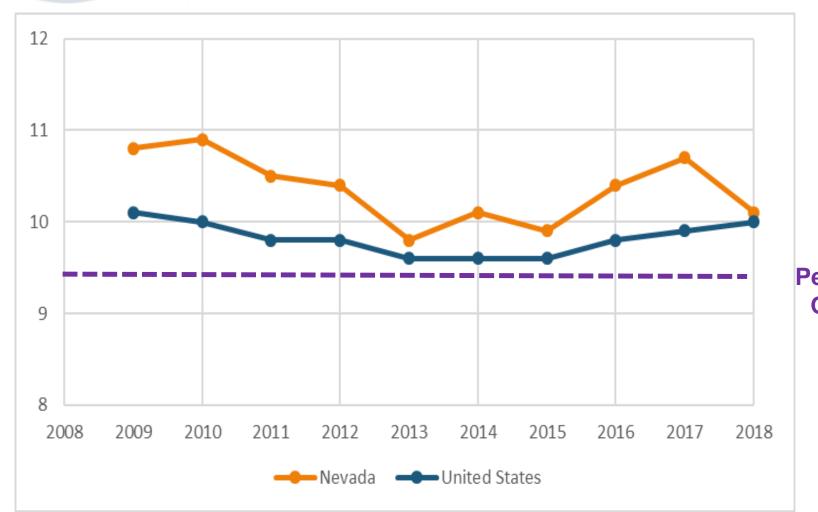


^{*2019} data is preliminary and subject to change

Data Source: Nevada Medicaid Data Warehouse



NOM 5: Percent Of Preterm Births (<37 Weeks Gestation)



Healthy People 2020 Objective



Data Source: National Vital Statistics System (NVSS)



Percent Of Preterm Births (<37 Weeks Gestation)										
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Nevada	10.8	10.9	10.5	10.4	9.8	10.1	9.9	10.4	10.7	10.1
United States	10.1	10	9.8	9.8	9.6	9.6	9.6	9.8	9.9	10
HP 2020 Objective		9.4								
NV % Change 2009-2018	-6.5%									





Percent Of Preterm Births (<37 Weeks Gestation) By Access to Prenatal Care

	No Care	First Trimester	Second Trimester	Third Trimester	
2019	-	10.5	8.5	7.5	
2018	18.9	9.7	8.0	8.0	
2017	19.6	10.4	10.0	8.9	

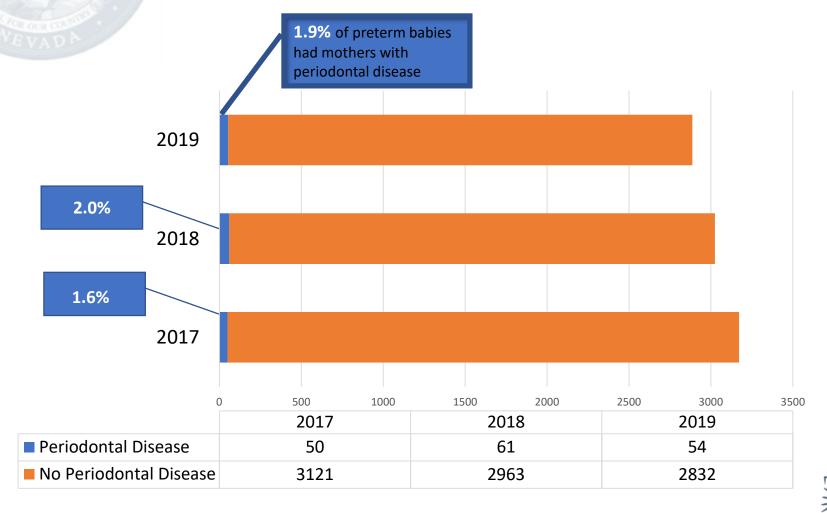
Due to small sample sizes for second and third trimester prenatal care access this data should be interpreted with caution



Data Source: Nevada Electronic Birth Data

^{*2019} data is preliminary and subject to change

Medicaid Preterm Births (<37 Weeks Gestation) by Mother's Periodontal Disease



^{*2019} data is preliminary and subject to change







Conclusions

 When examining preterm birth and low birth weight outcomes by access to prenatal care, differences are most apparent when comparing mothers with no prenatal care to mothers who had prenatal care- regardless of trimester

 Mothers diagnosis of periodontal disease using Medicaid data and the relationship to preterm birth and low birth weight is inconclusive







Questions?



Contact Information

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Acronyms

- HP 2020- Healthy People 2020
- MCH-Maternal and Child Health
- NOM-National Outcome Measure
- NVSS- National Vital Statistics System

