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NEW SOUTH WALES MOTHERS AND BABIES 2004



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CONTENTS

1. ACKNOWLEDGEMENTS	9
2. EXECUTIVE SUMMARY	10
3. METHODS	12
Data sources	12
Method for estimating level of reporting of maternal Aboriginality	13
Definitions	13
Explanatory notes	16
Map of NSW health areas	17
4. TRENDS IN NEW SOUTH WALES	18
Confinements and births by plurality	18
Table 1: Plurality, NSW 2000–2004	18
Health area of residence	18
Table 2: Maternal health area of residence, NSW 2000–2004	18
Maternal age	19
Figure 1: Mothers aged less than 20 years and 35 years and over, NSW 2000–2004	19
Table 3: Maternal age, NSW 2000–2004	19
Maternal country of birth	20
Table 4: Maternal country of birth, NSW, 2000–2004	20
Maternal Aboriginality	21
Table 5: Maternal Aboriginality, NSW 2000–2004	21
Previous pregnancies	21
Table 6: Previous pregnancies, NSW 2000–2004	21
Duration of pregnancy at first antenatal visit	21
Table 7: Duration of pregnancy at first antenatal visit, NSW 2000–2004	21
Smoking in pregnancy	22
Table 8: Mothers who smoked at all during pregnancy by number of cigarettes smoked in the second half of pregnancy, NSW 2000–2004	22
Place of birth	22
Table 9: Maternal place of birth, NSW 2000–2004	22
Hypertension and diabetes	23
Table 10: Maternal hypertension or diabetes, NSW 2000–2004	23
Labour	23
Table 11: Onset and augmentation of labour, NSW 2000–2004	23
Delivery	24
Table 12: Type of delivery, NSW 2000–2004	24
Table 13: Maternal health insurance status by type of delivery, NSW 1999–2003	24
Pain relief	25
Table 14: Maternal pain relief, NSW 2000–2004	25
Baby sex	25
Gestational age	25
Table 15: Births by gestational age, NSW 2000–2004	25
Birth weight	26
Table 16: Births by birth weight, NSW 2000–2004	26

	A	AWA	00
	Apgar sc		26
		Births by Apgar score at 5 minutes, NSW 2000–2004	26
	-	are and neonatal intensive care	27
	Table 18:	Births by admission to special care or neonatal intensive care units, NSW 2000–2004	27
	Dorinatal	outcome	27
		Births by perinatal outcome, NSW 2000–2004	27
	Maternal		28
		Maternal deaths by year, NSW 1990–2003	28
		Maternal deaths by year, NSW 1990–2003 Maternal deaths by cause, NSW 2002–2003	28
5 15		H SERVICES	29
J. AI	Confinen		29
	Maternal		29
		Maternal age by health area of residence, NSW 2004	29
		country of birth	29
		Aboriginality	29
		Maternal country of birth by health area of residence, NSW 2004	30
		Maternal Aboriginality by health area of residence, NSW 2004	30
		of pregnancy at first antenatal visit	31
		Duration of pregnancy at first antenatal check by health area	31
	Table 23.	of residence, NSW 2004	31
	Smoking	in pregnancy	31
		Number of cigarettes smoked in the second half of pregnancy by health area of	
		residence, NSW 2004	31
	Place of	birth	32
	Table 27:	Place of birth by health area of residence, NSW 2004	32
	Labour		32
	Table 28:	Onset and augmentation of labour by health area of residence, NSW 2004	32
	Delivery		33
	Table 29:	Type of delivery by health area of residence, NSW 2004	33
	Birth wei	ght	33
	Table 30:	Births by birth weight and health area of residence, NSW 2004	33
	Gestation	nal age	34
	Table 31:	Births by gestational age and health area of residence, NSW 2004	34
	Perinatal	outcomes	34
	Table 32:	Perinatal mortality by health area of residence, NSW 2004	34
	Livebirth	s by statistical local areas	35
	Table 33:	Livebirths by health area and statistical local area of residence, NSW 2004	35
6.	ABORIGINA	AL AND TORRES STRAIT ISLANDER MOTHERS AND BABIES	37
	Reporting	g of Aboriginality	37
	Table 34:	Births to Aboriginal and Torres Strait Islander mothers by source of birth report, year of birth and health area of hospital, NSW 2000–2003	37
	Figure 2:	Level of reporting of Aboriginality to the NSW Midwives Data Collection by year of birth and health area of hospital, NSW 2000–2003	38
	Table 35:	Birth registrations by maternal and paternal indigenous status, NSW 2003	38
	Trends in	births	39
	Table 36:	Aboriginal and Torres Strait Islander mothers and babies by indigenous status, NSW 2000–2004	39

		Plurality		39
		Table 37:	Aboriginal and Torres Strait Islander mothers and babies by plurality, NSW 2000–2004	39
		Previous	pregnancies	40
		Table 38:	Number of previous pregnancies among Aboriginal and Torres Strait Islander mothers, NSW 2000–2004	40
		Maternal	age	40
		Table 39:	Age of Aboriginal and Torres Strait Islander mothers, NSW 2000–2004	40
		Health are	ea of residence	41
		Table 40:	Health area of residence of Aboriginal and Torres Strait Islander mothers, NSW 2000–2004	41
		Table 41:	Health area of residence of Aboriginal and Torres Strait Islander mothers by age, NSW 2004	41
		Booking	status	42
		Duration	of pregnancy at first antenatal visit	42
		Table 42:	Duration of pregnancy at first antenatal visit among Aboriginal and Torres Strait Islander mothers, NSW 2000–2004	42
		Table 43:	Duration of pregnancy at first antenatal visit among Aboriginal and Torres Strait Islander mothers by health area of residence, NSW 2004	42
		Smoking	in pregnancy	43
		Figure 3:	Smoking in the second half of pregnancy among Aboriginal and Torres Strait Islander mothers by amount smoked and health area of residence, NSW 2004	43
		Medical c	onditions and obstetric complications	43
		Table 44:	Maternal medical conditions and obstetric complications by Aboriginality, NSW 2004	43
		Labour a	nd delivery	44
		Table 45:	Labour onset for Aboriginal and Torres Strait Islander mothers, NSW 2000–2004	44
		Table 46:	Type of delivery among Aboriginal and Torres Strait Islander mothers, NSW 2000–2004	44
		Birth weig	ght	45
		Table 47:	Weight of Aboriginal and Torres Strait Islander babies, NSW 2000-2004	45
		Table 48:	Weight of Aboriginal and Torres Strait Islander babies by health area of residence, NSW 2004	45
		Gestation	nal age	46
		Table 49:	Gestational age of Aboriginal and Torres Strait Islander babies, NSW 2000–2004	46
		Table 50:	Gestational age of Aboriginal and Torres Strait Islander babies by health area of residence, NSW 2004	46
		Apgar sc	ore	47
		Table 51:	Apgar score of Aboriginal and Torres Strait Islander babies, NSW 2000–2004	47
		Special c	are and neonatal intensive care	47
		Table 52:	Aboriginal and Torres Strait Islander babies admitted to special care and neonatal intensive care units, NSW 2000–2004	47
		Perinatal	mortality	47
		Table 53:	Perinatal deaths among Aboriginal and Torres Strait Islander babies, NSW 2000–2004	47
7.	MAT	TERNAL C	COUNTRY OF BIRTH	48
-			confinements	48
			Country of birth group, NSW 2000–2004	48
		Maternal		49
			Maternal age by country of birth group, NSW 2004	49
			Maternal age by country of birth group, NSW 2004	49
		J - 2 - 1		-

	Health ar	ea of residence	50
	Table 56:	Health area of residence by maternal country of birth group, NSW 2004	50
	Booking	status	51
	Duration	of pregnancy at first antenatal visit	51
	Table 57:	Duration of pregnancy at first antenatal visit by country of birth group, NSW 2004	51
	Smoking	in pregnancy	51
	Table 58:	Smoking in pregnancy by country of birth group, NSW 2004	51
	Table 59:	Mothers who smoked at all during pregnancy by number of cigarettes smoked in the second half of pregnancy and country of birth group, NSW 2004	52
	Medical c	onditions and obstetric complications	52
	Table 60:	Maternal medical conditions and obstetric complications by country of birth group, NSW 2004	52
	Labour a	nd delivery	53
	Table 61:	Labour onset by country of birth group, NSW 2004	53
	Table 62:	Type of delivery by country of birth group, NSW 2004	53
	Birth weigh	ght	54
	Table 63:	Birth weight by maternal country of birth group, NSW 2004	54
	Gestation	nal age	54
	Table 64:	Gestational age by maternal country of birth group, NSW 2004	54
	Apgar sc	ore	55
	Table 65:	Births by country of birth group and Apgar score at 5 minutes, NSW 2004	55
	Perinatal	outcomes	55
	Table 66:	Perinatal outcomes by country of birth group, NSW 2004	55
8.	NEONATAL	INTENSIVE CARE	56
	Registrat	ion rate	56
	_	NICUS registrations by health area of residence, NSW & ACT 2004	56
		characteristics	56
	Table 68:	Mothers of NICUS registrants by health area of residence and Aboriginality, NSW & ACT 2004	57
	Table 69:	Mothers of NICUS registrants by health area of residence and maternal age, NSW & ACT 2004	57
	Table 70:	Mothers of NICUS registrants by antenatal complications and gestational age, NSW & ACT 2004	57
	Figure 5:	Mothers of NICUS registrants by antenatal corticosteroid administration and gestational age, NSW & ACT 2000–2004	58
	Table 71:	Mothers of NICUS registrants by antenatal corticosteroid administration and gestational age, NSW & ACT 2000–2004	58
	Transfer	status, labour and delivery	59
	Table 72:	NICUS registrants by booking status, transfer status and gestational age, NSW & ACT 2004	59
	Figure 6:	NICUS registrants by tertiary hospital birth and gestational age, NSW & ACT 2000–2004	60
	Table 73:	NICUS registrants by place of birth (level of obstetric hospital) and gestational age, NSW & ACT 2004	60
	Table 74:	NICUS registrants by booking status, transfer status and birth weight, NSW & ACT 2004	60
	Table 75:	NICUS registrants by place of birth (level of obstetric hospital) and birth weight, NSW & ACT 2004	61
	Table 76:	Mothers of NICUS registrants by onset of labour and gestational age, NSW & ACT 2004	61

Table 77:	Mothers of NICUS registrants by onset of labour and birth weight, NSW & ACT 2004	61
Table 78:	NICUS registrants by duration of rupture of membranes and gestational age,	01
Table 76.	NSW & ACT 2004	61
Table 79:	NICUS registrants by type of delivery and gestational age, NSW & ACT 2004	62
Table 80:	NICUS registrants by type of delivery and birth weight, NSW & ACT 2004	62
Infant cha	aracteristics	62
Figure 7:	NICUS registrants by gestational age, NSW & ACT 2004	63
Table 81:	NICUS registrants by gestational age, NSW & ACT 2000–2004	63
Table 82:	Births by NICUS registration and gestational age, NSW & ACT 2004	64
Table 83:	NICUS registrants by birth weight, NSW & ACT 2000–2004	64
Table 84:	Births by NICUS registration and birth weight, NSW & ACT 2004	65
Table 85:	NICUS registrants by gender and gestational age, NSW & ACT 2004	65
Table 86:	NICUS registrants by congenital anomalies and gestational age, NSW & ACT 2004	65
Table 87:	NICUS registrants by plurality and gestational age, NSW & ACT 2004	66
Table 88:	NICUS registrants by Apgar score and gestational age, NSW & ACT 2004	67
Table 89:	NICUS registrants by Apgar score at one and 5 minutes, NSW & ACT 2000–2004	67
Table 90:	NICUS registrants by assisted ventilation by gestational age,	01
iabio oo.	NSW & ACT 2000–2004	67
Figure 8:	NICUS registrants by main indication for assisted ventilation, NSW & ACT 2004	68
•	NICUS registrants by main indication for assisted ventilation and gestational age, NSW & ACT 2004	68
Table 92:	NICUS registrants by surfactant administration and gestational age,	00
Table 02:	NSW & ACT 2004	69
Table 95.	NICUS registrants by proven systemic infection and gestational age, NSW & ACT 2000–2004	69
Table 94:	NICUS registrants by treated patent ductus arteriosus (PDA) and gestational age, NSW & ACT 2004	69
Table 95:	NICUS registrants by necrotising enterocolitis (NEC) and gestational age, NSW & ACT 2004	70
Table 96:	NICUS registrants by major surgery and gestational age, NSW & ACT 2004	70
Table 97:	NICUS registrants by intraventricular haemorrhage (IVH) and gestational age, NSW & ACT 2004	71
Table 98:	NICUS registrants by retinopathy of prematurity (ROP) and gestational age, NSW & ACT 2004	71
Service u		72
Figure 9:	NICUS registrants by total number of days in hospital and gestational age, NSW & ACT 2004	72
Figure 10:	NICUS registrants by total number of days of assisted ventilation and gestational age, NSW & ACT 2004	73
Figure 11:	NICUS registrants by total number of days of oxygen therapy and gestational age, NSW & ACT 2000–2004	73
Table 99:	NICUS registrants by service utilisation indicators and gestational age, NSW & ACT 2004	74
Table 100:	NICUS registrants by home oxygen administration and gestational age,	
	NSW & ACT 2000–2004	75
Survival		76
Figure 12:	NICUS registrants by 6-months survival and gestational age,	
	NSW & ACT 2000–2004	76

	Table 101: NICUS registrants by duration of survival and gestational age, NSW & ACT 2004	77
	Table 102: NICUS registrants by duration of survival and birth weight, NSW & ACT 2004	77
	Table 103: NICUS registrants by duration of survival, place of birth and gestational age, NSW & ACT 2004	78
	Table 104: NICUS registrants by duration of survival, major congenital anomaly and gestational age, NSW & ACT 2004	78
	Figure 13: NICUS registrant deaths by post-mortem examination and gestational age, NSW & ACT 2000–2004	79
	Table 105: NICUS registrants by post-mortem examination and gestational age, NSW & ACT 2004	79
9.	EXTREMELY PRE-TERM FOLLOW UP	80
	Registration rate	80
	Table 106: NICUS registrations by health area of residence, NSW & ACT 1998–2001	80
	Table 107: Births by NICUS registration, hospital survival and gestational age, NSW & ACT 1998–2001	80
	Assessment and tools	81
	Development outcome	81
	Table 108: Neurological status at 2–3 year follow up by gestational age, NSW & ACT 1998–2001	81
	Table 109: Visual status at 2–3 year follow up by gestational age, NSW & ACT 1998–2001	81
	Table 110: Hearing status at 2–3 year follow up by gestational age, NSW & ACT 1998–2001	82
	Table 111: Development status at 2–3 year follow up by gestational age, NSW & ACT 1998–200	82
	Weight for age	83
	Table 112: Severity of functional disability at 2–3 year follow up by gestational age, NSW & ACT 1998–2001	83
	Table 113: Weight for age at 2-3 year follow up by gestational age, NSW & ACT 1998-2001	83
10.	BIRTH DEFECTS	84
	Birth defects among stillborn and liveborn infants	84
	Trends in reported birth defects	84
	Table 114: Birth defect cases, NSW 1998–2004	84
	Birth defects by diagnostic category	84
	Table 115: Birth defects among stillbirths and live births by diagnostic category, NSW 1998–2004	
	Infant characteristics	86
	Table 116: Birth defect cases by gestational age, NSW 1998–2004	86
	Table 117: Birth defect cases by pregnancy outcome, NSW 1998–2004	86
	Maternal characteristics	87
	Table 118: Birth defect cases by maternal age, NSW 1998–2004	87
	Birth defects among terminations of pregnancy, spontaneous abortions and unknown outcomes of pregnancy	87
	Table 119: Pregnancies with fetuses affected by birth defects and resulting in spontaneous abortion, termination of pregnancy or unknown outcome, NSW 1998–2004	87
	Table 120: Birth defects among spontaneous abortions, terminations of pregnancy and unknown outcome of pregnancy by diagnostic category, NSW 1998–2004	88
	Trends in selected birth defects	89
	Table 121: Selected birth defects by year, NSW 1998–2004	89
	Figure 14: Neural tube defects: Cases by year and pregnancy outcome, NSW 1998–2004	90
		30
	Figure 15: Chromosomal abnormalities: Cases by year and pregnancy outcome, NSW 1998–2004	90

	Figure 16: Down syndrome: Cases by year and pregnancy outcome, NSW 1998–2004	91
	Figure 17: Diaphragmatic hernia: Cases by year and pregnancy outcome, NSW 1998–2004	91
	Birth defects by NSW health areas	92
	Table 122: Birth defects in NSW health areas, 1998–2004	92
11.	NSW HOSPITALS	93
	Onset and augmentation of labour in selected hospitals	93
	Table 123: Onset and augmentation of labour by hospital, NSW 2004	93
	Type of delivery in selected hospitals	95
	Table 124: Type of delivery by hospital, NSW 2004	95
	Pain relief in selected hospitals	97
	Table 125: Pain relief by hospital, NSW 2004	97
	Perineal status in selected hospitals	99
	Table 126: Vaginal births by perineal status and hospital, NSW 2004	99
	Birth weight in selected hospitals	101
	Table 127: Births by baby birth weight and hospital, NSW 2004	101
	Gestational age in selected hospitals	103
	Table 128: Births by gestational age and hospital, NSW 2004	103
	Neonatal resuscitation in selected hospitals	105
	Table 129: Births by type of resuscitation and hospital, NSW 2004	105
	Admission to special care and neonatal intensive care units in selected hospitals	107
	Table 130: Livebirths by admission to special care–NICU and hospital, NSW 2004	107
	Baby discharge status in selected hospitals	109
	Table 131: Confinements by baby discharge status and hospital, NSW 2004	109
	Postnatal length of stay in selected hospitals	111
	Table 132: Average maternal postnatal length of stay in hospital of birth, NSW 1999–2003	111
	Induction of labour for other than defined indications, Indicator 1.1	112
	Table 133: Indicator 1.1: Induction of labour for other than defined indications by hospital, NSW 2000–2004	112
	Induction of labour for other than defined indications, Indicator 1.2	113
	Table 134: Indicator 1.2: Induction of labour for other than defined indications by hospital, NSW 2000–2004	113
	Vaginal delivery following primary caesarean section, Indicator 2.1	114
	Table 135: Indicator 2.1: Vaginal delivery after caesarean section by hospital, NSW 2000–2004	114
	Primary caesarean section for failure to progress, Indicator 3.1	115
	Table 136: Indicator 3.1: Primary caesarean section for failure to progress by hospital, NSW 2000–2004	115
	Primary caesarean section for failure to progress, Indicator 3.2	116
	Table 137: Indicator 3.2: Primary caesarean section for failure to progress by hospital, NSW 2000–2004	116
	Primary caesarean section for fetal distress, Indicator 4.1	117
	Table 138: Indicator 4.1: Primary caesarean section for fetal distress by hospital, NSW 2000–2004	117
	Primary caesarean section for fetal distress, Indicator 4.2	118
	Table 139: Indicator 4.2: Primary caesarean section for fetal distress by hospital, NSW 2000–2004	118

	Intact lower genital tract in primiparous patients delivering vaginally, Indicator 5.1	119
	Table 140: Indicator 5.1: Intact lower genital tract in primiparous patients delivering vaginally by hospital, NSW 2000–2004	119
	Apgar scores, Indicator 6.1	120
	Table 141: Indicator 6.1: Apgar score of 4 or less by hospital, NSW 2000–2004	120
	Term infants admitted to NICU for reasons other than congenital abnormalities,	
	Indicator 7.1	121
	Table 142: Indicator 7.1: Term infants admitted to NICU for reasons other than congenital abnormalities by hospital, NSW 2000–2004	121
12.	PERINATAL DEATHS	122
	Review of perinatal deaths 2004	122
	Trends in obstetric antecendents of perinatal death	122
	Obstetric antecedents of perinatal death 2004	122
	Table 143: Perinatal deaths by obstetric antecedent and year, NSW 2001–2004	123
	Figure 18: Perinatal deaths by obstetric antecedent and year, NSW 2004	123
	Table 144: Perinatal deaths by obstetric antecedent and perinatal outcome, NSW 2004	124
	Obstetric cause of perinatal death by hospital service level 2004	126
	Time of death 2004	126
	Trends in neonatal causes of death	126
	Neonatal causes of death 2004	126
	Perinatal deaths associated with maternal drug dependency-abuse 2004	126
	Post-mortem examination 2004	126
	Table 145: Perinatal deaths by obstetric antecedent and hospital service level, NSW 2004	126
	Table 146: Neonatal deaths by cause and year, NSW 2001–2004	127
	Table 147: Neonatal deaths by cause and gestational age, NSW 2004	128
13.	HOW USEFUL ARE HOSPITAL MORBIDITY DATA FOR MONITORING CONDITIONS OCCURRING IN THE PERINATAL PERIOD?	129
	Introduction	129
	Methods	129
	Results	130
	Table 148: Measures of accuracy for reported conditions	130
	Table 149: Comparison of reporting maternal conditions in ISC and validation data: Measures of accuracy and reliability	131
	Table 150: Comparison of reporting neonatal conditions in ISC and validation data: Measures of accuracy and reliability	133
	Table 151: Comparison of NSW ISC and other state perinatal data collections for selected conditions	134
	Discussion	135
	Acknowledgements	136
	References	136
14.	APPENDICES	
	Appendix 1: Description of selected birth defects	137
	Appendix 2: Birth defect exclusion list	137
	Appendix 3: Maternal countries of birth and country of birth groups	138
	Appendix 4: NSW Midwives Data Collection form	139

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2. EXECUTIVE SUMMARY

This is the eighth report on mothers and babies in NSW to combine the annual reports of the NSW Midwives Data Collection (MDC), the Neonatal Intensive Care Units' Data Collection (NICUS), and the NSW Birth Defects Register (BDR).

This year there are 2 supplementary chapters: Chapter 9 includes a report on a follow-up study of extremely preterm infants; and Chapter 13 presents the results of a study examining the usefulness of hospital morbidity data for surveillance of conditions occurring in the perinatal period.

In addition, for the first time Chapter 11 includes the Australian Council on Healthcare Standards–Royal Australian and New Zealand College of Obstetricians and Gynaecologists (ACHS–RANZCOG) clinical indicators for obstetrics for individual hospitals where 200 or more births occurred in 2004.

Information on causes of maternal deaths in NSW was obtained through the work of the NSW Maternal and Perinatal Committee. From 1 January 2000, confidential reviews of perinatal deaths among babies of at least 22 weeks gestation or 500 grams birth weight are also carried out by the Committee. Chapter 12 describes the results of the review for deaths occurring in 2004.

Trends in NSW

There were 85,626 births to 84,288 women in 2004. The number of teenage mothers continues to decline, falling from 3,853 (4.4 per cent of all mothers) in 2000 to 3,387 (4.0 per cent) in 2004; while the number of mothers aged 35 years and over increased from 15,334 in 2000 to 16,769 in 2004, an increase from 17.7 to 19.9 per cent of all confinements.

About 28 per cent mothers were born overseas in 2004, most commonly in the United Kingdom (2.6 per cent), New Zealand (2.4 per cent), Vietnam (2.0 per cent), and China (2.0 per cent).

The reported number of Aboriginal and Torres Strait Islander mothers giving birth increased slightly from 2,105 in 2000 (2.4 per cent of all mothers) to 2,308 in 2004 (2.7 per cent of all mothers). Part of this increase is likely to be due to an increased willingness of mothers to be identified as Aboriginal or Torres Strait Islander.

The proportion of mothers planning to give birth in a birth centre remained stable at about 3.7 per cent, while the reported number of mothers planning a home birth decreased from 146 to 114 over the 5 year period.

The rate of normal vaginal birth fell from 67.1 per cent in 2000 to 62.1 per cent in 2004. Over the 5 years, the caesarean section rate increased from 21.3 to 27.2 per cent

and the rate of instrumental delivery remained steady at 10 to 11 per cent. Caesarean section delivery continues to be more common among privately than publicly insured mothers. The changing pattern in type of delivery is evident in both groups between 1999 and 2003. Among privately insured mothers the rate of normal vaginal birth decreased from 57.6 to 50.8 per cent and the caesarean section rate increased from 26.3 to 34.7 per cent. Among publicly insured mothers the rate of normal vaginal birth decreased from 72.8 to 68.7 per cent and the rate of caesarean section increased from 17.1 to 22.5 per cent.

Since 1999, the rate of low birth weight (less than 2,500 grams) has been steady at about 6 per cent. The rate was 6.4 per cent in 2004. The percentage of babies born prematurely (less than 37 weeks gestation) has remained stable at about 7 per cent.

The perinatal mortality rate varied from 8.6 to 9.6 per 1,000 births over the 5 year period. About two-thirds of all perinatal deaths were stillbirths and one-third were neonatal deaths.

In the period 1990–2003, 149 deaths were reported among pregnant women or women who gave birth less than 6 weeks previously. One hundred of these were classified as directly or indirectly associated with the pregnant state, while 48 were incidental (not related to pregnancy) and one was of undetermined cause.

Aboriginal and Torres Strait Islander Mothers and Babies

In 2004, 70.1 per cent of Aboriginal and Torres Strait Islander mothers commenced antenatal care before 20 weeks gestation compared with 88.0 per cent of non-Aboriginal and Torres Strait Islander mothers. About one in 5 Aboriginal and Torres Strait Islander mothers were teenagers. Since 2000, the rates of low birth weight (less than 2,500 grams) and prematurity (less than 37 weeks gestation) in Aboriginal and Torres Strait Islander babies have been over 10 per cent. These rates are one and a half times to 2 times higher than the rates for NSW overall. The perinatal mortality rate among babies born to Aboriginal and Torres Strait Islander mothers was 11.6 per 1,000 in 2004, higher than the rate of 9.0 per 1,000 experienced by babies born to non-Aboriginal or Torres Strait Islander mothers.

Neonatal Intensive Care

There were 2,231 infants registered in the Neonatal Intensive Care Units' Data Collection in 2004 representing a registration rate of 24.8 per 1,000 live births. Ninety-two (4.1 per cent) infants registered in 2004 were born to Aboriginal and/or Torres Strait Islander mothers.

The 2,231 infants were born to 2,038 mothers, nearly 80 per cent of whom were residents of the Sydney South West, Sydney West, Northern Sydney & Central Coast, South Eastern Sydney & Illawarra and Hunter & New England Health Areas. The age of mothers ranged from 15 to 48 years with a mean age of 29.8 years. Antenatal complications were reported for 88.1 per cent of mothers. The proportion of women receiving antenatal corticosteroids for lung maturation has increased each year since 1992, with 86.7 per cent of mothers receiving steroids in 2004.

Thirty-five per cent of infants registered in 2004 were born following a booked tertiary centre birth and 35.0 per cent were born following maternal transfer. Twenty-nine per cent were transferred to a tertiary centre following birth and 3.3 per cent were transferred from one tertiary centre to another during the first day of life. Nearly three quarters (73.5 per cent) of the infants registered in 2004 were born in a tertiary centre.

Boys comprised 58.8 per cent of the 2004 cohort and girls 41.2 per cent. Most infants (78.7 per cent) were from a singleton pregnancy, 18.8 per cent were from a twin pregnancy, 2.4 per cent were from a triplet pregnancy and 0.2 per cent were from a quadruplet pregnancy.

Seventy-five per cent of infants registered during 2004 were preterm (less than 37 weeks gestation), 40.8 per cent were very preterm (less than 32 weeks gestation) and 11.8 per cent were extremely preterm (less than 28 weeks gestation). Nearly one in 5 (19.3 per cent) infants had a major or minor congenital anomaly.

Infants with major congenital anomalies were excluded from the analysis of mortality and morbidity. The majority of infants registered in 2004 (87.9 per cent) received assisted ventilation (intermittent mandatory ventilation or continuous positive airways pressure ventilation).

Proven systemic infection was present in 9.8 per cent of infants, necrotising enterocolitis in 2.5 per cent, intraventricular haemorrhage in 13.9 per cent, treated patent ductus arteriosus in 15.9 per cent, and major surgery in 3.5 per cent. Severe grades (Grade 3 or 4) of retinopathy of prematurity were present in 2.8 per cent of infants less than 32 weeks gestation, of whom 87.0 per cent had either cryo- or laser therapy to prevent retinal detachment. Surfactant was given to 38.6 per cent of infants; the majority (56.2 per cent) of ventilated infants with a diagnosis of Respiratory Distress Syndrome received surfactant.

Overall, 94.4 per cent of infants without a major congenital anomaly survived to 6 months of age. Survival improved with gestational age up to 35 weeks after which it decreased slightly. Of the infants who died, most (75.0 per cent) died at less than one week of age and a further 18.3 per cent died at less than 29 days of age. The 6 month survival rate for infants born at all gestational ages was similar for those born in a tertiary centre and those born in a non-tertiary centre.

Extremely Preterm Follow up

From 1998 to 2001 69.0 per cent of 22 to 28 weeks gestation infants were liveborn. Eighty-nine per cent of liveborn infants were admitted to a neonatal intensive care unit and 77.7 per cent of neonatal intensive care unit admissions survived to hospital discharge. A further 1.8 per cent of children died after hospital discharge and before their follow up appointment.

There were 1,214 children available for follow up at 2–3 years of age, corrected for prematurity. The follow up rate was 79.5 per cent. The median (25th, 75th) age of assessment was 35.6 (29.1, 36.9) months. Of the 965 children with information at 2–3 years of age, corrected for prematurity, 11.0 per cent had cerebral palsy, 1.2 per cent were bilaterally blind, 5.2 per cent were bilaterally deaf and 10.8 per cent had a moderate to severe developmental delay.

Overall 15.9 per cent of children had a moderate to severe functional disability due to cerebral palsy, bilateral blindness, deafness requiring bilateral hearing aids or cochlear implants or developmental delay more than 2 standard deviations below the mean on a standardized psychological assessment.

Birth defects

About 2,000 infants are born with birth defects each year in NSW. In 1998–2004, defects of the cardiovascular system were most commonly reported, followed by defects of the musculoskeletal system and defects of the genito-urinary system. This is a similar pattern to previous years.

In 2003, the reported rate of defects in stillborn and liveborn babies was slightly lower than the previous 5 years combined (35.4 versus 38.1 per 1,000) due to a lower overall birth defect rate among infants.

Birth defects were more common among premature infants compared to full term infants, and among male infants compared to female infants. The rate of birth defects increases with increasing maternal age, especially after age 35. However, as most babies are born to mothers aged less than 35 years, the majority of babies with birth defects were born to younger mothers.

Perinatal deaths

Confidential reports on 643 perinatal deaths in 2004 were reviewed. Overall, 191 (29.7 per cent) perinatal deaths reviewed for 2004 were unexplained. The next most common obstetric antecedents of death were fetal abnormality (n=125, 19.4 per cent), spontaneous preterm labour (n=121, 18.8 per cent), and specific perinatal conditions such as twin-to-twin transfusion and umbilical cord complications (n=43, 6.7 per cent). Post-mortem examinations were carried out in 33.0 per cent of all perinatal deaths.

The most common cause of neonatal death was extreme prematurity (n=67, 34.5 per cent), followed by congenital abnormalities (n=56, 28.9 per cent).

3. METHODS

Data sources

The New South Wales Midwives Data Collection

The New South Wales Midwives Data Collection (MDC) is a population-based surveillance system covering all births in NSW public and private hospitals, as well as home births. It encompasses all livebirths and stillbirths of at least 20 weeks gestation or at least 400 grams birth weight.

The MDC relies on the attending midwife or doctor to complete a notification form when a birth occurs. The form, a copy of which is shown at Appendix 4, includes demographic items and items on maternal health, the pregnancy, labour, delivery, and perinatal outcomes. Completed forms are sent to the Performance, Analysis and Reporting Branch in the Data Collections and Quality Section of the NSW Department of Health, where they are compiled into the MDC database.

Over 66 per cent of MDC notifications are received electronically from hospital obstetric information systems. These notifications are received on disk or by email and replace the submission of the record on paper. There are several source systems that generate the MDC data. The largest source is the OBSTET database, which supplies 47.7 per cent of all MDC data, followed by: the OIS database (Central Sydney Area Health Service) 6.3 per cent; the Central Coast modified CRS System (2.9 per cent); the Illawarra Shared Care System (2.5 per cent); the Sydney Adventist Hospital database (2.7 per cent); and Medistat (1.3 per cent).

The MDC receives notifications of women whose usual place of residence is outside NSW but who give birth in NSW. However, the MDC does not receive notifications of births outside NSW to women usually resident in NSW.

The Neonatal Intensive Care Units' Data Collection

The Neonatal Intensive Care Units' (NICUS) Data Collection is a statewide audit of infants admitted to neonatal intensive care units and 4 of the level 4 neonatal nurseries in New South Wales (NSW) and the Australian Capital Territory (ACT) during the neonatal period for one of the following reasons:

- gestational age less than 32 weeks;
- birth weight less than or equal to 1,500 grams;
- mechanical ventilation for 4 hours or more;
- continuous positive airways pressure (CPAP) for 4 hours or more;
- major surgery (opening of a body cavity);
- insertion of a central venous line for 4 hours or more.

In 2004 the 10 neonatal intensive care units in NSW and ACT were situated at the following perinatal centres: John Hunter Children's Hospital (Newcastle), Liverpool Health Service, Nepean Hospital, Royal Hospital for Women, Royal North Shore Hospital, Royal Prince Alfred Mothers and Babies Hospital, The Canberra Hospital (Canberra),

Westmead Hospital, and at the 2 paediatric hospitals: Sydney Children's Hospital and The Children's Hospital at Westmead. The 4 level 4 neonatal nurseries that joined NICUS in 2002 were situated at Blacktown Hospital, Gosford Hospital, St George Hospital and Wollongong Hospital.

The neonatal, maternal and perinatal data that comprise the NICUS Data Collection are collected and collated within each neonatal intensive care unit and level 4 nursery by a designated Clinical Audit Officer. The data are compiled into a central database located at the NSW Centre for Perinatal Health Services Research.

The Neonatal Intensive Care Units' Follow up Data Collection

The Neonatal Intensive Care Units' Follow up Data Collection is a statewide audit at 2–3 years of age, corrected for prematurity of infants born 22 to 28 weeks gestation and admitted to a neonatal intensive care unit in NSW and the ACT.

All surviving infants were assessed by a developmental assessment team at the following perinatal centres: John Hunter Children's Hospital (Newcastle), Liverpool Health Service, Nepean Hospital, Royal Hospital for Women, Royal North Shore Hospital, Royal Prince Alfred Mothers and Babies Hospital, The Canberra Hospital (Canberra) or Westmead Hospital or at one of the 2 paediatric hospitals: The Children's Hospital at Westmead, and the Sydney Children's Hospital.

The follow up data that comprise the NICUS Follow up Data Collection are collected and collated within each of the above hospitals by a designated member of the developmental assessment team. The data are compiled into a central database located at the NSW Centre for Perinatal Health Services Research.

The New South Wales Birth Defects Register

The NSW Birth Defects Register (BDR) is a population-based surveillance system established to monitor birth defects detected during pregnancy or at birth, or diagnosed in infants up to one year of age. The BDR was established in 1990 and, under *NSW Public Health Act 1991*, from 1 January 1998 doctors, hospitals, and laboratories have been required to notify birth defects detected during pregnancy, at birth, or up to one year of life. The BDR is administered by the Centre for Epidemiology and Research of the NSW Department of Health.

The activities of the BDR include: annual publication of information on birth defects in NSW; provision of information to area health services to assist in service planning and monitoring of child health, and investigation of specific issues; provision of information in response to specific requests from the public, health professionals, and other government departments; and provision of data to the AIHW National Perinatal Statistics Unit (NPSU) for

monitoring of birth defects at a national level. The NPSU is also responsible for providing Australian information on birth defects to the International Clearinghouse for Birth Defects Monitoring Systems, a non-governmental organisation of the World Health Organization.

Sources of notifications to the BDR include: the NSW Midwives Data Collection (MDC), specialist paediatric hospitals, cytogenetic laboratories, and individual health care providers. The BDR is supported by an advisory committee, comprising a panel of clinical experts representing the following specialities: genetics, dysmorphology, neonatology, obstetrics and gynaecology, midwifery, bioethics, and epidemiology; and a community representative from the Association of Genetic Support of Australasia.

Data for research purposes may be provided in 2 formats: aggregate information similar to that contained in this report, and data concerning individuals with identifying information removed. All requests for data should be submitted in writing to the Director, Centre for Epidemiology and Research. Requests for data concerning individuals for sufficiently important research purposes will be referred to the NSW Department of Health Ethics Committee. Procedures for release of personal information are described in the Department's *Information Privacy Code of Practice*, copies of which are available through the NSW Department of Health's website at www.health. nsw.gov.au.

The NSW Inpatient Statistics Collection

For this report data from the NSW Inpatient Statistics Collection (ISC) was linked to MDC data to produce information on postnatal length of stay in NSW hospitals, and, from 1998, health insurance status.

The ISC covers demographic and episode related data for every inpatient who is separated from any public, private, and repatriation hospital, private day procedure centre, or public nursing home in NSW. Separation can result from discharge, transfer, death, or change in service category. The ISC is maintained by the Performance, Analysis and Reporting Branch in the Data Collections and Quality Section of the NSW Department of Health.

NSW Maternal and Perinatal Committee

The NSW Maternal and Perinatal Committee is a quality assurance committee established under the NSW Health Administration Act 1982, and is privileged under the Act to carry out confidential reviews of both maternal and perinatal deaths. Members are appointed by the Minister for Health. The committee reviews each maternal death to identify any possible avoidable factors and to determine whether the death was related to pregnancy (or its management) or whether it was incidental. The committee also reviews perinatal deaths of at least 22 weeks gestation or at least 500 grams birth weight. The information obtained from these reviews assists in the development of policies aimed at improving the health of mothers and newborns in NSW. Information considered by the Committee is confidential.

Method for estimating level of reporting of maternal Aboriginality

The Aboriginality of the mother, rather than the baby, is reported to the MDC, although mother's Aboriginality is frequently used as a proxy measure for the baby's Aboriginality. Consequently, maternal Aboriginality was used for this analysis.

The number of births reported to Torres Straight Islander mothers is quite small in NSW. Aboriginal and Torres Straight Islander mothers were therefore combined for this analysis. For ease of reference, 'Aboriginal' is used to refer to both Aboriginal or Torres Straight Islander mothers.

Records of births reported to the MDC were linked to birth registration records of the NSW Registry of Births, Deaths and Marriages for births occurring in the 4-year period 2000–2003. Records from the 2 files were matched using a probabilistic linkage software (Automatch). Prior to matching, residential address and mothers' name were standardised using a standardisation software (Autostan). The overall linkage rate was 95.2 per cent of MDC records and 98.9 per cent of birth registration records.

Capture—recapture methods are used to adjust estimates of counts to reflect ascertainment level or undercounting. Capture—recapture was carried out using the method described by McCarty et al.1 Analysis was carried out using SAS version 8.02. Analyses concerning geographic location were based on health area of hospital of birth as reported to the MDC. Home births and births for which the hospital of birth was not stated were excluded from the analysis.

References

 McCarty DJ, Tull ES, Moy CS, Kwoh CK, LaPorte RE. Ascertainment corrected rates: Applications of Capture– Recapture Methods. *Int J Epidemiol* 1993; 22(3): 559–565.

Definitions

Aboriginal and Torres Strait Islander

Women who identify themselves to be of Australian Aboriginal and Torres Strait Islander heritage.

Age corrected for prematurity

Age corrected for prematurity: until the child is 3 years old, the age of the baby is calculated from the due date and not the date of birth.

Apgar score

A numerical scoring system routinely administered one and 5 minutes after birth to evaluate the condition of the baby. The score ranges from 0–10 (10 being perfect). It takes account of 5 physical signs, each of which is assigned a component score of 0, 1 or 2: heart rate, respiration, muscle tone, reflexes, and colour.

Augmentation

Artificial rupture of the membranes or use of oxytocic drugs after spontaneous onset of labour.

Birth defect

Any structural defect or chromosomal abnormality detected during pregnancy, at birth, or in the first year of life, excluding birth injuries and minor anomalies such as skin tags, talipes, birthmarks, or clicky hips. From 1994, the following conditions were included in the NSW Birth Defects Register: congenital hypothyroidism, cystic fibrosis, phenylketonuria, and thalassaemia major.

Birth weight

The newborn infant's first bare weight in grams. Low birth weight: birth weight less than 2,500 grams. Very low birth weight: birth weight less than 1,500 grams. Extremely low birth weight: birth weight less than 1,000 grams.

Caesarean section

Delivery of the fetus through an abdominal incision.

Elective caesarean section: a caesarean section (planned or unplanned) performed before the onset of labour.

Emergency caesarean section: a caesarean section performed after the onset of labour, whether or not the onset of labour was spontaneous.

Confinement

Refers to a woman having given birth. In a multiple pregnancy, one confinement will result in more than one birth.

Epidural

Injection of analgesic agent outside the dura mater which covers the spinal canal; includes lumbar, spinal, and epidural anaesthetics.

Episiotomy

An incision of the perineum and vagina to enlarge the vulval orifice.

Functional disability¹:

None-minimal: No developmental delay: Griffiths

Mental Developmental Scales (GMDS) general quotient (GQ) or Bayley Scales of Infant Development-II (BSID-II) mental developmental index (MDI) 1 standard deviation below the mean to 3 standard

deviation above the mean;

Mild: Developmental delay: GMDS or BSID-

II between 1 and 2 Standard Deviations

below the mean;

Mild cerebral palsy: able to walk without aids at 2-3 years of age, corrected for

prematurity;

Moderate: Developmental delay: GMDS or BSID-

II between 2 and 3 Standard Deviations

below the mean;

Moderate cerebral palsy: able to walk with the assistance of aids at 2–3 years of age,

corrected for prematurity;

Sensorineural or conductive deafness: requiring amplification with bilateral hearing aids or unilateral-bilateral cochlear

implant;

Severe: Developmental delay: GMDS or BSID-

II 3 or more standard deviations below

the mean;

Bilateral blindness: with a visual acuity of

<6/60 in the better eye;

Severe cerebral palsy: unable to walk with the assistance of aids at 2–3 years of age,

corrected for prematurity.

Gestational age

The duration of pregnancy in completed weeks from the first day of the last normal menstrual period. Where accurate information on the date of the last menstrual period is not available, a clinical estimate of gestational age may be obtained from ultrasound during the first half of pregnancy or by examination of the newborn infant. The 'best estimate' is used here.

Griffiths Mental Developmental Scales (GMDS)

The mean for the General Quotient (GQ) of the Griffiths Mental Developmental Scales (GMDS) is 100.2 and the standard deviation (SD) is 12.8.

The mean for the mental developmental index (MDI) of the Bayley Scales of Infant Development-II (BSID-II) is 100 and the standard deviation (SD) is 15.

Induction of labour

Oxytocics—prostaglandins: the initiation of labour by the use of oxytocic agents, prostaglandins, or their derivatives (oral, intravaginal or intravenous).

ARM only: the initiation of labour by artificial rupture of membranes.

Oxytocics-prostaglandins and ARM: both medical and surgical induction as defined above (combined medical and surgical induction).

Intraventricular haemorrhage (IVH)

Worst level of intraventricular haemorrhage (IVH) seen on either right or left side by either ultrasound or post-mortem examination.

None: ultrasound–post-mortem shows no

haemorrhage

Grade 1: subependymal germinal matrix

haemorrhage

Grade 2: intraventricular haemorrhage with no

ventricular dilatation

Grade 3: intraventricular haemorrhage with

ventricle distended with blood

Grade 4: intraparenchymal haemorrhage Not examined: No ultrasound or post-mortem

examination.

Livebirth

The complete expulsion or extraction from its mother of a baby of at least 400 grams or 20 weeks gestation who, after being born, breathes or shows any evidence of life such as a heartbeat.

Major surgery

Any surgery that requires opening of a body cavity.

Mechanical ventilation

Use of a mechanical ventilator to provide intermittent positive pressure respiration for a baby for 4 hours or more.

Necrotising enterocolitis (NEC)

Clinically diagnosed: received treatment for NEC (includes suspending feeds, blood cultures and treatment with antibiotics such as clindamycin–gentamycin).

Proven radiologically or at operation: radiological signs include intra-mural or intra-hepatic air, perforation or a 'fixed loop'.

Neonatal death

The death of a liveborn infant within 28 days of birth.

Neonatal period

The first 28 completed days of life.

Neonatal mortality rate

The number of neonatal deaths per 1,000 livebirths.

Patent ductus arteriosus (PDA)

Clinical signs of PDA such as typical murmur, active precordium, bounding pulses, cardiomegaly, or pulmonary vascular congestion on x-ray. May be confirmed on ultrasound examination.

Parity

The total number of livebirths and stillbirths of the mother before the pregnancy or birth under consideration.

Perinatal death

A stillbirth or neonatal death.

Perinatal mortality rate

The number of perinatal deaths (stillbirths and neonatal deaths) per 1,000 total births in a year (livebirths and stillbirths combined).

Perineal status

1st degree tear: a perineal graze–laceration–tear

involving: the fourchette, hymen,

labia, skin, vagina, or vulva.

2nd degree tear: a perineal laceration or tear involving

the pelvic floor or perineal muscles or

vaginal muscles.

3rd degree tear: a perineal laceration-tear involving the

anal sphincter or rectovaginal septum.

4th degree tear: a third degree perineal laceration or tear

which also involves the anal mucosa or

rectal mucosa.

Plurality

The number of fetuses or babies from the pregnancy. On this basis pregnancy may be classified as single or multiple.

Premature infant

An infant born before 37 completed weeks gestation.

Premature labour

The spontaneous onset of labour (regular painful contractions with progressive cervical changes) before 37 completed weeks of gestation.

Retinopathy of prematurity

Worst stage of retinopathy of prematurity (ROP) in either eye during the initial hospital admission.

None seen: no changes seen

Stage I: demarcation line present

Stage II: ridge present

Stage III: ridge with extra-retinal fibrovascular

proliferation

Stage IV: retinal detachment

Systemic infection in the infant

Clinical or radiological signs of infection together with growth of a known pathogen from a systemic site—does not include tracheal aspirate.

Transfer (NICUS only)

Maternal transfer before birth (prenatal): the transfer of a pregnant woman to a tertiary obstetric hospital.

Neonatal transfer after birth (postnatal): the transfer of an infant from the hospital of birth to a tertiary NICU.

Spontaneous abortion

The spontaneous expulsion of a fetus less than 20 weeks gestation and less than 400 grams birth weight.

Stillbirth

The complete expulsion or extraction from its mother of a product of conception of at least 20 weeks gestation or 400 grams birth weight who did not, at any time after delivery, breathe, or show any evidence of life such as a heartbeat.

Termination of pregnancy

A procedure intentionally performed to terminate a pregnancy before 20 completed weeks gestation.

References

1. The Victorian Infant Collaborative Study Group. Postnatal corticosteroids and sensorineural outcome at 5 years of age. *J Paediatr Child Health* 2000; 36:256–261.

Explanatory notes

Antenatal complications (NICUS)

These specifically include antepartum haemorrhage, placenta praevia, placenta abruptio, prolonged rupture of membranes, gestational diabetes, threatened preterm labour, hypertensive disease of pregnancy and rhesus isoimmunisation. There is also an open-ended 'other antenatal complications' option. The most common problems specified in this option are cervical incompetence, polyhydramnios, oligohydramnios, chorioamnionitis, threatened miscarriage, and problems secondary to multiple pregnancy.

Rates of birth defects

The BDR collects data pertaining to birth defects regardless of the outcome of pregnancy. This includes notifications of livebirths, stillbirths, terminations of pregnancy and spontaneous abortions. Birth defect rates are calculated using births (that is, livebirths and stillbirths) as the denominator, because denominator populations for pregnancies less than 20 weeks gestation are unknown. The numerators are described in the relevant sections.

The source of denominator population data on births is the MDC. The MDC was selected because its definitions are consistent with those applied by the BDR.

Denominator populations compatible with the BDR were derived from the MDC by including only those births that occurred to NSW residents.

Caution should be exercised when comparing the birth defect rates tabled in this document with those reported within the NPSU's Congenital Malformations Australia Report. This report covers birth defects detected during pregnancy and up to one year of age while the Congenital Malformations Australia Report covers birth defects detected during pregnancy and up to 28 days of life.

Variations in data published by the BDR and interstate birth defects registers may be due to differences in coding practices, in categories of birth defects included in each Register and differences in the upper age limit for notification of cases.

Place of residence of mother

The mother's usual residence was the basis for coding to statistical local areas and NSW health areas.

Labour

The category *labour*—spontaneous with oxytocics—prostaglandins was used where labour was augmented with artificial rupture of membranes as well as oxytocics or prostaglandins.

Levels of neonatal care

Tertiary

Level 3: Neonatal Intensive Care Unit (NICU)—a unit that provides high-dependency specialist nursing and medical care for all newborn infants including sustained life support such as mechanical ventilation and has staff neonatologists and neonatal registrars.

Non-tertiary

Level 2a: Neonatal Care—a unit that can give high-level oxygen, can start mechanical ventilation if necessary, and has paediatric house staff.

Level 2b: Neonatal Care—a unit that can give low-level oxygen and has a paediatrician on call.

Level of obstetric hospitals

Level 1: local hospitals (no births), postnatal only.

Level 2: small isolated hospitals, low-risk births only. Staffed by general practitioners and midwives.

Level 3: country district and smaller metropolitan hospitals, care for mothers and infants at low-moderate risk. Full resuscitation and theatre facilities available. Rostered obstetricians, resident medical staff and midwives. Accredited general practitioners—specialist anaesthetist on call. Has Level 2b neonatal care.

Level 4: country base-metropolitan district hospitals. Delivery and care for mothers and/or babies with moderate risk factors. Obstetricians and paediatrician available 24 hours a day, 7 days a week. Rostered resident medical staff, specialist anaesthetist on call. Has Level 2b neonatal care

Level 5: country base—metropolitan district hospitals, care for mothers and infants known to be at high risk. Able to cope with complications arising from these risk factors. Has Level 2a neonatal care.

Level 6: (tertiary)—specialist obstetric hospitals (supra regional). All functions—low, moderate and high-risk births. Has Level 3 neonatal intensive care.

Type of delivery

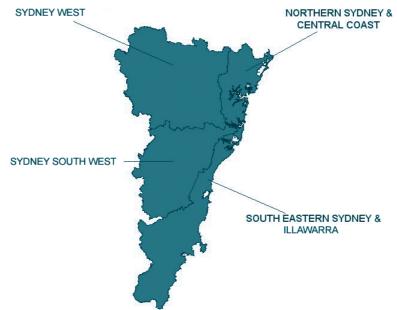
The 'vaginal breech' category covers all forms of vaginal breech delivery, including forceps to the aftercoming head.

Perinatal mortality rate

Perinatal deaths include deaths reported to the MDC only. As the MDC form is completed at discharge or transfer of the baby, deaths occurring after this time may not be reported to the MDC. Birth and perinatal death registration data held by the Australian Bureau of Statistics (ABS) give the most complete ascertainment of perinatal deaths for calculation of rates.

MAP OF NSW HEALTH AREAS





4. TRENDS IN NEW SOUTH WALES

Confinements and births by plurality

There were 85,626 births to 84,288 women reported in 2004 (Table 1). This is the lowest number of births in the last 5 years. The number of twin pregnancies has declined slightly since 2001, while the number of triplet pregnancies varied between 22 and 30 per year.

Plurality	2	2000				ear 002	2	003	2	004
	No.	%	No.	001 %	No.	%	No.	%	No.	%
Pregnancies										
Singleton	85027	98.3	82926	98.3	83190	98.3	83677	98.4	82983	98.5
Twins	1404	1.6	1428	1.7	1375	1.6	1330	1.6	1274	1.5
Triplets	29	0.0	24	0.0	22	0.0	23	0.0	30	0.0
Quadruplets	0	0.0	1	0.0	0	0.0	2	0.0	1	0.0
Total	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0
Births										
Singleton	85027	96.7	82926	96.6	83190	96.7	83677	96.8	82983	96.9
Twins	2808	3.2	2856	3.3	2749	3.2	2660	3.1	2549	3.0
Triplets	87	0.1	72	0.1	66	0.1	69	0.1	90	0.1
Quadruplets	0	0.0	4	0.0	0	0.0	8	0.0	4	0.0
Total	87922	100.0	85858	100.0	86005	100.0	86414	100.0	85626	100.0

Health area of residence

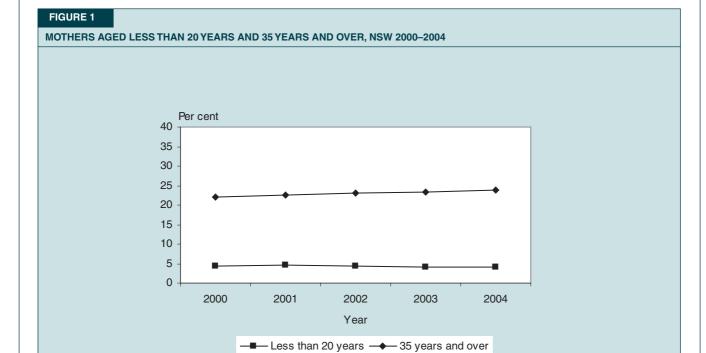
In 2004, the largest number of births occurred in the Sydney South West Area, followed by Sydney West and South Eastern Sydney & Illawarra Areas (Table 2). Declines in numbers of births were most apparent in the Greater Southern and Greater Western Areas.

Health Area			2	001		Year 2002		2003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West South Eastern	19316	22.3	18775	22.3	19105	22.6	19485	22.9	18720	22.2
Sydney & Illawarra	14104	16.3	13589	16.1	13699	16.2	13898	16.3	14121	16.8
Sydney West Northern Sydney &	15967	18.5	15763	18.7	15883	18.8	15942	18.7	15834	18.8
Central Coast	13204	15.3	12856	15.2	12818	15.2	13142	15.5	13032	15.5
Hunter & New England	10105	11.7	9753	11.6	10004	11.8	9694	11.4	9672	11.5
North Coast	4709	5.4	4762	5.6	4656	5.5	4587	5.4	4690	5.6
Greater Southern	4283	5.0	4209	5.0	3969	4.7	3834	4.5	3838	4.6
Greater Western	4135	4.8	4110	4.9	3855	4.6	3898	4.6	3784	4.5
Other-not stated	637	0.7	562	0.7	598	0.7	552	0.6	597	0.7
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0

Maternal age

The number of teenage mothers decreased from 3,853 in 2000 to 3,387 in 2004, a fall from 4.4 to 4.0 per cent of all mothers; while the number of mothers 35 years of age or over increased from 15,334 in 2000 to 16,769 in 2004, an increase from 17.7 to 19.9 per cent of all confinements (Figure 1, Table 3). The mean maternal age rose from 29.8 to 30.3 years over the 5 year period.

The trend towards later childbirth is evident among both primiparous and multiparous mothers: the proportion of mothers giving birth for the first time who were aged 35 years or more increased from 11.1 to 13.1 per cent over the 5 year period, and the proportion of multiparous mothers who were aged 35 years or more increased from 22.5 to 24.9 per cent. The mean maternal age rose from 28.1 to 28.7 years for primiparous mothers and from 31.0 to 31.5 years for multiparous mothers.



Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

MATERNAL AGE, NSW	2000–2004										
Maternal age					١	/ear					
(years)		2000		2001		2002		2003		2004	
	No.	%	No.	%	No.	%	No.	%	No.	•	
Under 15	31	0.0	19	0.0	28	0.0	23	0.0	22	0	
15–19	3822	4.4	3778	4.5	3624	4.3	3363	4.0	3365	4	
20–24	13316	15.4	13036	15.4	12674	15.0	12529	14.7	12095	14	
25–29	27293	31.6	25528	30.3	24523	29.0	24138	28.4	23113	27	
30–34	26640	30.8	26707	31.7	27810	32.9	28522	33.5	28906	34	
35–39	12894	14.9	12640	15.0	13107	15.5	13582	16.0	13808	16	
10–44	2342	2.7	2488	2.9	2645	3.1	2752	3.2	2819	3	
45+	98	0.1	122	0.1	120	0.1	113	0.1	142	0	
Not stated	24	0.0	61	0.1	56	0.1	10	0.0	18	0	
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100	

Maternal country of birth

TABLE 4

Bangladesh

Afghanistan

North Korea

Papua New Guinea

Russian Federation

Other/Not stated

Germany

Chile

Iran

Syria

Egypt

Sudan

Poland

France

Singapore

Laos

Italy

TOTAL

In the period 2000–2004, about 72 per cent of mothers were born in Australia. In 2004, mothers born in the United Kingdom, New Zealand, Vietnam, China and Lebanon together accounted for 10.9 per cent of all mothers (Table 4). Further information on maternal country of birth is shown in Chapter 7.

Country of birth	20	000	-	Year 2001 2002						2004	
	No.	%	No.	%	No.	%	No.	%	No.	%	
Australia	62368	72.1	61655	73.1	61631	72.9	61430	72.2	60961	72.3	
United Kingdom	2557	3.0	2331	2.8	2344	2.8	2368	2.8	2229	2.6	
New Zealand	1962	2.3	2009	2.4	1998	2.4	2121	2.5	1989	2.4	
Vietnam	2053	2.4	1691	2.0	1773	2.1	1863	2.2	1684	2.0	
China	2163	2.5	1791	2.1	1830	2.2	1586	1.9	1672	2.0	
Lebanon	1766	2.0	1667	2.0	1663	2.0	1696	2.0	1594	1.9	
Philippines	1315	1.5	1243	1.5	1156	1.4	1192	1.4	1083	1.3	
India	643	0.7	612	0.7	747	0.9	810	1.0	888	1.1	
Fiji	688	0.8	652	0.8	655	0.8	691	0.8	686	0.8	
Iraq	455	0.5	577	0.7	545	0.6	648	0.8	621	0.7	
South Africa	387	0.4	450	0.5	486	0.6	486	0.6	547	0.6	
Indonesia	566	0.7	494	0.6	494	0.6	489	0.6	519	0.6	
Former Yugoslavia	627	0.7	607	0.7	531	0.6	571	0.7	464	0.6	
South Korea	426	0.5	358	0.4	301	0.4	328	0.4	389	0.5	
United States of America	377	0.4	332	0.4	346	0.4	355	0.4	372	0.4	
Hong Kong	357	0.4	332	0.4	307	0.4	301	0.4	314	0.4	
Sri Lanka	304	0.4	291	0.3	324	0.4	299	0.4	310	0.4	
Pakistan	224	0.3	276	0.3	266	0.3	260	0.3	291	0.3	
Western Samoa	320	0.4	319	0.4	310	0.4	303	0.4	289	0.3	
Malaysia	319	0.4	251	0.3	262	0.3	271	0.3	283	0.3	
Ireland	273	0.3	291	0.3	267	0.3	333	0.4	281	0.3	
Thailand	199	0.2	221	0.3	268	0.3	253	0.3	277	0.3	
Cambodia	326	0.4	285	0.3	279	0.3	295	0.3	274	0.3	
Turkey	335	0.4	317	0.4	266	0.3	265	0.3	268	0.3	
Japan	252	0.3	293	0.3	283	0.3	293	0.3	260	0.3	
Tonga	296	0.3	278	0.3	271	0.3	219	0.3	246	0.3	
Canada	177	0.2	203	0.2	192	0.2	225	0.3	237	0.3	

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Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

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86460

56

Countries of birth for which 100 or more mothers gave birth in 2004.

Maternal Aboriginality

The reported number of Aboriginal or Torres Strait Islander mothers giving birth increased from 2,105 in 2000 to 2,308

in 2004, an increase from 2.4 to 2.7 per cent of all mothers (Table 5). Further information on maternal Aboriginality and reporting of Aborginality is shown in Chapter 6.

MATERNAL ABORIGII	NALITY, NS	SW 2000–2	004								
Aboriginality	2	2000	2	Year 2001 2002			2	2003	2004		
	No.	%	No.	%	No.	%	No.	%	No.	%	
Aboriginal or Torres											
Strait Islander Non-Aboriginal or	2105	2.4	2110	2.5	2155	2.5	2161	2.5	2308	2.7	
Torres Strait Islander	84306	97.5	82223	97.4	82383	97.4	82831	97.4	81948	97.2	
Not stated	49	0.1	46	0.1	49	0.1	40	0.0	32	0.0	
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0	

Previous pregnancies

In recent years there were no substantial changes in the reported number of previous pregnancies greater than 20 weeks gestation (Table 6). The proportion of mothers giving birth for the first time has been stable at 41 to 42

per cent, while the proportion of mothers giving birth to a second to fifth baby has been stable at about 56 to 57 per cent. Less than 2 per cent of mothers have previously given birth 5 times or more.

PREVIOUS PREGNAN	CIES, NSV	V 2000–200)4							
Number of previous pregnancies	2	2000	2	2001	Ye 20	2	2003	2004		
(>20 weeks gestation)	No.	%	No.	%	No.	%	No.	%	No.	%
0	35953	41.6	35153	41.7	35035	41.4	35879	42.2	35796	42.5
1-4	49146	56.8	47850	56.7	48169	56.9	47847	56.3	47136	55.9
5+	1331	1.5	1329	1.6	1290	1.5	1258	1.5	1312	1.6
Not stated	30	0.0	47	0.1	93	0.1	48	0.1	44	0.1
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0

Duration of pregnancy at first antenatal visit

Since 2000, the proportion of mothers starting antenatal care at 20-plus weeks gestation has been stable at 12–13 per cent (Table 7).

DURATION OF PREGNAN	CY AT FIRST AN	TENATAL \	/ISIT, NSW	2000–2004						
Duration of pregnancy (weeks)	Year 2000 2001 2002 2003									2004
	No.	%	No.	%	No.	%	No.	%	No.	9
0–19	74803	86.5	72704	86.2	73116	86.4	73615	86.6	73775	87.
20-plus	10748	12.4	10878	12.9	10614	12.5	10929	12.9	9934	11
Not stated	909	1.1	797	0.9	857	1.0	488	0.6	579	0
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100

Smoking in pregnancy

The proportion of mothers reporting any smoking during pregnancy declined between 2000 and 2004: in 2000, 15,001 (17.4 per cent) mothers reported smoking in pregnancy, compared to 14,424 (17.1 per cent) in 2001, 13,829 (16.3 per cent) in 2002, 12,875 (15.1 per cent) in 2003, and 12,472 (14.8 per cent) in 2004.

Of mothers who smoked during pregnancy in 2004, 3.9 per cent stopped smoking before the second half of pregnancy. Over the 5-year period, among those who smoked in the second half of pregnancy, there was a trend towards smoking fewer cigarettes per day (Table 8).

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MOTHERS WHO SMOKED AT ALL DURING PREGNANCY BY NUMBER OF CIGARETTES SMOKED IN THE SECOND HALF OF PREGNANCY, NSW 2000–2004

Cigarettes smoked in the second half of pregnancy	2	2000		2001		/ear :002	2	2003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
None	622	4.1	576	4.0	556	4.0	427	3.3	485	3.9
More than 10 per day	7005	46.7	6725	46.6	6347	45.9	5680	44.1	5378	43.1
1–10 per day	7092	47.3	6834	47.4	6639	48.0	6451	50.1	6303	50.5
Smoked, amount not stated	282	1.9	289	2.0	279	2.0	317	2.5	297	2.4
Not stated	0	0.0	0	0.0	8	0.1	0	0.0	9	0.1
TOTAL	15001	100.0	14424	100.0	13829	100.0	12875	100.0	12472	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Place of birth

In 2004, the majority of mothers planned to give birth in a hospital labour ward, and 3.7 per cent of mothers planned to give birth in a birth centre (Table 9). About two-thirds of mothers who planned to give birth in a birth centre actually did so. The total number of reported planned homebirths declined from 146 in 2000 to 114 in 2004, while the reported number of planned homebirths that occurred at home fell from 108 in 2000 to 93 in 2004.

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MATERNAL PLACE OF BIRTH, NSW 2000-2004

Place of birth					Y	ear					
	2	2000	2	2001	20	002	2	2003		2004	
	No.	%									
Hospital	82782	95.7	80984	96.0	81230	96.0	81441	95.8	80701	95.7	
Birth centre	2205	2.6	2038	2.4	2030	2.4	2075	2.4	2003	2.4	
Planned birth centre-											
hospital admission	959	1.1	822	1.0	881	1.0	1029	1.2	1126	1.3	
Planned homebirth	108	0.1	144	0.2	99	0.1	109	0.1	93	0.1	
Planned homebirth-											
hospital admission	38	0.0	38	0.0	31	0.0	23	0.0	21	0.0	
Born before arrival	366	0.4	353	0.4	316	0.4	355	0.4	344	0.4	
Not stated	2	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0	

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Hypertension and diabetes

In 2004, pre-eclampsia was reported in 5.5 per cent of mothers, a slight fall from 7.0 per cent in 2000. Essential hypertension was reported in about one per cent of mothers, a rate that has not changed substantially over the last 5 years (Table 10).

In 2004, gestational diabetes was reported in 4.3 per cent of mothers, rising from 3.9 per cent reported in 2000, while rates of diabetes mellitus have remained stable at about 0.5 per cent over the 5-year period.

MATERNAL HYPERTE	INSION OF	DIABETE	:S, NSW 20	00–2004						
Condition	2	2000	2	001		ear 002	2	003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
Diabetes mellitus	392	0.5	404	0.5	462	0.5	505	0.6	464	0.6
Gestational diabetes	3386	3.9	3213	3.8	3693	4.4	3792	4.5	3592	4.3
Essential hypertension	858	1.0	823	1.0	940	1.1	879	1.0	940	1.1
Pre-eclampsia	6082	7.0	5360	6.4	4839	5.7	4645	5.5	4606	5.5
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0

Labour

The rate of spontaneous onset of labour fell from 64.9 per cent in 2000 to 60.3 per cent in 2004 (Table 11). Nine per cent of labours were augmented with oxytocics or prostaglandins in 2004. The rate of induction of labour was 24.4 per cent in 2004, similar to previous years. The

most common reported reason for induction of labour in 2004 was prolonged pregnancy (41 or more weeks) (32.4 per cent), followed by hypertensive disease (11.9 per cent), prelabour rupture of membranes (10.6 per cent), suspected intrauterine growth retardation (3.9 per cent), diabetes (3.8 per cent) and fetal death (1.1 per cent).

Onset of labour	2000		2	001		ear 002	2	2003		2004	
	No.	%	No.	%	No.	%	No.	%	No.	%	
Spontaneous	40042	46.3	37492	44.4	37615	44.5	38110	44.8	37137	44.1	
Spontaneous											
augmented with ARM	7014	8.1	6684	7.9	6422	7.6	5992	7.0	6090	7.2	
Spontaneous											
augmented with											
oxytocics-											
prostaglandins	9050	10.5	8297	9.8	7644	9.0	7258	8.5	7580	9.0	
No labour	9926	11.5	10986	13.0	11720	13.9	12820	15.1	12930	15.3	
Induced-											
oxytocics-											
prostaglandins	7493	8.7	7422	8.8	7414	8.8	7265	8.5	7049	8.4	
Induced–ARM only	1196	1.4	1181	1.4	1193	1.4	1331	1.6	1267	1.5	
Induced-											
ARM+oxytocics-											
prostaglandins	11516	13.3	12033	14.3	12262	14.5	11965	14.1	11912	14.1	
Induced-other#	215	0.2	277	0.3	305	0.4	289	0.3	322	0.4	
Not stated	8	0.0	7	0.0	12	0.0	2	0.0	1	0.0	
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0	

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # This category includes other forms of induction such at Foley's catheter.

Delivery

Among NSW mothers, the rate of normal vaginal birth decreased from 67.1 per cent in 2000 to 62.1 per cent in 2004 (Table 12). The caesarean section rate increased from 21.3 to 27.2 per cent. The rate of instrumental delivery remained steady at 10 to 11 per cent, accompanied by a change in the pattern of instrumental delivery: the rate of vacuum extraction rose from 6.2 to 7.0 per cent and the rate of forceps delivery declined from 4.5 to 3.3 per cent.

Operative and instrumental deliveries are more common among privately than publicly insured mothers (Table 13). Among privately insured mothers the rate of normal vaginal birth fell from 57.6 in 1999 to 50.8 per cent in 2003 and the caesarean section rate increased from 26.3 to 34.7 per cent. Among publicly insured mothers the rate of normal vaginal birth fell from 72.8 to 68.7 per cent and the caesarean section rate rose from 17.1 to 22.5 per cent.

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TYPE OF DELI	VERY, NSW	2000-2004

Type of delivery	_		_	Year 2001 2002						0004
	2	2000	2	001	20		2	2003	2004	
	No.	%	No.	%	No.	%	No.	%	No.	%
Normal vaginal	58049	67.1	55206	65.4	54271	64.2	53424	62.8	52366	62.1
Forceps	3904	4.5	3398	4.0	3034	3.6	2875	3.4	2762	3.3
Vacuum extraction	5367	6.2	5499	6.5	5855	6.9	5788	6.8	5902	7.0
Vaginal breech	669	0.8	383	0.5	353	0.4	371	0.4	347	0.4
Elective caesarean										
section	9926	11.5	10986	13.0	11720	13.9	12820	15.1	12930	15.3
Emergency										
caesarean section#	8530	9.9	8894	10.5	9335	11.0	9744	11.5	9974	11.8
Not stated	15	0.0	13	0.0	19	0.0	10	0.0	7	0.0
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # Emergency caesarean section includes caesarean sections where the onset of labour was not stated.

TABLE 13

MATERNAL HEALTH INSURANCE STATUS BY TYPE OF DELIVERY, NSW 1999-2003

Insurance status-					'ear					
type of delivery	1	1999	2	2000	2	2001	20	002	2	2003
	No.	%								
Public										
Normal vaginal	44683	72.8	43462	71.8	39541	71.3	38228	70.4	38976	68.7
Forceps	2437	4.0	2191	3.6	1673	3.0	1430	2.6	1464	2.6
Vacuum extraction	3173	5.2	3100	5.1	2868	5.2	2995	5.5	3205	5.7
Vaginal breech	601	1.0	505	0.8	286	0.5	253	0.5	283	0.5
Elective caesarean section	5242	8.5	5594	9.2	5658	10.2	5854	10.8	6630	11.7
Emergency caesarean section#	5263	8.6	5627	9.3	5438	9.8	5512	10.2	6143	10.8
Not stated	0	0.0	12	0.0	3	0.0	7	0.0	0	0.0
TOTAL	61399	100.0	60491	100.0	55467	100.0	54279	100.0	56701	100.0
Private										
Normal vaginal	13674	57.6	13652	55.5	14715	53.6	15261	52.4	14172	50.8
Forceps	1728	7.3	1669	6.8	1684	6.1	1578	5.4	1405	5.0
Vacuum extraction	1953	8.2	2199	8.9	2558	9.3	2801	9.6	2570	9.2
Vaginal breech	134	0.6	135	0.5	76	0.3	82	0.3	70	0.3
Elective caesarean section	3810	16.0	4159	16.9	5114	18.6	5689	19.5	6128	21.9
Emergency caesarean section#	2443	10.3	2762	11.2	3300	12.0	3683	12.7	3565	12.8
Not stated	0	0.0	3	0.0	10	0.0	12	0.0	10	0.0
TOTAL	23742	100.0	24579	100.0	27457	100.0	29106	100.0	27920	100.0
TOTAL##										
Normal vaginal	58951	68.6	58049	67.1	55206	65.4	54271	64.2	53424	62.8
Forceps	4190	4.9	3904	4.5	3398	4.0	3034	3.6	2875	3.4
Vacuum extraction	5152	6.0	5367	6.2	5499	6.5	5855	6.9	5788	6.8
Vaginal breech	762	0.9	669	0.8	383	0.5	353	0.4	371	0.4
Elective caesarean section	9147	10.6	9926	11.5	10986	13.0	11720	13.9	12820	15.1
Emergency caesarean section#	9.0	8530	9.9	8894	10.5	9335	11.0	9744	11.5	
Not stated	0	0.0	15	0.0	13	0.0	19	0.0	10	0.0
TOTAL	85967	100.0	86460	100.0	84379	100.0	84587	100.0	85032	100.0

Source: Linked data of the NSW Midwives Data Collection and NSW Inpatient Statistics Collection. Centre for Epidemiology and Research, NSW Department of Health.

[#] Émergency caesarean section includes caesarean sections where the onset of labour was not stated. ## Total includes confinements where type of health insurance was not stated.

Pain relief

There has been a trend towards increased use of spinal anaesthetics, from 6.1 per cent in 2000 to 14.6 per cent in 2004. The proportion of mothers having no pain relief during labour or delivery decreased from 12.2 per cent in 2000 to 10.2 per cent in 2004 (Table 14). In 2004, 45.7 per cent of mothers used nitrous oxide for pain relief, 27.9 per cent had an epidural anaesthetic, and 22.1 per cent received intramuscular narcotics.

IADLL IT			
MATERNAL PA	IN RELIEF	NSW 2000	-2004

Type of pain relief#						ear				
	2	000	2	001	20	002	2	2003		2004
	No.	%								
Epidural	25728	29.8	24572	29.1	23543	27.8	23569	27.7	23487	27.9
General anaesthetic	4753	5.5	4866	5.8	4811	5.7	4636	5.5	4213	5.0
IM Narcotics	22654	26.2	21451	25.4	21038	24.9	21083	24.8	18587	22.1
Nitrous Oxide	42303	48.9	40964	48.5	40729	48.2	39504	46.5	38518	45.7
Spinal	5248	6.1	6677	7.9	8672	10.3	10698	12.6	12336	14.6
Nil	10518	12.2	9674	11.5	9163	10.8	8896	10.5	8584	10.2
TOTAL CONFINEMENTS	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # More than one type of pain relief may be used.

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Baby sex

There were no significant changes in the pattern of baby sex since 2000, with slightly more male babies born than females in each year. In 2004, 44,202 (51.6 per cent) of babies were male, 41,390 (48.3 per cent) were female, 19 were of indeterminate sex, and sex was not reported for 15 babies. This compares with babies born in 2000, when 45,346 (51.6 per cent) of 87,922 babies were male, 42,539 (48.4 per cent) were female, 15 were of indeterminate sex, and sex was not reported for 22 babies.

Gestational age

In 2004, 7.3 per cent of babies were born prematurely (less than 37 weeks gestation), the same rate as for 2000 (Table 15). Over the 5 year period, about 90 per cent of babies were born at term (37–41 weeks gestation), and about 2 per cent were postmature (41-plus weeks gestation).

TABLE 15										
BIRTHS BY GESTAT	ΓΙΟΝΑL AGE,	NSW 200	0–2004							
Gestational age (weeks)	2	2000		/ear :001	20	002	2	2003		2004
,	No.	%	No.	%	No.	%	No.	%	No.	%
<20	0	0.0	0	0.0	1	0.0	1	0.0	0	0.0
20–27	623	0.7	628	0.7	594	0.7	585	0.7	605	0.7
28–31	663	0.8	667	0.8	612	0.7	639	0.7	667	0.8
32-36	5114	5.8	4890	5.7	4865	5.7	4810	5.6	4975	5.8
37–41	79368	90.3	77566	90.3	77865	90.5	78241	90.5	77614	90.6
42+	2148	2.4	2093	2.4	2047	2.4	2128	2.5	1761	2.1
Not stated	6	0.0	14	0.0	21	0.0	10	0.0	4	0.0
TOTAL	87922	100.0	85858	100.0	86005	100.0	86414	100.0	85626	100.0

Birth weight

Since 2000, the rate of low birth weight (less than 2,500 grams) has been about just over 6 per cent (Table 16). The rate was 6.4 per cent in 2004.

Birth weight						ear				
(grams)		000		001		002		003		2004
	No.	%								
Less than 500	228	0.3	243	0.3	212	0.2	223	0.3	214	0.2
500–999	425	0.5	416	0.5	399	0.5	393	0.5	395	0.5
1000-1499	546	0.6	526	0.6	469	0.5	497	0.6	558	0.7
1500-1999	1079	1.2	1043	1.2	1083	1.3	1049	1.2	1059	1.2
2000–2499	3383	3.8	3283	3.8	3344	3.9	3221	3.7	3231	3.8
2500–2999	12819	14.6	12783	14.9	12838	14.9	12877	14.9	12797	14.9
3000–3499	30647	34.9	30312	35.3	30504	35.5	30803	35.6	30238	35.3
3500–3999	27483	31.3	26542	30.9	26676	31.0	26982	31.2	26570	31.0
4000–4499	9454	10.8	9060	10.6	8921	10.4	8810	10.2	8931	10.4
4500+	1811	2.1	1607	1.9	1509	1.8	1507	1.7	1584	1.8
Not stated	47	0.1	43	0.1	50	0.1	52	0.1	49	0.1
TOTAL	87922	100.0	85858	100.0	86005	100.0	86414	100.0	85626	100.0

Apgar score

In 2004, 2.1 per cent of babies were born with an Apgar score of less than 7 at 5 minutes and 1.0 per cent were born with a score less than 4 (Table 17). These rates are similar to those of previous years.

BIRTHS BY APGA	AR SCORE AT 5	MINUTES	s, NSW 200	0–2004#						
Apgar score	2	2000	2	001		ear 002	2	003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
0–4	1043	1.2	922	1.1	902	1.0	899	1.0	921	1.1
5–6	956	1.1	938	1.1	893	1.0	865	1.0	844	1.0
7+	85756	97.5	83797	97.6	84033	97.7	84473	97.8	83653	97.7
Not stated	167	0.2	201	0.2	177	0.2	177	0.2	208	0.2
TOTAL	87922	100.0	85858	100.0	86005	100.0	86414	100.0	85626	100.0

Special care and neonatal intensive care

In 2004, 14.6 per cent of babies were admitted to special care units and 2.8 per cent were admitted to neonatal intensive care units (Table 18). Between 2000 and 2004, the percentage of babies reported as being admitted to neonatal intensive care increased slightly while the percentage of babies reported as being admitted to special care decreased. The overall percentage of babies admitted to either type of care was 17.4 per cent in 2004 compared to 18.1 per cent in 2000.

TABLE 18										
BIRTHS BY ADMISSION TO S	PECIAL CARI	OR NEO	NATAL INTI	ENSIVE CA	RE UNITS,	NSW 2000	0–2004			
Unit of admission				,	Year					
	2	2000	2	001	2	002	20	003	20	004
	No.	%	No.	%	No.	%	No.	%	No.	•
Special care unit	13842	15.7	12900	15.0	12740	14.8	12926	15.0	12469	14
Neonatal intensive care unit	2147	2.4	2190	2.6	2196	2.6	2277	2.6	2416	2
TOTAL	87922	100.0	85858	100.0	86005	100.0	86414	100.0	85626	100

Perinatal outcome

In the period 2000–2004 the perinatal mortality rate varied from 8.6 to 9.6 per 1,000 (Table 19). In 2004, 72.6 per cent of all reported perinatal deaths were stillbirths and 27.4 per cent were neonatal deaths.

In 2004, of the 773 perinatal deaths in NSW, 751 (97.2 per cent) were reported among planned hospital births, 10 (1.3 per cent) among planned birth centre births, none occurred among planned home births, and 12 were among babies born before arrival at hospital.

TABLE 1	9										
BIRTHS I	BY PERINATAL	OUTCOM	IE, NSW 20	00–2004#							
Year	Liveborn surviving		Stil	lborn	Ne	al Outcome onatal eath	Not s	tated		tal ths	Perinatal mortalit rate/1,000 births
	No.	%	No.	%	No.	%	No.	%	No.	%	
2000	87076	99.0	595	0.7	247	0.3	4	0.0	87922	100.0	9.6
2001	85069	99.1	538	0.6	245	0.3	6	0.0	85858	100.0	9.1
2002	85222	99.1	515	0.6	233	0.3	35	0.0	86005	100.0	8.7
2003	85669	99.1	523	0.6	221	0.3	1	0.0	86414	100.0	8.6
2004	84849	99.1	561	0.7	212	0.2	4	0.0	85626	100.0	9.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.
Perinatal deaths include deaths reported to the MDC only. As the MDC form is completed at discharge or transfer of the baby, deaths occurring after this time may not be reported to the MDC.

Maternal deaths

In the period 1990–2003, 149 deaths were reported among pregnant women or women who gave birth less than 6 weeks previously. Of these, 48 (32.2 per cent) died of incidental causes not related to the pregnancy or its management; 66 (44.3 per cent) deaths were found to be directly due to pregnancy or its management; 34 (22.8

per cent) deaths were found to result from pre-existing disease or disease which developed during pregnancy (not due to direct obstetric causes), but which may have been aggravated by the physiologic effects of pregnancy; and there was one death for which the cause was not determined (Table 20). Table 21 shows maternal deaths by cause in NSW for 2002 and 2003.

TABLE 20

MATERNAL DEATHS BY YEAR, NSW 1990-2003#

Year		Direct	In	direct	T	ification otal & Indirect	Inc	idental		TOTAL
	No.	Ratio/ 100,000	No.	Ratio/ 100,000	No.	Ratio/ 100,000	No.	Ratio/ 100,000	No.	Ratio/ 100,000
1990	4	4.6	6	6.9	10	11.6	2	2.3	12	13.9
1991	4	4.7	1	1.2	5	5.8	1	1.2	6	7.0
1992	5	5.7	1	1.1	6	6.8	5	5.7	11	12.5
1993	6	6.9	1	1.2	7	8.1	6	6.9	13	15.0
1994	8	9.2	1	1.2	9	10.4	3	3.5	12	13.8
1995	7	8.1	2	2.3	9	10.4	6	7.0	15	17.4
1996	6	7.0	1	1.2	7	8.2	5	5.9	12	14.1
1997	7	8.1	2	2.3	9	10.5	5	5.8	14	16.1
1998	4	4.7	4	4.7	8	9.4	3	3.5	11	12.9
1999##	4	4.7	1	1.2	5	5.8	6	7.0	12	14.0
2000	4	4.7	5	5.9	9	10.7	1	1.2	10	11.9
2001	4	4.7	4	4.7	8	9.5	1	1.2	9	10.7
2002	2	2.4	2	2.4	4	4.7	1	1.2	5	5.9
2003	1	1.2	3	3.5	4	4.7	3	3.5	7	8.2

Source: NSW Maternal and Perinatal Committee.

Includes all deaths of women who were pregnant at the time of death, or who died within 42 days of childbirth. Direct deaths include those resulting from obstetric complications of the pregnant state, including its management. Indirect deaths include those resulting from preexisting disease or disease which developed during pregnancy and was not due to direct obstetric causes but which may have been aggravated by the physiological effects of pregnancy. Incidental deaths are those where the pregnancy is unlikely to have contributed significantly to the death.¹
Total for 1999 includes one death of undetermined cause.

TABLE 21

MATERNAL DEATHS BY CAUSE, NSW 2002-2003#

Year-Classification	Cause	No.
2002		
Direct	E. coli septicaemia	1
Direct	Amniotic fluid embolism	1
Indirect	Pancytopenia	1
Indirect	Status asthmaticus	1
Incidental	Malaria	1
TOTAL		5
2003		
Direct	Amniotic fluid embolism	1
Indirect	Intrathoracic haemorrhage due to aortic dissection	1
Indirect	Haemorrhage from placenta praevia	1
Indirect	Idiopathic pulmonary haemosiderosis	1
Incidental	Blood loss-hypovolaemia	1
Incidental	Subdural empyema and left temporal lobe abscess	1
Incidental	Motor vehicle trauma	1
TOTAL		7

Source: NSW Maternal and Perinatal Committee.

Includes all deaths of women who were pregnant at the time of death, or who died within 42 days of childbirth. Direct deaths include those resulting from obstetric complications of the pregnant state, including its management. Indirect deaths include those resulting from preexisting disease or disease which developed during pregnancy and was not due to direct obstetric causes but which may have been aggravated by the physiological effects of pregnancy. Incidental deaths are those where the pregnancy is unlikely to have contributed significantly to the death.

References

 Slaytor EK, Sullivan EA, King JF. Maternal deaths in Australia 1997–1999. AIHW Catalogue no. PER 24. Sydney: AIHW National Perinatal Statistics Unit, 2004.

5. AREA HEALTH SERVICES

Information on the health of Aboriginal and Torres Strait Islander mothers, and mothers born in non-English speaking countries is shown in Chapters 6 and 7 respectively.

Confinements

The largest numbers of confinements in 2004 were among mothers resident in the Sydney South West (18,720, 22.2 per cent), followed by Sydney West (15,834, 18.8 per cent) and South Eastern Sydney & Illawarra (14,121, 16.8 per cent) Areas (Table 22).

Maternal age

The proportion of women giving birth at less than 20 years of age varied from 1.7 per cent in the Northern Sydney & Central Coast Area to 8.5 per cent in the Greater Western Area, while the proportion of mothers giving birth at 35 years of age or more ranged from 14.0 per cent in the Greater Western Area to 28.4 per cent in the Northern Sydney & Central Coast Area (Table 22).

Maternal country of birth

Seventy-nine per cent of women who gave birth in NSW in 2004 were born in English speaking countries, 11.0 per cent were born in Asian countries, and 4.6 per cent were born in the Middle East or Africa (Table 23).

The highest proportions of mothers born in non-English speaking countries were in the Sydney South West and Sydney West Areas. In Sydney South West, the majority of mothers born in non-English speaking countries were born in South East Asia, and the Middle East and Africa. In Sydney West, the most common maternal countries of birth were in the Middle East and Africa, and in South East and Southern Asia.

Maternal Aboriginality

In 2004, 2.7 per cent of mothers were reported to be Aboriginal or Torres Strait Islander (Table 24). The proportion of Aboriginal or Torres Strait Islander mothers varied from 0.7 per cent in the Northern Sydney & Central Coast Area to 13.3 per cent in the Greater Western Area.

Health Area								I	/laterna		ears)							
	12-	-19	20	0–24	25	-29	30	0–34	3	5–39	40	0–44	4	l5+	Not st	ated	TO	DTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South																		
West	593	3.2	2748	14.7	5377	28.7	6317	33.7	3006	16.1	644	3.4	32	0.2	3	0.0	18720	100.
South Eastern																		
Sydney &																		
Illawarra	351	2.5	1370	9.7	3647	25.8	5424	38.4	2750	19.5	554	3.9	24	0.2	1	0.0	14121	100.
Sydney West	667	4.2	2520	15.9	4862	30.7	5173	32.7	2167	13.7	426	2.7	17	0.1	2	0.0	15834	100.
Northern Sydney &																		
Central Coast	220	1.7	974	7.5	2705	20.8	5431	41.7	3043	23.4	624	4.8	34	0.3	1	0.0	13032	100.
Hunter &																		
New England	607	6.3	1823	18.8	2868	29.7	2879	29.8	1247	12.9	236	2.4	12	0.1	0	0.0	9672	100.
North Coast	343	7.3	952	20.3	1257	26.8	1385	29.5	604	12.9	139	3.0	9	0.2	1	0.0	4690	100.
Greater Southern	255	6.6	791	20.6	1148	29.9	1061	27.6	469	12.2	99	2.6	6	0.2	9	0.2	3838	100.
Greater Western	322	8.5	811	21.4	1060	28.0	1062	28.1	441	11.7	80	2.1	7	0.2	1	0.0	3784	100.
Other-Not stated	29	4.9	106	17.8	189	31.7	174	29.1	81	13.6	17	2.8	1	0.2	0	0.0	597	100.
TOTAL	3387	4.0	12095	14.3	23113	27.4	28906	34.3	13808	16.4	2819	3.3	142	0.2	18	0.0	84288	100.

Health Area	_	lish iking	Cent & So Amer	uth	Melar Micro 8 Polyr	nesia k	Eur		Wes	countratern & thern rope	Eas Euro Rus	tern ope, sia, itral an & ltic	group Middle & Afr	k	Ea	uth ist sia	E	orth ast sia		uthei Asia	n T	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South																						
West South Eastern	11445	61.3	265	1.4	683	3.7	393	2.1	115	0.6	122	0.7	1873	10.0	2398	12.8	839	4.5	535	2.9	18668	100
Sydney & Illawarra	11328	80.6	146	1.0	140	1.0	258	1.8	157	1.1	171	1.2	441	3.1	573	4.1	638	4.5	205	15	14057	100.
Sydney West	11211	70.9	122	0.8		3.2	146	0.9	88	0.6	90	0.6	1239	7.8	875	5.5	665	4.2			15812	
Northern Sydney		. 0.0		0.0	0.0	0.2		0.0		0.0		0.0			0.0	0.0	000			0.0	.00.2	
Central Coast Hunter &	10882	83.6	90	0.7	113	0.9	89	0.7	191	1.5	102	0.8	221	1.7	420	3.2	658	5.1	254	2.0	13020	100
New England	9355	96.8	17	0.2	55	0.6	17	0.2	32	0.3	16	0.2	60	0.6	67	0.7	34	0.4	14	0.1	9667	100
North Coast	4479	95.6	16	0.3	29	0.6	6	0.1	42	0.9	5	0.1	13	0.3	58	1.2	19	0.4	16	0.3	4683	100
Greater Southern	3681	96.1	5	0.1	34	0.9	- 11	0.3	13	0.3	4	0.1	17	0.4	22	0.6	12	0.3	32	0.8	3831	100
Greater Western	3701	97.9	4	0.1	13	0.3	4	0.1	7	0.2	5	0.1	9	0.2	22	0.6	9	0.2	7	0.2	3781	100
Other–Not stated	539	91.5	10	1.7	4	0.7	2	0.3	4	0.7	3	0.5	3	0.5	10	1.7	10	1.7	4	0.7	589	100
TOTAL	66621	79.2	675	0.8	1584	1.9	926	1.1	649	0.8	518	0.6	3876	4.6	4445	5.3	2884	3.4	1930	2.3	84108	100

Source: NSW Midwives Data Collection (HOIST), Centre for Epidemiology and Research, NSW Department of Health.
Excludes 180 mothers for which country of birth was not stated. Maternal countries of birth and country of birth groups are shown in Appendix 3.

Health Area	Torre: Isla	riginal s Strait nder	Non-Al Torre Isla	riginality poriginal s Strait inder	Not s			OTAL
	No.	%	No.	%	No.	%	No.	%
Sydney South West	164	0.9	18553	99.1	3	0.0	18720	100.0
South Eastern Sydney & Illawarra	221	1.6	13889	98.4	11	0.1	14121	100.0
Sydney West	238	1.5	15595	98.5	1	0.0	15834	100.0
Northern Sydney & Central Coast	93	0.7	12936	99.3	3	0.0	13032	100.0
Hunter & New England	508	5.3	9163	94.7	1	0.0	9672	100.0
North Coast	390	8.3	4295	91.6	5	0.1	4690	100.0
Greater Southern	173	4.5	3658	95.3	7	0.2	3838	100.0
Greater Western	505	13.3	3279	86.7	0	0.0	3784	100.0
Other-Not stated	16	2.7	580	97.2	1	0.2	597	100.0
TOTAL	2308	2.7	81948	97.2	32	0.0	84288	100.0

Source: NSW Midwives Data Collection (HOIST), Centre for Epidemiology and Research, NSW Department of Health.

Duration of pregnancy at first antenatal visit

In 2004, 87.5 per cent of mothers commenced antenatal care prior to 20 weeks gestation. This percentage varied from 82.6 per cent in the Sydney West Area to 95.1 per cent in the Northern Sydney and Central Coast Area (Table 25).

TABLE 25							
DURATION OF PREGNANCY A	T FIRST ANTI	ENATAL CHE	CK BY HEALT	H AREA OF R	ESIDENCE, N	SW 2004	
Health Area		Duratio	n of pregnancy	/ at first antena	ıtal visit		
	0-	-19	20-	plus	Not st	ated	Т
	No.	%	No.	%	No.	%	No.
Sydney South West	15528	82.9	3094	16.5	98	0.5	18720
South Eastern Sydney & Illawarra	12871	91.1	1183	8.4	67	0.5	14121

	U	-19	20-	pius	NOL SI	aleu	101	IAL
	No.	%	No.	%	No.	%	No.	%
Sydney South West	15528	82.9	3094	16.5	98	0.5	18720	100.0
South Eastern Sydney & Illawarra	12871	91.1	1183	8.4	67	0.5	14121	100.0
Sydney West	13077	82.6	2677	16.9	80	0.5	15834	100.0
Northern Sydney & Central Coast	12391	95.1	618	4.7	23	0.2	13032	100.0
Hunter & New England	8334	86.2	1196	12.4	142	1.5	9672	100.0
North Coast	4232	90.2	394	8.4	64	1.4	4690	100.0
Greater Southern	3439	89.6	359	9.4	40	1.0	3838	100.0
Greater Western	3377	89.2	354	9.4	53	1.4	3784	100.0
Other-Not stated	526	88.1	59	9.9	12	2.0	597	100.0
TOTAL	73775	87.5	9934	11.8	579	0.7	84288	100.0

Source: NSW Midwives Data Collection (HOIST), Centre for Epidemiology and Research, NSW Department of Health.

Smoking in pregnancy

In 2004, 14.2 per cent of mothers reported smoking in the second half of pregnancy (Table 26). The lowest reported rate was among mothers resident in the Northern Sydney & Central Coast Area (7.7 per cent) and the highest rate among residents of the Greater Western Area (29.0 per cent).

Health Area	Nor	ne	1–10 da	per		than	d half of pro Smol amo	ked-	Not s	stated	тс	TAL
	No.	%	No.	%	No.	%	not s	tated %	No.	%	No.	%
0 1 0 11												
Sydney South West	16849	90.0	1015	5.4	810	4.3	46	0.2	0	0.0	18720	100.0
South Eastern	10049	90.0	1015	5.4	810	4.3	40	0.2	U	0.0	10720	100.
Sydney &												
Illawarra	12734	90.2	891	6.3	445	3.2	49	0.3	2	0.0	14121	100.0
Sydney West	13598	85.9	1173	7.4	1016	6.4	47	0.3	0	0.0	15834	100.
Northern Sydney 8												
Central Coast	12022	92.2	579	4.4	408	3.1	22	0.2	1	0.0	13032	100.
Hunter &												
New England	7522	77.8	1051	10.9	1051	10.9	47	0.5	1	0.0	9672	100.
North Coast	3536	75.4	584	12.5	515	11.0	51	1.1	4	0.1	4690	100.
Greater Southern	2894	75.4	467	12.2	466	12.1	9	0.2	2	0.1	3838	100.
Greater Western	2681	70.9	475	12.6	598	15.8	25	0.7	5	0.1	3784	100
Other-Not stated	457	76.5	68	11.4	69	11.6	1	0.2	2	0.3	597	100
TOTAL	72293	85.8	6303	7.5	5378	6.4	297	0.4	17	0.0	84288	100

Place of birth

Ninety-six per cent of mothers chose to deliver in a hospital delivery suite in 2004, compared to 3.7 per cent who planned a birth centre birth and 0.1 per cent who planned a home birth (Table 27). Planned birth centre births were most commonly reported in the Sydney West, Sydney South West, and South Eastern Sydney & Illawarra Areas.

Labour

In 2004, the onset of labour was spontaneous in 60.3 per cent of confinements (Table 28). Labour was induced in 24.4 per cent of confinements and no labour (elective caesarean section) was reported in 15.3 per cent. The rate of spontaneous onset of labour was highest among residents of the North Coast Area (63.4 per cent). The highest rate of induction of labour was among residents of the Hunter & New England Area (26.2 per cent).

Health Area	Но	spital	_	irth ntre	Plan birth c	entre- pital	Plar ho	of birth nned me rth	Plar home hos	nned birth– pital	bet	orn fore ival	то	ΓAL
	No.	%	No.	%	admi: No.	ssion %	No.	%	admi No.	ssion %	No.	%	No.	%
Sydney South West	17839	95.3	573	3.1	211	1.1	12	0.1	1	0.0	84	0.4	18720	100.0
South Eastern Sydney &														
Illawarra	13271	94.0	440	3.1	343	2.4	17	0.1	2	0.0	48	0.3	14121	100.0
Sydney West	14972	94.6	359	2.3	430	2.7	5	0.0	0	0.0	68	0.4	15834	100.0
Northern Sydney &														
Central Coast	12692	97.4	193	1.5	81	0.6	18	0.1	4	0.0	44	0.3	13032	100.0
Hunter & New England	9134	94.4	433	4.5	56	0.6	2	0.0	2	0.0	45	0.5	9672	100.0
North Coast	4640	98.9	2	0.0	2	0.0	19	0.4	10	0.2	17	0.4	4690	100.0
Greater Southern	3815	99.4	1	0.0	1	0.0	9	0.2	0	0.0	12	0.3	3838	100.0
Greater Western	3756	99.3	2	0.1	1	0.0	2	0.1	1	0.0	22	0.6	3784	100.0
Other-Not stated	582	97.5	0	0.0	1	0.2	9	1.5	1	0.2	4	0.7	597	100.0
TOTAL	80701	95.7	2003	2.4	1126	1.3	93	0.1	21	0.0	344	0.4	84288	100.0

Health Area	Spontar	neous	Sponta augm with	ented	aug oxy	ntaneo mente with ytocics rosta- andins	ed lab	lo our	oxyt	of labouced- ocics sta- odins	Indi	uced I only	Al oxy	uced- RM+ tocics osta- ndins		luced- ther#		Not tated	тс	DTAL
	No.	%	No.	%	No.	andins %	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West South Eastern Sydney &	8689	46.4	1020	5.4	1999	10.7	2560	13.7	1947	10.4	252	1.3	2161	11.5	92	0.5	0	0.0	18720	100.0
Illawarra Sydney West Northern Sydney 8	5989 7144	42.4 45.1	1003 1103		1316 1392		2395 2225		1112 1038	7.9 6.6	185 179	1.3 1.1	2040 2695	14.4 17.0	80 58	0.6 0.4	1 0	0.0	14121 15834	100.0
Central Coast Hunter &	5225	40.1	828		1314			19.4			144		2094	16.1	23	0.2	0	0.0	13032	100.0
New England North Coast Greater Southern	4416 2041 1737	45.7 43.5 45.3	723 541 365	7.5 11.5 9.5	579 391 262	6.0 8.3 6.8	1418 678 524	14.7 14.5 13.7	788 373 531	8.1 8.0 13.8	232 77 89	2.4 1.6 2.3	1481 580 316	15.3 12.4 8.2	35 9 14	0.4 0.2 0.4	0 0 0	0.0 0.0 0.0	9672 4690 3838	100.0 100.0
Greater Western Other–Not stated TOTAL	1627 269 37137	43.0 45.1 44.1		11.8 9.9	272 55 7580	7.2 9.2	530 67 12930	14.0 11.2	336 53 7049	8.9 8.9	97 12 1267	2.6 2.0	466 79 11912	12.3 13.2	8 3 322	0.2 0.5 0.4	0 0 1	0.0 0.0 0.0	3784 597 84288	100.0 100.0

Delivery

Sixty-two per cent of confinements were by normal vaginal birth, 10.3 per cent were instrumental and 27.2 per cent were by caesarean section (Table 29). The highest rate of normal vaginal birth was among residents of the Greater Western Area (67.8 per cent), while the highest rates of instrumental delivery were among residents of

South Eastern Sydney and Illawarra (12.9 per cent). The caesarean section rate varied from 24.1 per cent among mothers resident in the Sydney South West Area to 32.7 per cent in the Northern Sydney & Central Coast Area.

Health Area	No	rmal	Ford	ceps		ype of uum	deliver Vag	•	Ele	ctive	Emer	gency	Not st	ated	тот	ſAL
		ginal irth			extra	ction	bre			sarean	caes	arean				
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West	12190	65.1	422	2.3	1514	8.1	77	0.4	2560	13.7	1957	10.5	0	0.0	18720	100.0
South Eastern Sydney &																
Illawarra	8017	56.8	544	3.9	1280	9.1	46	0.3	2395	17.0	1836	13.0	3	0.0	14121	100.
Sydney West	10058	63.5	744	4.7	757	4.8	66	0.4	2225	14.1	1984	12.5	0	0.0	15834	100.0
Northern Sydney &																
Central Coast	7215	55.4	399	3.1	1120	8.6	41	0.3	2533	19.4	1722	13.2	2	0.0	13032	100.
Hunter &																
New England	6322	65.4	250	2.6	600	6.2	55	0.6	1418	14.7	1027	10.6	0	0.0	9672	100.
North Coast	3128	66.7	133	2.8	196	4.2	24	0.5	678	14A.5	531	11.3	0	0.0	4690	100.0
Greater Southern	2441	63.6	169	4.4	253	6.6	14	0.4	524	13.7	435	11.3	2	0.1	3838	100.
Greater Western	2565	67.8	88	2.3	154	4.1	22	0.6	530	14A.0	425	11.2	0	0.0	3784	100.0
Other-Not stated	430	72.0	13	2.2	28	4.7	2	0.3	67	11.2	57	9.5	0	0.0	597	100.
TOTAL	52366	62.1	2762	3.3	5902	7.0	347	0.4	12930	15.3	9974	11.8	7	0.0	84288	100.0

Birth weight

In 2004, 6.4 per cent of births were low birth weight (less than 2,500 grams). These comprised 0.7 per cent of birth weight less than 1,000 grams, 0.7 per cent in the 1,000 to 1,499 gram range, and 5.0 per cent in the 1,500 to 2,499 gram range (Table 30). Rates of low birth weight ranged from 5.3 per cent in Greater Southern Area to 7.6 per cent in the Hunter and New England Area.

Emergency caesarean section includes caesarean section where the onset of labour was not stated.

Health Area											E	3irth v	veight	(gran	ns)									
	Less	s tha	n 5	00-		00-	15	00-	20	00-	25	500-	30	000-	35	00-	40	-000	45	+00	ı	lot	TC	DTAL
	_	00	-	999	-	199		999	_	499	2	999	_	499		999		499				ated		
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	. %	No.	%	No.	%	No.	%	No.	%	No.	. %
Sydney South																								
West	62	0.3	95	0.5	139	0.7	219	1.2	752	4.0	3022	15.9	7075	37.3	5540	29.2	1768	9.3	294	1.5	12	0.1	18978	100
South Eastern																								
Sydney &																								
Illawarra	33	0.2	68	0.5	84	0.6	152	1.1	495	3.4	2180	15.2	5100	35.5	4522	31.5	1451	10.1	275	1.9	13	0.1	14373	100
Sydney West	43	0.3	78	0.5	94	0.6	208	1.3	605	3.8	2500	15.5	5789	36.0	4886	30.4	1593	9.9	283	1.8	5	0.0	16084	100
Northern Sydney	&																							
Central Coast	19	0.1	58	0.4	86	0.6	168	1.3	428	3.2	1679	12.6	4695	35.4	4336	32.7	1557	11.7	250	1.9	2	0.0	13278	100
Hunter &																								
New England	28	0.3	55	0.6	86	0.9	138	1.4	435	4.4	1474	15.0	3226	32.9	3077	31.3	1090	11.1	198	2.0	9	0.1	9816	100
North Coast		0.2	14	0.3	25	0.5	67	1.4	196	4.1	740	15.6	1560	32.8	1506	31.7	542	11.4	94	2.0	2	0.0	4757	100
Greater Southern		0.2	_	0.1		0.4	-	0.9	143	3.7		13.7	1300		1294	33.3		11.6	-	2.4	5	0.1	3883	100
Greater Western		0.3		0.5		0.6		1.7	156	4.1		14.9	1279		1227	31.9		10.5	89	2.3	1	0.0	3847	100
Other-Not stated	0	0.0	2	0.3		0.7	•	1.0	21	3.4		15.9		35.1	182	29.8		12.8	6	1.0	•	0.0	610	100
TOTAL	214	0.2	395	0.5	558	0.7	1059	1.2	3231	3.8	12797	14.9	30238	35.3	26570	31.0	8931	10.4	1584	1.8	49	0.1	85626	100

Gestational age

The majority of births (90.6 per cent) were at term, and 2.1 per cent were post-term (42-plus weeks). The 7.3 per cent of preterm births comprised 0.7 per cent born at less than 28 weeks, 0.8 per cent at 28–31 weeks, and 5.8 per

cent at 32–36 weeks. The highest rate of preterm birth was in the Hunter and New England Area (8.8 per cent), while the lowest was 6.0 per cent in the Greater Southern Area (Table 31).

Health Area							Gestation							
	Less th	nan 28	28-		32	-36	37	-41	4	2+	Not s	stated	TO	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West	156	0.8	157	0.8	1080	5.7	17135	90.3	449	2.4	1	0.0	18978	100.0
South Eastern Sydney &														
Illawarra	96	0.7	100	0.7	794	5.5	13079	91.0	303	2.1	1	0.0	14373	100.
Sydney West	118	0.7	124	0.8	894	5.6	14661	91.2	287	1.8	0	0.0	16084	100.
Northern Sydney &														
Central Coast	77	0.6	103	0.8	792	6.0	12024	90.6	282	2.1	0	0.0	13278	100.
Hunter &														
New England	81	0.8	95	1.0	685	7.0	8689	88.5	266	2.7	0	0.0	9816	100.
North Coast	27	0.6	29	0.6	290	6.1	4354	91.5	57	1.2	0	0.0	4757	100.
Greater Southern	21	0.5	19	0.5	193	5.0	3583	92.3	65	1.7	2	0.1	3883	100.
Greater Western	27	0.7	35	0.9	214	5.6	3526	91.7	45	1.2	0	0.0	3847	100.
Other-Not stated	2	0.3	5	0.8	33	5.4	563	92.3	7	1.1	0	0.0	610	100
TOTAL	605	0.7	667	0.8	4975	5.8	77614	90.6	1761	2.1	4	0.0	85626	100

Perinatal outcomes

The perinatal mortality rate in 2004 was 9.0 per 1,000 births. This includes all births and deaths of babies of at least 400 grams birth weight or at least 20 weeks gestation (Table 32). The rate varied from 6.7 per 1,000 in the Greater Southern and Northern Sydney and Central Coast Areas to 13.0 per 1,000 in the Greater Western Area.

Health Area	Live surv	born iving	Still	oorn	Perinatal Neor dea		No sta	ot ted	Tota birth		Perinatal mortality rate/1,000 births
	No.	%	No.	%	No.	%	No.	%	No.	%	Dirtiis
Sydney South West	18764	98.9	146	0.8	68	0.4	0	0.0	18978	100.0	11.3
South Eastern Sydney &											
Illawarra	14266	99.3	77	0.5	30	0.2	0	0.0	14373	100.0	7.4
Sydney West	15941	99.1	101	0.6	41	0.3	1	0.0	16084	100.0	8.8
Northern Sydney &											
Central Coast	13188	99.3	67	0.5	22	0.2	1	0.0	13278	100.0	6.7
Hunter &											
New England	9711	98.9	74	0.8	31	0.3	0	0.0	9816	100.0	10.7
North Coast	4718	99.2	29	0.6	9	0.2	1	0.0	4757	100.0	8.0
Greater Southern	3857	99.3	22	0.6	4	0.1	0	0.0	3883	100.0	6.7
Greater Western	3796	98.7	44	1.1	6	0.2	1	0.0	3847	100.0	13.0
Other-Not stated	608	99.7	1	0.2	1	0.2	0	0.0	610	100.0	3.3
TOTAL	84849	99.1	561	0.7	212	0.2	4	0.0	85626	100.0	9.0

Source: NSW Midwives Data Collection (HOIST), Centre for Epidemiology and Research, NSW Department of Health.

Perinatal deaths include deaths reported to the MDC only. As the MDC form is completed at discharge or transfer of the baby, deaths occurring after this time may not be reported to the MDC.

Livebirths by statistical local areas

lealth Area and Statistical Local Area	No.	%	Health Area and Statistical Local Area	No.	%
Sydney South West			Hunter and New England		
Ashfield	493	2.6	Armidale Dumaresq: City	225	2.3
Bankstown	2638	14.0	Armidale Dumaresq: Balance	72	0.7
Burwood	316	1.7	Barraba	21	0.2
Camden	810	4.3	Bingara	19	0.2
Campbelltown	2109	11.2	Cessnock	620	6.4
Canterbury	2154	11.4	Dungog	83	0.9
Concord	395	2.1	Glen Innes	79	0.8
Drummoyne	495	2.6	Gloucester	38	0.8
Fairfield	2616	13.9	Greater Taree	493	5.1
Leichhardt	998	5.3	Great Lakes	335	3.4
Liverpool	2830	15.0	Gunnedah	124	1.3
Marrickville	1063	5.6	Guyra	59	0.6
South Sydney (SSW)	437	2.3	Inverell: Pt A	62	0.6
Strathfield	295	1.6	Inverell: Pt B	134	1.4
Sydney (SSW)	89	0.5	Lake Macquarie	2092	21.5
Wingecarribee	457	2.4	Maitland	840	8.6
Wollondilly	637	3.4	Manilla	37	0.4
	18832	100.0	Merriwa	28	0.3
South Eastern Sydney & Illawarra			Moree Plains	203	2.1
	190	0.4	Murrurundi	34	0.3
Botany	482	3.4	Muswellbrook	243	2.5
Hurstville	977	6.8	Narrabri	160	2.5 1.6
Kiama	181	1.3	Newcastle: Inner	32	0.3
Kogarah	682	4.8			
Randwick	1515	10.6	Newcastle: Remainder	1687	17.3
Rockdale	1299	9.1	Nundle	15	0.2
Shellharbour	840	5.9	Parry: Pt A	50	0.5
Shoalhaven: Pt A	399	2.8	Parry: Pt B	129	1.3
Shoalhaven: Pt B	567	4.0	Port Stephens	626	6.4
South Sydney (SESAHS)	501	3.5	Quirindi	68	0.7
Sutherland Shire: East	1270	8.9	Scone	142	1.5
Sutherland Shire: West	1462	10.2	Severn	33	0.3
Sydney (Inner)	96	0.7	Singleton	316	3.2
Sydney (SESI)	109	0.8	Tamworth	491	5.0
			Tenterfield	26	0.3
Waverley	890	6.2	Uralla	61	0.6
Wollongong	2338	16.4	Walcha	37	0.4
Woollahra	687	4.8	Yallaroi	28	0.4
Other	1	0.0			
TOTAL	14296	100.0	TOTAL	9742	100.0
Sydney West			North Coast		
Auburn	1113	7.0	Ballina	383	8.1
Baulkham Hills	1984	12.4	Bellingen	109	2.3
Blacktown: North	1548	9.7	Byron	283	6.0
Blacktown: North	1380	8.6	Coff's Harbour: Pt A	506	10.7
Blacktown: South-West	1651	10.3	Coff's Harbour: Pt B	137	2.9
			Copmanhurst	39	0.8
Blue Mountains	872	5.5	Grafton	196	4.1
Greater Lithgow	221	1.4	Hastings: Pt A	412	8.7
Hawkesbury	902	5.6	Hastings: Pt B	298	6.3
Holroyd	1438	9.0	•		
Parramatta	2209	13.8	Kempsey	381	8.1
Penrith	2664	16.7	Kyogle	71	1.5
TOTAL	15982	100.0	Lismore: Pt A	362	7.7
Northern Sydney & Central Coast			Lismore: Pt B	155	3.3
Gosford	1920	14.5	Maclean	153	3.2
Hornsby	1778	13.5	Nambucca	177	3.7
Hunter's Hill	147	1.1	Pristine Waters: Nymboida	71	1.5
			Pristine Waters: Ulmarra	65	1.4
Ku-ring-gai	857	6.5	Richmond River: Casino	124	2.6
Lane Cove	383	2.9	Richmond River: Balance	113	2.4
Manly	551	4.2	Tweed: Pt A	402	8.5
Mosman	378	2.9	Tweed: Pt B	290	6.1
North Sydney	780	5.9			
Pittwater	715	5.4	TOTAL	4727	100.0
Ryde	1215	9.2			
Warringah	1830	13.4			
Warringah Willoughby	1830	13.9 6.7			
Warringah Willoughby Wyong	1830 888 1768	6.7 13.4			

TABLE 33 (continued)
LIVEBIRTHS BY HEALTH AREA AND STATISTICAL LOCAL AREA OF RESIDENCE, NSW 2004

Health Area and Statistical Local Area	No.	%	Health Area and Statistical Local Area	No.	%
Greater Southern			Greater Western		
Albury	13	0.3	Bathurst	372	9.8
Bega Valley	261	6.8	Blayney: Pt A	75	2.0
Berrigan	26	0.7	Blayney: Pt B	16	0.4
Bland	86	2.2	Bogan	56	1.5
Bombala	31	0.8	Bourke	53	1.4
Boorowa	18	0.5	Brewarrina	33	0.9
Carrathool	66	1.7	Broken Hill	223	5.9
Conargo	5	0.1	Cabonne: Pt A	16	0.4
Coolamon	33	0.9	Cabonne: Pt B	10	0.3
Cooma-Monaro	106	2.7	Cabonne: Pt C	100	2.6
Cootamundra	97	2.5	Central Darling	23	0.6
Crookwell	25	0.6	Cobar	82	2.2
Culcairn	22	0.6	Coolah	44	1.2
Deniliquin	87	2.3	Coonabarabran	78	2.1
Eurobodalla	317	8.2	Coonamble	65	1.7
Goulburn	209	5.4	Cowra	149	3.9
Griffith	379	9.8	Dubbo: Pt A	542	14.3
Gundagai	50	1.3	Dubbo: Pt B	77	2.0
Gunning	10	0.3	Evans: Pt A	13	0.3
Harden	43	1.1	Evans: Pt B	32	0.8
Hay	42	1.1	Forbes	103	2.7
Holbrook	9	0.2	Gilgandra	49	1.3
Jerilderie	13	0.3	Lachlan	97	2.6
Junee	63	1.6	Mudgee	197	5.2
Leeton	186	4.8	Narromine	113	3.0
Lockhart	30	8.0	Oberon	105	2.8
Mulwaree	79	2.0	Orange	552	14.5
Murray	7	0.2	Parkes	192	5.0
Murrumbidgee	27	0.7	Rylstone	32	0.8
Narrandera	77	2.0	Walgett	113	3.0
Queanbeyan	179	4.6	Warren	39	1.0
Snowy River	75	1.9	Weddin	33	0.9
Tallaganda	6	0.2	Wellington	103	2.7
Temora	65	1.7	Wentworth	6	0.2
Tumbarumba	26	0.7	Unincorporated Far West	8	0.2
Tumut	137	3.5	Other	1	0.0
Urana	8	0.2	TOTAL	3802	100.0
Wagga Wagga: Pt A	675	17.5			
Wagga Wagga: Pt B	87	2.3	Other-Not stated	609	100.0
Windouran	10	0.3		.=	100 -
Yarrowlumla: Part A	36	0.9	TOTAL NSW	85061	100.0
Yass	5	0.1			
Young	128	3.3			
Other	7	0.2			
TOTAL	3861	100.0			

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

6. ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS AND BABIES

Reporting of Aboriginality

Maternal Aboriginality is under-reported on the MDC. One method of assessing the extent of under-reporting and monitoring changes over time is to compare the reporting of maternal Aboriginality to the MDC with reporting of maternal Aboriginality on birth registrations held by the NSW Registry of Births, Deaths and Marriages. Using capture–recapture methods, an estimate of the total number of babies born to Aboriginal mothers was obtained and compared with the number of babies born to Aboriginal mothers as reported to the MDC. The method used here is described in Chapter 3 (page 13).

The percentage of births to Aboriginal and Torres Strait Islander mothers reported to the MDC ranged from 65 to 70 per cent between 2000 and 2003. Reporting varied markedly between area health services, ranging from 37.5 per cent in the Sydney South West Area to 89.4 per cent in the Greater Western Area in 2003 (Table 34, Figure 2).

Under-reporting of Aboriginality on the MDC means that numbers of births presented in this chapter should be interpreted with caution. The total number of babies born to Aboriginal mothers in 2003 is estimated to be 3,282, about one and a half times higher than the number reported to the MDC.

TABLE 34

BIRTHS TO ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS BY SOURCE OF BIRTH REPORT, YEAR OF BIRTH AND HEALTH AREA OF HOSPITAL, NSW $2000-2003^{\#}$

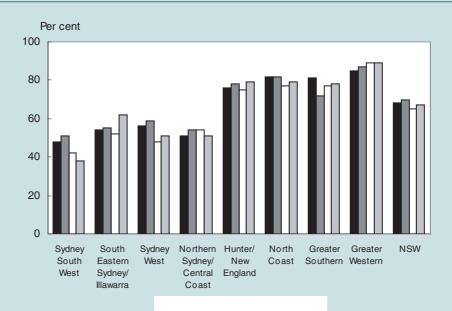
Year– Area health service of hospital	MDC births	RBDM births	Births reported to both MDC–RBDM	Total estimated Aboriginal births	Estimated Aboriginal births reported to MDC	95% confidence interval of estimated births reported
	No.	No.	No.	No.	%	•
2000						
Sydney South West	185	287	137	387	47.8	42.8-52.8
South Eastern Sydney & Illawarra	169	206	112	310	54.4	48.9-60.0
Sydney West	224	279	155	403	55.6	50.8-60.5
Northern Sydney & Central Coast	84	94	48	164	51.3	43.6-58.9
Hunter & New England	481	433	329	633	76.0	72.7-79.3
North Coast	335	217	177	411	81.6	77.9-85.4
Greater Southern	195	145	118	239	81.4	76.5-86.4
Greater Western	449	330	279	531	84.6	81.5-87.6
NSW	2122	1991	1355	3118	68.1	66.4-69.7
2001						
Sydney South West	192	272	138	378	50.8	45.7-55.8
South Eastern Sydney & Illawarra	156	182	100	283	55.0	49.2-60.8
Sydney West	223	253	148	381	58.6	53.6-63.5
Northern Sydney & Central Coast	75	97	52	140	53.8	45.5-62.0
Hunter & New England	486	434	339	622	78.1	74.9-81.4
North Coast	336	197	162	408	82.3	78.6-86.0
Greater Southern	178	140	101	246	72.2	66.6-77.8
Greater Western	490	321	278	566	86.6	83.8-89.4
NSW	2136	1896	1318	3072	69.5	67.9-71.1
2002						
Sydney South West	166	269	113	395	42.1	37.2-46.9
South Eastern Sydney & Illawarra	179	203	106	342	52.3	47.0-57.6
Sydney West	224	299	142	471	47.6	43.0-52.1
Northern Sydney & Central Coast	89	105	56	166	53.5	45.9-61.1
Hunter & New England	534	421	317	709	75.3	72.1-78.5
North Coast	336	197	152	435	77.2	73.3-81.2
Greater Southern	165	117	90	214	77.0	71.4-82.6
Greater Western	489	303	268	553	88.5	85.8-91.1
NSW	2182	1914	1244	3357	65.0	63.4-66.6
2003						
Sydney South West	174	275	103	463	37.5	33.1-42.0
South Eastern Sydney & Illawarra	180	180	111	292	61.7	56.2-67.3
Sydney West	242	276	140	476	50.8	46.3-55.3
Northern Sydney & Central Coast	82	110	56	161	51.0	43.3-58.8
Hunter & New England	535	426	336	678	78.9	75.8-82.0
North Coast	319	181	142	406	78.5	74.5-82.5
Greater Southern	176	115	89	227	77.5	72.1-82.9
Greater Western	482	291	260	539	89.4	86.8-92.0
NSW	2190	1854	1237	3282	66.7	65.1-68.3

Source: Linked NSW Midwives Data Collection and Registry of Births, Deaths and Marriages birth registration data.

Births where the hospital of birth was not reported, or where the birth occurred other than in hospital, were excluded. Information for 2000 to 2002 for RBDM births have been updated since previous reports to take into account late registrations of births.

FIGURE 2

LEVEL OF REPORTING OF ABORIGINALITY TO THE NSW MIDWIVES DATA COLLECTION BY YEAR OF BIRTH AND HEALTH AREA OF HOSPITAL, NSW 2000-2003*



Source:Linked NSW Midwives Data Collection and Registry of Births, Deaths and Marriages birth registration data. # Births where the hospital of birth was not reported or where the birth occurred other than in hospital were excluded.

Information on paternal Aboriginality is not collected by the MDC, but is reported to the NSW Registry of Births, Deaths and Marriages. Of the 85,946 births registered for residents of NSW in 2003, 3,253 (3.8 per cent) were reported to have an Aboriginal or Torres Strait Islander mother or father (Table 35). For 1,177 babies, the mother was reported to be non-Aboriginal or Torres Strait Islander and the father was reported to be Aboriginal or Torres Strait Islander. There are therefore a substantial number of babies with non-indigenous mothers and indigenous fathers who are not represented in the numbers reported in this chapter.

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BIRTH REGISTRATIONS BY MATERNAL AND PATERNAL INDIGENOUS STATUS, NSW 2003*

Mother#	Father	No.	%	
Aboriginal or Torres Strait Islander	Aboriginal or Torres Strait Islander	678	0.8	
Aboriginal or Torres Strait Islander	Non-Aboriginal or Torres Strait Islander	1398	1.6	
Non-Aboriginal or Torres Strait Islander	Aboriginal or Torres Strait Islander	1177	1.4	
Non-Aboriginal or Torres Strait Islander	Non-Aboriginal or Torres Strait Islander	82693	96.2	
TOTAL	TOTAL	85946	100.0	

Source: Australian Bureau of Statistics birth registration data (HOIST), Centre for Epidemiology and Research, NSW Department of Health.
Births registered among NSW residents. Births where indigenous status was not stated were classified as non-Aboriginal or Torres Strait Islander.

Trends in births

In 2004, 2,184 babies were born to Aboriginal mothers, 48 babies were born to Torres Strait Islander mothers and 101 babies were born to mothers of both Aboriginal and Torres Strait Islander background (Table 36).

TABLE 36 ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS AND BABIES BY INDIGENOUS STATUS, NSW 2000–2004*

Plurality					١	/ear				
	2	2000	2	2001	2	2002	20	003	20	004
	No.	%								
Pregnancies										
Aboriginal	1990	94.5	1988	94.2	2041	94.7	2014	93.2	2161	93.6
Torres Strait Islander	25	1.2	40	1.9	25	1.2	35	1.6	48	2.1
Both Aboriginal and TSI	90	4.3	82	3.9	89	4.1	112	5.2	99	4.3
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0
Births										
Aboriginal	2006	94.5	2014	94.2	2069	94.8	2039	93.1	2184	93.6
Torres Strait Islander	25	1.2	42	2.0	25	1.1	37	1.7	48	2.1
Both Aboriginal and TSI	91	4.3	82	3.8	89	4.1	114	5.2	101	4.3
TOTAL	2122	100.0	2138	100.0	2183	100.0	2190	100.0	2333	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.
Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

Plurality

Between 2000 and 2004, the reported number of babies born to Aboriginal and Torres Strait Islander mothers increased from 2,122 to 2,333 (Table 37), representing 2.4 and 2.7 per cent respectively of all babies born in NSW. Multiple pregnancies (twins, triplets etc.) were reported for about one per cent of mothers.

IABLE 37	
ARORIGINAL	AND TORRES STRAIT ISLANDER MOTHERS AND RARIES BY DLURALITY NSW 2000_2004#

Plurality					١	/ear				
•	2	2000	2	2001	2	2002	20	003	20	004
	No.	%								
Pregnancies										
Singleton	2089	99.2	2082	98.7	2127	98.7	2134	98.8	2283	98.9
Twins	16	0.8	28	1.3	28	1.3	26	1.2	25	1.1
Triplets	0	0.0	0	0.0	0	0.0	1	0.0	0	0.0
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0
Births										
Singleton	2089	98.4	2082	97.4	2127	97.4	2134	97.4	2283	97.9
Twins	33	1.6	56	2.6	56	2.6	53	2.4	50	2.1
Triplets	0	0.0	0	0.0	0	0.0	3	0.1	0	0.0
TOTAL	2122	100.0	2138	100.0	2183	100.0	2190	100.0	2333	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

Previous pregnancies

In 2004, one-third of Aboriginal and Torres Strait Islander mothers gave birth for the first time (Table 38). About 58 per cent of mothers reported between one and 4 previous births and 9.6 per cent of mothers had given birth to 5 or more babies. This pattern has not changed substantially since 2000.

TABLE 38

NUMBER OF PREVIOUS PREGNANCIES AMONG ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS. NSW 2000–2004 st

No. previous pregnancies (>20 weeks)		2000		2001		Year 2002	2	003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
0	645	30.6	634	30.0	664	30.8	668	30.9	759	32.9
1–4	1285	61.0	1309	62.0	1302	60.4	1316	60.9	1327	57.5
5+	174	8.3	164	7.8	183	8.5	177	8.2	221	9.6
Not stated	1	0.0	3	0.1	6	0.3	0	0.0	1	0.0
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

Maternal age

The reported number of babies born to Aboriginal and Torres Strait Islander mothers has increased at all ages. About one in 5 Aboriginal and Torres Strait Islander mothers were teenagers in 2004.

Following statewide trends, the number of mothers giving birth at 35 years of age or more has increased over the last 5 years. The proportion of mothers aged 35-plus years increased from 7.4 per cent in 2000 to 9.6 per cent in 2004 (Table 39).

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AGE OF ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS, NSW 2000-2004*

Maternal age (years)		2000		2001		Year 2002	2	2003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
12–19	459	21.8	439	20.8	481	22.3	455	21.1	493	21.4
20–34	1491	70.8	1515	71.8	1524	70.7	1553	71.9	1594	69.1
35+	155	7.4	152	7.2	146	6.8	153	7.1	221	9.6
Not stated	0	0.0	4	0.2	4	0.2	0	0.0	0	0.0
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

Health area of residence

The reported number of Aboriginal and Torres Strait Islander mothers who gave birth in 2004 ranged from 93 in the Northern Sydney and Central Coast Area to 508 in the Greater Western Area (Table 40). The proportion of mothers who were teenagers varied from 11.8 per cent in the Northern Sydney and Central Coast Area to 26.9 per cent in the Sydney West Area (Table 41).

TABLE 40

HEALTH AREA OF RESIDENCE OF ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS, NSW 2000-2004*

Health Area						Year					
		2000		2001		2002		2003	2	2004	
	No.	%									
Sydney South West	168	8.0	174	8.2	165	7.7	160	7.4	164	7.1	
South Eastern Sydney &											
Illawarra	173	8.2	153	7.3	173	8.0	178	8.2	221	9.6	
Sydney West	203	9.6	213	10.1	204	9.5	237	11.0	238	10.3	
Northern Sydney &											
Central Coast	81	3.8	74	3.5	85	3.9	82	3.8	93	4.0	
Hunter & New England	474	22.5	477	22.6	513	23.8	514	23.8	508	22.0	
North Coast	330	15.7	329	15.6	327	15.2	304	14.1	390	16.9	
Greater Southern	176	8.4	162	7.7	158	7.3	170	7.9	173	7.5	
Greater Western	484	23.0	511	24.2	517	24.0	493	22.8	505	21.9	
Other-Not stated	16	0.8	17	0.8	13	0.6	23	1.1	16	0.7	
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0	

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers for the total are about one and a half times higher than shown. The level of under-reporting varies between area health services (Table 34).

TABLE 41

HEALTH AREA OF RESIDENCE OF ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS BY AGE, NSW 2004*

Health Area		Maternal	age (years)			
	Less	than 20	2	:0+	то	TAL
	No.	%	No.	%	No.	%
Sydney South West	33	20.1	131	79.9	164	100.0
South Eastern Sydney & Illawarra	38	17.2	183	82.8	221	100.0
Sydney West	64	26.9	174	73.1	238	100.0
Northern Sydney & Central Coast	11	11.8	82	88.2	93	100.0
Hunter & New England	115	22.6	393	77.4	508	100.0
North Coast	70	17.9	320	82.1	390	100.0
Greater Southern	37	21.4	136	78.6	173	100.0
Greater Western	120	23.8	385	76.2	505	100.0
Other–Not stated	5	31.3	11	68.8	16	100.0
TOTAL	493	21.4	1815	78.6	2308	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers for the total are about one and a half times higher than shown. The level of under-reporting varies between area health services (Table 34).

Booking status

In 2004, 89.9 per cent of Aboriginal and Torres Strait Islander mothers were booked into the hospital of birth, a slight rise from 87.5 per cent in 2000. In 2004, 97.5 per cent of non-Aboriginal or Torres Strait Islander mothers were booked into the hospital of birth.

Duration of pregnancy at first antenatal visit

Between 2000 and 2004, the proportion of mothers who commenced antenatal care at less than 20 weeks gestation rose from 67.6 to 70.1 per cent (Table 42). This compares with 88.0 per cent of non-Aboriginal or Torres Strait Islander mothers who commenced antenatal care at less than 20 weeks gestation in 2004.

In 2004, the proportion of Aboriginal and Torres Strait Islander mothers who commenced antenatal care at less than 20 weeks gestation varied from 58.0 per cent in the Sydney West Area to 81.7 per cent in the Northern Sydney & Central Coast Area (Table 43).

TABLE 42

DURATION OF PREGNANCY AT FIRST ANTENATAL VISIT AMONG ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS, NSW 2000-2004*

Duration of pregnancy at first antenatal visit (weeks)		2000		Year 2001 2002 2003						
	No.	%	No.	%	No.	%	No.	%	No.	%
0–19	1422	67.6	1365	64.7	1448	67.2	1526	70.6	1618	70.1
20-plus	546	25.9	615	29.1	560	26.0	547	25.3	573	24.8
Not stated	137	6.5	130	6.2	147	6.8	88	4.1	117	5.1
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

TABLE 43

DURATION OF PREGNANCY AT FIRST ANTENATAL VISIT AMONG ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS BY HEALTH AREA OF RESIDENCE, NSW 2004*

Health Area	0	–19		first antenatal :0+	Not s	tated	т	OTAL
	No.	%	No.	%	No.	%	No.	%
Sydney South West	97	59.1	61	37.2	6	3.7	164	100.0
South Eastern Sydney & Illawarra	172	77.8	46	20.8	3	1.4	221	100.0
Sydney West	138	58.0	90	37.8	10	4.2	238	100.0
Northern Sydney & Central Coast	76	81.7	15	16.1	2	2.2	93	100.0
Hunter & New England	345	67.9	125	24.6	38	7.5	508	100.0
North Coast	291	74.6	73	18.7	26	6.7	390	100.0
Greater Southern	129	74.6	39	22.5	5	2.9	173	100.0
Greater Western	356	70.5	122	24.2	27	5.3	505	100.0
Other-Not stated	14	87.5	2	12.5	0	0.0	16	100.0
TOTAL	1618	70.1	573	24.8	117	5.1	2308	100.0

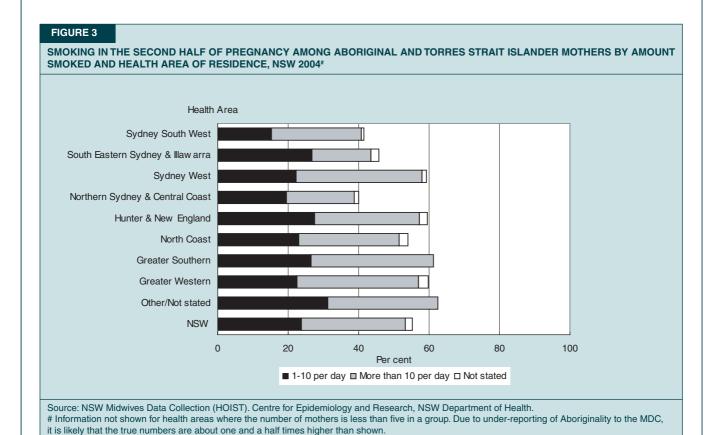
Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers for the total are about one and a half times higher than shown. The level of under-reporting varies between area health services (Table 34).

Smoking in pregnancy

In 2004, 56.6 per cent of Aboriginal and Torres Strait Islander mothers reported smoking at some time during pregnancy, compared to 55.9 per cent in 2000. This compares with 13.6 per cent of non-Aboriginal or Torres Strait Islander mothers who reported smoking at some time during pregnancy in 2004.

Smoking in the second half of pregnancy poses the greatest risk to the health of both mother and baby. In 2004, 55.2 per cent of Aboriginal and Torres Strait Islander mothers reported smoking in the second half of pregnancy. This percentage varied from 39.9 per cent in the Northern Sydney and Central Coast Area to 61.3 per cent in the Greater Southern Area (Figure 3).



Medical conditions and obstetric complications

In 2004, there was a slightly lower rate of gestational diabetes reported among Aboriginal and Torres Strait Islander mothers compared with non-Aboriginal or Torres Strait Islander mothers (Table 44). The number

of Aboriginal and Torres Strait Islander mothers with medical conditions and obstetric complications reported to the MDC is low, even after taking into account underreporting of maternal Aboriginality. This is particularly the case for diabetes. The low numbers may be due to under-detection and/or under-reporting.

Condition				Aho	riginality			
Condition	Torre	ginal and es Strait ander	Torre	original or es Strait ander		t stated	тота	
	No.	%	No.	%	No.	%	No.	9
Diabetes mellitus	24	1.0	440	0.5	0	0.0	464	0
Gestational diabetes	74	3.2	3518	4.3	0	0.0	3592	4
Essential hypertension	22	1.0	918	1.1	0	0.0	940	1
Pre-eclampsia	123	5.3	4483	5.5	0	0.0	4606	5
TOTAL	2308	100.0	81948	100.0	32	100.0	84288	100

Labour and delivery

The rate of spontaneous onset of labour fell from 72.5 per cent in 2000 to 68.5 per cent in 2004 (Table 45). The rate of induction of labour among Aboriginal and Torres Strait Islander mothers varied from about 18 to 21 per cent between 2000 and 2004. The rate of induction of labour among Aboriginal and Torres Strait Islander mothers was lower than the rate of 24.5 per cent reported among non-Aboriginal and Torres Strait Islander mothers in 2004.

Between 2000 and 2004, the rate of normal vaginal birth fell slightly from 74.7 to 71.4 per cent. The caesarean section rate rose from 18.2 to 22.1 per cent (Table 46). The rate of forceps delivery remained stable at about 2.5 per cent, and vaginal breech delivery fell from 1.5 to 0.7 per cent.

TABLE 45

LABOUR ONSET FOR ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS, NSW 2000-2004*

Labour onset					١	/ear					
	2	000	2	001	2	002	20	003	2	004	
	No.	%									
Spontaneous	1527	72.5	1486	70.4	1507	69.9	1469	68.0	1581	68.5	
No labour##	206	9.8	207	9.8	223	10.3	250	11.6	260	11.3	
Induced	372	17.7	417	19.8	423	19.6	442	20.5	467	20.2	
Not stated	0	0.0	0	0.0	2	0.1	0	0.0	0	0.0	
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0	

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

No labour indicates elective caesarean section.

TABLE 46

TYPE OF DELIVERY AMONG ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS, NSW 2000-2004*

Type of delivery										
	2	2000		2001	2	002	20	003	200	04
	No.	%								
Normal vaginal	1573	74.7	1562	74.0	1598	74.2	1585	73.3	1647	71.4
Forceps	51	2.4	39	1.8	30	1.4	35	1.6	60	2.6
Vacuum extraction	67	3.2	66	3.1	68	3.2	67	3.1	74	3.2
Vaginal breech	31	1.5	16	0.8	14	0.6	9	0.4	16	0.7
Elective caesarean section	206	9.8	207	9.8	223	10.3	250	11.6	260	11.3
Emergency caesarean section##	177	8.4	220	10.4	222	10.3	215	9.9	251	10.9
TOTAL	2105	100.0	2110	100.0	2155	100.0	2161	100.0	2308	100.0

Source:NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

Emergency caesarean section includes caesarean section where the onset of labour was not stated.

Birth weight

Since 2000, the rate of low birth weight (less than 2,500 grams) in Aboriginal and Torres Strait Islander babies has been over 10 per cent and was 12.9 per cent in 2004 (Table 47). This is over twice the rate for babies born to non-Aboriginal or Torres Strait Islander mothers, which was 6.2 per cent in 2004. In 2004, the largest number of low birth weight babies were born in the Hunter and New England Area (Table 48).

TABLE 47

WEIGHT OF ABORIGINAL AND TORRES STRAIT ISLANDER BABIES, NSW 2000-2004*

Birth weight (grams)	2000		2	2001		ear 002	2	2003		2004		
	No.	%	No.	%	No.	%	No.	%	No.	%		
Less than 1,000	33	1.6	27	1.3	21	1.0	31	1.4	23	1.0		
1,000-1,499	20	0.9	33	1.5	28	1.3	19	0.9	34	1.5		
1,500-2,499	199	9.4	228	10.7	230	10.5	221	10.1	244	10.5		
2,500+	1866	87.9	1848	86.4	1900	87.0	1917	87.5	2032	87.1		
Not stated	4	0.2	2	0.1	4	0.2	2	0.1	0	0.0		
TOTAL	2122	100.0	2138	100.0	2183	100.0	2190	100.0	2333	100.0		

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown

TABLE 48

WEIGHT OF ABORIGINAL AND TORRES STRAIT ISLANDER BABIES BY HEALTH AREA OF RESIDENCE, NSW 2004*

Health Area			Birth weig	tht (grams)		
	Less th	an 2,500	2,5	00+	TC	TAL
	No.	%	No.	%	No.	%
Sydney South West	14	8.5	150	91.5	164	100.0
South Eastern Sydney & Illawarra	21	9.4	203	90.6	224	100.0
Sydney West	37	15.3	205	84.7	242	100.0
Northern Sydney & Central Coast	14	14.9	80	85.1	94	100.0
Hunter & New England	69	13.4	445	86.6	514	100.0
North Coast	59	14.8	339	85.2	398	100.0
Greater Southern	24	13.7	151	86.3	175	100.0
Greater Western	62	12.3	444	87.7	506	100.0
Other-Not stated	1	6.3	15	93.8	16	100.0
TOTAL	301	12.9	2032	87.1	2333	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers for the total are about one and a half times higher than shown. The level of under-reporting varies between area health services (Table 34).

Gestational age

Since 2000, the over 10 per cent of Aboriginal and Torres Strait Islander babies have been premature (less than 37 weeks gestation) (Table 49). The rate was 11.7 per cent in 2004—compared with a rate of 7.2 per cent for babies born to non-Aboriginal or Torres Strait Islander mothers. In 2004, the largest number of premature babies were born in the Hunter and New England Area (Table 50).

TABLE 49

GESTATIONAL AGE OF ABORIGINAL AND TORRES STRAIT ISLANDER BABIES, NSW 2000-2004*

Gestational age (weeks)	2000		Year 2001 2002					2003 2004			
(No.	%	No.	%	No.	%	No.	%	No.	%	
20–27	33	1.6	26	1.2	21	1.0	29	1.3	31	1.3	
28–31	29	1.4	38	1.8	34	1.6	30	1.4	29	1.2	
32-36	185	8.7	201	9.4	212	9.7	206	9.4	212	9.1	
37–41	1839	86.7	1824	85.3	1868	85.6	1878	85.8	2038	87.4	
42 +	36	1.7	48	2.2	45	2.1	47	2.1	23	1.0	
Not stated	0	0.0	1	0.0	3	0.1	0	0.0	0	0.0	
TOTAL	2122	100.0	2138	100.0	2183	100.0	2190	100.0	2333	100.0	

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

TABLE 50

GESTATIONAL AGE OF ABORIGINAL AND TORRES STRAIT ISLANDER BABIES BY HEALTH AREA OF RESIDENCE, NSW 2004*

Health Area			Gest	ational age (w	eeks)		
	Less	than 37	3	7+	TO	TAL	
	No.	%	No.	%	No.	%	
Sydney South West	15	9.1	149	90.9	164	100.0	
South Eastern Sydney & Illawarra	26	11.6	198	88.4	224	100.0	
Sydney West	26	10.7	216	89.3	242	100.0	
Northern Sydney & Central Coast	15	16.0	79	84.0	94	100.0	
Hunter & New England	64	12.5	450	87.5	514	100.0	
North Coast	56	14.1	342	85.9	398	100.0	
Greater Southern	23	13.1	152	86.9	175	100.0	
Greater Western	45	8.9	461	91.1	506	100.0	
Other-Not stated	2	12.5	14	87.5	16	100.0	
TOTAL	272	11.7	2061	88.3	2333	100.0	

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers for the total are about one and a half times higher than shown. The level of under-reporting varies between area health services (Table 34).

Apgar score

In 2004, 2.9 per cent of Aboriginal and Torres Strait Islander babies had an Apgar score less than seven (Table 51), higher than the rate of 2.0 per cent for babies born to non-Aboriginal or Torres Strait Islander mothers.

TABLE 51

APGAR SCORE OF ABORIGINAL AND TORRES STRAIT ISLANDER BABIES, NSW 2000-2004*

Apgar score at 5 minutes	2000		2	2001		/ear 2002	2003 2004				
	No.	%	No.	%	No.	%	No.	%	No.	%	
0–4	41	1.9	49	2.3	38	1.7	42	1.9	34	1.5	
5–6	26	1.2	29	1.4	31	1.4	30	1.4	34	1.5	
7+	2045	96.4	2048	95.8	2104	96.4	2109	96.3	2256	96.7	
Not stated	10	0.5	12	0.6	10	0.5	9	0.4	9	0.4	
TOTAL	2122	100.0	2138	100.0	2183	100.0	2190	100.0	2333	100.0	

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

Special care and neonatal intensive care

In 2004, 19.6 per cent of Aboriginal and Torres Strait Islander babies were admitted to special care units and 4.8 per cent were admitted to neonatal intensive care units (Table 52). This compares with babies born to non-

Aborignal or Torres Strait Islander mothers, of whom 14.4 per cent were admitted to special care units and 2.8 per cent were admitted to neonatal intensive care units in 2004.

TABLE 52

ABORIGINAL AND TORRES STRAIT ISLANDER BABIES ADMITTED TO SPECIAL CARE AND NEONATAL INTENSIVE CARE UNITS, NSW 2000-2004*

Unit of admission				Υ	'ear					
	2	2000	2	001	2	2002	20	003	20	004
	No.	%								
Special care unit	405	19.1	442	20.7	431	19.7	450	20.5	457	19.6
Neonatal intensive care unit	86	4.1	82	3.8	71	3.3	83	3.8	113	4.8
TOTAL	2122	100.0	2138	100.0	2183	100.0	2190	100.0	2333	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown

Perinatal mortality

Since 2000, the perinatal mortality rate among Aboriginal and Torres Strait Islander babies has varied from 11.0 to 18.2 per 1,000 births (Table 53). The rate of 11.6 per 1,000

in 2004 is higher than the rate of 9.0 per 1,000 experienced by babies born to non-Aboriginal or Torres Strait Islander mothers.

TABLE 53

PERINATAL DEATHS AMONG ABORIGINAL AND TORRES STRAIT ISLANDER BABIES, NSW 2000–2004 $^{\sharp}$

Perinatal deaths					Yea	ır				
	20	000	20	001	200	02	20	03	20	004
		Rate/								
	No.	1,000								
Stillbirth	24	11.3	29	13.6	18	8.2	24	11.0	20	8.6
Neonatal death	13	6.1	10	4.7	6	2.7	9	4.1	7	3.0
TOTAL	37	17.4	39	18.2	24	11.0	33	15.1	27	11.6

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

Perinatal deaths include deaths reported to the MDC only. As the MDC form is completed at discharge or transfer of the baby, deaths occurring after this time may not be reported to the MDC. Due to under-reporting of Aboriginality to the MDC, it is likely that the true numbers are about one and a half times higher than shown.

7. MATERNAL COUNTRY OF BIRTH

In this section maternal countries of birth are combined into English-speaking and other regional groups. The country groups and individual countries are listed in Appendix 3. Recent trends in confinements for individual maternal countries of birth are shown in Table 4 (page 20).

Trends in confinements

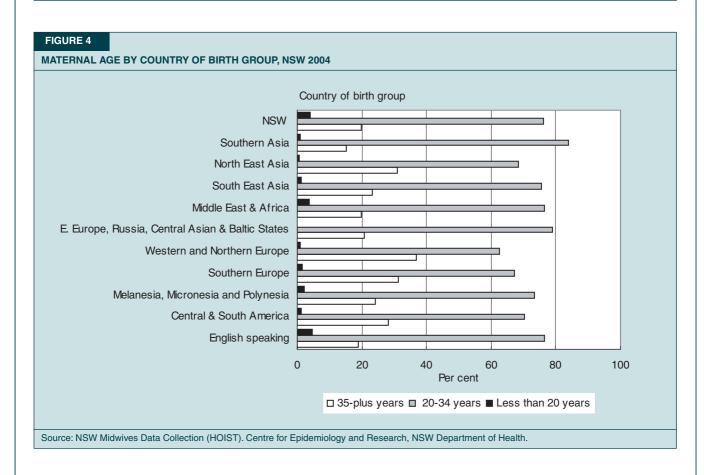
Between 2000 and 2004, about 20 per cent of mothers were born in non-English speaking countries (Table 54). Over the 5 year period, there were slight declines in the percentage of mothers born in Southern Europe, South East Asia and North East Asia, and slight increases in the percentage of mothers born in Middle East and Africa, and Southern Asia.

Country of birth		2000		2001		/ear 2002		2003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
Confinements										
English speaking	68105	78.8	67275	79.7	67268	79.5	67320	79.2	66621	79.0
Central & South America	708	0.8	697	0.8	739	0.9	692	0.8	675	0.8
Melanesia, Micronesia &										
Polynesia	1606	1.9	1544	1.8	1534	1.8	1545	1.8	1584	1.9
Southern Europe	1217	1.4	1129	1.3	1001	1.2	1040	1.2	926	1.1
Western & Northern										
Europe	671	0.8	631	0.7	614	0.7	660	0.8	649	0.8
Eastern Europe, Russia,										
Central Asian &										
Baltic States	428	0.5	412	0.5	458	0.5	486	0.6	518	0.6
Middle East & Africa	3685	4.3	3688	4.4	3653	4.3	3879	4.6	3876	4.6
South East Asia	5085	5.9	4478	5.3	4557	5.4	4673	5.5	4445	5.3
North East Asia	3449	4.0	2965	3.5	2962	3.5	2819	3.3	2884	3.4
Southern Asia	1476	1.7	1535	1.8	1716	2.0	1746	2.1	1930	2.3
Other–Not stated	30	0.0	25	0.0	85	0.1	172	0.2	180	0.2
TOTAL	86460	100.0	84379	100.0	84587	100.0	85032	100.0	84288	100.0
Births										
English speaking	69300	78.8	68524	79.8	68449	79.6	68457	79.2	67735	79.1
Central & South America	716	0.8	707	0.8	755	0.9	699	0.8	683	0.8
Melanesia, Micronesia &										
Polynesia	1636	1.9	1567	1.8	1555	1.8	1564	1.8	1600	1.9
Southern Europe	1256	1.4	1153	1.3	1022	1.2	1064	1.2	939	1.1
Western & Northern										
Europe	688	8.0	643	0.7	627	0.7	668	0.8	663	0.8
Eastern Europe, Russia,										
Central Asian &										
Baltic States	439	0.5	418	0.5	468	0.5	494	0.6	525	0.6
Middle East & Africa	3747	4.3	3758	4.4	3711	4.3	3947	4.6	3941	4.6
South East Asia	5127	5.8	4527	5.3	4595	5.3	4733	5.5	4488	5.2
North East Asia	3483	4.0	2982	3.5	3000	3.5	2846	3.3	2910	3.4
Southern Asia	1499	1.7	1554	1.8	1738	2.0	1766	2.0	1953	2.3
Other-Not stated	31	0.0	25	0.0	85	0.1	176	0.2	189	0.2
TOTAL	87922	100.0	85858	100.0	86005	100.0	86414	100.0	85626	100.0

Maternal age

Births to teenage mothers were more common among mothers born in English-speaking countries than non-English speaking countries (Table 55, Figure 4), while the largest proportions of mothers aged 35 years and over were among mothers born in Western and Northern Europe (36.7 per cent) and Southern Europe (31.3 per cent).

Country of birth group					Maternal a	ige (years)				
, gp	12-	19	2	20-34		5+	Not s	tated	Т	TOTAL
	No.	%	No.	%	No.	%	No.	%	No.	9
English speaking	3080	4.6	51005	76.6	12522	18.8	14	0.0	66621	100.0
Central & South America	9	1.3	474	70.2	191	28.3	1	0.1	675	100.
Melanesia, Micronesia & Polynesia	36	2.3	1163	73.4	385	24.3	0	0.0	1584	100.
Southern Europe	13	1.4	622	67.2	290	31.3	1	0.1	926	100.
Western & Northern Europe	5	0.8	405	62.4	238	36.7	1	0.2	649	100
Eastern Europe, Russia, Central										
Asian & Baltic States	2	0.4	408	78.8	108	20.8	0	0.0	518	100
Middle East & Africa	143	3.7	2967	76.5	766	19.8	0	0.0	3876	100
South East Asia	58	1.3	3353	75.4	1034	23.3	0	0.0	4445	100
North East Asia	18	0.6	1971	68.3	895	31.0	0	0.0	2884	100
Southern Asia	18	0.9	1617	83.8	295	15.3	0	0.0	1930	100
Other-Not stated	5	2.8	129	71.7	45	25.0	1	0.6	180	100
TOTAL	3387	4.0	64114	76.1	16769	19.9	18	0.0	84288	100



Health area of residence

In 2004, the proportion of mothers born in non-English speaking countries was highest in the Sydney South West Area (38.6 per cent), followed by the Sydney West Area (29.1 per cent).

Five per cent of mothers were born in South East Asian countries, 53.9 per cent of whom were resident in the

Sydney South West Area. Almost 5 per cent of mothers were born in Middle Eastern or African countries and 80.3 per cent of these mothers were resident in the Sydney South West or Sydney West Areas. A further 3.4 per cent of mothers were born in North East Asian countries and 2.3 per cent in Southern Asian countries, with the majority living in metropolitan areas (Table 56).

Health Area										(Countr	v of l	airth a	roun										
neam Area	English speakin	g	Centi & Sout Amer	h :h	Melar Micro & Polyn	nesia		uther urope	Nor		Ea Eu Ru Ce As B	stern irope issia, entral ian & altic tates	M E	iddle East & frica	E	outh East Asia	Ea	orth ast sia	Souti As		1	her- Not ated		TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	•
Sydney Sout	th																							
West	11445	61.1	265	1.4	683	3.6	393	2.1	115	0.6	122	0.7	1873	10.0	2398	12.8	839	4.5	535	2.9	52	0.3	18720	100
South																								
Eastern																								
Sydney &																								
Illawarra	11328	80.2	146	1.0	140	1.0	258	1.8	157	1.1	171	1.2	441	3.1	573	4.1	638	4.5	205	1.5	64	0.5	14121	100
Sydney																								
West	11211	70.8	122	0.8	513	3.2	146	0.9	88	0.6	90	0.6	1239	7.8	875	5.5	665	4.2	863	5.5	22	0.1	15834	100
Northern Sydney & Central																								
Coast	10882	83.5	90	0.7	113	0.9	89	0.7	191	1.5	102	8.0	221	1.7	420	3.2	658	5.0	254	1.9	12	0.1	13032	100
Hunter & Ne	W																							
England	9355	96.7	17	0.2	55	0.6	17	0.2	32	0.3	16	0.2	60	0.6	67	0.7	34	0.4	14	0.1	5	0.1	9672	10
NorthCoast	4479	95.5	16	0.3	29	0.6	6	0.1	42	0.9	5	0.1	13	0.3	58	1.2	19	0.4	16	0.3	7	0.1	4690	10
Greater																								
Southern	3681	95.9	5	0.1	34	0.9	11	0.3	13	0.3	_	_	17	0.4	22	0.6	12	0.3	32	8.0	_	-	3838	10
Greater																								
Western	3701	97.8	-	-	13	0.3	-	_	7	0.2	5	0.1	9	0.2	22	0.6	9	0.2	7	0.2	-	_	3784	10
Other-Not																								
stated		90.3		-	-	0.7	-	-	4	0.7	-	-	3	0.5	10	1.7		1.7	4	0.7	-	-	597	
TOTAL	66621	79.0	675	0.8	1584	1.9	926	1.1	649	0.8	518	0.6	3876	4.6	4445	5.3	2884	3.4	1930	2.3	180	0.2	84288	100

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # Data not shown for country of birth groups with less than 5 in a group.

Booking status

In 2004, 97.3 per cent of all mothers were booked at the hospital of birth. The lowest rate (94.7 per cent) was in mothers born in Melanesia, Micronesia and Polynesia. This compared with 97.3 per cent of mothers born in English speaking countries and over 97 per cent of mothers in other country of birth groups.

Duration of pregnancy at first antenatal visit

In 2004, 87.5 per cent of all mothers commenced antenatal care before 20 weeks gestation. There was some variation between country of birth groups, with 89.3 per cent of mothers born in English speaking countries commencing antenatal care before 20 weeks gestation, compared with 64.2 per cent of mothers born in Melanesia, Micronesia, and Polynesia, and 75.3 per cent of mothers born in the Middle East and Africa (Table 57).

Country of birth group	0-	-19		of pregnancy a	t first antenatal Not s			OTAL
	No.	%	No.	%	No.	%	No.	%
English speaking	59494	89.3	6625	9.9	502	0.8	66621	100.0
Central & South America	597	88.4	78	11.6	0	0.0	675	100.0
Melanesia, Micronesia & Polynesia	1017	64.2	539	34.0	28	1.8	1584	100.
Southern Europe	826	89.2	99	10.7	1	0.1	926	100.
Western & Northern Europe	572	88.1	77	11.9	0	0.0	649	100.
Eastern Europe, Russia,								
Central Asian & Baltic States	445	85.9	73	14.1	0	0.0	518	100.
Middle East & Africa	2917	75.3	946	24.4	13	0.3	3876	100.
South East Asia	3726	83.8	703	15.8	16	0.4	4445	100.
North East Asia	2403	83.3	478	16.6	3	0.1	2884	100.
Southern Asia	1641	85.0	285	14.8	4	0.2	1930	100.
Other-Not stated	137	76.1	31	17.2	12	6.7	180	100.
TOTAL	73775	87.5	9934	11.8	579	0.7	84288	100.

Smoking in pregnancy

In 2004, smoking at any time during pregnancy was more common among mothers born in English speaking countries than mothers born in non-English speaking countries (Table 58). About one in 6 mothers born in English speaking countries smoked at some time during pregnancy, compared to one in 10 or fewer mothers born in other country of birth groups.

Smoking in the second half of pregnancy poses the greatest risk to the health of both mother and baby. Four per cent of mothers who smoked during pregnancy quit before the second half of pregnancy. Of mothers who did smoke in the second half of pregnancy, mothers born in English speaking countries were more likely to smoke more than 10 cigarettes per day compared to mothers born in other country of birth groups (Table 59).

Country of birth group				Smoking in pre	egnancy			
	1	No	١	es es	Not s	tated	TC	OTAL
	No.	%	No.	%	No.	%	No.	%
English speaking	54842	82.3	11772	17.7	7	0.0	66621	100.0
Central & South America	648	96.0	27	4.0	0	0.0	675	100.0
Melanesia, Micronesia & Polynesia	1435	90.6	149	9.4	0	0.0	1584	100.0
Southern Europe	824	89.0	102	11.0	0	0.0	926	100.0
Western & Northern Europe	609	93.8	40	6.2	0	0.0	649	100.0
Eastern Europe, Russia,								
Central Asian & Baltic States	497	95.9	21	4.1	0	0.0	518	100.0
Middle East & Africa	3661	94.5	215	5.5	0	0.0	3876	100.0
South East Asia	4361	98.1	84	1.9	0	0.0	4445	100.0
North East Asia	2855	99.0	29	1.0	0	0.0	2884	100.0
Southern Asia	1920	99.5	10	0.5	0	0.0	1930	100.0
Other-Not stated	156	86.7	23	12.8	1	0.6	180	100.0
TOTAL	71808	85.2	12472	14.8	8	0.0	84288	100.0

TABLE 59

MOTHERS WHO SMOKED AT ALL DURING PREGNANCY BY NUMBER OF CIGARETTES SMOKED IN THE SECOND HALF OF PREGNANCY AND COUNTRY OF BIRTH GROUP, NSW 2004

Country of birth group	No	ne	1-	–10		than	he second Smoked	, amount	Not s	•	1	TOTAL
			pe	r day	10 pe	er day	not s	tated				
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
English speaking	439	3.7	5900	50.1	5150	43.7	275	2.3	8	0.1	11772	100.0
Central & South America	3	11.1	17	63.0	5	18.5	1	3.7	1	3.7	27	100.0
Melanesia, Micronesia & Polynesia	11	7.4	91	61.1	44	29.5	3	2.0	0	0.0	149	100.0
Southern Europe	3	2.9	57	55.9	41	40.2	1	1.0	0	0.0	102	100.0
Western & Northern Europe	4	10.0	20	50.0	15	37.5	1	2.5	0	0.0	40	100.0
Eastern Europe, Russia, Central												
Asian & Baltic States	1	4.8	12	57.1	6	28.6	2	9.5	0	0.0	21	100.0
Middle East & Africa	10	4.7	117	54.4	77	35.8	11	5.1	0	0.0	215	100.0
South East Asia	6	7.1	51	60.7	25	29.8	2	2.4	0	0.0	84	100.0
North East Asia	5	17.2	20	69.0	4	13.8	0	0.0	0	0.0	29	100.0
Southern Asia	2	20.0	5	50.0	2	20.0	1	10.0	0	0.0	10	100.0
Other-Not stated	1	4.3	13	56.5	9	39.1	0	0.0	0	0.0	23	100.0
TOTAL	485	3.9	6303	50.5	5378	43.1	297	2.4	9	0.1	12472	100.0

Medical conditions and obstetric complications

In 2004, 1.5 per cent of mothers born in Melanesia, Micronesia, and Polynesia were reported to have diabetes mellitus, over twice the rate for all mothers in NSW, though the number of mothers is small (Table 60). The rates of gestational diabetes in mothers born in Asian countries and Melanesia, Micronesia, and Polynesia were at least twice the rate for all mothers in NSW.

Overall, 1.1 per cent of mothers were reported to have essential hypertension, and 5.5 per cent were reported to have pre-eclampsia. Rates of reported pre-eclampsia were lower among mothers born in North East Asian countries than other country of birth groups.

Condition	Eng	lish	Cer	ntral	Mela	nesia	Sout	hern	Wes		•	f birt	h grou Mid		So	uth	No	orth	Sout	thern	Othe	ar_	то	ТΔ
	spea		So	& outh erica	Micro	nesia & nesia	Eur		Nort	k.	Eur Rus Cer Asia	rope ssia, ntral an & altic	Ea & Afri	st		st	Е	ast sia		sia	No stat	t	10	14
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	. %	No.	%	No.	%	No.	%	No.	%	No.	%	No.	
Diabetes																								
mellitus	326	0.5	0	0.0	24	1.5	9	1.0	4	0.6	3	0.6	19	0.5	41	0.9	21	0.7	15	0.8	2	1.1	464	C
Gestational diabetes	1991	3.0	34	F 0	163	10.0	66	7.1	10	2.9	10	0.1	292	7.5	461	10.4	015	10.9	000	110	_	0.0	3592	
Essential	1991	3.0	34	5.0	103	10.3	00	7.1	19	2.9	10	3.1	292	7.5	401	10.4	315	10.9	230	11.9	5	2.8	3592	4
hypertension	797	1.2	4	0.6	16	1.0	11	1.2	4	0.6	7	1.4	39	1.0	34	0.8	13	0.5	13	0.7	2	1.1	940	1
			43	6.4	91	5.7	54		32	4.9	34	6.6	134	3.5		3.6	84	2.9	82	4.2	15	8.3	4606	

Labour and delivery

TABLE 61

TABLE 62

Mothers born in non-English speaking countries were more likely to have a spontaneous onset of labour than mothers born in English speaking countries, and were less likely to be induced (Table 61).

Mothers born in the Middle East and Africa and Melanesia, Micronesia and Polynesia were more likely to have a normal vaginal delivery than mothers in other country of birth groups (Table 62). The highest caesarean section rates were among mothers born in Southern Asia (30.7 per cent) and Central and South America (31.3 per cent).

LABOUR ONSE	T BY COUNTRY	OF BIRTH GROUP,	NSW 2004

Country of					Onset	of labour				
birth group	Spor	ntaneous	No	labour#	Ind	uced	Not s	stated	T	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
English speaking	38900	58.4	10452	15.7	17268	25.9	1	0.0	66621	100.0
Central & South America	420	62.2	125	18.5	130	19.3	0	0.0	675	100.0
Melanesia, Micronesia & Polynesia	1064	67.2	191	12.1	329	20.8	0	0.0	1584	100.0
Southern Europe	589	63.6	142	15.3	195	21.1	0	0.0	926	100.0
Western & Northern Europe	420	64.7	106	16.3	123	19.0	0	0.0	649	100.0
Eastern Europe, Russia, Central										
Asian & Baltic States	349	67.4	70	13.5	99	19.1	0	0.0	518	100.0
Middle East & Africa	2590	66.8	486	12.5	800	20.6	0	0.0	3876	100.0
South East Asia	3173	71.4	586	13.2	686	15.4	0	0.0	4445	100.0
North East Asia	1962	68.0	430	14.9	492	17.1	0	0.0	2884	100.0
Southern Asia	1235	64.0	290	15.0	405	21.0	0	0.0	1930	100.0
Other–Not stated	105	58.3	52	28.9	23	12.8	0	0.0	180	100.0
TOTAL	50807	60.3	12930	15.3	20550	24.4	1	0.0	84288	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # No labour indicates elective caesarean section.

TYPE OF DELL	VERY BY COUNT	RY OF BIRTH GR	OUP NSW 2004
TITE OF DEED	VEITI DI OCCIVI		2007

Country of							-	Гуре о	f delivery	y						
birth group		rmal ginal	Ford	ceps		cuum action	Vag bree		caes	ctive arean ction	caes	gency arean tion#	No sta		то	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
English speaking Central & South	41317	62.0	2162	3.2	4521	6.8	277	0.4	10452	15.7	7886	11.8	6	0.0	66621	100.0
America Melanesia, Micronesia	390	57.8	16	2.4	54	8.0	4	0.6	125	18.5	86	12.7	0	0.0	675	100.0
Polynesia	1091	68.9	38	2.4	77	4.9	8	0.5	191	12.1	179	11.3	0	0.0	1584	100.0
Southern Europe Western & Northern	584	63.1	26	2.8	73	7.9	3	0.3	142	15.3	98	10.6	0	0.0	926	100.0
Europe Eastern Europe, Russi Central Asian &	374 ia,	57.6	28	4.3	65	10.0	2	0.3	106	16.3	74	11.4	0	0.0	649	100.0
Baltic States	322	62.2	22	4.2	41	7.9	1	0.2	70	13.5	62	12.0	0	0.0	518	100.0
Middle East & Africa	2694	69.5	91	2.3	210	5.4	19	0.5	486	12.5	376	9.7	0	0.0	3876	100.0
South East Asia	2784	62.6	130	2.9	390	8.8	16	0.4	586	13.2	538	12.1	1	0.0	4445	100.0
North East Asia	1651	57.2	142	4.9	291	10.1	7	0.2	430	14.9	363	12.6	0	0.0	2884	100.0
Southern Asia	1056	54.7	104	5.4	169	8.8	8	0.4	290	15.0	303	15.7	0	0.0	1930	100.0
Other-Not stated	103	57.2	3	1.7	11	6.1	2	1.1	52	28.9	9	5.0	0	0.0	180	100.0
TOTAL	52366	62.1	2762	3.3	5902	7.0	347	0.4	12930	15.3	9974	11.8	7	0.0	84288	100.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # Emergency caesarean section includes caesarean sections where the onset of labour was not stated.

Birth weight

The rate of low birth weight (less than 2,500 grams) in 2004 was 6.4 per cent in NSW. The highest rates of low birth weight were in babies of mothers born in Southern Asian countries (8.0 per cent) (Table 63). Babies of mothers born in North East Asian countries were least likely to be low birth weight.

Country of				Birth we	ight (grams)			
birth group	Less th	an 2,500	2,5	500+		stated	TO	OTAL
	No.	%	No.	%	No.	%	No.	9
English speaking	4287	6.3	63411	93.6	37	0.1	67735	100.
Central & South America	37	5.4	646	94.6	0	0.0	683	100.
Melanesia, Micronesia & Polynesia	109	6.8	1489	93.1	2	0.1	1600	100.
Southern Europe	62	6.6	877	93.4	0	0.0	939	100.
Western & Northern Europe	36	5.4	627	94.6	0	0.0	663	100.
Eastern Europe, Russia, Central								
Asian & Baltic States	31	5.9	494	94.1	0	0.0	525	100.
Middle East & Africa	248	6.3	3690	93.6	3	0.1	3941	100.
South East Asia	307	6.8	4177	93.1	4	0.1	4488	100.
North East Asia	146	5.0	2764	95.0	0	0.0	2910	100.
Southern Asia	157	8.0	1795	91.9	1	0.1	1953	100.
Other-Not stated	37	19.6	150	79.4	2	1.1	189	100.
TOTAL	5457	6.4	80120	93.6	49	0.1	85626	100.

Gestational age

The rate of prematurity (less than 37 weeks gestation) in 2004 was 7.3 per cent in NSW. The highest rates of prematurity were in babies of mothers born in Melanesia, Micronesia and Polynesia (8.0 per cent). Babies of mothers born in Western and Northern Europe were least likely to be premature (Table 64).

Country of				Gestationa	al age (weeks)			
birth group	Less	than 37	3	7+	Not s	tated	TC	OTAL
	No.	%	No.	%	No.	%	No.	%
English speaking	5054	7.5	62678	92.5	3	0.0	67735	100.0
Central & South America	40	5.9	643	94.1	0	0.0	683	100.0
Melanesia, Micronesia & Polynesia	128	8.0	1472	92.0	0	0.0	1600	100.0
Southern Europe	63	6.7	875	93.2	1	0.1	939	100.0
Western & Northern Europe	36	5.4	627	94.6	0	0.0	663	100.0
Eastern Europe, Russia, Central								
Asian & Baltic States	37	7.0	488	93.0	0	0.0	525	100.0
Middle East & Africa	262	6.6	3679	93.4	0	0.0	3941	100.0
South East Asia	303	6.8	4185	93.2	0	0.0	4488	100.0
North East Asia	160	5.5	2750	94.5	0	0.0	2910	100.0
Southern Asia	124	6.3	1829	93.7	0	0.0	1953	100.0
Other/Not stated	40	21.2	149	78.8	0	0.0	189	100.0
TOTAL	6247	7.3	79375	92.7	4	0.0	85626	100.0

Apgar score

In 2004, 2.1 per cent of all babies (including stillborn babies) had an Apgar score of 7 or less at 5 minutes and 1.1 per cent had a score of less than 4 (Table 65). The rate of Apgar scores of less than 7 was highest among babies of mothers born in Melanesia, Micronesia and Polynesia (3.0 per cent).

TABLE 65										
BIRTHS BY COUNTRY OF BIRTH	GROUP A	ND APGAI	R SCORE A	T 5 MINU	TES, NSW 2	:004#				
Country of					Apga	r score				
birth group		0–4	5	- 6		7+	Not s	tated	TO	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
English speaking	703	1.0	649	1.0	66209	97.7	174	0.3	67735	100.0
Central & South America	12	1.8	4	0.6	666	97.5	1	0.1	683	100.0
Melanesia, Micronesia & Polynesia	30	1.9	18	1.1	1547	96.7	5	0.3	1600	100.0
Southern Europe	7	0.7	15	1.6	917	97.7	0	0.0	939	100.0
Western & Northern Europe	3	0.5	6	0.9	654	98.6	0	0.0	663	100.0
Eastern Europe, Russia, Central										
Asian & Baltic States	4	0.8	7	1.3	513	97.7	1	0.2	525	100.0
Middle East & Africa	55	1.4	34	0.9	3845	97.6	7	0.2	3941	100.0
South East Asia	52	1.2	57	1.3	4370	97.4	9	0.2	4488	100.0
North East Asia	23	0.8	24	0.8	2861	98.3	2	0.1	2910	100.0

26

1.3

175

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health. # Births include stillbirths.

1.3

Perinatal outcomes

Southern Asia

Other-Not stated

In 2004, 99 per cent of babies born in NSW and reported to the MDC were born alive and survived until discharge from the hospital of birth (Table 66). The majority of perinatal deaths occurred among babies of mothers born in English speaking countries (n=594, 76.8 per cent). There

were a further 44 deaths among babies of mothers born in South East Asian countries, and 42 deaths among babies of mothers born in the Middle East and Africa—comprising 5.7 and 5.4 per cent respectively of all perinatal deaths reported to the MDC.

0.3

1.6

1953

189

97.1

92.6

100.0

100.0 100.0

Country of birth group	Livet survi		Stilli	born	Perinatal Neor		Not st dea		Tota birth		Perinatal mortality rate/1,000 births
	No.	%	No.	%	No.	%	No.	%	No.	%	birtiis
English speaking	67138	99.1	437	0.6	157	0.2	3	0.0	67735	100.0	8.8
Central & South America	671	98.2	7	1.0	5	0.7	0	0.0	683	100.0	17.6
Melanesia, Micronesia &											
Polynesia	1579	98.7	16	1.0	5	0.3	0	0.0	1600	100.0	13.1
Southern Europe	930	99.0	7	0.7	2	0.2	0	0.0	939	100.0	9.6
Western & Northern Europe	663	100.0	0	0.0	0	0.0	0	0.0	663	100.0	_
Eastern Europe, Russia,											
Central Asian &											
Baltic States	521	99.2	3	0.6	1	0.2	0	0.0	525	100.0	7.6
Middle East & Africa	3899	98.9	32	0.8	10	0.3	0	0.0	3941	100.0	10.7
South East Asia	4444	99.0	27	0.6	17	0.4	0	0.0	4488	100.0	9.8
North East Asia	2892	99.4	12	0.4	6	0.2	0	0.0	2910	100.0	6.2
Southern Asia	1931	98.9	17	0.9	5	0.3	0	0.0	1953	100.0	11.3
Other-Not stated	181	95.8	3	1.6	4	2.1	1	0.5	189	100.0	_
TOTAL	84849	99.1	561	0.7	212	0.2	4	0.0	85626	100.0	9.0

Source: NSW Midwives Data Collection (HOIST). Centre for Epidemiology and Research, Department of Health.

Perinatal deaths include deaths reported to the MDC only. As the MDC form is completed at discharge or transfer of the baby, deaths occurring after this time may not be reported to the MDC.

8. NEONATAL INTENSIVE CARE

The information presented in this chapter was obtained from the Neonatal Intensive Care Units' (NICUS) Data Collection (see Chapter 3, Data sources).

Registration rate

There were 2,231 infants registered in NICUS in 2004. The most common reasons for registration of an infant were assisted ventilation for 4 hours or more (47.4 per cent) and gestational age less than 29 weeks (16.6 per cent). Infants generally met more than one of the registration criteria.

The NICUS registration rate in 2004 was 24.8 per 1,000 livebirths, which has increased slightly each year since 1992 (17.9 per 1,000 livebirths). Table 67 shows the registration rate according to the mothers' health area of residence. The relatively low registration rates from the health areas adjoining the New South Wales border reflect the fact that some infants are preferentially referred interstate. The registration rate in health areas with low numbers of births should be interpreted with caution.

Ninety-two of the 2,231 infants (4.1 per cent) registered in NICUS were born to Aboriginal or Torres Strait Islander mothers. There were 2,392 livebirths to Aboriginal or Torres Strait Islander women recorded by the NSW and ACT Midwives Data Collections for 2004. The registration rate for these infants was 38.5 per 1,000 livebirths and has increased since 1992. Eighty-four of the 2,038 mothers (4.1 per cent) were Aboriginal or Torres Strait Islander, of whom 18 (21.4 per cent) were residents of the Greater Western and North Coast Health Areas (Table 68). Twenty-seven of the 353 mothers (7.6 per cent) of infants less than 29 weeks and/or less than 1,000 grams were Aboriginal or Torres Strait Islander.

Maternal characteristics

There were 2,038 mothers of the 2,231 infants registered in NICUS during 2004. Just over 80 per cent of the mothers were residents of the Sydney South West, Sydney West, Hunter & New England, Northern Sydney & Central Coast, and South Eastern Sydney & Illawarra Health Areas. The distribution of the mothers' health area of residence for infants less than 29 weeks and/or less than 1,000 grams was similar to those for the whole group. Of the 353 mothers of infants in this group just over three-quarters (84.7 per cent) were residents of the Sydney South West, Sydney West, Hunter & New England, Northern Sydney & Central Coast, and South Eastern Sydney & Illawarra Health Areas.

The age of mothers of NICUS infants ranged from 15 to 48 years, with a mean age of 29.8 years. The mean maternal age was similar across all gestational age groups and has remained constant since 1992. In 2004, 22.3 per cent of mothers were aged 35 years or more (range 13.7 per cent in 1992 to 22.3 per cent in 2004). In 2004, 4.8 per cent of mothers were aged less than 20 years (range 4.7 per cent in 2004 to 6.8 per cent in 2000) (Table 69). The health area of residence with the highest proportion of teenage mothers was North Coast.

There were 1,795 mothers (88.1 per cent) who had an antenatal complication. The most common antenatal complications were preterm labour (45.2 per cent), pregnancy induced hypertension (17.6 per cent), fetal distress (16.7 per cent), antepartum haemorrhage (16.5 per cent), and intrauterine growth restriction (10.3 per cent). Antenatal complications were more frequent in mothers delivering at less than 37 weeks compared with at term. Even so, 56.2 per cent of mothers giving birth at term had an antenatal complication (Table 70).

Health Area		NICUS strants	Total NSW & ACT live births	Registrants per 1,000 live births
	No.	%	No.	
Sydney South West	476	21.3	18893	25.2
South Eastern Sydney & Illawarra	281	12.6	14224	19.8
Sydney West	445	20.0	16017	27.8
Northern Sydney & Central Coast	256	11.5	13169	19.4
Hunter & New England	337	15.1	9761	34.5
North Coast	54	2.4	4585	11.8
Greater Southern	131	5.9	4621	28.3
Greater Western	100	4.5	3851	26.0
ACT	140	6.3	4115	34.0
Overseas	7	0.3	0	0.0
Interstate	4	0.2	614	11.4
TOTAL	2231	100.00	89850	24.8

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. NSW Midwives Data Collection 2004. Centre for Epidemiology and Research, NSW Department of Health. ACT Maternal Perinatal Data Collection 2003, ACT Health.

Administration of corticosteroids to the mother prior to preterm birth improves the outcome for the infant. In 2004, 86.7 per cent of mothers of infants born at less than 28 weeks received corticosteroids (Figure 5, Table 71). Nearly

ninety per cent of mothers of 28–31 week gestation infants received antenatal corticosteroids. The overall proportion of mothers receiving antenatal corticosteroids increased from 45 per cent in 1992 to 74.1 per cent in 2001.

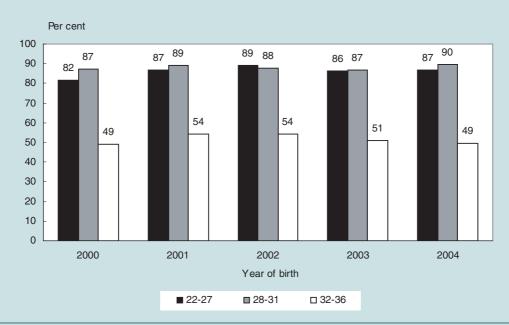
Health Area	Non-Ab	original	Abo	riginal	TC	TAL
	No.	%	No.	%	No.	%
Sydney South West	432	97.7	10	2.3	442	21.7
South Eastern Sydney & Ilawarra	247	98.0	5	2.0	252	12.4
Sydney West	395	97.5	10	2.5	405	19.9
Northern Sydney & Central Coast	224	98.2	4	1.8	228	11.2
Hunter & New England	286	91.4	27	8.6	313	15.4
North Coast	44	86.3	7	13.7	51	2.5
Greater Southern	117	94.4	7	5.6	124	6.1
Greater Western	76	87.4	11	12.6	87	4.3
ACT	122	97.6	3	2.4	125	6.1
Overseas	7	100.0	0	0.0	7	0.3
Interstate	4	100.0	0	0.0	4	0.2
TOTAL	1954	95.9	84	4.1	2038	100.0

Health Area			Maternal a	ge (years)				
	Less t	han 20		0–34	3	5+	TC	OTAL
Sydney South West	12	2.7	315	71.3	115	26.0	442	21.
South Eastern Sydney & Illawarra	13	5.2	176	69.8	63	25.0	252	12
Sydney West	16	4.0	310	76.5	79	19.6	405	19
Northern Sydney & Central Coast	4	1.8	153	67.1	71	31.4	228	11
Hunter & New England	23	7.3	242	77.3	48	15.3	313	15
North Coast	5	9.8	38	74.5	8	15.7	51	2
Greater Southern	10	8.1	94	75.8	20	16.1	124	6
Greater Western	8	9.2	64	73.6	15	17.2	87	4
ACT	4	3.2	85	68.0	36	28.8	125	6
Overseas	0	0.0	7	100.0	0	0.0	7	0
Interstate	0	0.0	4	100.0	0	0.0	4	0
TOTAL	95	4.7	1488	73.0	455	22.3	2038	100

Antenatal complication				G	estationa	al age (we	eks)					
	2	3–27	2	8–31		2–36		7-41		42+	TO	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Threatened preterm labour	177	78.3	333	61.0	399	56.1	12	2.2	0	0.0	921	45.2
Pregnancy induced hypertension	31	13.7	125	22.9	160	22.5	42	7.6	0	0.0	358	17.6
Fetal distress	36	15.9	76	13.9	117	16.5	111	20.1	1	25.0	341	16.7
Antepartum haemorrhage	66	29.2	133	24.4	114	16.0	23	4.2	0	0.0	336	16.5
Intrauterine growth restriction	16	7.1	68	12.5	110	15.5	15	2.7	0	0.0	209	10.3
Fetal diagnosis of anomaly	1	0.4	12	2.2	54	7.6	73	13.2	0	0.0	140	6.9
Chorioamnionitis	49	21.7	50	9.2	21	3.0	5	0.9	0	0.0	125	6.1
Gestational diabetes	4	1.8	22	4.0	46	6.5	39	7.1	0	0.0	111	5.4
Any complication	226	100.0	546	100.0	711	100.0	311	56.4	1	25.0	1795	88.
TOTAL MOTHERS	226	100.0	546	100.0	711	100.0	551	100.0	4	100.0	2038	100.0

FIGURE 5

MOTHERS OF NICUS REGISTRANTS BY ANTENATAL CORTICOSTEROID ADMINISTRATION AND GESTATIONAL AGE, NSW & ACT 2000–2004



Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 71

MOTHERS OF NICUS REGISTRANTS BY ANTENATAL CORTICOSTEROID ADMINISTRATION AND GESTATIONAL AGE, NSW & ACT 2000–2004

Year	Corticosteroid			(Gestational	age (week	s)		
	Administration	2:	2–27	28	3–31	32	2 _ 36	T	OTAL
		No.	%	No.	%	No.	%	No.	%
2000	No	45	18.5	65	12.6	287	50.9	397	30.0
	Yes	198	81.5	451	87.4	277	49.1	926	70.0
	TOTAL	243	100.0	516	100.0	564	100.0	1323	100.0
2001	No	33	13.3	57	10.8	260	45.6	350	25.9
	Yes	216	86.7	473	89.2	310	54.4	999	74.1
	TOTAL	249	100.0	530	100.0	570	100.0	1349	100.0
2002	No	27	10.8	63	12.3	279	45.7	369	26.9
	Yes	224	89.2	449	87.7	331	54.3	1004	73.1
	TOTAL	251	100.0	512	100.0	610	100.0	1373	100.0
2003	No	31	13.9	68	13.1	310	49.1	409	29.8
	Yes	192	86.1	451	86.9	322	50.9	965	70.2
	TOTAL	223	100.0	519	100.0	632	100.0	1374	100.0
2004	No	30	13.3	56	10.3	360	50.6	446	30.1
	Yes	196	86.7	490	89.7	351	49.4	1037	69.9
	TOTAL	226	100.0	546	100.0	711	100.0	1483	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

Transfer status, labour and delivery

Infants are admitted to a neonatal intensive care unit

- delivery that has been booked to occur in a tertiary centre;
- delivery in a tertiary centre following maternal transfer;
- delivery in a non-tertiary centre followed by infant transfer to a tertiary centre.

Thirty-five per cent of all births were booked at a tertiary centre, ranging from 30 per cent for the 23–27 week gestational age group to 40.5 per cent for the 32–36 weeks gestational age group (Table 72). Maternal transfer was most common at gestations less than 32 weeks. The rate of maternal transfer was identical for infants born before 28 weeks gestation and for those born at 28–31 weeks gestation (58.9 per cent). The overall rate of maternal transfer was 35 per cent.

Nearly 30 per cent of infants were transferred to a tertiary centre following birth. There were 3.3 per cent (73/2,231) of infants transferred from one tertiary centre to another during the first day of life for assisted ventilation and/or major surgery. Transfer following birth was most common in the 37-plus weeks gestational age group (58.7 per cent). Forty-four infants (44/1,320; 3.3 per cent) greater than 31 weeks gestation were discharged home prior to the admission that qualified them for registration in NICUS.

The inverse relationship between gestational age groups and the proportion of births in a tertiary centre is shown in Figure 6 and Table 73. The proportion of infants born in a tertiary centre increased from 60.0 per cent in 1992 to 74.8 per cent 2000. In 2004, 89.7 per cent of infants

less than 32 weeks gestation were born in a tertiary centre compared with 72.3 per cent of 32–36 week gestation infants and 48.7 per cent of term infants.

The pattern of transfer status (Table 74) and place of birth by birth weight (Table 75) is similar to that of gestational age, with the majority (88.7 per cent) of the very low birth weight infants (less than 1,500 grams) born in a tertiary centre.

Spontaneous onset of labour was more common among mothers of infants less than 28 weeks gestation (Table 76). Augmentation and induction of labour were most common in term and post-term births. Similarly spontaneous onset of labour occurred in half (51.2 per cent) of all mothers of infants less than 2,500 grams birth weight (Table 77). As expected, augmentation, or induction of labour was most common in mothers of infants with a birth weight of 2,500 grams or more (29.1 per cent).

Prolonged rupture of membranes (greater than 24 hours) was more common at lower gestations, affecting 23.2 per cent of infants less than 28 weeks gestation (Table 78).

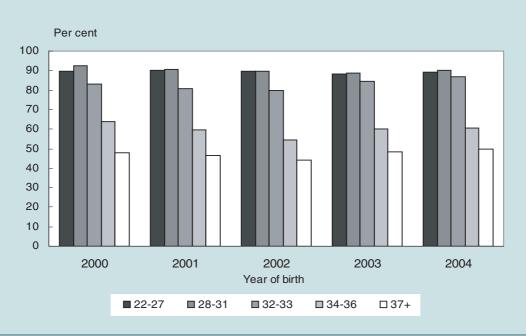
The proportion of NICUS registrants born by elective caesarean section (caesarean section without labour) was 38.3 per cent in 2004, previously ranging from 27.0 per cent in 1992 to 38.4 per cent in 2003 (Tables 79 and 80). The most common type of delivery was caesarean section (45.8 per cent in 1993 to 59.7 per cent in 2004), followed by 32.8 per cent for normal vaginal delivery (previously 41.9 per cent in 1993 to 35.6 per cent in 2003) and 3.3 per cent for vaginal breech delivery (7.0 per cent in 1998 to 4.2 per cent in 2003). The high rate of caesarean section and breech delivery in the NICUS cohort is related to the high proportion of preterm births. The rate of caesarean section in term and post-term births was 41.3 per cent, compared with 27.7 per cent for all livebirths in NSW in 2004.

Continued on page 62

NICUS REGISTRANTS BY BO	OOKIN	G STATU	S, TRAN	ISFER ST	ATUS AN	ID GESTAT	TIONAL A	AGE, NSW	& ACT	2004		
Booking status and						Gestationa						
transfer status	2	3–27	28	8–31	32	2–36	3	7–41		42+	TO	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Booked at tertiary hospital	79	30.0	200	30.9	309	40.5	187	33.8	3	75.0	778	34.9
Transfer before birth	155	58.9	382	59.0	217	28.4	26	4.7	0	0.0	780	35.0
Transfer after birth	28	10.6	65	10.0	217	28.4	326	59.0	1	25.0	637	28.6
Booked at non-tertiary hospital	1	0.4	1	0.2	20	2.6	14	2.5	0	0.0	36	1.6
TOTAL	263	100.0	648	100.0	763	100.0	553	100.0	4	100.0	2231	100.0

FIGURE 6

NICUS REGISTRANTS BY TERTIARY HOSPITAL BIRTH AND GESTATIONAL AGE, NSW & ACT 2000-2004



Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 73

NICUS REGISTRANTS BY PLACE OF BIRTH (LEVEL OF OBSTETRIC HOSPITAL) AND GESTATIONAL AGE, NSW & ACT 2004

Place of birth						estationa						
		22-27	2	28–31	3	2–33	3	4–36		37+	TC	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Level 1	0	0.0	1#	0.2	0	0.0	0	0.0	1	0.2	2	0.1
Level 2	1	0.4	2#	0.3	1	0.3	2	0.5	11	2.0	17	0.8
Level 3	3	1.1	10#	1.5	4	1.1	12	2.9	28	5.0	57	2.6
Level 4	13	4.9	19#	2.9	8	2.3	37	9.0	71	12.7	148	6.6
Level 5	9	3.4	17#	2.6	22	6.3	50	12.1	68	12.2	166	7.4
Level 6	234	89.0	583#	90.0	303	86.6	249	60.3	271	48.7	1640	73.5
Private hospital	3	1.1	6#	0.9	8	2.3	54	13.1	92	16.5	163	7.3
Born before arrival	0	0.0	6#	0.9	2	0.6	1	0.2	4	0.7	13	0.6
Interstate-Overseas	0	0.0	4#	0.6	2	0.6	8	1.9	11	2.0	25	1.2
TOTAL	263	100.0	648	100.0	350	100.0	413	100.0	557	100.0	2231	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

39/65 (60.0%) babies not born in a level 6 hospital were 30–31 weeks gestation. 358/583 (61.4%) babies born in a level 6 hospital were 30–31 weeks gestation.

TABLE 74

NICUS REGISTRANTS BY BOOKING STATUS, TRANSFER STATUS AND BIRTH WEIGHT, NSW & ACT 2004

Booking status and transfer status	Less t	han 1,000	1,000	0–1,499		ight (grams) 0-2,499	2,	500+	1	OTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%	
Booked at tertiary hospital	82	31.2	175	34.4	249	35.0	272	36.3	778	34.9	
Transfer before birth	157	59.7	269	53.0	302	42.5	52	6.9	780	35.0	
Transfer after birth	24	9.1	56	11.0	148	20.8	409	54.6	637	28.6	
Booked at non-tertiary hosp	ital 0	0.0	8	1.6	12	1.7	16	2.1	36	1.6	
TOTAL	263	100.0	508	100.0	711	100.0	749	100.0	2231	100.0	

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 75

NICUS REGISTRANTS BY PLACE OF BIRTH (LEVEL OF OBSTETRIC HOSPITAL) AND BIRTH WEIGHT, NSW & ACT 2004

Place of birth						eight (grams	s)				
	<	1,000	1,00	00-1,499	1,50	0-2,499	2,	500+	T	OTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%	
Level 1	0	0.0	1	0.2	0	0.0	1	0.1	2	0.1	
Level 2	0	0.0	2	0.4	4	0.6	11	1.5	17	0.8	
Level 3	3	1.1	7	1.4	16	2.3	31	4.1	57	2.6	
Level 4	12	4.6	17	3.3	29	4.1	90	12.0	148	6.6	
Level 5	6	2.3	25	4.9	45	6.3	90	12.0	166	7.4	
Level 6	239	90.9	445	87.6	566	79.6	390	52.1	1640	73.5	
Private hospital	2	0.8	4	0.8	40	5.6	117	15.6	163	7.3	
Born before arrival	1	0.4	4	0.8	4	0.6	4	0.5	13	0.6	
Interstate-Overseas	0	0.0	3	0.6	7	0.9	15	2.0	25	1.2	
TOTAL	263	100.0	508	100.0	711	100.0	749	100.0	2231	100.0	

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 76

MOTHERS OF NICUS REGISTRANTS BY ONSET OF LABOUR AND GESTATIONAL AGE, NSW & ACT 2004

					G	estational	age (wee	eks)				
Onset of labour	23-	-27	2	8–31	3	2–36	37	7–41		42+	TO	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Spontaneous	163	72.1	276	50.5	302	42.5	230	41.7	3	75.0	974	47.8
Augmented	7	3.1	14	2.6	24	3.4	60	10.9	0	0.0	105	5.2
Induced	0	0.0	6	1.1	45	6.3	130	23.6	1	25.0	182	8.9
No labour	56	24.8	250	45.8	340	47.8	131	23.8	0	0.0	777	38.1
TOTAL	226	100.0	546	100.0	711	100.0	551	100.0	4	100.0	2038	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 77

MOTHERS OF NICUS REGISTRANTS BY ONSET OF LABOUR AND BIRTH WEIGHT, NSW & ACT 2004

Onset of labour					Birth we	ight (grams)				
	Less th	nan 1,000	1,00	0-1,499	1,50	0-2,499	2,5	500+	TO	DTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
Spontaneous	126	57.8	203	46.2	332	52.3	313	42.0	974	47.8
Augmented	3	1.4	16	3.6	18	2.8	68	9.1	105	5.2
Induced	1	0.5	10	2.3	22	3.5	149	20.0	182	8.9
No labour	88	40.4	210	47.8	263	41.4	216	29.0	777	38.1
TOTAL	218	100.0	439	100.0	635	100.0	746	100.0	2038	100.0

TABLE 78

NICUS REGISTRANTS BY DURATION OF RUPTURE OF MEMBRANES AND GESTATIONAL AGE, NSW & ACT 2004

				G	estational	age (we	eks)					
2	23-27	2	28-31	3	2-36	Ŭ ` 3	7–41		42+	TO	DTAL	
No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
202	76.8	510	78.7	679	89.0	534	96.6	4	100.0	1929	86.5	
32	12.2	78	12.0	65	8.5	17	3.1	0	0.0	192	8.6	
29	11.0	60	9.3	19	2.5	2	0.4	0	0.0	110	4.9	
263	100.0	648	100.0	763	100.0	553	100.0	4	100.0	2231	100.0	
	No. 202 32 29	202 76.8 32 12.2 29 11.0	No. % No. 202 76.8 510 32 12.2 78 29 11.0 60	No. % No. % 202 76.8 510 78.7 32 12.2 78 12.0 29 11.0 60 9.3	23–27 28–31 3 No. % No. % No. 202 76.8 510 78.7 679 32 12.2 78 12.0 65 29 11.0 60 9.3 19	23–27 28–31 32–36 No. % No. % 202 76.8 510 78.7 679 89.0 32 12.2 78 12.0 65 8.5 29 11.0 60 9.3 19 2.5	23-27 28-31 32-36 3 No. % No. % No. 202 76.8 510 78.7 679 89.0 534 32 12.2 78 12.0 65 8.5 17 29 11.0 60 9.3 19 2.5 2	No. % No. % No. % No. % 202 76.8 510 78.7 679 89.0 534 96.6 32 12.2 78 12.0 65 8.5 17 3.1 29 11.0 60 9.3 19 2.5 2 0.4	23–27	23–27	23–27 28–31 32–36 37–41 42+ TO No. % No. %	23-27 28-31 32-36 37-41 42+ TOTAL No. % No. % No. % No. % 202 76.8 510 78.7 679 89.0 534 96.6 4 100.0 1929 86.5 32 12.2 78 12.0 65 8.5 17 3.1 0 0.0 192 8.6 29 11.0 60 9.3 19 2.5 2 0.4 0 0.0 110 4.9

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

Type of delivery						Gestati	onal age	(weeks)				
	2	3–27	2	28–31	3	2-36	37	7–41	4	12+	TC	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Normal vaginal	89	33.8	165	25.5	203	26.6	273	49.4	2	50.0	732	32.8
Forceps	1	0.4	12	1.9	17	2.2	13	2.4	1	25.0	44	2.0
Forceps rotation	0	0.0	4	0.6	0	0.0	1	0.2	0	0.0	5	0.2
Vacuum extraction	0	0.0	3	0.5	11	1.4	30	5.4	0	0.0	44	2.0
Vaginal breech	27	10.3	29	4.5	11	1.4	7	1.3	0	0.0	74	3.3
Elective caesarean	65	24.7	289	44.6	370	48.5	131	23.7	0	0.0	855	38.3
Emergency caesarean	81	30.8	146	22.5	151	19.8	98	17.7	1	25.0	477	21.4
TOTAL	263	100.0	648	100.0	763	100.0	553	100.0	4	100.0	2231	100.0

NICUS REGISTRANTS BY T	TPE OF DELIVE	ERY AND BI	RIHWEIG	aHI, NSW &	ACT 2004	+				
Type of delivery						ght (grams)				
	Less	than 1,000	1,00	00–1,499	1,50	0–2,499	2,	500+	Т	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	•
Normal vaginal	65	24.7	114	22.4	218	30.7	335	44.7	732	32
Forceps	1	0.4	8	1.6	17	2.4	18	2.4	44	2
Forceps rotation	0	0.0	3	0.6	1	0.1	1	0.1	5	0
Vacuum extraction	0	0.0	0	0.0	8	1.1	36	4.8	44	2
Vaginal breech	24	9.1	22	4.3	22	3.1	6	0.8	74	3
Elective caesarean	102	38.8	243	47.8	292	41.1	218	29.1	855	38
Emergency caesarean	71	27.0	118	23.2	153	21.5	135	18.0	477	21
TOTAL	263	100.0	508	100.0	711	100.0	749	100.0	2231	100

(Continued from page 59)

Infant characteristics

Three-quarters of the infants (75 per cent) were preterm (less than 37 weeks gestation), 40.8 per cent were very preterm (less than 32 weeks gestation) and 11.8 per cent were extremely preterm (less than 28 weeks gestation) (Figure 7). The proportion of infants in each gestational age group has remained relatively constant (Table 81). Almost all liveborn infants at 24–31 weeks gestation were admitted to a NICU, about two-thirds at 32 weeks gestation, and one-fifth at 33–34 weeks gestation (Table 82).

Sixty-seven per cent of infants had a low birth weight (less than 2,500 grams), 34.6 per cent had a very low birth weight (less than 1,500 grams) and 11.8 per cent had an extremely low birth weight (less than 1,000 grams). The proportion of infants in each birth weight group has

remained constant (Table 83). Almost all liveborn infants 600–1500 grams birth weight were admitted to a NICU (Table 84).

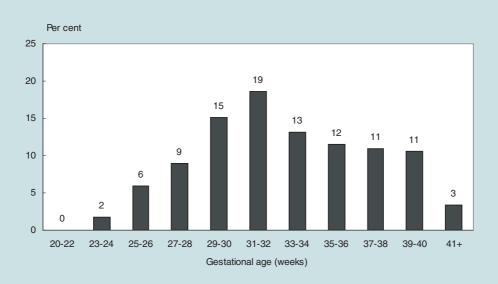
Overall, 58.8 per cent of infants were male. The ratio of males to females was approximately 3:2 in most gestational age groups (Table 85).

The overall proportion of the infants who had a major congenital anomaly decreased from 22.0 per cent in 1992 to 17.3 per cent in 2004. Congenital anomalies were more common among term infants (37-plus weeks gestational age), of whom 35.5 per cent had a major congenital anomaly and 2.3 per cent had a minor congenital anomaly (Table 86).

Continued on page 66

FIGURE 7

NICUS REGISTRANTS BY GESTATIONAL AGE, NSW & ACT 2004



Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 81

NICUS REGISTRANTS BY GESTATIONAL AGE, NSW & ACT 2000-2004

Gestational age (weeks)						of birth				
	:	2000	2	2001	2	2002	2	2003		2004
	No.	%	No.	%	No.	%	No.	%	No.	%
22–27	275	13.7	277	13.8	281	14.0	253	12.0	263	11.8
28-31	609	30.3	640	31.8	604	30.0	608	28.8	648	29.0
32-36	601	29.9	611	30.4	640	31.8	677	32.0	763	34.2
37-41	512	25.5	473	23.5	479	23.8	561	26.5	553	24.8
42+	10	0.5	9	0.4	8	0.4	14	0.7	4	0.2
TOTAL	2007	100.0	2010	100.0	2012	100.0	2113	100.0	2231	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 82

BIRTHS BY NICUS REGISTRATION AND GESTATIONAL AGE, NSW & ACT 2004

Gestational age (weeks)	NSW & ACT NICUS Stillbirths No.	Live births No.	Registrations No.	Rate per 1,000 live births	% of cohort
Less than 21	48	17	0	0.0	0.0
21	68	24	0	0.0	0.0
22	55	36	0	0.0	0.0
23	48	18	11	611.1	0.5
24	29	34	29	852.9	1.3
25	25	66	53	803.0	2.4
26	20	85	78	917.6	3.5
27	25	86	92	1069.8	4.1
28	12	104	108	1038.5	4.8
29	12	135	143	1059.3	6.4
30	17	180	194	1077.8	8.7
31	21	212	203	957.5	9.1
32	21	342	212	619.9	9.5
33	25	455	138	303.3	6.2
34	21	788	155	196.7	7.0
35	20	1276	129	101.1	5.8
36	21	2331	129	55.3	5.8
37	29	5165	109	21.1	4.9
38	24	14101	135	9.6	6.1
39	22	21475	110	5.1	4.9
40	26	26514	127	4.8	5.7
41	25	14592	72	4.9	3.2
42	1	1694	4	2.4	0.2
43	1	143	0	0.0	0.0
44	0	1	0	0.0	0.0
TOTAL	616	89874#	2231	24.8	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. NSW Midwives Data Collection 2004. Centre for Epidemiology and Research, NSW Department of Health. ACT Maternal Perinatal Data Collection 2003, ACT Health.
Excludes 8 babies reported to the MDC in 2003–2004 for whom the birth outcome was not known.

TABLE 83

NICUS REGISTRANTS BY BIRTH WEIGHT, NSW & ACT 2000-2004

Birth weight (grams)						of birth					
	2	2000	2	001		002		2003	20	004	
	No.	%	No.	%	No.	%	No.	%	No.	%	
Less than 400	1	0.0	2	0.1	1	0.0	1	0.0	1	0.0	
400-499	6	0.3	5	0.2	7	0.3	9	0.4	5	0.2	
500-599	21	1.0	30	1.5	21	1.0	24	1.1	25	1.1	
600–699	56	2.8	49	2.4	53	2.6	38	1.8	35	1.6	
700–799	62	3.1	49	2.4	63	3.1	54	2.6	54	2.4	
800-899	53	2.6	72	3.6	58	2.9	60	2.8	66	3.0	
900–999	84	4.2	63	3.1	81	4.0	80	3.8	77	3.5	
1,000-1,249	212	10.6	219	10.9	181	9.0	197	9.3	230	10.3	
1,250-1,499	281	14.0	274	13.6	263	13.1	257	12.2	278	12.5	
1,500-1,749	204	10.2	231	11.5	228	11.3	215	10.2	257	11.5	
1,750–1,999	144	7.2	159	7.9	163	8.1	185	8.8	174	7.8	
2,000–2,499	254	12.7	251	12.5	273	13.6	258	12.2	280	12.6	
2,500-2,999	201	10.0	215	10.7	205	10.2	244	11.5	280	12.6	
3,000-3,499	200	10.0	195	9.7	195	9.7	228	10.8	226	10.1	
3,500-3,999	149	7.4	132	6.6	158	7.9	176	8.3	153	6.9	
4,000+	79	3.9	64	3.2	62	3.1	87	4.1	90	4.0	
TOTAL	2007	100.0	2010	100.0	2012	100.0	2113	100.0	2231	100.0	

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 84

BIRTHS BY NICUS REGISTRATION AND BIRTH WEIGHT, NSW & ACT 2004

Birth weight	NSW	& ACT		NICUS	
(grams)	Stillbirths No.	Live births No.	Registrations No.	Rate per 1,000 live births	% of cohort
Less than 400	143	56	1	17.9	0.04
400–499	67	34	5	147.1	0.22
500–599	59	55	25	454.5	1.12
600–699	28	41	35	853.7	1.57
700–799	19	54	54	1000.0	2.42
800–899	13	73	66	904.1	2.96
900–999	14	78	77	987.2	3.45
1,000-1,249	32	234	230	982.9	10.31
1,250-1,499	21	292	278	952.1	12.46
1,500-1,749	27	445	257	577.5	11.52
1,750–1,999	22	641	174	271.5	7.80
2,000–2,499	46	3367	280	83.2	12.55
2,500-2,999	52	13419	280	20.9	12.55
3,000-3,499	39	31889	226	7.1	10.13
3,500-3,999	23	28007	153	5.5	6.86
4,000+	10	11196	90	8.0	4.03
TOTAL	615#	89881#	2231	24.8	100.00

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. NSW Midwives Data Collection 2004. Centre for Epidemiology and Research, NSW Department of Health ACT Maternal Perinatal Data Collection 2003, ACT Health. # Excludes 6 babies reported to the MDC in 2003–2004 for whom the birth outcome was not known.

TABLE 85

NICUS REGISTRANTS BY GENDER AND GESTATIONAL AGE, NSW & ACT 2004

Sex					Ges	tational a	ge (wee	ks)				
	2	3–27	28	3–31	3	2-36	3	7–41		42+	T	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male	144	54.8	354	54.6	464	60.8	346	62.6	3	75.0	1311	58.8
Female	119	45.2	294	45.4	299	39.2	207	37.4	1	25.0	920	41.2
TOTAL	263	100.0	648	100.0	763	100.0	553	100.0	4	100.0	2231	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 86

NICUS REGISTRANTS BY CONGENITAL ANOMALIES AND GESTATIONAL AGE, NSW & ACT 2004

Congenital anomaly					Ge	stational	age (wee	eks)						
	2	3–27	28	8–31	32	2–36	37	7–41		42+	Т	OTAL		
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%		
None 233 88.6 590 91.0 631 82.7 343 62.0 3 75.0 1800 80.7														
Minor 5 1.9 11 1.7 15 2.0 13 2.4 0 0.0 44 2.0														
Major	25	9.5	47	7.3	117	15.3	197	35.6	1	25.0	387	17.3		
TOTAL 263 100.0 648 100.0 763 100.0 553 100.0 4 100.0 2231 100.0														
Source: NICUS Data Collection	ction. NSW	Centre for	Perinatal	Health Sei	rvices Re	search.								

(Continued from page 62)

The overall proportion of infants born following a multiple pregnancy was 21.4 per cent in 2004 (range 14.5 per cent in 1993 to 22.4 per cent in 2001). In 2004, most of the infants (78.7 per cent) were from a singleton pregnancy, 18.8 per cent were from a twin pregnancy, 2.4 per cent were from a triplet pregnancy and 0.2 per cent were from a quadruplet pregnancy. The higher than expected rate of multiple births among the 2004 NICUS cohort reflects the high proportion of multiple pregnancies resulting in preterm birth with 27.4 per cent of infants less than 37 weeks gestation (Table 87). Multiple births represented 3.1 per cent of all NSW–ACT livebirths in 2004.

Table 88 shows the median, 25th and 75th percentiles for one and 5 minute Apgar scores according to gestational age groups. For infants 32–42 weeks gestational age, the median one-minute Apgar score was 8. The median 5 minute score was 9 for infants 28–42 weeks gestational age. The proportion of infants with a one-minute Apgar score of 0–4 has decreased from 38.7 per cent in 1992 to 23.8 per cent in 2004. Similarly the proportion of infants with a 5 minute Apgar score of 0–4 has decreased from 10.8 per cent in 1992 to 6.1 per cent in 2004 (Table 89).

Infants with major congenital anomalies (n=387) were excluded from the analysis of morbidity and mortality.

The majority of infants without a major congenital anomaly (1,621/1,844; 87.9 per cent) in the 2004 NICUS cohort received assisted ventilation (intermittent mandatory ventilation and/or continuous positive airways pressure) (Table 90).

The main indication for assisted ventilation for most

infants was respiratory distress syndrome (Figure 8). The main indication for assisted ventilation varied with gestational age. Respiratory distress syndrome, immature lung, and transient tachypnoea were more common in the preterm groups, whereas perinatal asphyxia, meconium aspiration, pulmonary hypertension and apnoea were more common in term infants (Figure 8, Table 91).

The overall proportion of ventilated infants who received surfactant was 38.6 in 2004 (range 33.8 per cent in 1992 to 51.8 per cent in 1998) (Table 92). In 2004, 54.9 per cent of the infants who received surfactant were less than 32 weeks gestational age. The majority (56.2 per cent) of ventilated infants with a diagnosis of respiratory distress syndrome received surfactant.

Proven systemic infection has decreased from 21.5 per cent in 1992 to 9.8 per cent of infants in 2004. Infection was most common among infants less than 28 weeks gestation (37.4 per cent) (Table 93).

Overall, the incidence of treated patent ductus arteriosus (PDA) was 15.9 per cent in 2004 (range 10.7 in 1994 to 15.9 per cent in 2004). In 2004, 93.2 per cent of the infants treated for PDA were less than 32 weeks gestational age (Table 94). The majority of infants with a PDA requiring treatment received indomethacin only (14.3 per cent). Surgical treatment of PDA was predominantly performed on infants less than 28 weeks gestation (7.9 per cent). Some infants (7.1 per cent) were treated with both indomethacin and surgery.

Continued on page 70

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NICUS REGISTRA	NTS BY PLURA	LITY AND	GESTA	TIONAL A	AGE, NS	W & ACT	2004					
Plurality						Gestatio	nal age	(weeks)				
	2	3–27	2	8–31	;	32-36	37	7–41	4	42+	TO	DTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Singleton	186	70.7	446	68.8	584	76.5	535	96.7	4	100.0	1755	78.7
Twins	65	24.7	178	27.5	158	20.7	18	3.3	0	0.0	419	18.8
Triplets	12	4.6	24	3.7	17	2.2	0	0.0	0	0.0	53	2.4
Quads	0	0.0	0	0.0	4	0.5	0	0.0	0	0.0	4	0.2
TOTAL	263	100.0	648	100.0	763	100.0	553	100.0	4	100.0	2231	100.0

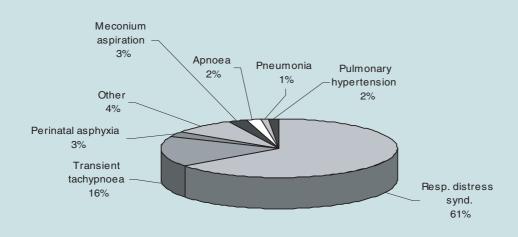
TABLE 88								
NICUS REGISTRANTS BY	APGAR SCORE	AND GESTATIO	NAL AGE, N	SW & ACT 200	4			
Apgar score				Gestational	age (weeks)			
	23	3–27	28	3–31	32	-36	3	37+
	Median	(25%,75%)	Median	(25%,75%)	Median	(25%,75%)	Median	(25%,75%)
One-minute Apgar	5	(3,6)	7	(5,8)	8	(6,9)	7	(5,9)
Five-minute Apgar	7	(6,9)	9	(8,9)	9	(8,9)	9	(7,9)

Apgar score						of birth				
	No.	2000 %	No.	001 %	No.	002 %	No.	003 %	No.	004 %
	NO.	76	140.	76	NO.	76	NO.	76	NO.	76
ONE MINUTE										
0–4	509	25.4	516	25.7	474	23.6	475	22.5	530	23.8
5–7	746	37.2	744	37.0	691	34.3	750	35.5	733	32.9
8+	738	36.8	735	36.6	830	41.3	886	41.9	958	42.9
Not stated	14	0.7	15	0.7	17	0.8	2	0.1	10	0.4
TOTAL	2007	100.0	2010	100.0	2012	100.0	2113	100.0	2231	100.0
FIVE MINUTES										
0–4	154	7.7	143	7.1	139	6.9	110	5.2	135	6.1
5–7	399	19.9	425	21.1	394	19.6	382	18.1	436	19.5
8+	1441	71.8	1429	71.1	1467	72.9	1618	76.6	1652	74.0
Not stated	13	0.6	13	0.6	12	0.6	3	0.1	8	0.4
TOTAL	2007	100.0	2010	100.0	2012	100.0	2113	100.0	2231	100.0

Year	Assisted ventilation						nal age (w				
			2–27		28–31		2-36		37+		OTAL
		No.	%	No.	%	No.	%	No.	%	No.	%
2000	No	1	0.4	117	20.5	65	12.4	6	1.9	189	11.3
	Yes	261	99.6	455	79.5	461	87.6	304	98.1	1481	88.7
	TOTAL	262	100.0	572	100.0	526	100.0	310	100.0	1670	100.0
2001	No	2	0.7	126	20.7	61	11.6	3	1.1	192	11.4
	Yes	265	99.3	482	79.3	464	88.4	276	98.9	1487	88.6
	TOTAL	267	100.0	608	100.0	525	100.0	279	100.0	1679	100.0
2002	No	2	0.7	90	16.2	50	9.0	4	1.4	146	8.8
	Yes	266	99.3	464	83.8	504	91.0	284	98.6	1518	91.2
	TOTAL	268	100.0	554	100.0	554	100.0	288	100.0	1664	100.0
2003	No	1	0.4	104	17.9	97	15.8	75	20.1	277	15.4
	Yes	234	99.6	476	82.1	515	84.2	298	79.9	1523	84.6
	TOTAL	235	100.0	580	100.0	612	100.0	373	100.0	1800	100.0
2004	No	0	0.0	78	13.0	83	12.8	62	17.3	223	12.1
	Yes	238	100.0	523	87.0	563	87.2	297	82.7	1621	87.9
	TOTAL	238	100.0	601	100.0	646	100.0	359	100.0	1844	100.0

FIGURE 8

NICUS REGISTRANTS BY MAIN INDICATION FOR ASSISTED VENTILATION, NSW & ACT 2004*



Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies or not ventilated excluded.

TABLE 91

NICUS REGISTRANTS BY MAIN INDICATION FOR ASSISTED VENTILATION AND GESTATIONAL AGE, NSW & ACT 2004*

Indication					Gestation	al age (week	s)			
	2	23-27	:	28-31	3:	2–36	· 3	7+	TC	DTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
Transient tachypnoea of newborn	0	0.0	81	15.5	128	22.7	65	21.9	274	16.9
Hyaline membrane disease	225	94.5	394	75.3	366	65.0	60	20.2	1045	64.5
Meconium aspiration	0	0.0	0	0.0	2	0.4	40	13.5	42	2.6
Pneumonia	2	0.8	0	0.0	4	0.7	11	3.7	17	1.0
Pulmonary hypertension	1	0.4	0	0.0	4	0.7	19	6.4	24	1.5
Immature lung	1	0.4	8	1.5	1	0.2	0	0.0	10	0.6
Apnoea	0	0.0	10	1.9	10	1.8	11	3.7	31	1.9
Congenital anomaly	0	0.0	2	0.4	2	0.4	0	0.0	4	0.2
Other	9	3.8	23	4.4	39	6.9	49	16.5	120	7.4
Perinatal surgery	0	0.0	0	0.0	1	0.2	4	1.3	5	0.3
Newborn encephalopathy	0	0.0	3	0.6	5	0.9	38	12.8	46	2.8
Not stated	0	0.0	2	0.4	1	0.2	0	0.0	3	0.2
TOTAL	238	100.0	523	100.0	563	100.0	297	100.0	1621	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

Babies with major congenital anomalies or not ventilated excluded.

TABLE 92

NICUS REGISTRANTS BY SURFACTANT ADMINISTRATION AND GESTATIONAL AGE, NSW & ACT 2000-2004*

Year	Surfactant					tional age					
	administration	22	2–27		28–31	3	32–36		37+		OTAL
		No.	%	No.	%	No.	%	No.	%	No.	%
2000	No	59	22.6	255	56.0	282	61.2	255	83.9	851	57.5
	Yes	202	77.4	200	44.0	179	38.8	49	16.1	630	42.5
	TOTAL	261	100.0	455	100.0	461	100.0	304	100.0	1481	100.0
2001	No	56	21.1	275	57.1	325	70.0	221	80.1	877	59.0
	Yes	209	78.9	207	42.9	139	30.0	55	19.9	610	41.0
	TOTAL	265	100.0	482	100.0	464	100.0	276	100.0	1487	100.0
2002	No	66	24.8	276	59.5	366	72.6	241	84.9	949	62.5
	Yes	200	75.2	188	40.5	138	27.4	43	15.1	569	37.5
	TOTAL	266	100.0	464	100.0	504	100.0	284	100.0	1518	100.0
2003	No	45	19.2	257	54.0	353	68.5	239	80.2	894	58.7
	Yes	189	80.8	219	46.0	162	31.5	59	19.8	629	41.3
	TOTAL	234	100.0	476	100.0	515	100.0	298	100.0	1523	100.0
2004	No	42	17.6	301	57.6	406	72.1	247	83.2	996	61.4
	Yes	196	82.4	222	42.4	157	27.9	50	16.8	625	38.6
	TOTAL	238	100.0	523	100.0	563	100.0	297	100.0	1621	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies and babies not ventilated excluded.

TABLE 93

NICUS REGISTRANTS BY PROVEN SYSTEMIC INFECTION AND GESTATIONAL AGE, NSW & ACT 2004*

Infection				(Gestationa	ıl age (wee	ks)				
	23	3–27	2	8–31	3	2-36		37+	то	TAL	
	No.	%	No.	%	No.	%	No.	%	No.	%	
No	149	62.6	549	91.3	632	97.8	333	92.8	1663	90.2	
Yes	89	37.4	52	8.7	14	2.2	26	7.2	181	9.8	
TOTAL	238	100.0	601	100.0	646	100.0	359	100.0	1844	100.0	

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies excluded.

TABLE 94

NICUS REGISTRANTS BY TREATED PATENT DUCTUS ARTERIOSUS (PDA) AND GESTATIONAL AGE, NSW & ACT 2004*

PDA-Treatment for PDA				Gestational	age (weel	ks)			
	23	3–27	2	28–31		32–36	то	TAL	
	No.	%	No.	%	No.	%	No.	%	
No treated PDA	109	45.8	510	84.9	630	97.5	1249	84.1	
Indomethacin only	110	46.2	87	14.5	16	2.5	213	14.3	
Surgery only	2	0.8	2	0.3	0	0.0	4	0.3	
Indomethacin & surgery	17	7.1	2	0.3	0	0.0	19	1.3	
TOTAL	238	100.0	601	100.0	646	100.0	1485	100.0	

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies excluded.

Continued from page 66

Overall, the incidence of necrotising enterocolitis (NEC) was 2.4 per cent in 2004 (range 9.8 per cent in 1992 to 2.2 per cent in 2000). The diagnosis of NEC was made radiologically or at surgery in 50 per cent of infants and clinically in the remainder. NEC was more common at the lower gestational age groups and 89.1 per cent of the infants with NEC were born at less than 32 weeks gestation (Table 95).

The overall incidence of major surgery was 3.5 per cent in 2004 (range 7.7 per cent in 1992 to 3.1 per cent in 2000). In 2004, 75 per cent of the infants who required major surgery were less than 32 weeks gestation (Table 96). The most common surgical procedures amongst these infants were for patent ductus arteriosus and necrotising enterocolitis.

In 2004, the incidence of intraventricular haemorrhage (IVH) among preterm infants (less than 37 weeks gestational age) was 13.9 per cent (range 20.5 per cent in

1993 to 12.9 per cent in 2003). In 2004, confirmed IVH was most common among infants less than 28-weeks gestation (46.2 per cent); 38.5 per cent of these infants had severe IVH (grade 3 or 4). Four infants less than 32 weeks gestation with severe IVH required surgical drainage for post haemorrhagic hydrocephalus (4/53, 7.5 per cent). Of the surviving infants born before 32 weeks gestation, 95.8 per cent had a head ultrasound examination to detect IVH (Table 97).

The proportion of infants with severe grades (Grades 3, 4 or 5) of retinopathy of prematurity (ROP) was 2.8 per cent in 2004 (range 7.5 per cent in 1992 to 2.8 per cent in 2004). In 2004, 4 infants with Grade 3 ROP were 28-31 weeks gestation and 94.7 per cent of the infants less than 28 weeks gestation with severe ROP received either cryo- or laser therapy. Importantly, 25 per cent of surviving infants of 28–31 weeks gestational age did not have an eye examination recorded (Table 98).

Continued on page 72

TABLE 95				
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	ΙА	ы	_	yn.

NICUS REGISTRANTS BY NECROTISING ENTEROCOLITIS (NEC) AND GESTATIONAL AGE, NSW & ACT 2004*

NEC-Treatment for NEC						al age (weel				
	2	3–27	2	8–31	3:	2–36	3	37+	T	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
No NEC	217	91.2	581	96.7	643	99.5	357	99.4	1798	97.5
Clinical diagnosis	9	3.8	10	1.7	2	0.3	2	0.6	23	1.2
X-ray diagnosis	8	3.4	4	0.7	1	0.2	0	0.0	13	0.7
Surgery for NEC	4	1.7	6	1.0	0	0.0	0	0.0	10	0.5
TOTAL	238	100.0	601	100.0	646	100.0	359	100.0	1844	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies excluded.

TABLE 96

NICUS REGISTRANTS BY MAJOR SURGERY AND GESTATIONAL AGE, NSW & ACT 2004*

Major surgery	2.	3–27	2	8–31		age (weeks		37+	TO	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
No	212	89.1	579	96.3	640	99.1	349	97.2	1780	96.5
Yes	26	10.9	22	3.7	6	0.9	10	2.8	64	3.5
TOTAL	238	100.0	601	100.0	646	100.0	359	100.0	1844	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies excluded.

TABLE 97

NICUS REGISTRANTS BY INTRAVENTRICULAR HAEMORRHAGE (IVH) AND GESTATIONAL AGE, NSW & ACT 2004*

Head ultrasound	_				age (weeks)		_	
	2	3–27	2	8–31	;	32–36	T	OTAL
	No.	%	No.	%	No.	%	No.	%
No IVH	121	50.8	485	80.7	250	38.7	856	57.6
Grade 1	43	18.1	59	9.8	19	2.9	121	8.1
Grade 2	21	8.8	6	1.0	2	0.3	29	2.0
Grade 3	15	6.3	10	1.7	2	0.3	27	1.8
Grade 4	25	10.5	3	0.5	1	0.2	29	2.0
Hydrocephalus requiring drainage	3	1.3	1	0.2	2	0.3	6	0.4
Not examined & lived	0	0.0	35	5.8	370	57.3	405	27.3
Not examined & died	13	5.5	3	0.5	2	0.3	18	1.2
TOTAL	238	100.0	601	100.0	646	100.0	1485	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

Babies with major congenital anomalies excluded.

TABLE 98

NICUS REGISTRANTS BY RETINOPATHY OF PREMATURITY (ROP) AND GESTATIONAL AGE, NSW & ACT 2004*

Retinopathy of prematurity (ROP)			Gestationa	l age (weeks)			
, , , , , , , , , , , , , , , , , , , ,	2:	3–27		3–31 [°]	TOTAL		
	No.	%	No.	%	No.	%	
No ROP	83	34.9	402	66.9	485	57.8	
Grade 1	34	14.3	20	3.3	54	6.4	
Grade 2	44	18.5	10	1.7	54	6.4	
Grade 3	16	6.7	4	0.7	20	2.4	
Grade 5	3	1.3	0	0.0	3	0.4	
Treatment with cryo-laser therapy	18	7.6	2	0.3	20	2.4	
Not examined & lived	0	0	150	25.0	150	17.9	
Not examined & died	58	24.4	15	2.5	73	8.7	
TOTAL	238	100.0	601	100.0	839	100.0	

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

Babies with major congenital anomalies excluded.

(Continued from page 70)

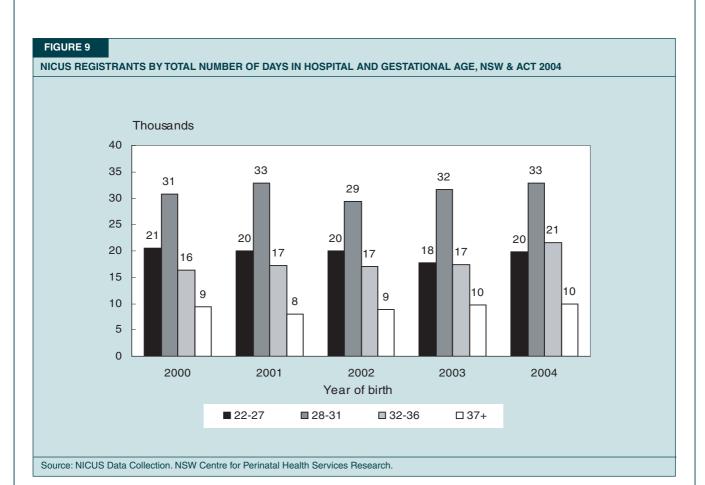
Service utilisation

Indicators of service utilisation collected as part of NICUS include length of stay in tertiary and non-tertiary centres, days on assisted ventilation, and days in oxygen (Figures 9, 10 and 11 and Table 99). On an individual basis, infants born at less than 28 weeks gestation consumed most resources. However, as a group those born at 28–31 weeks gestation consumed more bed days than any other group. In 2004, the total cohort used 62,852 bed days in a tertiary centre in NSW and the ACT (range 46,090 in 1993 to 62,852 in 2004); as well as 21,342 in a non-tertiary centre (level 2 neonatal unit) in NSW and the ACT (14,288 in

1992 to 21,342 in 2004). Even when these infants leave the neonatal intensive care unit, they still require substantial resources.

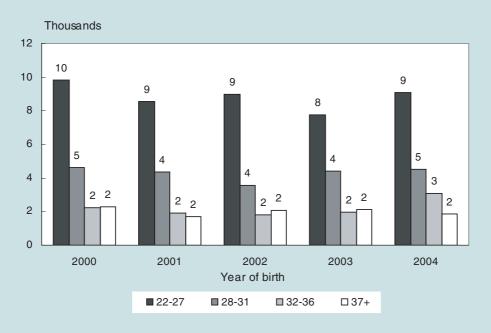
In 2004, NICUS registrants used 18,557 days of assisted ventilation (range 15,282 in 1993 to 18,557 in 2004) and 27,575 days of oxygen therapy (range 22,526 in 1992 to 30,802 in 2001). In 2004, 59 (3.2 per cent) infants were discharged home on oxygen therapy (range 2.1 per cent in 1992 to 5.1 per cent in 1998). The proportion of infants less than 28 weeks gestation discharged home on oxygen therapy was 18.5 per cent (range 7.5 per cent in 1992 to 21.3 per cent in 2002) (Table 100).

Continued on page 76





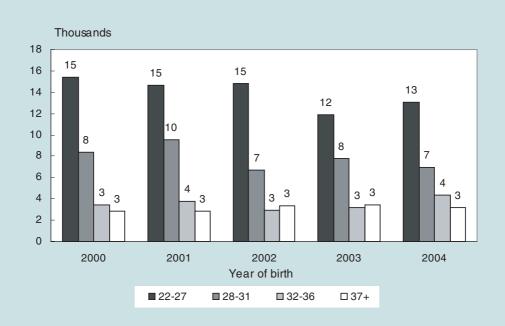
NICUS REGISTRANTS BY TOTAL NUMBER OF DAYS OF ASSISTED VENTILATION AND GESTATIONAL AGE, NSW & ACT 2004



Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

FIGURE 11

NICUS REGISTRANTS BY TOTAL NUMBER OF DAYS OF OXYGEN THERAPY AND GESTATIONAL AGE, NSW & ACT 2000-2004



Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 99
NICUS REGISTRANTS BY SERVICE UTILISATION INDICATORS AND GESTATIONAL AGE, NSW & ACT 2004

Indicators	23–27	28–31	Gestational age (week 32-36	(s) 37+	TOTAL
Non-tertiary hospital stay (days)					
Minimum	0	0	0	0	0
Maximum	95	99	160	336	336
Sum	2327	10552	6881	1582	21342
Median	0	16	4	0	1
25th percentile	0	0	0	0	0
75th percentile	14	29	16	3	17
Fertiary hospital stay (days)					
Minimum	0	0	0	0	0
Maximum	394	403	642	322	642
Sum	17525	22352	14639	8336	62852
Median	72	29	12	9	16
25th percentile	36	15	7	5	7
75th percentile	92	48	21	18	37
Total hospital stay (days)					
Minimum	0	1	1	1	0
Maximum	394	448	642	440	642
Sum	19852	32824	21498	9899	84073
Median	79	47	23	11	29
	60	38	16	6	0
25th percentile					
75th percentile	98	60	33	20	50
Mechanical ventilation (days)					
Minimum	0	0	0	0	0
Maximum	191	90	217	43	21
Sum	3415	1420	1461	1457	7753
Median	5	0	0	1	1
		0		0	0
25th percentile	1		0		
75th percentile	18	1	1	3	3
Continuous Positive Airways Pressure (days					
Minimum	0	0	0	0	0
Maximum	155	83	132	35	155
Sum	5675	3117	1601	411	10804
Median	19	2	1	0	1
	4	0		•	•
25th percentile	•		0	0	0
75th percentile	33	5	2	1	3
Assisted ventilation (days)					
Minimum	0	0	0	0	0
Maximum	345	164	315	56	345
Sum	9090	4537	3062	1868	18557
Median	31	3	2	2	2
	11	1	0	0	0
25th percentile		•		•	
75th percentile	50	8	4	4	6
Oxygen (days)					
Minimum	0	0	0	0	0
Maximum	274	193	317	245	317
Sum	13098	6960	4330	3187	27575
Median	35	2	2	2	3
25th percentile	7	1	1	1	1
75th percentile	80	9	5	7	8

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

TABLE 100

NICUS REGISTRANTS BY HOME OXYGEN ADMINISTRATION AND GESTATIONAL AGE, NSW & ACT 2000-2004*

Year	Home oxygen					Gestation	al age (wee	ks)			
	,,	2	2–27	2	8-31		32–36		37 +	TO	OTAL
		No.	%	No.	%	No.	%	No.	%	No.	%
2000	No	211	80.5	557	97.4	519	98.7	306	98.7	1593	95.4
	Yes	51	19.5	15	2.6	7	1.3	4	1.3	77	4.6
	TOTAL	262	100.0	572	100.0	526	100.0	310	100.0	1670	100.0
2001	No	217	81.3	579	95.2	524	99.8	276	98.9	1596	95.1
	Yes	50	18.7	29	4.8	1	0.2	3	1.1	83	4.9
	TOTAL	267	100.0	608	100.0	525	100.0	279	100.0	1679	100.0
2002	No	210	78.4	541	97.7	551	99.5	283	98.3	1585	95.3
	Yes	58	21.6	13	2.3	3	0.5	5	1.7	79	4.7
	TOTAL	268	100.0	554	100.0	554	100.0	288	100.0	1664	100.0
2003	No	200	85.1	556	95.9	610	99.7	371	99.5	1737	96.5
	Yes	35	14.9	24	4.1	2	0.3	2	0.5	63	3.5
	TOTAL	235	100.0	580	100.0	612	100.0	373	100.0	1800	100.0
2004	No	194	81.5	589	98.0	644	99.7	358	99.7	1785	96.8
	Yes	44	18.5	12	2.0	2	0.3	1	0.3	59	3.2
	TOTAL	238	100.0	601	100.0	646	100.0	359	100.0	1844	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

Babies with major congenital anomalies excluded.

(Continued from page 72)

Survival

Infants with a major congenital anomaly have been excluded from the analysis of survival, with the exception of data reported in Table 104.

The 6 month survival rate for all infants without a major congenital anomaly in the 2004 cohort was 94.4 per cent (range 87.8 per cent in 1992 to 94.4 per cent in 2004). Survival of infants born at less than 25 weeks gestation was 50 per cent (range 33.3 per cent in 2003 to 54.8 per cent in 1993). There was a trend for survival to improve with gestational age (Figure 12 and Table 101). There was no difference in the survival rate between term (94.4 per cent) and preterm infants (94.3 per cent). Among infants who died, 75 per cent of deaths occurred during the first week of life (range 62.5 per cent in 1998 to 76.2 per cent in 2002) with a further 18.3 per cent occurring during the first month of life (Table 101).

The 6 month survival rate improved with increasing birth weight, ranging from 30.4 per cent for infants in the 500–599 gram group to 91 per cent for the 900–999 gram group. Six-month survival continued to improve with increasing birth weight to a maximum of 98.3 per cent for infants of 2,000–2,499 grams birth weight and then decreased slightly (Table 102).

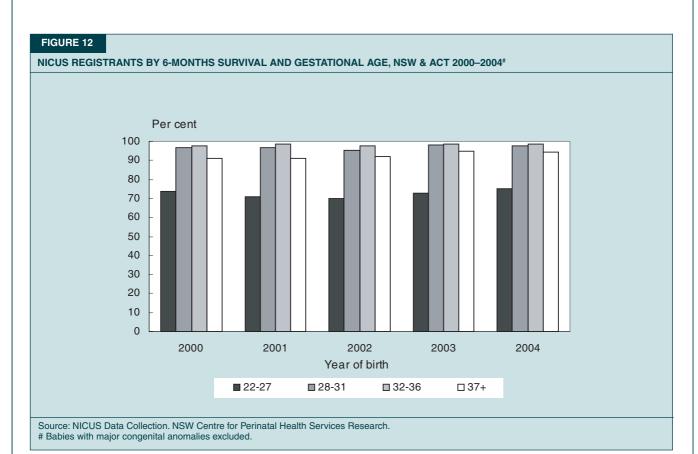
The majority of infants registered in NICUS were born at a tertiary centre. Although the gestational age is the most important risk factor for mortality, disease severity is also important. At each gestational age group those with severe disease are more likely to be transferred to a neonatal intensive care unit.

In 2004, place of birth did not significantly affect survival for infants in any of the gestational age groups (Table 103).

The 6 month survival rate was similar for males (94.8 per cent) and females (93.7 per cent) overall, and for all gestational age groups: less than 28 weeks (76 per cent versus 74.3 per cent); 28–31 weeks (97.2 per cent versus 97.8 per cent); 32–36 weeks (98.7 per cent versus 98 per cent); and 37–41 weeks gestation groups (95.2 per cent versus 93 per cent).

The 6 month survival rate was 93.8 per cent (n=1,410) for singleton infants and 96.3 per cent (n=434) for multiple gestation infants. Plurality did not influence survival in infants 28–36 weeks gestational age. In 2004 the survival rate for infants in the less than 28 week gestation group was higher for infants born of a multiple (58/73; 79.5 per cent) than a singleton pregnancy (121/165; 73.3 per cent); this was due to the high survival rate (31/33; 93.9 per cent) of infants born of multiple pregnancies at 27 weeks who accounted for almost half of the multiples in the 23–27 week gestational age group.

As expected the overall survival rate was generally lower (82.7 per cent) in the presence of a major congenital anomaly (Table 104).



Post-mortem examinations were performed on 31/104 infants (29.8 per cent) who died in the 2004 cohort (Figure 13 and Table 105). Post-mortem examinations were most commonly not requested for infants 23–27 weeks gestation (52.5 per cent). The highest rate of refusal was in the 32-36 week group (40 per cent) and the highest rate of post-mortems done was in the 28-31 week (46.7 per cent) and over 37 week group (45 per cent).

0.2

100.0

1844

Gestational age (weeks)	Ali	ve at 6				Age at de	eath (days)			
3, (),	me	onths		0–7	8-	-28		28+	TO	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
23	3	30.0	6	60.0	0	0.0	1	10.0	10	0.5
24	15	57.7	7	26.9	4	15.4	0	0.0	26	1.4
25	31	66.0	12	25.5	2	4.3	2	4.3	47	2.5
26	52	76.5	11	16.2	3	4.4	2	2.9	68	3.7
27	78	89.7	7	8.0	1	1.1	1	1.1	87	4.7
28	88	91.7	7	7.3	1	1.0	0	0.0	96	5.2
29	128	100.0	0	0.0	0	0.0	0	0.0	128	6.9
30	178	97.8	2	1.1	2	1.1	0	0.0	182	9.9
31	192	98.5	3	1.5	0	0.0	0	0.0	195	10.6
32	196	99.5	0	0.0	1	0.5	0	0.0	197	10.7
33	123	98.4	2	1.6	0	0.0	0	0.0	125	6.8
34	131	98.5	0	0.0	1	0.8	1	0.8	133	7.2
35	98	98.0	2	2.0	0	0.0	0	0.0	100	5.4
36	88	96.7	2	2.2	1	1.1	0	0.0	91	4.9
37	78	96.3	3	3.7	0	0.0	0	0.0	81	4.4
38	78	95.1	2	2.4	2	2.4	0	0.0	82	4.4
39	59	96.7	2	3.3	0	0.0	0	0.0	61	3.3
40	81	94.2	4	4.7	1	1.2	0	0.0	86	4.7
11	40	87.0	6	13.0	0	0.0	0	0.0	46	2.5
	_									

0.0

0

0.0

94.4 Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

100.0

0

78

0.0

# Dables	with major	congenital	anomanes	excluded.	

3

1740

42 TOTAL

Birth weight (grams)		e at 5				Age at de	eath (days)		_	
		onths %		0–7 %		-28		28+ %		OTAL
	No.	76	No.	70	No.	%	No.	70	No.	%
Less than 400		0	0.0 1	100.0	0	0.0	0	0.0	1	0.1
400-499	2	40.0	2	40.0	1	20.0	0	0.0	5	0.3
500-599	7	30.4	10	43.5	3	13.0	3	13.0	23	1.2
600-699	22	68.8	10	31.3	0	0.0	0	0.0	32	1.7
700–799	36	78.3	5	10.9	4	8.7	1	2.2	46	2.5
800-899	48	82.8	9	15.5	1	1.7	0	0.0	58	3.1
900–999	61	91.0	4	6.0	1	1.5	1	1.5	67	3.6
1,000–1,249	194	96.0	6	3.0	1	0.5	1	0.5	202	11.0
1,250-1,499	257	97.3	6	2.3	1	0.4	0	0.0	264	14.3
1,500-1,749	235	98.3	4	1.7	0	0.0	0	0.0	239	13.0
1,750,999	151	98.1	2	1.3	1	0.6	0	0.0	154	8.4
2,000–2,499	234	98.3	2	0.8	2	0.8	0	0.0	238	12.9
2,500–2,999	197	96.6	4	2.0	2	1.0	1	0.5	204	11.1
3,000–3,499	140	95.2	5	3.4	2	1.4	0	0.0	147	8.0
3,500–3,999	94	96.9	3	3.1	0	0.0	0	0.0	97	5.3
4,000+	62	92.5	5	7.5	0	0.0	0	0.0	67	3.6
TOTAL	1740	94.4	78	4.2	19	1.0	7	0.4	1844	100.0

Babies with major congenital anomalies excluded.

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NICUS REGISTRANTS BY DURATION OF SURVIVAL, PLACE OF BIRTH AND GESTATIONAL AGE, NSW & ACT 2004*

Gestational	Place of		ve at 6				Age at dea				
age (weeks)	birth		onths		– 7	8-			3+		OTAL
		No.	%	No. %	No.	%	No.	%	No.	%	
23–27	Non tertiary	22	78.6	6	21.4	0	0.0	0	0.0	28	11.8
	Tertiary	157	74.8	37	17.6	10	4.8	6	2.9	210	88.2
	Sub-total	179	75.2	43	18.1	10	4.2	6	2.5	238	100.0
28–31	Non tertiary	49	94.2	3	5.8	0	0.0	0	0.0	52	8.7
	Tertiary	531	97.8	9	1.7	3	0.6	0	0.0	543	91.3
	Sub-total	580	97.5	12	2.0	3	0.5	0	0.0	595	100.0
32–36	Non tertiary	169	97.1	2	1.1	2	1.1	1	0.6	174	27.0
	Tertiary	465	98.9	4	0.9	1	0.2	0	0.0	470	73.0
	Sub-total	634	98.4	6	0.9	3	0.5	1	0.2	644	100.0
37–41	Non tertiary	181	95.3	8	4.2	1	0.5	0	0.0	190	53.8
	Tertiary	152	93.3	9	5.5	2	1.2	0	0.0	163	46.2
	Sub-total	333	94.3	17	4.8	3	0.8	0	0.0	353	100.0
42+	Non tertiary	1	100.0	0	0.0	0	0.0	0	0.0	1	33.3
	Tertiary	2	100.0	0	0.0	0	0.0	0	0.0	2	66.7
	Sub-total	3	100.0	0	0.0	0	0.0	0	0.0	3	100.0
TOTAL		1729	94.3	78	4.3	19	1.0	7	0.4	1833	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies excluded. Babies born before arrival excluded.

TABLE 104

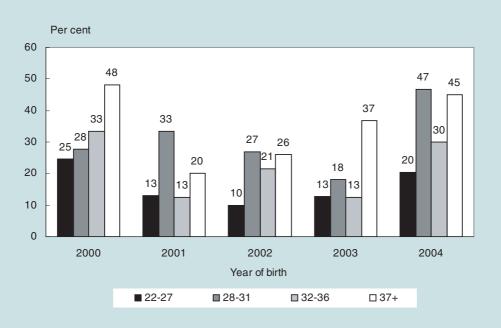
NICUS REGISTRANTS BY DURATION OF SURVIVAL, MAJOR CONGENITAL ANOMALY AND GESTATIONAL AGE, NSW & ACT 2004

Gestational	Major congenital		/e at 6	_	_			ath (days				
age (weeks)	anomaly		onths)–7	8-			8+		DTAL	
		No.	%	No.	%	No.	%	No.	%	No.	%	
23–27	No	79	75.2	43	18.1	10	4.2	6	2.5	238	90.5	
	Yes	19	76.0	2	8.0	0	0.0	4	16.0	25	9.5	
	Sub-total	198	75.3	45	17.1	10	3.8	10	3.8	263	100.0	
28–31	No	586	97.5	12	2.0	3	0.5	0	0.0	601	92.7	
	Yes	40	85.1	3	6.4	0	0.0	4	8.5	47	7.3	
	Sub-total	626	96.6	15	2.3	3	0.5	4	0.6	648	100.0	
32–36	No	636	98.5	6	0.9	3	0.5	1	0.2	646	84.7	
	Yes	89	76.1	17	14.5	5	4.3	6	5.1	117	15.3	
	Sub-total	725	95.1	23	3.0	8	1.0	7	0.9	763	100.0	
37–41	No	336	94.4	17	4.8	3	0.8	0	0.0	356	64.4	
	Yes	172	87.3	14	7.1	3	1.5	8	4.1	197	35.6	
	Sub-total	508	91.9	31	5.6	6	1.1	8	1.4	553	100.0	
42+	No	3	100.0	0	0.0	0	0.0	0	0.0	3	75.0	
	Yes	0	0.0	1	100.0	0	0.0	0	0.0	1	25.0	
	Sub-total	3	75.0	1	25.0	0	0.0	0	0.0	4	100.0	
TOTAL		2060	92.4	115	5.2	27	1.2	29	1.3	2231	100.0	

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

FIGURE 13

NICUS REGISTRANT DEATHS BY POST-MORTEM EXAMINATION AND GESTATIONAL AGE, NSW & ACT 2000-2004*



Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. # Babies with major congenital anomalies excluded.

TABLE 105

NICUS REGISTRANTS BY POST-MORTEM EXAMINATION AND GESTATIONAL AGE, NSW & ACT 2004*

Post-mortem					Gestationa	ıl age (week	s)			
	2	3–27	28	8–31	3	2-36		37+	TO	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%
Not requested	31	52.5	3	20.0	3	30.0	4	20.0	41	39.4
Refused	16	27.1	5	33.3	4	40.0	7	35.0	32	30.8
Done	12	20.3	7	46.7	3	30.0	9	45.0	31	29.8
TOTAL	59	100.0	15	100.0	10	100.0	20	100.0	104	100.0

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research.

Babies with major congenital anomalies excluded.

9. EXTREMELY PRE-TERM FOLLOW UP

This is the first time that follow up of infants 22–28 weeks gestation has been reported in the Mothers and Babies Report. The information presented in this chapter was obtained from the Neonatal Intensive Care Units' (NICUS) Follow-up Data Collection (see Chapter 3, Data sources).

Registration rate

All infants of 22–28 weeks gestation admitted to a neonatal intensive care unit in NSW or the ACT who survived to hospital discharge were enrolled in the follow up clinic at their registration hospital. Table 106 shows the health area of mother's residence at birth of the 1591 infants who were born between 1 January 1998 and 31 December 2001. The majority of liveborn infants were admitted to a neonatal intensive care unit in all aealth areas.

Overall 1,790/2,595 (69.0 per cent) infants were liveborn, 1,591/1,790 (88.9 per cent) were admitted to a neonatal intensive care unit, 1,236/1,591 (77.7 per cent) survived to hospital discharge, 22/1,236 (1.8 per cent) died post-

discharge (Table 107). Live births increased with increasing gestational age from 36.7 per cent at 22 weeks gestation to 88.2 per cent at 28 weeks gestation. Similarly admission to a neonatal intensive care unit increased from 3.5 per cent at 22 weeks gestation to 98.0 per cent at 28 weeks gestation. As expected hospital survival also increased with increasing gestational age from 0 per cent at 22 weeks gestation to 92.2 per cent at 28 weeks gestation.

The major causes of death for the children who died after hospital discharge were sudden infant death syndrome, chronic lung disease, pneumonia, suffocation by overlying and degenerative disease of the nervous system.

There were 1,214 children available for follow up at 2–3 years of age, corrected for prematurity, of these 249 children were not followed up (16 families moved overseas, 17 families moved interstate, and 216 were either lost to follow up or refused the appointment). The follow up rate at 2–3 years of age, corrected for prematurity was 965 (79.5 per cent) children.

TABLE 106 NICUS REGISTRATIONS BY HEALTH AREA OF RESIDENCE, NSW & ACT 1998–2001

Health Area		NICUS strants	Total NSW & ACT Live births	Registrants per 1,000 live births
	No.	%	No.	
Sydney South West	349	21.9	390	894.9
South Eastern Sydney & Illawarra	224	14.1	255	878.4
Sydney West	260	16.3	289	899.7
Northern Sydney & Central Coast	230	14.5	250	920.0
Hunter & New England	232	14.6	243	954.7
North Coast	36	2.3	59	610.2
Greater Southern	94	5.9	106	886.8
Greater Western	80	5.0	92	869.6
ACT	79	5.0	92	858.7
Interstate	5	0.4	12	416.7
Overseas	2	0.1	2	1000.0
TOTAL	1591	100.0	1790#	888.8

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. NSW Midwives Data Collection 1998–2001. Centre for Epidemiology and Research, NSW Department of Health. ACT Maternal Perinatal Data Collection 1998–2001, ACT Health. # Excludes 15 babies for whom the birth outcome was not known.

TABLE 107

BIRTHS BY NICUS REGISTRATION, HOSPITAL SURVIVAL AND GESTATIONAL AGE, NSW & ACT 1998-2001

Gestational age (weeks)	Total births		& ACT	Live	births		CUS trations		spital rvival		ied ischarge	Available 2–3 years	Refused/ Lost		essed ilable
	No.	No.	%	No.	%	No.	%	No.	%	No.	%	No.	No.	No.	%
22	313	198	63.3	115	36.7	4	3.5	0	0.0	0	0.0	0	0	0	0.0
23	271#	149	55.2	121	44.8	63	52.1	18	28.6	1	5.5	17	3	14	82.4
24	335	128	38.2	207	61.8	180	87.0	89	49.4	1	1.1	88	10	78	88.6
25	315	86	27.3	229	72.7	222	96.9	141	63.5	0	0.0	141	13	128	90.8
26	410#	94	23.0	315	77.0	322		254	78.9	9	3.5	245	44	201	82.0
27	423#	74	17.6	346	82.4	337	97.4	307	91.1	5	1.6	302	70	232	76.8
28	528#	61	11.8	457	88.2	463		427	92.2	6	1.4	421	109	312	74.1
TOTAL	2595	790#	30.6	1790#	69.4	1591	88.9	1236	77.7	22	1.8	1214	249	965	79.5

Source: NICUS Data Collection. NSW Centre for Perinatal Health Services Research. NSW Midwives Data Collection 1998–2001. Centre for Epidemiology and Research, NSW Department of Health. ACT Maternal Perinatal Data Collection 1998-2001, ACT Health. # Excludes 15 babies for whom the birth outcome was not known.

Assessment and tools

Children were assessed by the developmental assessment team (91 per cent) at the tertiary hospital in which they received their neonatal care or the closest tertiary hospital to their current place of residence. If the parents were unable to travel to a tertiary hospital then the local paediatrician (7 per cent) or general practitioner (2 per cent) examined the child. The median (25th, 75th) age of assessment was 35.6 (29.1, 36.9) months of age, corrected for prematurity.

A formal developmental assessment comprised hearing by an audiologist, vision by an ophthalmologist or optometrist, neurological examination by a developmental paediatrician or physiotherapist, and a developmental assessment using the Griffiths Mental Developmental Scales or Bayley Scales of Infant Development-II performed by a psychologist or a developmental paediatrician.

Developmental outcome

Of the 965 children with information at 2-3 years of age, corrected for prematurity, 912 (94.5 per cent) had a neurological examination performed. Of these 100 (11.0 per cent) had cerebral palsy. A further 57 (6.3 per cent) children had motor incoordination. The proportion of children with cerebral palsy (mild n=44, moderate n=25 or severe n=31) and motor incoordination decreased with increasing gestational age (Table 108).

Of the 965 children with information at 2–3 years of age, corrected for prematurity, 606 (62.8 per cent) had their eyes examined by an ophthalmologist or optometrist post discharge from hospital. Of these 7 (1.2 per cent) children were bilaterally blind with a visual acuity of less than 6/60 in the better eye. Another 87 children had visual problems including unilateral blindness, or required eye surgery, eye patching, eye drops or corrective lenses. The proportion of children who were blind or who were diagnosed with visual problems decreased with increasing gestational age (Table 109).

TABLE 108 NEUROLOGICAL STATUS AT 2-3 YEAR FOLLOW UP BY GESTATIONAL AGE, NSW & ACT 1998-2001 Gestational age **Neurological examination** Palsy (weeks) **Performed** Incoordination Infants No. 0/ % No. % No % No No. 23 14 100.0 7 50.0 5 35.7 2 14.3 100.0 14 24 98.7 60 9.1 10 13.0 78 100.0 77 77.9 25 125 97.7 93 74.4 13 10.4 19 15.2 128 100.0 26 193 96.0 158 82.3 10 5.2 25 13.0 201 100.0 27 191 87.2 9 4.1 19 232 219 94.4 8.7 100.0 28 91.0 13 4.6 25 8.8 312 100.0 284 246 86.6 TOTAL 912 94.5 755 100 11.0 100.0 Source: NICUS Follow-up Data Collection. NSW Centre for Perinatal Health Services Research.

VISUAL STATUS AT 2-3 Y	EAR FOLLOW UP	BY GESTATION	NAL AGE. NS	W & ACT 1998	3–2001			
Gestational age (weeks)	Visual ex	camination	Vi	sual blems#	Bil	ateral Blind		Fotal fants
,	No.	%	No.	%	No.	%	No.	%
23	13	92.9	5	38.5	2	15.4	14	100.0
24	67	85.9	14	20.9	1	1.5	78	100.0
25	105	82.0	24	22.9	1	1.0	128	100.0
26	139	69.2	16	11.5	0	0.0	201	100.0
27	94	40.5	13	13.8	0	0.0	232	100.0
28	204	65.4	15	7.4	3	1.5	312	100.0
TOTAL	606	62.8	87	14.4	7	1.2	965	100.0

Of the 965 children with information at 2–3 years of age, corrected for prematurity, 773 (80.1 per cent) had their hearing tested by an audiologist post discharge from hospital. Of these 40 (5.2 per cent) required bilateral hearing aids or unilateral/bilateral cochlear implants. Another 79 (10.2 per cent) children had hearing problems including unilateral deafness, high frequency deafness or insertion of grommets. The proportion of children who were deaf or had a hearing problem decreased with increasing gestational age (Table 110).

Of the 965 children with information at 2–3 years of age, corrected for prematurity, 809 (83.8 per cent) had a standardised psychological test performed. The majority of children, 609 (85.7 per cent) were assessed using the Griffiths Mental Development Scales, 17 (1.8 per cent) using the Bayley Scales of Development-II and 18 using the Reynell-Zinkin Scales for Visually Impaired

Children, Vineland Adaptive Behaviour Scales, Denver Developmental Scales. The proportion of children with a mild (n=99, 12.2 per cent), moderate (n=46, 5.7 per cent) or severe (n=41, 5.1 percent) developmental delay decreased with increasing gestational age (Table 111).

Table 112 shows the proportion of children with any degree of functional disability amongst children assessed at 2–3 years of age, corrected for prematurity. With increasing gestational age the proportion of children diagnosed with mild (n=114, 11.8 per cent), moderate (83, n=8.6 per cent) or severe (n=70, 7.2 per cent) functional disability decreased and concomitantly the proportion of children with no apparent disability increased.

TABLE 110

HEARING STATUS AT 2-3 YEAR FOLLOW UP BY GESTATIONAL AGE, NSW & ACT 1998-2001

Gestational age (weeks)	Hearing examination Performed			aring blems#		ateral ifness	Total Infants		
	No.	%	No.	%	No.	%	No.	%	
23	14	100.0	1	7.1	1	7.1	14	100.0	
24	66	84.6	9	13.6	9	13.6	78	100.0	
25	98	76.6	13	13.3	5	5.1	128	100.0	
26	169	84.1	21	12.4	13	7.7	201	100.0	
27	177	76.3	20	11.3	6	3.4	232	100.0	
28	249	79.8	17	6.8	6	2.4	312	100.0	
TOTAL	773	80.1	79	10.2	40	5.2	965	100.0	

Source: NICUS Follow-up Data Collection. NSW Centre for Perinatal Health Services Research.

Hearing problems include unilateral deafness, insertion of grommets, high frequency hearing loss, abnormal hearing test.

TABLE 111

DEVELOPMENTAL STATUS AT 2-3 YEAR FOLLOW UP BY GESTATIONAL AGE, NSW & ACT 1998-2001

Gestational age	Ps	ychologica	al assessm				Total					
	Perfo	ormed	Normal		Mild		Mod	lerate	Se	vere	Infants	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
23	12	85.7	6	50.0	2	16.7	3	25.0	1	8.3	14	100.0
24	66	84.6	40	60.6	11	16.7	7	10.6	8	12.1	78	100.0
25	115	89.8	74	64.3	18	15.7	7	6.1	16	13.9	128	100.0
26	167	83.1	132	79.0	17	10.2	13	7.8	5	3.0	201	100.0
27	193	83.2	154	79.8	25	13.0	8	4.1	6	3.1	232	100.0
28	256	82.1	217	84.8	26	10.2	8	3.1	5	2.0	312	100.0
TOTAL	809	83.8	623	77.0	99	12.2	46	5.7	41	5.1	965	100.0

Source: NICUS Follow-up Data Collection. NSW Centre for Perinatal Health Services Research.

Of the 965 children with information at 2-3 years of age, corrected for prematurity, 153 (15.9 per cent) had a moderate or severe functional disability due to cerebral palsy, bilateral blindness, deafness requiring bilateral hearing aids or unilateral/bilateral cochlear implants or developmental delay more than 2 standard deviations below the mean.

When children 23–28 weeks gestation were compared to a group of 460 randomly selected singleton term infants without a major congenital anomaly born during 1996 in NSW and assessed at 3 years of age using the same assessments methods, the extremely premature children were more likely to have had a mild (11.8 per cent versus 2 per cent), moderate (8.6 per cent versus 1 per cent) or severe (7.2 per cent versus 0.5 per cent) functional disability than the term control children. This represented an increased risk of mild (6 times higher), moderate (9 times higher)

or severe (14 times higher) functional disability in 23–28 week prematurely born children.

Weight for age

Of the children with a weight recorded 116 (13.4 per cent) were less than 3rd centile, 113 (13.1 per cent) were between the 3rd and 9th centile, 558 (64.5 per cent) were appropriately grown and 78 (9.0 per cent) had a weight above the 90th centile for sex and age (Table 113).

Reference

1. Vincent T, Bajuk B, Sutton L, Berry G, Henderson-Smart DJ. Study of antecedents and outcomes of severe morbidity in term neonates in New South Wales: A comparison of major disability at 1 and 3 years. *Proceedings of the 5th Annual Congress of the Perinatal Society of Australia and New Zealand.* Canberra, Australia. 2001: P139).

TABLE 112										
SEVERITY OF FUNC	TIONAL DIS	ABILITY AT	72-3 YEAF	RFOLLOW	UP BY GES	STATIONAL	AGE, NS	N & ACT 19	998–2001	
Gestational age	N.			Sev Mild		ctional disa				OTAL
(weeks)	No.	one %	No.	WIII a %	No.	werate	No.	evere %	No.	%
23	5	35.7	2	14.3	2	14.3	5	35.7	14	100.0
24	40	51.3	11	14.1	12	15.4	15	19.2	78	100.0
25	81	63.3	20	15.6	10	7.8	17	13.3	128	100.0
26	145	72.5	19	9.5	22	11.0	15	7.0	201	100.0
27	174	75.0	33	14.2	16	6.9	9	3.9	232	100.0
28	253	81.1	29	9.3	21	6.7	9	2.9	312	100.0
TOTAL	698	72.4	114	11.8	83	8.6	70	7.2	965	100.0

WEIGHT FOR AGE A	T 2–3 YEAR	FOLLOW U	IP BY GES	TATIONAL	AGE, NSW	& ACT 199	8–2001			
Gestational age (weeks)		<3		3–9		age centile -90		·90	,	TOTAL
(weeks)	No.	%	No.	%	No.	%	No.	%	No.	% with weight
23	1	8.3	1	8.3	8	66.7	2	16.7	12	85.7
24	10	15.2	17	25.8	36	54.6	3	4.6	66	84.6
25	23	19.8	18	15.5	66	56.9	9	7.8	116	90.6
26	32	17.4	30	16.3	105	57.1	17	9.2	184	91.5
27	19	9.4	23	11.4	146	72.3	14	6.9	202	87.1
28	31	10.9	24	8.4	197	69.1	33	11.6	285	91.3
TOTAL	116	13.4	113	13.1	558	64.5	78	9.0	865	89.6

10. BIRTH DEFECTS

Birth defects among stillborn and liveborn infants

A birth defect is any structural defect detected during pregnancy or at birth, excluding birth injuries and minor anomalies such as skin tags, positional talipes, birthmarks, or clicky hips. Descriptions of some common birth defects are shown in Appendix 1. A list of common exclusions is shown in Appendix 2.

From 1 January 1998, doctors, hospitals and laboratories are required to notify birth defects detected during pregnancy, at birth, or up to one year of life under the *NSW Public Health Act 1991*. Information reported is included in the NSW Birth Defects Register (BDR). The quality of information received by the BDR has improved since 1998, particularly in relation to pregnancy outcome.

This chapter reports birth defects detected during pregnancy or in the first year of life for 1998–2003 and birth defects detected during pregnancy or at birth for 2004.

Trends in reported birth defects

Between 1998 and 2004, the reported number of infants with birth defects has remained stable at just over 2 per cent (Table 114). In 2004, 997 cases of birth defects detected during pregnancy or at birth were reported.

Birth defects by diagnostic category

The most common categories of birth defects for births of more than 20 weeks gestation or with a birth weight greater

TABLE 1		0.0004#	
BIRTH DE	EFECT CASES, NSW 199	8-2004"	
Year	Birth defect cases	Births	Rate/1,000 births
1998	1941	85627	22.7
1999	1828	86468	21.1
2000	1858	87279	21.3
2001	1775	85285	20.8
2002	1739	85398	20.4
2003	1761	85853	20.5
2004	997	85016	11.7

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.
For 1998–2003, cases reported during pregnancy and up to one

For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

than 400 grams are presented in Table 115. Birth defects are classified using the British Paediatric Association (BPA) Classification of Diseases, which is primarily organised by body system. For infants with more than one defect, each defect is counted separately. The number of birth defects reported therefore exceeds the number of affected infants.

In 1998–2004, defects of the cardiovascular system were most commonly reported, followed by defects of the musculoskeletal system and defects of the genito-urinary system (Table 115). This is a similar pattern to previous years. In 2003, the overall rate of defects was lower than the previous 5 years (35.4 versus 38.1 per 1,000), due to a lower overall birth defect rate among infants.

Diagnostic category		No. defects				Rate/1,000 b	irths	
	1998–2002	2003	2004	1998–2004	1998–2002	2003	2004	1998–2004
Defects of nervous system								
Anencephaly	49	11	6	66	0.1	0.1	0.1	0.1
Spina Bifida	140	25	21	186	0.3	0.3	0.2	0.3
Encephalocele	27	6	6	39	0.1	0.1	0.1	0.1
Microcephaly	116	23	11	150	0.3	0.3	0.1	0.2
Congenital hydrocephalus	174	38	33	245	0.4	0.4	0.4	0.4
Other nervous system defects	366	58	41	465	0.9	0.7	0.5	0.8
TOTAL	872	161	118	1151	2.0	1.9	1.4	1.9
Defects of eye								
Anophthalmos-microphthalmos	55	11	15	81	0.1	0.1	0.2	0.1
Buphthalmos-congenital glaucoma	. 30	2	1	33	0.1	0.0	0.0	0.1
Congenital cataract	83	15	5	103	0.2	0.2	0.1	0.2
Other eye defects	176	27	23	226	0.4	0.3	0.3	0.4
TOTAL	344	55	44	443	0.8	0.6	0.5	0.7
Defects of ear, face and neck								
Absence-stricture auditory canal	56	9	7	72	0.1	0.1	0.1	0.1
Absent auricle	9	0	1	10	0.0	0.0	0.0	0.0
Defects of face and neck	43	9	8	60	0.1	0.1	0.1	0.1
Other ear defects	89	12	11	112	0.2	0.1	0.1	0.2
TOTAL	197	30	27	254	0.5	0.3	0.3	0.4
Defects of cardiovascular system								
Transposition of great vessels	210	52	26	288	0.5	0.6	0.3	0.5
Tetralogy of Fallot	148	35	16	199	0.3	0.4	0.2	0.3
Ventricular septal defect	902	160	102	1164	2.1	1.9	1.2	1.9
Atrial septal defect	834	157	79	1070	1.9	1.8	0.9	1.8

TABLE 115 (continued)

BIRTH DEFECTS AMONG STILLBIRTHS AND LIVE BIRTHS BY DIAGNOSTIC CATEGORY, NSW 1998-2004*

Diagnostic category	1998–2002	No. defects 2003	2004	1998–2004	1998–2002	Rate/1, 2003	,000 births 2004	1998–2004
Defects of cardiovascular system (co	ont.)							
Heart valve defects	640	106	60	806	1.5	1.2	0.7	1.3
Patent ductus arteriosus > 37 weeks	470	81	69	620	1.1	0.9	0.8	1.0
Coarctation of aorta	198	38	22	258	0.5	0.4	0.3	0.4
Other defects of aorta	111	27	16	154	0.3	0.3	0.2	0.3
Defects of pulmonary artery	144	27	15	186	0.3	0.3	0.2	0.3
Other cardiovascular defects	774	148	114	1036	1.8	1.7	1.3	1.7
TOTAL	4431	831	519	5781	10.3	9.7	6.1	9.6
Defects of respiratory system	4401	001	010	3701	10.0	5.7	0.1	3.0
Defects of respiratory system	77	9	8	94	0.2	0.1	0.1	0.2
Defects of larynx, trachea and bronch		9	4	63	0.1	0.1	0.0	0.1
Defects of lung	93	7	10	110	0.2	0.1	0.1	0.2
TOTAL	220	25	22	267	0.5	0.3	0.3	0.4
Defects of gastrointestinal system								
Cleft palate only	365	103	67	535	8.0	1.2	0.8	0.9
Cleft lip only	145	34	31	210	0.3	0.4	0.4	0.3
Cleft palate and cleft lip	235	46	40	321	0.5	0.5	0.5	0.5
Oesophageal atresia only	8	3	2	13	0.0	0.0	0.0	0.0
Oesophageal atresia with TOF	87	14	9	110	0.2	0.2	0.1	0.2
Tracheo-oesophageal fistula (TOF) or	nly 28	1	2	31	0.1	0.0	0.0	0.1
Atresia/stenosis of small intestine	142	22	8	172	0.3	0.3	0.1	0.3
Atresia/stenosis of anus	133	27	15	175	0.3	0.3	0.2	0.3
Other gastrointestinal defects	487	95	47	629	1.1	1.1	0.6	1.0
TOTAL	1630	345	221	2196	3.8	4.0	2.6	3.7
Defects of genitourinary system	.000	0.0		2.00	0.0		2.0	0
Defects of female genitals	46	11	15	72	0.1	0.1	0.2	0.1
Undescended testis	349	48	26	423	0.8	0.1	0.2	0.1
Hypospadias	886	170	121	1177	2.1	2.0	1.4	2.0
Epispadias	18	2	0	20	0.0	0.0		0.0
Chordee	133	32	12	177	0.3	0.4	0.1	0.3
Indeterminate sex-ambiguous genital		8	10	71	0.1	0.1	0.1	0.1
Renal agenesis-dysgenesis	215	31	30	276	0.5	0.4	0.4	0.5
Obstructive defects of renal pelvis and								
ureter	747	126	66	939	1.7	1.5	0.8	1.6
Other genito-urinary system defects	635	117	67	819	1.5	1.4	0.8	1.4
TOTAL	3082	545	347	3974	7.2	6.3	4.1	6.6
Defects of musculoskeletal system								
Congenital dislocation of the hips	668	146	55	869	1.6	1.7	0.6	1.4
Talipes equinovarus	294	78	42	414	0.7	0.9	0.5	0.7
Polydactyly	479	103	85	667	1.1	1.2	1.0	1.1
Syndactyly	114	17	18	149	0.3	0.2	0.2	0.2
Reduction deformities of limbs	256	34	36	326	0.6	0.4	0.4	0.5
Craniosynostosis	326	53	5	384	0.8	0.6	0.1	0.6
Diaphragmatic hernia	127	21	25	173	0.3	0.2	0.3	0.3
Exomphalos	72	14	14	100	0.2	0.2	0.2	0.2
Gastroschisis	94	16	14	124	0.2	0.2	0.2	0.2
Other musculoskeletal defects	919	132	108	1159	2.1	1.5	1.3	1.9
TOTAL	3349	614	402	4365	7.8	7.2	4.7	7.3
Defects of integumentary system	339	62	29	430	0.8	0.7	0.3	0.7
Cystic hygroma	53	8	6	67	0.1	0.1	0.1	0.1
Chromosomal defects								
Trisomy 21	513	103	79	695	1.2	1.2	0.9	1.2
Trisomy 13	35	7	7	49	0.1	0.1	0.1	0.1
Trisomy 18	91	19	13	123	0.2	0.2	0.2	0.2
Turner syndrome	68	13	6	87	0.2	0.2	0.1	0.1
Other chromosomal defects	278	66	34	378	0.6	0.8	0.4	0.6
TOTAL	985	208	139	1332	2.3	2.4	1.6	2.2
Situs inversus	20	12	3	35	0.0	0.1	0.0	0.1
Congenital malformation syndromes		38	31	264	0.5	0.4	0.4	0.4
Congenital cytomegalovirus infection		0	0.0	4	0.0	0	0.0	0.0
Congenital toxoplasmosis	1	0	0.0	1	0.0	0	0.0	0.0
Non-immune hydrops foetalis	126	19	20	165	0.3	0.2	0.2	0.3
Other and unspecified birth defects	550	87	15	652	1.3	1.0	0.2	1.1
and unoposition bit in defects	000		10	002	1.0	1.0	0.2	1.1

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.
For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

Infant characteristics

In the period 1998–2004, a single defect was reported in 63.8 per cent of infants, 2 defects in 18.7 per cent, 3 defects in 8.0 per cent, and 4 or more defects in 10.0 per cent of cases.

The sex was male in 58.1 per cent of infants, female in 41.4 per cent, indeterminate in 0.3 per cent of infants, and was not stated for 0.2 per cent.

Birth defects were more common in preterm and post-term infants than infants born at term (Table 116). Birth defects were also more common in infants born of a multiple

pregnancy than a singleton pregnancy: in 1998–2004, 2.0 per cent of singleton babies, 2.5 per cent of twins, and 4.2 per cent of triplets were born with a birth defect.

About 11 per cent of infants born with birth defects died in the perinatal period, over half of which were stillbirths (Table 117). These figures comprise all birth defect cases, including those where the cause of death may not be directly related to the birth defect(s). By comparison, the perinatal mortality rate among all births reported to the NSW Midwives Data Collection was less than one per cent in 2004 (see Chapter 4).

TABLE 116

BIRTH DEFECT CASES BY GESTATIONAL AGE, NSW 1998-2004#

Gestational age					Year				
(weeks)	1998–2002		:	2003		004	199	8-2004	
	No.	%	No.	%	No.	%	No.	%	Rate/1,000 births
20–27	552	6.0	131	7.4	94	9.4	777	6.5	186.8
28–31	275	3.0	50	2.8	37	3.7	362	3.0	81.3
32–36	1080	11.8	197	11.2	134	13.4	1411	11.9	41.3
37–41	6723	73.5	1229	69.8	713	71.5	8665	72.8	15.9
42 +	204	2.2	29	1.6	18	1.8	251	2.1	18.1
Not stated	307	3.4	125	7.1	1	0.1	433	3.6	_
TOTAL	9141	100.0	1761	100.0	997	100.0	11899	100.0	19.8

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.

For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

TABLE 117

BIRTH DEFECT CASES BY PREGNANCY OUTCOME, NSW 1998-2004*

Pregnancy outcome					Year				
	1998	3-2002	:	2003		2004		98-2004	
	No.	%	No.	%	No.	%	No.	%	
Stillbirth	541	5.9	121	6.9	104	10.4	766	6.4	
Liveborn-neonatal death	397	4.3	69	3.9	56	5.6	522	4.4	
Liveborn-postneonatal death	84	0.9	10	0.6	4	0.4	98	0.8	
Liveborn surviving	8119	88.8	1561	88.6	833	83.6	10513	88.4	
TOTAL	9141	100.0	1761	100.0	997	100.0	11899	100.0	

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.

For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported. Postneonatal deaths are likely to be under-reported.

Maternal characteristics

After 30 years of age, the incidence of birth defects increased with increasing maternal age (Table 118). While the rate of birth defects is higher in older women, the majority of births occur in younger women. In 1998–2004, 74.7 per cent of babies with birth defects were born to women aged less than 35 years.

In 1998–2004, 286 babies of Aboriginal or Torres Strait Islander mothers were reported to have birth defects. The rate of birth defects among these babies was 19.1 per 1,000 compared with 18.9 per 1,000 for non-Aboriginal mothers.

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BIRTH DEFECT CASES BY MATERNAL AGE, NSW 1998-2004*

Maternal age					Year				
(years)	199	8-2002	2	2003	20	004	199	8-2004	
,	No.	%	No.	%	No.	%	No.	%	Rate/1,000 births
Under 20	416	4.6	62	3.5	41	4.1	519	4.4	19.8
20–24	1360	14.9	228	12.9	151	15.1	1739	14.6	19.0
25–29	2643	28.9	404	22.9	261	26.2	3308	27.8	18.3
30–34	2514	27.5	487	27.7	323	32.4	3324	27.9	17.3
35–39	1328	14.5	255	14.5	172	17.3	1755	14.7	19.2
40–44	329	3.6	67	3.8	44	4.4	440	3.7	25.1
45+	20	0.2	3	0.2	4	0.4	27	0.2	34.1
Not stated	531	5.8	255	14.5	1	0.1	787	6.6	-
TOTAL	9141	100.0	1761	100.0	997	100.0	11899	100.0	19.8

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.

For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

Birth defects among terminations of pregnancy, spontaneous abortions and unknown outcomes of pregnancy

In the period 1998–2003, on average about 280 terminations of pregnancy per year were reported to the NSW Birth Defects Register (Table 119). To date, 172 terminations of pregnancy have been reported to the Register for 2004. This number is expected to increase as outcomes for mothers with defects detected during pregnancy in 2004 continue to be reported. Of the 1,852 terminations of pregnancy reported in 1998–2004, 1,372 (74.1 per cent)

were associated with a chromosomal abnormality, the most common of which was Trisomy 21 (Down syndrome), and 231 (12.5 per cent) were associated with a neural tube defect (Tables 119 and 120).

For spontaneous abortions, cytogenetic analysis is only carried out in cases of habitual abortion; the numbers presented, therefore, underestimate the number of spontaneous abortions that occur due to birth defects. Descriptions of some diagnostic terms used here are included in Appendix 1.

TABLE 119

PREGNANCIES WITH FETUSES AFFECTED BY BIRTH DEFECTS AND RESULTING IN SPONTANEOUS ABORTION, TERMINATION OF PREGNANCY OR UNKNOWN OUTCOME, NSW 1998–2004

Pregnancy outcome	1998 No.	1999 No.	2000 No.	2001 No.	Year 2002 No.	2003 No.	2004 No.	1998–2004 No.	
Spontaneous abortion Termination of pregnancy	84	119	124	171	202	232	280	1212	
less than 20 weeks gestation	254	310	262	257	285	312	172	1852	
Unknown outcome	13	16	22	19	7	18	_	95	
TOTAL	351	445	408	447	494	562	452	3159	

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.

TABLE 120

BIRTH DEFECTS AMONG SPONTANEOUS ABORTIONS, TERMINATIONS OF PREGNANCY AND UNKNOWN OUTCOME OF PREGNANCY BY DIAGNOSTIC CATEGORY, NSW 1998–2004

Diagnostic category	Spont. abortion	1998–2002 Termination of pregnancy less than 20 weeks gestation			Year 2003 Termination of pregnancy less than 20 weeks gestation		Spont. abortion	2004 Termination of pregnancy less than 20 weeks gestation	Spont. abortion		Unknown
	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.
Defects of nervous system Neural tube defects Other nervous system	8	183	3	0	29	0	1	19	9	231	3
defects TOTAL	4 12 0	142 325 2	6 9 0	1 1 0	12 41 1	0 0 0	1 2 0	19 38 0	6 15 0	173 404 3	6 9 0
Defects of eye	ŭ			_	•	ŭ			_		U
Defects of ear, face and ne	ck 0	11	1	1	1	0	0	2	1 14	1	
Defects of cardiovascular system	9	172	7	4	37	0	1	24	14	233	7
Defects of respiratory system	0	25	3	2	1	0	0	3	2	29	3
Defects of gastrointestinal system	3	110	4	5	25	0	2	23	10	158	4
Defects of musculoskeleta system	I 30	317	9	4	47	0	7	49	41	413	9
Defects of genitourinary system	8	153	6	3	28	0	2	27	13	208	6
Defects of integumentary system	1	2	0	0	0	0	1	0	22	0	
Cystic hygroma	7	84	0	2	30	3	6	20	15	134	3
Chromosomal defects	′	04	U	2	30	3	0	20	15	134	3
Trisomy 21	53	486	16	19	126	11	25	60	97	672	27
Trisomy 13	30	73	10	7	16	1	9	9	46	98	11
Trisomy 18	38	181	8	9	47	0	15	20	62	248	8
Turner syndrome Other chromosomal	65	77	2	26	23	0	33	13	124	113	2
defects TOTAL	494 680	195 1012	25 61	169 230	33 245	6 18	192 274	13 115	855 1184	241 1372	31 79
Situs inversus	0	5	0	0	0	0	0	0	0	5	0
Congenital malformation	0	3	0	0	U	0	0	0	U	3	0
syndromes	2	11	0	0	2	0	0	0	2	13	0
Non-immune hydrops foeta	alis 7	45	2	2	8	1	2	6	11	59	3
Other and unspecified birtl											
defects	3	36	3	2	3	0	0	6	5	45	3
TOTAL	762	2310	105	256	469	22	297	313	1315	3092	127

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.

Trends in selected birth defects

Trends in a selection of common birth defects are shown in Table 121 and Figures 14 to 17. For 1998–2003, malformations reported up to one year of age are included; for 2004, malformations reported during pregnancy or at birth are included.

The reported number of liveborn and stillborn infants with neural tube defects was 42 in 1998 and 39 in 2003, and 33 have been reported for 2004 to date. The number of reported terminations of pregnancy was 38 in 1998, 28 in 2003, and 19 in 2004 (Figure 14).

Over the period 1998–2004, the number of cases of isolated cleft palate ranged from 60 to 88 per year, and for total cleft lip (including cases of cleft lip and cleft palate) from 71 to 89 per year. Termination of pregnancy was usually associated with other defects such as neural tube defects, chromosomal abnormalities, or multiple abnormalities in addition to the cleft lip and/or cleft palate.

The reported number of liveborn and stillborn infants with chromosomal defects was 201 in 1998 and 207 in 2003, and the number of reported terminations of pregnancy associated with chromosomal defects rose from 156 in 1998 to 244 in 2003. The number of infants born with Down syndrome was 111 in 1998 and 102 in 2003, while the number of reported terminations of pregnancy associated with Down syndrome rose from 74 in 1998 to 125 in 2003.

In 1998, 19 liveborn infants and 2 stillborn infants had a diaphragmatic hernia, and there were 3 terminations of pregnancy for this condition. In 2003, there were 17 liveborn infants and 4 stillborn infants who had a diaphragmatic hernia, and there were no terminations of pregnancy (Figure 17).

TABLE 121

SELECTED BIRTH DEFECT CASES BY YEAR, NSW 1998-2004#

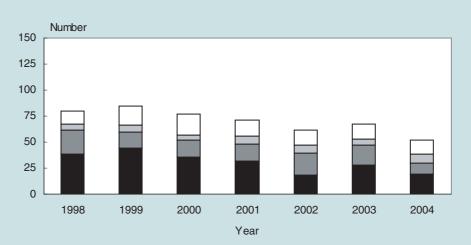
Birth defect						Ye	ar							
	199			999		2000		001		002		2003		004
	No.	Rate/ 1,000												
Neural tube defects	80	0.9	85	1.0	77	0.9	71	0.8	62	0.7	67	0.8	52	0.6
Anencephalus	34	0.4	24	0.3	29	0.3	25	0.3	20	0.2	18	0.2	15	0.2
Spina bifida	42	0.5	57	0.7	42	0.5	39	0.5	33	0.4	46	0.5	31	0.4
Encephalocele	10	0.1	8	0.1	13	0.1	8	0.1	10	0.1	7	0.1	6	0.1
Cleft palate	68	0.8	67	0.8	79	0.9	67	0.8	60	0.7	88	1.0	61	0.7
Total cleft lip	89	1.0	84	1.0	71	0.8	88	1.0	76	0.9	85	1.0	74	0.9
Hypospadias	191	2.2	199	2.3	191	2.2	173	2.0	133	1.6	171	2.0	121	1.4
Limb reduction defects	54	0.6	56	0.6	61	0.7	42	0.5	21	0.2	31	0.4	27	0.3
Chromosomal abnormalities	357	4.2	412	4.8	412	4.7	370	4.3	441	5.2	451	5.3	253	3.0
Down syndrome	185	2.2	199	2.3	214	2.5	180	2.1	221	2.6	227	2.6	139	1.6
Renal agenesis and dysgenesis	100	1.2	80	0.9	82	0.9	75	0.9	63	0.7	68	0.8	60	0.7
Exomphalos	25	0.3	17	0.2	28	0.3	22	0.3	22	0.3	20	0.2	24	0.3
Gastroschisis	18	0.2	18	0.2	20	0.2	23	0.3	18	0.2	19	0.2	15	0.2
Diaphragmatic hernia	24	0.3	41	0.5	22	0.3	28	0.3	23	0.3	21	0.2	25	0.3

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.

Includes terminations of pregnancy, stillbirths and livebirths. From 1 January 1998 birth defects became notifiable under the *NSW Public Health Act* 1991. This resulted in increased reporting of birth defects, particularly those associated with termination of pregnancy. For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

FIGURE 14

NEURAL TUBE DEFECTS: CASES BY YEAR AND PREGNANCY OUTCOME, NSW 1998-2004*

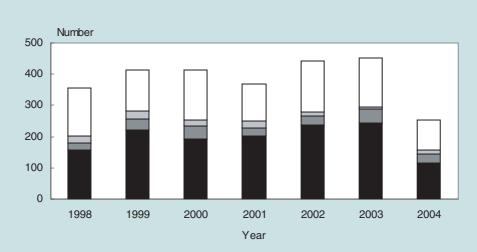


■ Termination of pregnancy ■ Stillbirth ■ Livebirth - neonatal death □ Liveborn surviving > 28 days

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.
For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

FIGURE 15

CHROMOSOMAL ABNORMALITIES: CASES BY YEAR AND PREGNANCY OUTCOME, NSW 1998-2004*

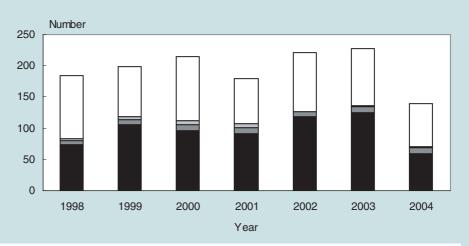


■ Termination of pregnancy ■ Stillbirth ■ Livebirth - neonatal death □ Liveborn surviving > 28 days

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.
For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

FIGURE 16

DOWN SYNDROME: CASES BY YEAR AND PREGNANCY OUTCOME, NSW 1998-2004*

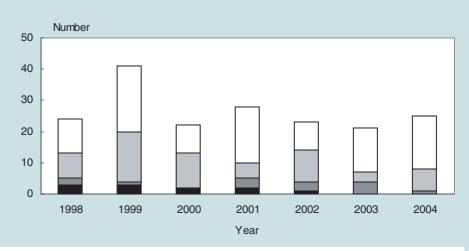


■ Termination of pregnancy ■ Stillbirth ■ Livebirth - neonatal death □ Liveborn surviving > 28 days

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.
For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

FIGURE 17

DIAPHRAGMATIC HERNIA: CASES BY YEAR AND PREGNANCY OUTCOME, NSW 1998-2004*



■ Termination of pregnancy ■ Stillbirth ■ Livebirth - neonatal death □ Liveborn surviving > 28 days

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.
For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

Birth defects by NSW health areas

Crude rates of reported birth defects for NSW health areas and rates standardised for maternal age are shown in Table 122. The denominator population includes livebirths and stillbirths among NSW residents as reported to the MDC. The rate of birth defects increases with increasing maternal age (Table 118). In order to allow direct comparison of geographic areas, rates have been standardised to the maternal age distribution of births in NSW in 1991.

Information shown in this table reflects the reporting practices of the various areas. From 1 January 1998 doctors, hospitals and laboratories are required to notify birth defects detected during pregnancy, at birth or up to one year of life under the *NSW Public Health Act 1991*. Thus, higher rates of reported birth defects may be expected from 1998 onwards compared to previous years.

In interpreting birth defect rates among NSW areas, it should also be noted that infants with birth defects who are born to mothers resident in areas close to interstate borders may be transferred interstate for care and therefore may not be reported to the BDR.

Over the period 1998–2004, standardised rates of reported birth defects were lowest in the Greater Southern Area and highest in the Hunter & New England Area. Review of cases showed slightly increased reported rates of a range of birth defects in the Hunter & New England Area compared to NSW overall including: unstable hips (but not dislocated hips), isolated atrial septal defect and ventricular septal defect, and first degree hypospadias. The range and pattern of these defects suggests that enumeration of less severe conditions is better in the Hunter & New England Health Area compared with NSW as a whole.

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BIRTH DEFECTS	IIV NSV	V HEALI	n AREAS,	1998–2	2004"								
Health Area	No.	1998–200 Crude rate per 1,000 births	O2 Standar- dised rate per 1,000 births	No.	2003 Crude rate per 1,000 births	Year Standar- dised rate per 1,000 births	No.	2004 Crude rate per 1,000 births	Standar- dised rate per 1,000 births	No.	Crude rate per 1,000 births	998–2004 Standar- dised rate per 1,000 births	99% confidence intervals
Sydney South													
West	2196	22.8	21.4	455	23.0	18.9	250	13.2	12.5	2901	21.5	19.8	18.8-20.9
South Eastern Sydney &													
Illawarra	1698	24.3	21.7	354	25.0	20.2	164	11.4	10.3	2216	22.5	19.9	18.6-21.1
Sydney West	1898	23.6	22.4	359	22.2	18.4	220	13.7	13.5	2477	22.0	20.6	19.5-21.7
Northern Sydney &													
Central Coast	1536	23.4	20.9	285	21.3	14.6	172	13.0	11.7	1993	21.6	18.8	17.4-20.2
Hunter &													
New England	1371	26.9	25.8	282	28.6	24.2	177	18.0	16.0	1830	25.9	24.2	22.7-25.8
North Coast	516	21.2	20.8	83	17.9	16.4	64	13.5	12.0	663	19.6	19.0	17.1-21.1
Greater Southern	388	17.7	16.4	72	18.5	15.3	46	11.8	11.5	506	17.0	15.7	13.8-17.6
Greater Western	428	20.6	19.6	78	19.7	18.9	61	15.9	15.6	567	19.8	19.0	16.9-21.2
TOTAL NSW	10031	23.3	21.8	1968	22.9	18.9	1154	13.6	12.8	13153	21.9	20.1	19.7-20.6

Source: NSW Birth Defects Register. Centre for Epidemiology and Research, NSW Department of Health.

[#] Cases exclude terminations of pregnancy, stillbirths and livebirths where the place of residence is unknown. For 1998–2003, cases reported during pregnancy and up to one year of age are included. For 2004, cases reported during pregnancy or at birth are reported.

11. NSW HOSPITALS

Onset and augmentation of labour in selected hospitals

Table 123 gives onset or augmentation of labour for individual hospitals where the number of reported deliveries exceeded 200 in 2004, totals for all hospitals within each health area, and the NSW total.

Health Area and Hospita		nacua	Snor	taneous	Snor				ugmen	tation		bour	Indu	and.	Indu	cod	Note	stated	TC	TAL
	Sponta	aneous	aug	mented h ARM	aug oxy	ntaneou gmenteo /tocics- ostagl.#	d -	Labou	oxyt	ocics- stagl.	- AI	ncea RM nly	ARI oxytoo prost	/I+ cics-	othe		NOT S	stated	IC	JIAL
	No.	%	No	. %	No.	_	No	. %	No.	%	No.	%	No.	%	No.	%	No	. %	No.	9
Sydney South West																				
Canterbury	833	57.5	0	0.0	159	11.0		10.4		20.2	10	0.7	0	0.0		0.1	0	0.0	1448	
Royal Prince Alfred	1982	49.3	0	0.0	618	15.4	581	14.4	750	18.6	48	1.2	38	0.9		0.1	0	0.0	4022	
Camden	299	65.4	58	12.7	8	1.8	6	1.3	30	6.6	21	4.6		7.7		0.0	0	0.0	457	
Fairfield	870	53.4	117	7.2	172	10.6	151	9.3	76	4.7	4	0.2	231 1			0.4	0	0.0	1628	
Liverpool	1431	47.0	221	7.3	352	11.6	363	11.9	265	8.7	33	1.1	342 1			1.2	0	0.0	3042	
Campbelltown	760	42.5 55.6	131 79	7.3 4.3	125 104	7.0 5.7	242 211	13.5 11.6	153 148	8.6 8.1	36 17	2.0	325 1		15	0.8	0	0.0	1787	
Bankstown–Lidcombe	1013	55.6	79	4.3	104	5.7	211	11.0	140	0.1	17	0.9	243 1	13.3	′	0.4	U	0.0	1822	100
Sydney Southwest Private	255	23.5	93	8.6	124	11.4	204	18.8	93	8.6	26	2.4	291 2	06.0	4	0.1	0	0.0	1087	100
Bowral	362	54.5	93	0.9	53	8.0	62	9.3	59	8.9	13	2.4	100 1			1.4	0	0.0	664	
ALL HOSPITALS	7805	48.9	705		1715	10.7	1971		1867		208	1.3	1605 1		81		0	0.0	15957	
			700	7.7	. 7 10	10.7	1071	12.4	1007	11.7	200	1.0	1000	0.1	O I	0.0	U	0.0	10001	100
South Eastern Sydney &	iliawa	rra																		
Royal Hospital	2024	EE 0	67	1.6	255	6.9	EOE	16.0	222	6.0	39	4.4	115 1	10.1	40	4.4	0	0.0	2677	100
for Women	2024 1293	55.0	57 84	3.8	255 203	9.2	595 223	16.2 10.1	222 195	8.8	24	1.1	445 1 176	7.9		1.1	0	0.0	3677 2216	
St. George		58.3		3.8		9.2 5.7			62	6.7	6	0.6				0.8	0	0.0		
Sutherland Hurstville Community	461 229	49.5 23.2	30 105	10.6	53 146	14.8	152 228	16.3 23.1	53	5.4	9	0.6	164 1 219 2			0.4	0	0.0	932 989	
Kareena Private	108	17.3	22	3.5	68	10.9		31.2	88	14.1	8	1.3	137 2			0.0	0	0.0	626	
St. George Private	455	27.9	159	9.8	197	12.1	365	22.4	184	11.3	34	2.1	217 1			1.1	0	0.0	1629	
Prince of Wales Private	409	26.9	199	13.1	142	9.3		26.2	120	7.9	42	2.8	201 1			0.5	1	0.0	1519	
Shoalhaven	526	59.4	22	2.5	29	3.3	160	18.1	65	7.3	13	1.5		7.2		0.7	0	0.0	885	
Wollongong	774	36.9	415	19.8	207	9.9	195	9.3	97	4.6	19	0.9	389 1			0.0	0	0.0	2097	
Illawarra Private	264	24.6	81	7.5	111	10.3	201	18.7	69	6.4	16	1.5	331 3			0.1	0	0.0	1074	
Other area hospitals	27	56.3	0	0.0	7	14.6	4	8.3	4	8.3	0	0.0		10.4		2.1	0	0.0		10
ALL HOSPITALS	6570		1174		1418	9.0	2716	17.3	1159	7.4	210			15.0		0.6	1	0.0	15692	
Sydney West																				
Auburn	691	62.8	37	3.4	79	7.2	102	9.3	61	5.5	5	0.5	119 1	10.8	7	0.6	0	0.0	1101	10
Blacktown	1411	56.3	85	3.4	201	8.0	253	10.1	149	6.0	15	0.6	380 1			0.4	0	0.0	2504	
Blue Mountains	155	62.5	9	3.6	15	6.0	20	8.1	11	4.4	11	4.4	26 1			0.4	0	0.0	248	
Nepean	1447	47.5	177	5.8	136	4.5	480	15.7	177	5.8	47	1.5	572 1			0.4	0	0.0	3049	
Westmead	1679	40.9	448	10.9	530	12.9	591	14.4	225	5.5	29	0.7	585 1		16		0	0.0	4103	
The Hills Private	336	26.7	105	8.3	158	12.5	181	14.4	78	6.2	17	1.4	383 3	30.4	1	0.1	0	0.0	1259	
Hawkesbury	448	56.9	17	2.2	30	3.8	120	15.2	62	7.9	17	2.2	90 1	11.4	3	0.4	0	0.0	787	10
Nepean Private	280	30.4	94	10.2	59	6.4	198	21.5	77	8.4	23	2.5	188 2	20.4	3	0.3	0	0.0	922	10
Westmead Private	507	30.0	206	12.2	231	13.7	248	14.7	181	10.7	19	1.1	295 1	17.5	1	0.1	0	0.0	1688	10
Other area hospitals	67	33.0	26	12.8	32	15.8	23	11.3	27	13.3	0	0.0	28 1	13.8	0	0.0	0	0.0	203	10
ALL HOSPITALS	7021	44.3	1204	7.6	1471	9.3	2216	14.0	1048	6.6	183	1.2	2666 1	16.8	55	0.3	0	0.0	15864	10
lorthern Sydney & Cent	ral Coa	ast																		
Gosford		37.4	315	14.3	275	12.5	305	13.9	174	7.9	8	0.4	299 1	13.6	0	0.0	0	0.0	2198	10
Wyong		67.3		22.5	11	4.0	2		1	0.4		1.1		4.0		0.0	0	0.0	275	
Hornsby	463	48.6	40	4.2	86	9.0		16.0	69	7.2	4	0.4	138 1			0.0	0	0.0	952	
Manly	343	50.2	9	1.3	55	8.1		13.3	71		13	1.9	101 1			0.0	0	0.0	683	
Mona Vale	310	50.9	24	3.9	88	14.4		10.7	31	5.1	4	0.7	87 1			0.0	0	0.0	609	
Royal North Shore	960	43.1	119	5.3	293	13.1	363	16.3	155	7.0	17	8.0	322 1	14.4	0	0.0	0	0.0	2229	
Ryde	185	70.1	- 11	4.2	14	5.3	26	9.8	6	2.3	0	0.0	22	8.3	0	0.0	0	0.0	264	
Mater, North Sydney	388	21.9	159	9.0		14.2		28.3	111	6.3		2.7	313 1			0.1	0	0.0	1771	10
North Shore Private	772	32.2	73	3.0	271	11.3	680	28.4	104	4.3	30	1.3	444 1	18.5	21	0.9	0	0.0	2395	10
Sydney Adventist	1087	49.2	0	0.0	3	0.1	446	20.2	126	5.7	24	1.1	520 2	23.5	4	0.2	0	0.0	2210	10
North Gosford Private	221	24.6	73	8.1	100	11.1	255	28.3	60	6.7	17	1.9	174 1	19.3	0	0.0	0	0.0	900	10
ALL HOSPITALS	5736	39.6	885	6.1	1117	10.0	2886	100	908	6.3	167	4.0	2431 1	0.01	00	0.2	0	0.0	14486	10

TABLE 123 (continued)

ONSET AND AUGMENTATION OF LABOUR BY HOSPITAL, NSW 2004*

Health Area and Hospit	al Sponta	aneous	aug	ntaneous mented h ARM	aug oxy	ntaneo gmente /tocics ostagl.	ous No ed s-	and a	r Ind	ntation duced tocics- ostagl.	Ind - A	bour uced RM nly	Indu AR oxyto pros	M+ cics-	oth		Not	stated	то	DTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Hunter & New England																				
Armidale	117	27.6	73	17.2	39	9.2	64	15.1	52	12.3	9	2.1	70	16.5	0	0.0	0	0.0	424	100.0
Inverell	32	13.8	26	11.2	46	19.8	48	20.7	26	11.2	7	3.0	47	20.3	0	0.0	0	0.0	232	100.0
Moree	84	41.4	16	7.9	19	9.4	19	9.4	17	8.4	1	0.5	47	23.2	0	0.0	0	0.0	203	100.0
Tamworth Base	251	37.0	103	15.2	48	7.1	86	12.7	64	9.4	13	1.9	113	16.7	0	0.0	0	0.0	678	100.0
Manning Base	256	37.3	72	10.5	54	7.9	93	13.5	53	7.7	26	3.8	133	19.4	0	0.0	0	0.0	687	100.0
Maitland	759	53.8	29	2.1	55	3.9	243	17.2	118	8.4	23	1.6	179	12.7	6	0.4	0	0.0	1412	100.0
Muswellbrook	113	50.7	21	9.4	- 11	4.9	11	4.9	26	11.7	8	3.6	33	14.8	0	0.0	0	0.0	223	100.0
Belmont	327	56.1	11	1.9	22	3.8	85	14.6	47	8.1	8	1.4	82	14.1	1	0.2	0	0.0	583	100.0
John Hunter	1457	50.2	214	7.4	184	6.3	366	12.6	155	5.3	71	2.4	421	14.5	32	1.1	0	0.0	2900	100.0
Christo Road Private	214	44.4	23	4.8	20	4.1	88	18.3	32	6.6	12	2.5	92	19.1	1	0.2	0	0.0	482	100.0
NIB Private	407	44.7	9	1.0	15	1.6	201	22.1	86	9.5	39	4.3	153	16.8	0	0.0	0	0.0	910	100.0
Other area hospitals	384	40.0	124	12.9	55	5.7	137	14.3	122	12.7	19	2.0	116	12.1	2	0.2	0	0.0	959	100.0
ALL HOSPITALS	4401	45.4	721	7.4	568	5.9	1441	14.9	798	8.2	236	2.4	1486	15.3	42	0.4	0	0.0	9693	100.0
North Coast																				
Coffs Harbour	300	39.8	88	11.7	64	8.5	133	17.7	47	6.2	7	0.9	113	15.0	- 1	0.1	0	0.0	753	100.0
Grafton Base	157	40.3	33	8.5	28	7.2	77	19.7	58	14.9	1	0.3	36	9.2	0	0.0	0	0.0	390	100.0
Kempsey	157	48.9	46	14.3	19	5.9	28	8.7	36	11.2	0	0.0	35	10.9	0	0.0	0	0.0	321	100.0
Lismore Base	526	44.5	119	10.1	102	8.6	158	13.4	99	8.4	32	2.7	146	12.4	0	0.0	0	0.0	1182	100.0
Murwillumbah	152	40.6	37	9.9	50	13.4	51	13.6	25	6.7	7	1.9	52	13.9	0	0.0	0	0.0	374	100.0
Tweed Heads	360	40.1	100	11.1	105	11.7	111	12.4	57	6.3	13	1.4	150	16.7	2	0.2	0	0.0	898	100.0
Port Macquarie Base	302	42.1	113	15.7	53	7.4	97	13.5	67	9.3	12	1.7	73	10.2	- 1	0.1	0	0.0	718	100.0
Other area hospitals	259	57.3	51	11.3	27	6.0	47	10.4	19	4.2	9	2.0	40	8.8	0	0.0	0	0.0	452	100.0
ALL HOSPITALS	2213	43.5	587	11.5	448	8.8	702	13.8	408	8.0	81	1.6	645	12.7	4	0.1	0	0.0	5088	100.0
Greater Southern																				
Cooma	113	54.9	9	4.4	19	9.2	19	9.2	23	11.2	2	1.0	21	10.2	0	0.0	0	0.0	206	100.0
Goulburn Base	141	50.0	29	10.3	54	19.1	41	14.5	14	5.0	1	0.4	2	0.7	0	0.0	0	0.0	282	100.0
Moruya	116	46.2	29	11.6	20	8.0	28	11.2	20	8.0	3	1.2	35	13.9	0	0.0	0	0.0	251	100.0
Queanbeyan	152	57.8	21	8.0	12	4.6	23	8.7	45	17.1	3	1.1	7	2.7	0	0.0	0	0.0	263	100.0
Griffith Base	227	52.8	43	10.0	18	4.2	62	14.4	47	10.9	14	3.3	18	4.2	- 1	0.2	0	0.0	430	100.0
Wagga Wagga Base	291	45.5	65	10.2	49	7.7	85	13.3	78	12.2	15	2.3	55	8.6	1	0.2	0	0.0	639	100.0
Calvary, Wagga Wagga	215	38.0	30	5.3	25	4.4	112	19.8	103	18.2	28	4.9	41	7.2	12	2.1	0	0.0	566	100.0
Other area hospitals	493	41.0	144	12.0	58	4.8	148	12.3	214	17.8	25	2.1	121	10.1	0	0.0	0	0.0	1203	100.0
ALL HOSPITALS	1748	45.5	370	9.6	255	6.6	518	13.5	544	14.2	91	2.4	300	7.8	14	0.4	0	0.0	3840	100.0
Greater Western																				
Dubbo Base	449	37.8	169	14.2	96	8.1	127	10.7	92	7.7	54	4.5	200	16.8	1	0.1	0	0.0	1188	100.0
Bathurst Base	307	54.5	61	10.8	19	3.4	77	13.7	64		6	1.1	29	5.2		0.0	0	0.0		100.0
Cowra	74	35.4	37		15	7.2	26	12.4	29	13.9	7	3.3	21	10.0		0.0	0	0.0		100.0
Orange Base	249	32.8	107	14.1	74	9.8	122	16.1	50	6.6	14	1.8		18.3		0.4	0	0.0		100.0
Broken Hill Base	170	66.1	12	4.7	22	8.6	25	9.7	20	7.8	1	0.4	7	2.7	0	0.0	0	0.0		100.0
Other area hospitals	302	50.3	57	9.5	32	5.3	103	17.2	62	10.3	9	1.5	35	5.8		0.0	0	0.0		100.0
ALL HOSPITALS	1551	43.4	443	12.4	258	7.2	480	13.4	317	8.9	91	2.5	431	12.1		0.1	0	0.0		100.0
Other-Not stated	92	98.9	1	1.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	93	100.0
TOTAL NSW	37137	44.1	6090	7.2	7580	9.0	12930	15.3	7049	8.4	1267	1.5	11912	14.1	322	0.4	1	0.0	84288	100.0

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.
May include artificial rupture of membranes.

^{###} This category includes other forms of induction such as Foley's catheter.

*King George and Royal North Shore Hospitals supply data electronically and report augmentation by oxytocin–prostaglandin only.

Type of delivery in selected hospitals

Table 124 gives type of delivery for individual hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each health area, and the NSW total.

Health Area and Hospi	ital						7	Type of	deliver	v						
	No	rmal ginal	For	ceps		cuum action	Vag bre	inal ech tion	Ele	ctive sarean ction#		rgency sarean	Not	stated	T	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West																
Canterbury	1012	69.9	13	0.9	118	8.1	3	0.2	151	10.4	151	10.4	0	0.0	1448	100.0
Royal Prince Alfred	2504	62.3	107	2.7	330	8.2	24	0.6	581	14.4	476	11.8	0	0.0	4022	100.0
Camden	409	89.5	13	2.8	7	1.5	1	0.2	6	1.3	21	4.6	0	0.0	457	100.0
Fairfield	1282	78.7	7	0.4	105	6.4	4	0.2	151	9.3	79	4.9	0	0.0	1628	100.0
Liverpool	2105	69.2	32	1.1	186	6.1	25	0.8	363	11.9	331	10.9	0	0.0	3042	100.
Campbelltown	1227	68.7	6	0.3	101	5.7	9	0.5	242	13.5	202	11.3	0	0.0	1787	100.
Bankstown/Lidcombe Sydney Southwest	1288	70.7	33	1.8	139	7.6	5	0.3	211	11.6	146	8.0	0	0.0	1822	100.
Private	606	55.7	27	2.5	149	13.7	2	0.2	204	18.8	99	9.1	0	0.0	1087	100.
Bowral	427	64.3	27	4.1	96	14.5	2	0.3	62	9.3	50	7.5	0	0.0	664	100.
ALL HOSPITALS	10860	68.1	265	1.7	1231	7.7	75	0.5	1971	12.4	1555	9.7	0	0.0	15957	100.
South Eastern Sydney Royal Hospital	& Illaw	arra														
for Women	2014	54.8	202	5.5	297	8.1	28	0.8	595	16.2	541	14.7	0	0.0	3677	100
St. George	1380	62.3	50	2.3	260	11.7	5	0.2	223	10.1	298	13.4	0	0.0	2216	100
Sutherland	595	63.8	25	2.7	62	6.7	2	0.2	152	16.3	96	10.3	0	0.0	932	100
Hurstville Community	443	44.8	33	3.3	121	12.2	0	0.0	228	23.1	164	16.6	0	0.09	89 100.	0
Kareena Private	242	38.7	85	13.6	30	4.8	1	0.2	195	31.2	73	11.7	0	0.0	626	100
St. George Private	784	48.1	77	4.7	158	9.7	0	0.0	365	22.4	245	15.0	0	0.0	1629	100
Prince of Wales Private	e 696	45.8	60	3.9	170	11.2	0	0.0	398	26.2	190	12.5	5	0.3	1519	100
Shoalhaven	564	63.7	43	4.9	23	2.6	2	0.2	160	18.1	93	10.5	0	0.0	885	100.
Wollongong	1425	68.0	21	1.0	179	8.5	6	0.3	195	9.3	271	12.9	0	0.0	2097	100.
Illawarra Private	587	54.7	13	1.2	165	15.4	1	0.1	201	18.7	107	10.0	0	0.0	1074	100
Other area hospitals	39	81.3	0	0.0	3	6.3	1	2.1	4	8.3	1	2.1	0	0.0	48	100
ALL HOSPITALS	8769	55.9	609	3.9	1468	9.4	46	0.3	2716	17.3	2079	13.2	5	0.0	15692	100
Sydney West																
Auburn	870	79.0	17	1.5	36	3.3	3	0.3	102	9.3	73	6.6	0	0.0	1101	100
Blacktown	1726	68.9	81	3.2	131	5.2	6	0.2	253	10.1	307	12.3	0	0.0	2504	100
Blue Mountains	192	77.4	2	0.8	9	3.6	0	0.0	20	8.1	25	10.1	0	0.0	248	100
Nepean	1954	64.1	56	1.8	127	4.2	12	0.4	480	15.7	420	13.8	0	0.0	3049	100
Westmead	2544	62.0	262	6.4	133	3.2	39	1.0	591	14.4	534	13.0	0	0.0	4103	100
The Hills Private	778	61.8	106	8.4	66	5.2	6	0.5	181	14.4	122	9.7	0	0.0	1259	100
Hawkesbury	515	65.4	34	4.3	21	2.7	2	0.3	120	15.2	95	12.1	0	0.0	787	100
Nepean Private	480	52.1	45	4.9	68	7.4	1	0.1	198	21.5	130	14.1	0	0.0	922	100
Westmead Private	884	52.4	181	10.7	133	7.9	4	0.2	248	14.7	238	14.1	0	0.0	1688	100
Other area hospitals	133	65.5	4	2.0	17	8.4	0	0.0	23	11.3	26	12.8	0	0.0	203	100
•	10076	63.5	788	5.0	741	4.7	73	0.5	2216	14.0	1970	12.4	0	0.0	15864	100
lorthern Sydney & Cei																
Gosford	1308	59.5	23	1.0	192	8.7	8	0.4	305	13.9	362	16.5	0	0.0	2198	100
Wyong	248	90.2	1	0.4	12	4.4	1	0.4	2	0.7	11	4.0	0	0.0		100
Hornsby	570	59.9	28	2.9	80	8.4	3	0.3	152	16.0	119	12.5	0	0.0		100
Manly	436	63.8	9	1.3	68	10.0	3	0.4	91	13.3	76	11.1	0	0.0		100
Mona Vale	370	60.8	17	2.8	78	12.8	3	0.5	65	10.7	76	12.5	0	0.0	609	100
Royal North Shore	1317	59.1	116	5.2	85	3.8	15	0.7	363	16.3	333	14.9	0	0.0	2229	100
Ryde	216	81.8	5	1.9	6	2.3	0	0.7	26	9.8	11	4.2	0	0.0	264	100
Mater, North Sydney	733	41.4	69	3.9	235	13.3	0	0.0	501	28.3	233	13.2	0	0.0	1771	100
North Shore Private	1051	43.9	74	3.1	241	10.1	5	0.0	680	28.4	344	14.4	0	0.0	2395	
Sydney Adventist			7 ()4	4 /				() '3	446							
Sydney Adventist North Gosford Private	1206 430	54.6 47.8	104 12	4.7 1.3	158 97	7.1 10.8	6 3	0.3	446 255	20.2 28.3	290 103	13.1 11.4	0	0.0		100

Health Area and Hosp									deliver		_					
		rmal ginal	Fore	ceps		action	bre	inal ech tion	caes	ctive sarean tion#		rgency sarean	Not s	stated	Т	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Hunter & New England	l															
Armidale	295	69.6	20	4.7	7	1.7	0	0.0	64	15.1	38	9.0	0	0.0	424	100.0
Inverell	150	64.7	23	9.9	0	0.0	1	0.4	48	20.7	10	4.3	0	0.0	232	100.0
Moree	141	69.5	9	4.4	6	3.0	1	0.5	19	9.4	27	13.3	0	0.0	203	100.0
Tamworth Base	455	67.1	14	2.1	40	5.9	5	0.7	86	12.7	78	11.5	0	0.0	678	100.0
Manning Base	466	67.8	2	0.3	48	7.0	8	1.2	93	13.5	70	10.2	0	0.0	687	100.0
Maitland	915	64.8	16	1.1	87	6.2	1	0.1	243	17.2	150	10.6	0	0.0	1412	100.0
Muswellbrook	177	79.4	1	0.4	13	5.8	2	0.9	11	4.9	19	8.5	0	0.0	223	100.0
Belmont	402	69.0	7	1.2	37	6.3	0	0.0	85	14.6	52	8.9	0	0.0	583	100.0
John Hunter	1959	67.6	73	2.5	156	5.4	26	0.9	366	12.6	320	11.0	0	0.0	2900	100.0
Christo Road Private	256	53.1	18	3.7	59	12.2	1	0.2	88	18.3	60	12.4	0	0.0	482	100.0
NIB Private	444	48.8	43	4.7	102	11.2	3	0.3	201	22.1	117	12.9	0	0.0	910	100.0
Other area hospitals	668	69.7	26	2.7	48	5.0	4	0.4	137	14.3	76	7.9	0	0.0	959	100.0
ALL HOSPITALS	6328	65.3	252	2.6	603	6.2	52	0.5	1441	14.9	1017	10.5	0	0.0	9693	100.0
North Coast																
Coffs Harbour	490	65.1	26	3.5	32	4.2	4	0.5	133	17.7	68	9.0	0	0.0	753	100.0
Grafton Base	221	56.7	14	3.6	14	3.6	0	0.0	77	19.7	64	16.4	0	0.0	390	100.0
Kempsey	259	80.7	3	0.9	7	2.2	3	0.9	28	8.7	21	6.5	0	0.0	321	100.0
Lismore Base	802	67.9	37	3.1	21	1.8	6	0.5	158	13.4	158	13.4	0	0.0	1182	100.0
Murwillumbah	213	57.0	6	1.6	31	8.3	0	0.0	51	13.6	73	19.5	0	0.0	374	100.0
Tweed Heads	637	70.9	8	0.9	42	4.7	6	0.7	111	12.4	94	10.5	0	0.0	898	100.0
Port Macquarie Base	450	62.7	34	4.7	39	5.4	3	0.4	97	13.5	95	13.2	0	0.0	718	100.0
Other area hospitals	356	78.8	13	2.9	27	6.0	2	0.4	47	10.4	7	1.5	0	0.0	452	100.0
ALL HOSPITALS	3428	67.4	141	2.8	213	4.2	24	0.5	702	13.8	580	11.4	0	0.0	5088	100.0
Greater Southern																
Cooma	152	73.8	1	0.5	7	3.4	0	0.0	19	9.2	27	13.1	0	0.0	206	100.0
Goulburn Base	163	57.8	27	9.6	20	7.1	0	0.0	41	14.5	31	11.0	0	0.0	282	100.0
Moruya	156	62.2	11	4.4	21	8.4	1	0.4	28	11.2	34	13.5	0	0.0	251	100.0
Queanbeyan	198	75.3	9	3.4	14	5.3	1	0.4	23	8.7	18	6.8	0	0.0	263	100.0
Griffith Base	280	65.1	23	5.3	15	3.5	1	0.2	62	14.4	49	11.4	0	0.0	430	100.0
Wagga Wagga Base	421	65.9	26	4.1	25	3.9	2	0.3	85	13.3	80	12.5	0	0.0	639	100.0
Calvary, Wagga Wagg		48.2	48	8.5	53	9.4	0	0.0	112	19.8	78	13.8	2	0.4	566	100.0
Other area hospitals	826	68.7	23	1.9	91	7.6	5	0.4	148	12.3	110	9.1	0	0.0	1203	100.0
ALL HOSPITALS	2469	64.3	168	4.4	246	6.4	10	0.3	518	13.5	427	11.1	2	0.1	3840	100.0
Greater Western	00	0						0.0	0.0				_	• • • • • • • • • • • • • • • • • • • •	55.0	.00.0
Dubbo Base	879	74.0	41	3.5	13	1.1	9	0.8	127	10.7	119	10.0	0	0.0	1188	100.0
Bathurst Base	365	64.8	20	3.5	25	4.4	2	0.8	77	13.7	74	13.1	0	0.0	563	100.0
Cowra	365 150	71.8	20	0.5	25 14	4.4 6.7	1	0.4	77 26	13.7	74 17	8.1	0	0.0	209	100.0
	476	62.8	12	1.6	63	6.7 8.3	3	0.5	122	16.1	17 82	10.8	0	0.0	758	100.0
Orange Base	476 182	70.8	12	0.4	63 7	8.3 2.7	3 1	0.4	25	9.7	82 41	16.0	0	0.0	758 257	100.0
Broken Hill Base	182 408	70.8 68.0	1 6	1.0	7 26	2.7 4.3	1 2	0.4	25 103	9.7 17.2	41 55	16.0 9.2	0	0.0		100.0
Other area hospitals	408	00.0	О	1.0	20	4.3	/	11.3	10.3	1//	ככ	47	()	()()	טטט	1111111

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13.4

0.0

388 10.9

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15.3 9974 11.8

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7 0.0 84288 100.0

0 0.0

0 0.0 93 100.0

3575 100.0

2.3

0.0

81

0

2460 68.8

91 97.8

52366 62.1 2762

ALL HOSPITALS

Other-Not stated

TOTAL NSW

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

148

0

4.1 18

3.3 5902 7.0 347 0.4 12930

2

0.0

Pain relief in selected hospitals

Table 125 gives type of pain relief provided to women for individual hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each health area and the NSW total. In addition

to the types of pain relief listed a further 23,695 (27.9 per cent) women were reported to have received local anaesthetic to the perineum, and 778 (0.9 per cent) received a pudendal block.

Health Area and Hospital						1	vpe of pain	relief						
	Ep	idural		neral sthetic		IM cotics	Nitr	rous	S	oinal		Nil	то	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West														
Canterbury	259	17.9	90	6.2	459	31.7	650	44.9	128	8.8	206	14.2	1448	100.0
Royal Prince Alfred	1337	33.2	210	5.2	1438	35.8	1455	36.2	403	10.0	465	11.6	4022	100.0
Camden	1	0.2	16	3.5	108	23.6	272	59.5	18	3.9	96	21.0	457	100.0
Fairfield	35	2.1	163	10.0	435	26.7	834	51.2	76	4.7	265	16.3	1628	100.0
Liverpool	521	17.1	205	6.7	1291	42.4	1290	42.4	402	13.2	269	8.8	3042	
Campbelltown	220	12.3	131	7.3	610	34.1	1014	56.7	289	16.2	196	11.0	1787	100.0
Bankstown-Lidcombe	150	8.2	92	5.0	365	20.0	1079	59.2	235	12.9	196	10.8	1822	
Sydney Southwest Private		31.0	50	4.6	390	35.9	648	59.6	94	8.6	43	4.0	1087	
Bowral	144	21.7	29	4.4	282	42.5	346	52.1	61	9.2	44	6.6		100.0
Other–Not stated	3004	18.8	986	6.2	5378	33.7	7588	47.6	1706	10.7	1780	11.2	15957	
			300	0.2	5576	00.7	7 300	47.0	1700	10.7	1700	11.2	10001	. 00.0
South Eastern Sydney & I				4.4	400	10.7	4077	00.0	000	17.4	000	10.4	0077	100
Royal Hospital for Womer		53.3	53	1.4	466	12.7	1077	29.3	638	17.4	383	10.4	3677	
St. George	603	27.2	105	4.7	423	19.1	1018	45.9	290	13.1	311	14.0	2216	
Sutherland	259	27.8	36	3.9	74	7.9	422	45.3	179	19.2	87	9.3	932	
Hurstville Community	619	62.6	36	3.6	77	7.8	311	31.4	98	9.9	49	5.0	989	
Kareena Private	420	67.1	17	2.7	22	3.5	139	22.2	95	15.2	11	1.8	626	
St. George Private	1092	67.0	50	3.1	104	6.4	674	41.4	102	6.3	43	2.6	1629	
Prince of Wales Private	1138	74.9	14	0.9	67	4.4	496	32.7	46	3.0	52	3.4	1519	100.
Shoalhaven	100	11.3	35	4.0	228	25.8	381	43.1	211	23.8	106	12.0	885	100.
Wollongong	382	18.2	120	5.7	466	22.2	1315	62.7	268	12.8	201	9.6	2097	100.
Illawarra Private	318	29.6	41	3.8	122	11.4	560	52.1	204	19.0	48	4.5	1074	100.
Other area hospitals	5	10.4			15	31.3	14	29.2	5	10.4	16	33.3	48	100.
Other-Not stated	6896	43.9	507	3.2	2064	13.2	6407	40.8	2136	13.6	1307	8.3	15692	100.
Sydney West														
Auburn	92	8.4	63	5.7	211	19.2	552	50.1	90	8.2	219	19.9	1101	100.
Blacktown	516	20.6	160	6.4	450	18.0	1311	52.4	297	11.9	315	12.6	2504	
Blue Mountains	28	11.3	8	3.2	55	22.2	107	43.1	32	12.9	45	18.1	248	
Nepean	715	23.5	281	9.2	841	27.6	1689	55.4	479	15.7	252	8.3	3049	
Westmead	1366	33.3	323	7.9	675	16.5	1848	45.0	586	14.3	322	7.8	4103	
The Hills Private	672	53.4	34	2.7	178	14.1	428	34.0	52	4.1	79	6.3	1259	
Hawkesbury	65	8.3	57	7.2	166	21.1	411	52.2	147	18.7	102	13.0	787	
Nepean Private	260	28.2	37	4.0	257	27.9	519	56.3	225	24.4	32	3.5	922	
Westmead Private	637	37.7	64	3.8	279	16.5	799	47.3	294	17.4	98	5.8	1688	
Other area hospitals	44	21.7	8	3.9	279 57	28.1	100	49.3	16	7.9	32	15.8	203	
Other–Not stated	4395	27.7	1035	6.5	3169	20.0	7764	48.9	2218	14.0	1496	9.4	15864	
			1033	0.5	3109	20.0	7704	40.9	2210	14.0	1490	9.4	13004	100.
Northern Sydney & Centra								40.0	480		4.0		0.400	
Gosford	427	19.4	119	5.4	671	30.5	929	42.3	472	21.5	48	2.2	2198	
Wyong			12	4.4	36	13.1	116	42.2	4	1.5	11	4.0	275	
Hornsby	380	39.9	52	5.5	205	21.5	455	47.8	69	7.2	65	6.8	952	
Manly	171	25.0	21	3.1	157	23.0	315	46.1	128	18.7	59	8.6	683	
Mona Vale	179	29.4	20	3.3	255	41.9	248	40.7	102	16.7	56	9.2	609	
Royal North Shore	700	31.4	55	2.5	455	20.4	1033	46.3	499	22.4	153	6.9	2229	100.
Ryde	20	7.6	10	3.8	41	15.5	134	50.8	27	10.2	54	20.5	264	100.
Mater, North Sydney	978	55.2	39	2.2	195	11.0	633	35.7	293	16.5	43	2.4	1771	100.
North Shore Private	1351	56.4	55	2.3	135	5.6	713	29.8	671	28.0	43	1.8	2395	100.
Sydney Adventist	1198	54.2	96	4.3	234	10.6	739	33.4	215	9.7	55	2.5	2210	100.
North Gosford Private	217	24.1	17	1.9	149	16.6	327	36.3	290	32.2	81	9.0	900	
	5621	38.8	496	3.4	2533	17.5		38.9			668	4.6	14486	

TABLE 125 (continued)

PAIN RELIEF BY HOSPITAL, NSW 2004*

Health Area and Hospita		idural		neral sthetic		T IM cotics		relief ous ide	Sp	oinal		Nil	TOTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No. %
Hunter & New England													
Armidale	29	6.8	35	8.3	99	23.3	197	46.5	52	12.3	33	7.8	424 100.0
Inverell	1	0.4	1	0.4	41	17.7	106	45.7	59	25.4	53	22.8	232 100.0
Moree	20	9.9	6	3.0	34	16.7	99	48.8	39	19.2	45	22.2	203 100.0
Tamworth Base	158	23.3	51	7.5	123	18.1	383	56.5	58	8.6	77	11.4	678 100.0
Manning Base	98	14.3	47	6.8	280	40.8	365	53.1	109	15.9	74	10.8	687 100.0
Maitland	90	6.4	61	4.3	376	26.6	745	52.8	331	23.4	164	11.6	1412 100.0
Muswellbrook	5	2.2	3	1.3	61	27.4	118	52.9	26	11.7	55	24.7	223 100.0
Belmont	29	5.0	39	6.7	205	35.2	310	53.2	106	18.2	78	13.4	583 100.0
John Hunter	524	18.1	221	7.6	687	23.7	1432	49.4	472	16.3	342	11.8	2900 100.0
Christo Road Private	128	26.6	10	2.1	75	15.6	192	39.8	116	24.1	44	9.1	482 100.0
NIB Private	268	29.5	23	2.5	126	13.8	303	33.3	240	26.4	97	10.7	910 100.0
Other area hospitals	97	10.1	54	5.6	201	21.0	502	52.3	132	13.8	161	16.8	959 100.0
Other–Not stated	1447	14.9	551	5.7	2308	23.8	4752	49.0	1740	18.0	1223	12.6	9693 100.0
North Coast													
Coffs Harbour	106	14.1	46	6.1	166	22.0	354	47.0	137	18.2	125	16.6	753 100.0
Grafton Base	110	28.2	45	11.5	79	20.3	183	46.9	42	10.8	55	14.1	390 100.0
Kempsey	61	19.0	7	2.2	126	39.3	181	56.4	19	5.9	58	18.1	321 100.0
Lismore Base	337	28.5	53	4.5	287	24.3	539	45.6	163	13.8	119	10.1	1182 100.0
Murwillumbah	41	11.0	35	9.4	117	31.3	168	44.9	84	22.5	57	15.2	374 100.0
Tweed Heads	128	14.3	38	4.2	272	30.3	477	53.1	144	16.0	122	13.6	898 100.0
Port Macquarie Base	126	17.5	30	4.2	177	24.7	383	53.3	130	18.1	103	14.3	718 100.0
Other area hospitals	36	8.0	5	1.1	65	14.4	178	39.4	36	8.0	170	37.6	452 100.0
Other–Not stated	945	18.6	259	5.1	1289	25.3	2463	48.4	755	14.8	809	15.9	5088 100.0
Greater Southern													
Cooma	41	19.9	3	1.5	1	0.5	119	57.8	26	12.6	34	16.5	206 100.0
Goulburn Base	83	29.4	27	9.6	51	18.1	148	52.5	5	1.8	29	10.3	282 100.0
Moruya	28	11.2	18	7.2	52	20.7	107	42.6	42	16.7	62	24.7	251 100.0
Queanbeyan	41	15.6	16	6.1	46	17.5	116	44.1	6	2.3	79	30.0	263 100.0
Griffith Base	41	9.5	10	2.3	187	43.5	236	54.9	93	21.6	49	11.4	430 100.0
Wagga Wagga Base	114	17.8	20	3.1	186	29.1	320	50.1	112	17.5	101	15.8	639 100.0
Calvary, Wagga Wagga	139	24.6	13	2.3	145	25.6	252	44.5	148	26.1	67	11.8	566 100.0
Other area hospitals	110	9.1	47	3.9	368	30.6	687	57.1	188	15.6	186	15.5	1203 100.0
Other–Not stated	597	15.5	154	4.0	1036	27.0	1985	51.7	620	16.1	607	15.8	3840 100.0
Greater Western													
Dubbo Base	178	15.0	96	8.1	384	32.3	679	57.2	105	8.8	161	13.6	1188 100.0
Bathurst Base	137	24.3	35	6.2	39	6.9	278	49.4	27	4.8	100	17.8	563 100.0
Cowra	6	2.9	6	2.9	48	23.0	128	61.2	35	16.7	34	16.3	209 100.0
Orange Base	182	24.0	35	4.6	137	18.1	399	52.6	87	11.5	127	16.8	758 100.0
Broken Hill Base	19	7.4	10	3.9	74	28.8	163	63.4	51	19.8	38	14.8	257 100.0
Other area hospitals	60	10.0	43	7.2	128	21.3	270	45.0	86	14.3	146	24.3	600 100.0
Other-Not stated	582	16.3	225	6.3	810	22.7	1917	53.6	391	10.9	606	17.0	3575 100.0
Other-Not stated	0	0.0	0	0.0	0	0.0	0	0.0.	0	0.0	88	94.6	93 100.0
TOTALS	23487	27.9	4213	5.0	18587	22.1	38518	45.7	12336	14.6	8584	10.2	84288100.00

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Perineal status in selected hospitals

Table 126 show the perineal status in vaginal births for individual hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each health area and the NSW total.

In addition to the perinatal outcomes described in the table there were a total of 88 cases of fourth degree tear reported in 2004.

Health Area and Hospital								Pe	rineal	status								
	Int	act		legree -graze		degree ear		or 4th ee tea		iotomy	tea	bined r and otomy	0	ther	Not	stated	T T	DTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West																		
Canterbury	284	24.8	408	35.6	307	26.8	30	2.6	94	8.2	1	0.1	22	1.9	0	0.0	1146	100.0
Royal Prince Alfred	473	16.0	1157	39.0	943	31.8	79	2.7	219	7.4	10	0.3	84	2.8	0	0.0	2965	100.0
Camden	138	32.1	164	38.1	66	15.3	2	0.5	23	5.3	1	0.2	36	8.4	0	0.0	430	100.0
Fairfield	401	28.7	328	23.5	326	23.3	32	2.3	229	16.4	0	0.0	82	5.9	0	0.0	1398	100.0
Liverpool	643	27.4	601	25.6	453	19.3	39	1.7	475	20.2	4	0.2	133	5.7	0	0.0	2348	100.0
Campbelltown	409	30.5	327	24.3	290	21.6	20	1.5	150	11.2	1	0.1	146	10.9	0	0.0	1343	100.0
Bankstown-Lidcombe	340	23.2	432	29.5	323	22.0	32	2.2	207	14.1	5	0.3	126	8.6	0	0.0	1465	100.0
Sydney Southwest																		
Private	162	20.7	175	22.3	164	20.9	9	1.1	253	32.3	10	1.3	11	1.4	0	0.0	784	100.0
Bowral	169	30.6	153	27.7	167	30.3	9	1.6	32	5.8	0	0.0	22	4.0	0	0.0	552	100.0
ALL HOSPITALS	3019	24.3		30.1	3039	24.4	252	2.0	1682	13.5	32	0.3	662	5.3	0		12431	
South Eastern Sydney &															Ī			
Royal Hospital for Wome		19.1	834	32.8	701	27.6	33	1.3	351	13.8	8	0.3	128	5.0	1	0.0	2541	100.0
		24.7	515	30.4	483	28.5	36	2.1	128	7.6		0.3		6.7	0	0.0		
St. George	418										2		113				1695	100.0
Sutherland	169	24.7	171	25.0	207	30.3	6	0.9	62	9.1	1	0.1	68	9.9	0	0.0	684	100.0
Hurstville Community	91	15.2	143	24.0	161	27.0	5	0.8	177	29.6	14	2.3	6	1.0	0	0.0	597	100.0
Kareena Private	85	23.7	78	21.8	100	27.9	3	0.8	77	21.5	11	3.1	4	1.1	0	0.0	358	100.0
St. George Private	209	20.5	207	20.3	342	33.6	17	1.7	164	16.1	29	2.8	51	5.0	0	0.0	1019	100.0
Prince of Wales Private	145	15.7	220	23.8	274	29.6	11	1.2	238	25.7	11	1.2	24	2.6	3	0.3	926	100.0
Shoalhaven	195	30.9	217	34.3	91	14.4	19	3.0	60	9.5	2	0.3	48	7.6	0	0.0	632	100.0
Wollongong	345	21.2	710	43.5	390	23.9	28	1.7	151	9.3	5	0.3	2	0.1	0	0.0	1631	100.0
Illawarra Private	185	24.2	107	14.0	227	29.6	7	0.9	216	28.2	12	1.6	12	1.6	0	0.0	766	100.0
Other area hospitals	27	62.8	7	16.3	4	9.3	0	0.0	4	9.3	0	0.0	1	2.3	0	0.0	43	100.0
ALL HOSPITALS	2354	21.6	3209	29.5	2980	27.4	165	1.5	1628	14.9	95	0.9	457	4.2	4	0.0	10892	100.0
Sydney West																		
Auburn	393	42.4	223	24.1	159	17.2	6	0.6	89	9.6	0	0.0	55	5.9	1	0.1	926	100.0
Blacktown	435	22.4	653	33.6	338	17.4	44	2.3	303	15.6	9	0.5	162	8.3	0	0.0	1944	100.0
Blue Mountains	66	32.5	56	27.6	52	25.6	4	2.0	9	4.4	0	0.0	16	7.9	0	0.0	203	100.0
Nepean	616	28.7	692	32.2	415	19.3	32	1.5	180	8.4	9	0.4	205	9.5	0	0.0	2149	100.0
Westmead	626	21.0	833	28.0	583	19.6	67	2.2	646	21.7	16	0.5	207	7.0	0	0.0	2978	100.0
The Hills Private	267	27.9	168	17.6	297	31.1	7	0.7	186	19.5	16	1.7	14	1.5	1	0.1	956	100.0
Hawkesbury	225	39.3	154	26.9	111	19.4	7	1.2	43	7.5	1	0.2	31	5.4	0	0.0	572	100.
Nepean Private	103	17.3	82	13.8	180	30.3	1	0.2	200	33.7	17	2.9	-11	1.9	0	0.0	594	100.
Westmead Private	245	20.4	251	20.9	284	23.6	9	0.7	390	32.4	14	1.2	9	0.7	0	0.0	1202	100.0
Other area hospitals	39	25.3	41	26.6	33	21.4	0	0.0	33	21.4	7	4.5	- 1	0.6	0	0.0	154	100.0
ALL HOSPITALS	3015	25.8	3153	27.0	2452	21.0	177	1.5	2079	17.8	89	0.8	711	6.1	2	0.0	11678	100.0
Northern Sydney & Centr	al Coa	et																
Gosford	577	37.7	415	27.1	487	31.8	30	2.0	9	0.6	12	0.8	1	0.1	0	0.0	153	100.0
Wyong	130	49.6	53	20.2	74	28.2	2	0.8	0	0.0	3	1.1	0	0.0	0	0.0	262	100.
Hornsby	117	17.2	152	22.3	261	38.3	20	2.9	59	8.7	3	0.4	69	10.1	0	0.0		100.0
	74	14.3	154	29.8	165	32.0	20	3.9	32	6.2	1	0.4	70	13.6		0.0		100.0
Manly Mona Vale	113	24.1	170	36.3	112	23.9	20 5	1.1	36	7.7	1	0.2	31	6.6	0	0.0		100.0
					524		41	2.7	189				158		0	0.0	1533	
Royal North Shore	234	15.3	384	25.0		34.2				12.3	3	0.2		10.3				
Ryde Motor North Sydnov	35	15.4	91	40.1	57	25.1	4	1.8	16	7.0	0	0.0	24	10.6	0	0.0		100.
Mater, North Sydney	160	15.4	216	20.8	285	27.5	8	0.8	304	29.3	30	2.9	34	3.3	0	0.0	1037	
North Shore Private	195	14.2	287	20.9	428	31.2	33	2.4	370	27.0	1	0.1	57	4.2	0	0.0		100.
Sydney Adventist	265	18.0	366	24.8	372	25.2	13	0.9	430	29.2	25	1.7	3	0.2	0	0.0	1474	
North Gosford Private	128	23.6	111	20.5	166	30.6	6	1.1	101	18.6	15	2.8	15	2.8	0	0.0		100.
ALL HOSPITALS	2028	21.0	2399	24.9	2931	30.4	182	1.9	1546	16.0	94	1.0	462	4.8	0	0.0	9642	100.

TARI	F 126	(continued	n

VAGINAL BIRTHS BY PERINEAL STATUS AND HOSPITAL, NSW 2004*

Health Area and Hospita		act		legree -graze		degree ear		Por 4th ee tea		status iotomy	tea	nbined r and iotomy		ther	Not	stated	і то	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Hunter & New England																		
Armidale	96	29.8	62	19.3	75	23.3	0	0.0	71	22.0	6	1.9	12	3.7	0	0.0	322	100.0
Inverell	62	35.6	46	26.4	11	6.3	2	1.1	50	28.7	1	0.6	2	1.1	0	0.0	174	100.0
Moree	67	42.7	37	23.6	34	21.7	2	1.3	6	3.8	7	4.5	4	2.5	0	0.0	157	100.0
Tamworth Base	148	28.8	197	38.3	107	20.8	3	0.6	40	7.8	5	1.0	14	2.7	0	0.0	514	100.0
Manning Base	237	45.2	145	27.7	85	16.2	4	0.8	19	3.6	8	1.5	26	5.0	0	0.0	524	100.0
Maitland	357	35.0	327	32.1	187	18.4	13	1.3	51	5.0	1	0.1	83	8.1	0	0.0	1019	100.0
Muswellbrook	84	43.5	45	23.3	42	21.8	2	1.0	12	6.2	5	2.6	3	1.6	0	0.0	193	100.0
Belmont	148	33.2	179	40.1	69	15.5	9	2.0	24	5.4	1	0.2	16	3.6	0	0.0	446	100.0
John Hunter	488	22.0	975	44.0	414	18.7	82	3.7	119	5.4	5	0.2	131	5.9	0	0.0	2214	100.0
Christo Road Private	94	28.1	54	16.2	120	35.9	6	1.8	57	17.1	0	0.0	3	0.9	0	0.0	334	100.0
NIB Private	161	27.2	108	18.2	198	33.4	11	1.9	102	17.2	3	0.5	9	1.5	0	0.0	592	100.0
Other area hospitals	296	39.7	182	24.4	161	21.6	4	0.5	84	11.3	12	1.6	7	0.9	0	0.0	746	100.0
ALL HOSPITALS	2238	30.9	2357	32.6	1503	20.8	138	1.9	635	8.8	54	0.7	310	4.3	0	0.0	7235	100.0
North Coast																		
Coffs Harbour	207	37.5	143	25.9	114	20.7	2	0.4	59	10.7	5	0.9	22	4.0	0	0.0	552	100.0
Grafton Base	113	45.4	57	22.9	38	15.3	2	0.8	28	11.2	7	2.8	4	1.6	0	0.0	249	100.0
Kempsey	143	52.6	64	23.5	50	18.4	3	1.1	10	3.7	1	0.4	1	0.4	0	0.0		100.0
Lismore Base	242	27.9	268	30.9	237	27.4	20	2.3	70	8.1	23	2.7	6	0.7	0	0.0	866	100.0
Murwillumbah	82	32.8	56	22.4	51	20.4	2	0.8	42	16.8	5	2.0	12	4.8	0	0.0	250	100.0
Tweed Heads	244	35.2	239	34.5	142	20.4	11	1.6	31	4.5	4	0.6	22	3.2	0	0.0	693	100.0
Port Macquarie	244	00.2	200	04.0	142	20.5		1.0	01	4.5	7	0.0	22	0.2	U	0.0	030	100.0
Base	192	36.5	93	17.7	138	26.2	2	0.4	68	12.9	12	2.3	21	4.0	0	0.0	526	100.0
Other area	132	30.3	90	17.7	100	20.2	_	0.4	00	12.5	12	2.0	21	4.0	U	0.0	320	100.0
hospitals	160	40.2	116	29.1	62	15.6	5	1.3	39	9.8	8	2.0	8	2.0	0	0.0	398	100.0
ALL HOSPITALS	1383	36.3	1036	27.2	832	21.9	47	1.2	347	9.1	65	1.7	96	2.5	0	0.0	3806	100.0
	1000	50.5	1000	21.2	002	21.3	47	1.2	047	3.1	03	1.7	30	2.5	U	0.0	3000	100.0
Greater Southern									_									
Cooma	83	51.9	34	21.3	37	23.1	0	0.0	5	3.1	0	0.0	1	0.6	0	0.0	160	100.0
Goulburn Base	60	28.6	18	8.6	39	18.6	2	1.0	79	37.6	7	3.3	5	2.4	0	0.0	210	100.0
Moruya	69	36.5	57	30.2	47	24.9	1	0.5	13	6.9	2	1.1	0	0.0	0	0.0	189	100.0
Queanbeyan	92	41.4	60	27.0	49	22.1	3	1.4	10	4.5	3	1.4	5	2.3	0	0.0		100.0
Griffith Base	135	42.3	115	36.1	34	10.7	3	0.9	25	7.8	4	1.3	3	0.9	0	0.0	319	100.0
Wagga Wagga Base	180	38.0	149	31.4	93	19.6	4	0.8	36	7.6	4	8.0	8	1.7	0	0.0	474	100.0
Calvary, Wagga Wagga	88	23.5	56	15.0	145	38.8	9	2.4	54	14.4	17	4.5	2	0.5	3	0.8	374	100.0
Other area hospitals	389	41.2	230	24.3	193	20.4	5	0.5	105	11.1	12	1.3	11	1.2	0	0.0	945	100.0
ALL HOSPITALS	1096	37.9	719	24.9	637	22.0	27	0.9	327	11.3	49	1.7	35	1.2	3	0.1	2893	100.0
Greater Western																		
Dubbo Base	278	29.5	349	37.0	160	17.0	10	1.1	116	12.3	16	1.7	13	1.4	0	0.0	942	100.0
Bathurst Base	140	34.0	127	30.8	88	21.4	2	0.5	38	9.2	6	1.5	11	2.7	0	0.0	412	100.0
Cowra	78	47.0	27	16.3	40	24.1	5	3.0	8	4.8	4	2.4	4	2.4	0	0.0	166	100.0
Orange Base	204	36.8	125	22.6	152	27.4	12	2.2	38	6.9	5	0.9	18	3.2	0	0.0	554	100.0
Broken Hill Base	106	55.5	42	22.0	35	18.3	0	0.0	6	3.1	1	0.5	1	0.5	0	0.0	191	100.0
Other area hospitals	183	41.4	115	26.0	87	19.7	10	2.3	37	8.4	5	1.1	5	1.1	0	0.0	442	100.0
ALL HOSPITALS	989	36.5	785	29.0	562	20.8	39	1.4	243	9.0	37	1.4	52	1.9	0	0.0	2707	100.0
Other-Not stated	49	52.7	24	25.8	16	17.2	0	0.0	0	0.0	0	0.0	1	1.1	3	3.2	93	100.0
TOTAL NSW	16171	26.3	17427	28.4	14952	24.4	1027	1.7	8487	13.8	515	0.8	2786	4.5	12	0.0	61377	100.0

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Birth weight in selected hospitals

Table 127 shows the birth weight of babies for individual hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each health area and the NSW total.

Health Area and Hospital			4.0				ght (grams		N			NTA 1
	Less 1,0			00– 199		199 199	2,5	600+	Not s	stated	10	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West												
Canterbury	6	0.4	1	0.1	61	4.2	1384	95.2	2	0.1	1454	100.0
Royal Prince Alfred	61	1.5	63	1.5	261	6.4	3716	90.5	5	0.1	4106	100.0
Camden	0	0.0	0	0.0	3	0.7	454	99.3	0	0.0	457	100.0
Fairfield	10	0.6	2	0.1	64	3.9	1558	95.2	2	0.1	1636	100.0
Liverpool	62	2.0	79	2.5	290	9.3	2684	86.1	2	0.1	3117	100.0
Campbelltown	8	0.4	5	0.3	102	5.6	1699	93.7	0	0.0	1814	100.0
Bankstown-Lidcombe	10	0.5	4	0.2	68	3.7	1753	95.5	0	0.0	1835	100.0
Sydney Southwest Private	4	0.4	3	0.3	44	4.0	1048	95.3	1	0.1	1100	100.0
Bowral	3	0.4	0	0.0	15	2.2	654	97.3	0	0.0	672	100.0
ALL HOSPITALS	164	1.0	157	1.0	908	5.6	14950	92.3	12	0.1	16191	100.0
South Eastern Sydney & Illaw	arra											
Royal Hospital for Women	64	1.7	58	1.5	221	5.9	3427	90.8	3	0.1	3773	100.0
St. George	11	0.5	6	0.3	99	4.4	2113	94.7	2	0.1	2231	100.0
Sutherland	0	0.0	2	0.2	33	3.5	905	96.1	2	0.2	942	100.0
Hurstville Community	2	0.2	0	0.0	36	3.6	961	96.1	1	0.1	1000	100.0
Kareena Private	2	0.3	1	0.2	24	3.8	608	95.7	0	0.0	635	100.0
St. George Private	1	0.1	0	0.0	56	3.4	1608	96.6	0	0.0	1665	100.0
Prince of Wales Private	0	0.0	2	0.1	43	2.8	1491	96.8	5	0.3	1541	100.0
Shoalhaven	6	0.7	1	0.1	47	5.2	842	94.0	0	0.0	896	100.0
Wollongong	9	0.4	7	0.3	133	6.2	1984	93.0	1	0.0	2134	100.0
Illawarra Private	0	0.0	1	0.1	26	2.4	1068	97.5	0	0.0	1095	100.0
Other area hospitals	0	0.0	0	0.0	0	0.0	47	97.9	1	2.1	48	100.0
ALL HOSPITALS	95	0.6	78	0.5	718	4.5	15054	94.3	15	0.1	15960	100.0
Sydney West												
Auburn	4	0.4	3	0.3	31	2.8	1067	96.6	0	0.0	1105	100.0
Blacktown	10	0.4	5	0.2	121	4.8	2396	94.6	1	0.0	2533	100.0
Blue Mountains	0	0.0	0	0.0	7	2.8	243	97.2	0	0.0	250	100.0
Nepean	34	1.1	33	1.1	220	7.1	2813	90.7	0	0.0	3100	100.0
Westmead	87	2.1	92	2.2	311	7.1	3746	88.4	2	0.0	4238	100.0
The Hills Private	4	0.3	1	0.1	48	3.7	1230	95.9	0	0.0	1283	100.0
Hawkesbury	3	0.3	1	0.1	23	2.9	766	96.6	0	0.0	793	100.0
Nepean Private	1	0.4	0	0.0	28 28	3.0	905	96.9	0	0.0	934	100.0
Westmead Private	4	0.1	1	0.0	∠6 58	3.4	1644	96.9	0	0.0	1707	100.0
Other area hospitals	0	0.2	0	0.1	58 8	3.4	195	96.3 96.1	0	0.0	203	100.0
ALL HOSPITALS	147	0.0	136	0.0	855	5.3	15005	96.1	3	0.0	16146	100.0
Northern Sydney & Central Co		0.5	100	0.0	000	5.5	10000	32.3	3	0.0	10140	100.0
Gosford Gosford	วสรเ 11	0.5	13	0.6	114	5.1	2083	93.8	0	0.0	2221	100.0
Wyong	0	0.0	2	0.0	8	2.9	267	96.4	0	0.0	277	100.0
Hornsby	2	0.0	1	0.7	21	2.2	936	97.5	0	0.0	960	100.0
Manly	1	0.2	2	0.1	26	3.8	664	95.8	0	0.0	693	100.0
Mona Vale	0	0.1	1	0.3	12	1.9	603	97.9	0	0.0	616	100.0
Royal North Shore	45	2.0	46	2.0	188	8.2	2016	97.9 87.8	2	0.0	2297	100.0
*					188				0			
Ryde	0	0.0	0	0.0	-	0.4	263	99.6		0.0	264	100.0
Mater, North Sydney	4	0.2	2	0.1	64	3.5	1733	96.1	0	0.0	1803	100.0
North Shore Private	13	0.5	5	0.2	86	3.5	2348	95.8	0	0.0	2452	100.0
Sydney Adventist	3	0.1	6	0.3	83	3.7	2150	95.9	0	0.0	2242	100.0
North Gosford Private	2	0.2	1	0.1	32	3.5	883	96.2	0	0.0	918	100.0
ALL HOSPITALS	81	0.5	79	0.5	635	4.3	13946	94.6	2	0.0	14743	100.0

TABLE 127 (continued)

BIRTHS BY BABY BIRTH WEIGHT AND HOSPITAL, NSW 2004*

Health Area and Hospital	Less			00– 199	1,5	irth wei 100– 199	ght (gram 2,5	is) 500+	Not s	stated	т	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Hunter & New England												
Armidale	2	0.5	1	0.2	26	6.0	402	93.3	0	0.0	431	100.0
Inverell	0	0.0	1	0.4	13	5.5	220	93.6	1	0.4	235	100.0
Moree	1	0.5	1	0.5	7	3.4	194	95.6	0	0.0	203	100.0
Tamworth Base	7	1.0	5	0.7	38	5.5	637	92.6	1	0.1	688	100.0
Manning Base	9	1.3	2	0.3	36	5.1	654	93.2	1	0.1	702	100.0
Maitland	1	0.1	1	0.1	83	5.8	1343	94.0	0	0.0	1428	100.0
Muswellbrook	0	0.0	1	0.4	9	4.0	216	95.6	0	0.0	226	100.0
Belmont	0	0.0	0	0.0	21	3.6	567	96.3	1	0.2	589	100.0
John Hunter	51	1.7	67	2.3	263	8.9	2581	87.1	2	0.1	2964	100.0
Christo Road Private	1	0.2	0	0.0	20	4.1	468	95.5	1	0.2	490	100.0
NIB Private	0	0.0	1	0.1	34	3.7	888	96.2	0	0.0	923	100.0
Other area hospitals	5	0.5	1	0.1	27	2.8	926	96.4	2	0.2	961	100.0
ALL HOSPITALS	77	0.8	81	0.8	577	5.9	9096	92.4	9	0.1	9840	100.0
North Coast												
Grafton Base	2	0.5	0	0.0	16	4.1	373	95.4	0	0.0	391	100.0
Coffs Harbour	1	0.1	1	0.1	42	5.5	719	94.1	1	0.1	764	100.0
Kempsey	1	0.3	0	0.0	19	5.9	301	93.8	0	0.0	321	100.0
Lismore Base	6	0.5	5	0.4	68	5.7	1120	93.4	0	0.0	1199	100.0
Murwillumbah	1	0.3	1	0.3	19	5.0	361	94.5	0	0.0	382	100.0
Tweed Heads	6	0.7	1	0.1	48	5.3	856	94.0	0	0.0	911	100.0
Port Macquarie Base	1	0.1	1	0.1	32	4.4	696	95.2	1	0.1	731	100.0
Other area hospitals	0	0.0	0	0.0	8	1.8	447	98.2	0	0.0	455	100.0
ALL HOSPITALS	18	0.3	9	0.2	252	4.9	4873	94.5	2	0.0	5154	100.0
Greater Southern												
Cooma	0	0.0	0	0.0	7	3.4	200	96.6	0	0.0	207	100.0
Goulburn Base	0	0.0	1	0.4	8	2.8	274	96.8	0	0.0	283	100.0
Moruya	2	0.8	2	0.8	12	4.8	236	93.7	0	0.0	252	100.0
Queanbeyan	0	0.0	0	0.0	3	1.1	261	98.9	0	0.0	264	100.0
Griffith Base	0	0.0	1	0.2	16	3.7	420	95.9	1	0.2	438	100.0
Wagga Wagga Base	2	0.3	4	0.6	59	9.0	587	89.8	2	0.3	654	100.0
Calvary, Wagga Wagga	2	0.3	1	0.2	21	3.7	547	95.3	3	0.5	574	100.0
Other area hospitals	1	0.1	0	0.0	36	3.0	1168	96.9	0	0.0	1205	100.0
ALL HOSPITALS	7	0.2	9	0.2	162	4.2	3693	95.3	6	0.2	3877	100.0
Greater Western												
Dubbo Base	5	0.4	3	0.2	66	5.5	1132	93.9	0	0.0	1206	100.0
Bathurst Base	3	0.4	0	0.2	28	4.9	541	94.6	0	0.0	572	100.0
Cowra	0	0.0	0	0.0	3	1.4	206	98.6	0	0.0	209	100.0
Orange Base	8	1.0	1	0.0	52	6.7	711	92.1	0	0.0	772	100.0
Broken Hill Base	0	0.0	0	0.0	16	6.2	244	93.8	0	0.0	260	100.0
Other area hospitals	4	0.7	5	0.8	17	2.8	577	95.7	0	0.0	603	100.0
ALL HOSPITALS	20	0.6	9	0.0	182	5.0	3411	94.2	0	0.0	3622	100.0
Other-Not stated	0	0.0	0	0.0	1	1.1	92	98.9	0	0.0	93	100.0
TOTAL NSW	609	0.7	558	0.7	4290	5.0	80120	93.6	49	0.1	85626	100.0

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Gestational age in selected hospitals

Table 128 shows the gestational age of babies for individual hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each health area, and the NSW total.

Health Area and Hospital							onal age (
	No.	31 %	32- No.	-33 %	34- No.	–36 %	No.	37+ %	Not s No.	tated %	No.	OTAL %
Sydney South West												
Canterbury	10	0.7	2	0.1	57	3.9	1385	95.3	0	0.0	1454	100.0
Royal Prince Alfred	150	3.7	80	1.9	197	4.8	3679	89.6	0	0.0	4106	100.0
Camden	0	0.0	0	0.0	5	1.1	452	98.9	0	0.0	457	100.0
Fairfield	14	0.9	4	0.2	54	3.3	1564	95.6	0	0.0	1636	100.0
Liverpool	158	5.1	99	3.2	179	5.7	2681	86.0	0	0.0	3117	100.0
Campbelltown	13	0.7	3	0.2	124	6.8	1674	92.3	0	0.0	1814	100.0
Bankstown-Lidcombe	13	0.7	3	0.2	69	3.8	1750	95.4	0	0.0	1835	100.0
Sydney Southwest Private	8	0.7	4	0.4	49	4.5	1039	94.5	0	0.0	1100	100.0
Bowral	3	0.4	1	0.1	22	3.3	646	96.1	0	0.0	672	100.0
ALL HOSPITALS	369	2.3	196	1.2	756	4.7	14870	91.8	0	0.0	16191	100.0
South Eastern Sydney & Illaw												
Royal Hospital for Women	131	3.5	62	1.6	200	5.3	3380	89.6	0	0.0	3773	100.0
St. George	15	0.7	14	0.6	84	3.8	2118	94.9	0	0.0	2231	100.0
Sutherland	2	0.2	1	0.1	36	3.8	903	95.9	0	0.0	942	100.0
Hurstville Community	5	0.5	4	0.4	39	3.9	952	95.2	0	0.0	1000	100.0
Kareena Private	2	0.3	5	8.0	30	4.7	598	94.2	0	0.0	635	100.0
St. George Private	1	0.1	4	0.2	90	5.4	1570	94.3	0	0.0	1665	100.0
Prince of Wales Private	2	0.1	3	0.2	68	4.4	1466	95.1	2	0.1	1541	100.0
Shoalhaven	5	0.6	7	8.0	43	4.8	841	93.9	0	0.0	896	100.0
Wollongong	13	0.6	31	1.5	137	6.4	1953	91.5	0	0.0	2134	100.0
Illawarra Private	0	0.0	1	0.1	44	4.0	1050	95.9	0	0.0	1095	100.0
Other area hospitals	0	0.0	0	0.0	0	0.0	48	100.0	0	0.0	48	100.0
ALL HOSPITALS	176	1.1	132	0.8	771	4.8	14879	93.2	2	0.0	15960	100.0
Sydney West												
Auburn	5	0.5	5	0.5	33	3.0	1062	96.1	0	0.0	1105	100.0
Blacktown	13	0.5	15	0.6	104	4.1	2401	94.8	0	0.0	2533	100.0
Blue Mountains	0	0.0	0	0.0	8	3.2	242	96.8	0	0.0	250	100.0
Nepean	73	2.4	54	1.7	181	5.8	2792	90.1	0	0.0	3100	100.0
Westmead	200	4.7	90	2.1	209	4.9	3739	88.2	0	0.0	4238	100.0
The Hills Private	6	0.5	8	0.6	69	5.4	1200	93.5	0	0.0	1283	100.0
Hawkesbury	5	0.6	4	0.5	33	4.2	751	94.7	0	0.0	793	100.0
Nepean Private	1	0.1	0	0.0	38	4.1	895	95.8	0	0.0	934	100.0
Westmead Private	6	0.4	5	0.3	73	4.3	1623	95.1	0	0.0	1707	100.0
Other area hospitals	0	0.0	1	0.5	7	3.4	195	96.1	0	0.0	203	100.0
ALL HOSPITALS	309	1.9	182	1.1	755	4.7	14900	92.3	0	0.0	16146	100.0
Northern Sydney & Central Co Gosford	oast 25	1.1	17	0.8	139	6.3	2040	91.9	0	0.0	2221	100.0
Wyong	∠5 2	0.7	17	0.8	4	1.4	2040	97.5	0	0.0	277	100.0
Hornsby	4	0.7	4	0.4	28	2.9	924	96.3	0	0.0	960	100.0
Manly	3	0.4	2	0.4	32	4.6	924 656	96.3	0	0.0	693	100.0
Mona Vale	ა 1	0.4	3	0.5	32 26	4.0	586	94.7 95.1	0	0.0	616	100.0
Royal North Shore	113	0.2 4.9	58	2.5	26 122	5.3	2004	95.1 87.2	0	0.0	2297	100.0
	0		58 0		122 7	2.7			0			
Ryde Motor North Sydnov	4	0.0		0.0		2.7 4.4	257	97.3	0	0.0	264	100.0
Mater, North Sydney	•	0.2	11	0.6	79		1709	94.8	_		1803	100.0
North Shore Private	13	0.5	12	0.5	107	4.4	2320	94.6	0	0.0	2452	100.0
Sydney Adventist	8	0.4	13	0.6	124	5.5	2097	93.5	0	0.0	2242	100.0
North Gosford Private	2	0.2	3	0.3	53	5.8	860	93.7	0	0.0	918	100.0
ALL HOSPITALS	175	1.2	124	0.8	721	4.9	13723	93.1	0	0.0	14743	100.0

TABLE 128 (continued)

BIRTHS BY GESTATIONAL AGE AND HOSPITAL, NSW 2004#

Health Area and Hospital	<31		3	2–33	Ge		l age (wed	eks) 37+	Not	stated	т	OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Hunter & New England												
Armidale	4	0.9	0	0.0	28	6.5	399	92.6	0	0.0	431	100.0
Inverell	2	0.9	3	1.3	10	4.3	220	93.6	0	0.0	235	100.0
Moree	2	1.0	1	0.5	7	3.4	193	95.1	0	0.0	203	100.0
Tamworth Base	11	1.6	3	0.4	55	8.0	619	90.0	0	0.0	688	100.0
Manning Base	11	1.6	4	0.6	34	4.8	653	93.0	0	0.0	702	100.0
Maitland	2	0.1	10	0.7	77	5.4	1339	93.8	0	0.0	1428	100.0
Muswellbrook	1	0.4	0	0.0	9	4.0	216	95.6	0	0.0	226	100.0
Belmont	0	0.0	1	0.2	26	4.4	562	95.4	0	0.0	589	100.0
John Hunter	121	4.1	68	2.3	239	8.1	2536	85.6	0	0.0	2964	100.0
Christo Road Private	1	0.2	1	0.2	40	8.2	448	91.4	0	0.0	490	100.0
NIB Private	2	0.2	3	0.3	60	6.5	858	93.0	0	0.0	923	100.0
Other area hospitals	6	0.6	0	0.0	15	1.6	940	97.8	0	0.0	961	100.0
ALL HOSPITALS	163	1.7	94	1.0	600	6.1	8983	91.3	0	0.0	9840	100.0
North Coast												
Coffs Harbour	5	0.7	4	0.5	43	5.6	712	93.2	0	0.0	764	100.0
Grafton Base	2	0.5	2	0.5	20	5.1	367	93.9	0	0.0	391	100.0
Kempsey	1	0.3	0	0.0	8	2.5	312	97.2	0	0.0	321	100.0
Lismore Base	8	0.7	12	1.0	77	6.4	1102	91.9	0	0.0	1199	100.0
Murwillumbah	2	0.5	0	0.0	15	3.9	365	95.5	0	0.0	382	100.0
Tweed Heads	6	0.7	2	0.2	53	5.8	850	93.3	0	0.0	911	100.0
Port Macquarie Base	3	0.4	4	0.5	38	5.2	686	93.8	0	0.0	731	100.0
Other area hospitals	0	0.0	0	0.0	5	1.1	450	98.9	0	0.0	455	100.0
ALL HOSPITALS	27	0.5	24	0.5	259	5.0	4844	94.0	0	0.0	5154	100.0
Greater Southern												
Cooma	0	0.0	0	0.0	8	3.9	199	96.1	0	0.0	207	100.0
Goulburn Base	0	0.0	0	0.0	12	4.2	271	95.8	0	0.0	283	100.0
Moruya	4	1.6	0	0.0	9	3.6	239	94.8	0	0.0	252	100.0
Queanbeyan	0	0.0	0	0.0	5	1.9	259	98.1	0	0.0	264	100.0
Griffith Base	3	0.7	2	0.5	20	4.6	413	94.3	0	0.0	438	100.0
Wagga Wagga Base	9	1.4	6	0.9	69	10.6	570	87.2	0	0.0	654	100.0
Calvary, Wagga Wagga	4	0.7	2	0.3	19	3.3	548	95.5	1	0.2	574	100.0
Other area hospitals	4	0.3	1	0.1	28	2.3	1171	97.2	1	0.1	1205	100.0
ALL HOSPITALS	24	0.6	11	0.3	170	4.4	3670	94.7	2	0.1	3877	100.0
Greater Western												
Dubbo Base	7	0.6	7	0.6	57	4.7	1135	94.1	0	0.0	1206	100.0
Bathurst Base	5	0.9	0	0.0	27	4.7	540	94.4	0	0.0	572	100.0
Cowra	0	0.0	0	0.0	5	2.4	204	97.6	0	0.0	209	100.0
Orange Base	9	1.2	3	0.4	53	6.9	707	91.6	0	0.0	772	100.0
Broken Hill Base	0	0.0	1	0.4	16	6.2	243	93.5	0	0.0	260	100.0
Other area hospitals	8	1.3	1	0.2	8	1.3	586	97.2	0	0.0	603	100.0
ALL HOSPITALS	29	8.0	12	0.3	166	4.6	3415	94.3	0	0.0	3622	100.0
Other-Not stated	0	0.0	0	0.0	2	2.2	91	97.8	0	0.0	93	100.0
TOTAL NSW	1272	1.5	775	0.9	4200	4.9	79375	92.7	4	0.0	85626	100.0

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Neonatal resuscitation in selected hospitals

Table 129 shows the type of neonatal resuscitation for individual hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each health area, and the NSW total.

Health Area and Hospital	N	one	Suc	tion		/gen		y ba	Resus g Intub	ation	Ext	ernal	Ot	her	Not s	stated	TO	ΓAL
					the	rapy	and i	mask	massa	IPPR ige ar ilatior	nd	rdiac						
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West																		
Canterbury	919	63.2	425	29.2	65	4.5	31	2.1	8	0.6	4	0.3	2	0.1	0	0.0	1454 1	
Royal Prince Alfred	2489	60.6	1010	24.6	269	6.6	233	5.7	86	2.1	11	0.3	8	0.2	0	0.0	4106 1	
Camden	372	81.4	42	9.2	25	5.5	18	3.9	0	0.0	0	0.0	0	0.0	0	0.0	457 1	
Fairfield	1060	64.8	331	20.2	201	12.3	37	2.3	6	0.4	1	0.1	0	0.0	0	0.0	1636 1	
Liverpool	2034	65.3	521	16.7	309	9.9	211	6.8	36	1.2	6	0.2	0	0.0	0	0.0	3117 1	
Campbelltown	1408	77.6	164	9.0	204	11.2	26	1.4	2	0.1	10	0.6	0	0.0	0	0.0	1814 1	
Bankstown-Lidcombe	1307	71.2	303	16.5	141	7.7	76	4.1	4	0.2	4	0.2	0	0.0	0	0.0	1835 1	
Sydney Southwest Private	651	59.2	224	20.4	147	13.4	71	6.5	1	0.1	1	0.1	3	0.3	2	0.2	1100 1	
Bowral	557	82.9	41	6.1	50	7.4	20	3.0	4	0.6	0	0.0	0	0.0	0	0.0	672 1	
ALL HOSPITALS	10797	66.7	3061	18.9	1411	8.7	723	4.5	147	0.9	37	0.2	13	0.1	2	0.0	16191 1	00.0
South Eastern Sydney & Illa											, -							
Royal Hospital for Women	2317	61.4	851	22.6	372	9.9	164	4.3	51	1.4	18	0.5	0	0.0	0	0.0	3773 1	
St. George	1684	75.5	172	7.7	270	12.1	92	4.1	5	0.2	8	0.4	0	0.0	0	0.0	2231 1	
Sutherland	490	52.0	260	27.6	173	18.4	14	1.5	1	0.1	4	0.4	0	0.0	0	0.0	942 1	
Hurstville Community	46	4.6	520	52.0	390	39.0	37	3.7	1	0.1	2	0.2	4	0.4	0	0.0	1000 1	
Kareena Private	25	3.9	360	56.7	208	32.8	36	5.7	0	0.0	0	0.0	6	0.9	0	0.0	635 1	
St. George Private	143	8.6	747	44.9	599	36.0	83	5.0	2	0.1	3	0.2	88	5.3	0	0.0	1665 1	
Prince of Wales Private	497	32.3	684	44.4	232	15.1	81	5.3	5	0.3	0	0.0	31	2.0	11	0.7	1541 1	
Shoalhaven	631	70.4	85	9.5	141	15.7	35	3.9	4	0.4	0	0.0	0	0.0	0	0.0	896 1	
Wollongong	1091	51.1	502	23.5	406	19.0	128	6.0	7	0.3	0	0.0	0	0.0	0	0.0	2134 1	
Illawarra Private	67	6.1	751	68.6	230	21.0	45	4.1	2	0.2	0	0.0	0	0.0	0	0.0	1095 1	
Other area hospitals ALL HOSPITALS	39 7030	81.3 44.0	3 4935	6.3 30.9	4 3025	8.3 19.0	1 716	2.1 4.5	1 79	2.1 0.5	0 35	0.0	0 129	0.0	0 11	0.0	ا 48 1 15960	00.0
Sydney West																		
Auburn	860	77.8	87	7.9	75	6.8	75	6.8	5	0.5	3	0.3	0	0.0	0	0.0	1105 1	0.00
Blacktown	1421	56.1	623	24.6	362	14.3	101	4.0	15	0.6	11	0.4	0	0.0	0	0.0	2533 1	0.00
Blue Mountains	170	68.0	29	11.6	41	16.4	10	4.0	0	0.0	0	0.0	0	0.0	0	0.0	250 1	
Nepean	1794	57.9	541	17.5	567	18.3	145	4.7	44	1.4	9	0.3	0	0.0	0	0.0	3100 1	
Westmead	2978	70.3	443	10.5	518	12.2	165	3.9	98	2.3	36	8.0	0	0.0	0	0.0	4238 1	
The Hills Private	835	65.1	221	17.2	179	14.0	46	3.6	1	0.1	1	0.1	0	0.0	0	0.0	1283 1	
Hawkesbury	628	79.2	65	8.2	83	10.5	15	1.9	1	0.1	1	0.1	0	0.0	0	0.0	793 1	
Nepean Private	398	42.6	134	14.3	323	34.6	73	7.8	2	0.2	1	0.1	3	0.3	0	0.0	934 1	
Westmead Private	1005	58.9	355	20.8	216	12.7	114	6.7	4	0.2	5	0.3	8	0.5	0	0.0	1707 1	
Other area hospitals	30	14.8	87	42.9	70	34.5	10	4.9	3	1.5	3	1.5	0	0.0	0	0.0	203 1	
ALL HOSPITALS	10119	62.7	2585	16.0	2434	15.1	754	4.7	173	1.1	70	0.4	11	0.1	0	0.0	16146 1	00.0
Northern Sydney & Central C																		
Gosford	1208	54.4	350	15.8	476	21.4	162	7.3	7	0.3	17	0.8	1	0.0	0	0.0	2221 1	
Wyong	179	64.6	38	13.7	39	14.1	18	6.5	1	0.4	2	0.7	0	0.0	0	0.0	277 1	
Hornsby	633	65.9	159	16.6	141	14.7	18	1.9	4	0.4	5	0.5	0	0.0	0	0.0	960 1	
Manly	350	50.5	216	31.2	88	12.7	38	5.5	0	0.0	1	0.1	0	0.0	0	0.0	693 1	
Mona Vale	360	58.4	173	28.1	62	10.1	19	3.1	2	0.3	0	0.0	0	0.0	0	0.0	616 1	
Royal North Shore	1175	51.2	738	32.1	210	9.1	118	5.1	50	2.2	5	0.2	1	0.0	0	0.0	2297 1	
Ryde	180	68.2	49	18.6	27	10.2	8	3.0	0	0.0	0	0.0	0	0.0	0	0.0	264 1	
Mater, North Sydney	732	40.6	604	33.5	276	15.3	140	7.8	4	0.2	1	0.1	46	2.6	0	0.0	1803 1	
North Shore Private	971	39.6	1000	40.8	389	15.9	89	3.6	2	0.1	1	0.0	0	0.0	0	0.0	2452 1	
Sydney Adventist	475	21.2	1296	57.8	256	11.4	204	9.1	4	0.2	2	0.1	5	0.2	0	0.0	2242 1	
North Gosford Private	386	42.0	272	29.6	219	23.9	38	4.1	0	0.0	1	0.1	2	0.2	0	0.0	918 1	
ALL HOSPITALS	6649	45.1	4895	33.2	2183	14.8	852	5.8	74	0.5	35	0.2	55	0.4	0	0.0	14743 1	00.0

Health Area and Hospital	N	one	Suc	tion		/gen	IPPR I	by bag		oation	n Ext	ernal	Ot	ther	Not	stated	то	TAL
					the	rapy	and	mask	and	IPPR	massa							
	No.	%	No.	%	No.	%	No.	%	No.	%	vent No.	ilatio	n No.	%	No.	%	No.	%
Hunter & New England																		
Armidale	125	29.0	72	16.7	198	45.9	18	4.2	- 1	0.2	0	0.0	17	3.9	0	0.0	431	100.0
Inverell	3	1.3	11	4.7	211	89.8	9	3.8	0	0.0	1	0.4	0	0.0	0	0.0	235	100.0
Moree	97	47.8	50	24.6	46	22.7	7	3.4	2	1.0	0	0.0	1	0.5	0	0.0	203	100.0
Tamworth Base	230	33.4	150	21.8	188	27.3	73	10.6	5	0.7	4	0.6	38	5.5	0	0.0	688	100.0
Manning Base	316	45.0	179	25.5	133	18.9	55	7.8	2	0.3	1	0.1	16	2.3	0	0.0	702	100.0
Maitland	1178	82.5	78	5.5	140	9.8	29	2.0	2	0.1	1	0.1	0	0.0	0	0.0	1428	100.0
Muswellbrook	161	71.2	21	9.3	26	11.5	15	6.6	2	0.9	1	0.4	0	0.0	0	0.0	226	100.0
Belmont	353	59.9	110	18.7	63	10.7	61	10.4	0	0.0	2	0.3	0	0.0	0	0.0	589	100.0
John Hunter	1931	65.1	477	16.1	308	10.4	205	6.9	28	0.9	15	0.5	0	0.0	0	0.0	2964	100.0
Christo Road Private	320	65.3	64	13.1	84	17.1	19	3.9	3	0.6	0	0.0	0	0.0	0	0.0	490	100.0
NIB Private	560	60.7	231	25.0	87	9.4	40	4.3	5	0.5	0	0.0	0	0.0	0	0.0	923	100.0
Other area hospitals	236	24.6	385	40.1	286	29.8	46	4.8	2	0.2	3	0.3	2	0.2	1	0.1	961	100.0
ALL HOSPITALS	5510	56.0	1828	18.6	1770	18.0	577	5.9	52	0.5	28	0.3	74	0.8	1	0.0	9840	100.
North Coast																		
Coffs Harbour	365	47.8	191	25.0	121	15.8	56	7.3	1	0.1	3	0.4	27	3.5	0	0.0	764	100.
Grafton Base	60	15.3	251	64.2	44	11.3	34	8.7	1	0.3	1	0.3	0	0.0	0	0.0		100.
Kempsey	229	71.3	14	4.4	38	11.8		11.2	0	0.0	4	1.2	0	0.0	0	0.0		100.
Lismore Base	316	26.4	457	38.1	266	22.2	87	7.3	11	0.9	4	0.3	58	4.8	0	0.0	1199	
Murwillumbah	46	12.0	205	53.7	110	28.8	17	4.5	2	0.5	2	0.5	0	0.0	0	0.0		100.
Tweed Heads	434	47.6	106	11.6	219	24.0	142		4	0.4	4	0.4	0	0.0	2	0.2		100.
Port Macquarie Base	328	44.9	168	23.0	142	19.4	54	7.4	7	1.0	2	0.3	29	4.0	1	0.1		100.0
Other area hospitals	198	43.5	106	23.3	112	24.6	22	4.8	1	0.2	0	0.0	16	3.5	0	0.0		100.0
ALL HOSPITALS	1976	38.3	1498	29.1	1052	20.4	448	8.7	27	0.5	20	0.4	130	2.5	3	0.1	5154	
	.0.0	00.0			.002			0.,		0.0		٠			Ŭ	0	0.0.	
Greater Southern Cooma	173	83.6	12	5.8	9	4.3	7	3.4	0	0.0	0	0.0	6	2.9	0	0.0	007	100
			12 54		94	33.2					0	0.0	_		0			100.0
Goulburn Base	114 133	40.3 52.8	54 56	19.1 22.2	94 48	19.0	13 13	4.6 5.2	5 0	1.8	1	0.0	3	1.1	0	0.0		100.0
Moruya		65.5	38	14.4	31	11.7	9	5.2 3.4	1	0.0	1	0.4	11	0.4 4.2	0	0.0		100.0
Queanbeyan Griffith Base	173 117	26.7	38 145	33.1	123	28.1	24	3.4 5.5	2	0.4	1	0.4	26	4.2 5.9	0	0.0		100.0
	231	35.3	170	26.0	123	19.0	47	5.5 7.2	6	0.5	1	0.2		11.5	0	0.0		100.0
Wagga Wagga Wagga	285	35.3 49.7	111	19.3	130	22.6	47	7.2	4	0.9	3	0.2		0.0	1	0.0		
Calvary, Wagga Wagga Other area hospitals	285 621	49.7 51.5	111 279	19.3	206	17.1	40 86	7.0 7.1	3	0.7	2	0.5	0 7	0.0	1	0.2	1205	100.0
ALL HOSPITALS	1847	47.6	865	23.2	765	17.1	239	7.1 6.2	21	0.2	9	0.2	129	3.3	2	0.1	3877	
	1047	47.0	003	22.3	705	19.7	239	0.2	21	0.5	9	0.2	129	3.3	2	0.1	30//	100.
Greater Western							4-										400-	
Dubbo Base	568	47.1	230	19.1	268	22.2	49	4.1	2	0.2	0	0.0	89	7.4	0	0.0	1206	
Bathurst Base	107	18.7	275	48.1	109	19.1		13.1	3	0.5	3	0.5	0	0.0	0	0.0		100.
Cowra	137	65.6	20	9.6	47	22.5	4	1.9	0	0.0	0	0.0	1	0.5	0	0.0		100.
Orange Base	438	56.7	89	11.5	183	23.7	52	6.7	4	0.5	0	0.0	6	0.8	0	0.0		100.
Broken Hill Base	160	61.5	45	17.3	42	16.2	11	4.2	1	0.4	0	0.0	1	0.4	0	0.0		100.
	257	42.6	121	20.1	179	29.7	37	6.1	2	0.3	2	0.3	4	0.7	1	0.2		100.0
Other area hospitals																		
Other area hospitals ALL HOSPITALS	1667	46.0	780	21.5	828	22.9	228	6.3	12	0.3	5	0.1	101	2.8	1	0.0	3622	100.0
•		46.0 86.0	780 4	21.5 4.3	828 7	7.5	228 1	6.3 1.1	12	0.3	5 0	0.1	101	2.8	1	0.0		100. 100.

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Admission to special care and neonatal intensive care units in selected hospitals

Table 130 shows admissions of liveborn babies to special care and neonatal intensive care units for individual hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each

health area, and the NSW total. The number of babies admitted to neonatal intensive care units reported here is higher than the numbers reported in Chapter 8, as some babies admitted to a neonatal intensive care unit do not meet the registration criteria for inclusion in the Neonatal Intensive Care Units Data Collection.

Health Area and Hospital			Admissi						Ad	lmission				
	No.	No %	No.	es %	Not s No.	tated %	No.	OTAL %	No.	No %	No.	es %	No.	TAL %
Sydney South West														
Canterbury	1262	87.2	186	12.8	0	0.0	1448	100.0	1448	100.0	0	0.0	1448	100.0
Royal Prince Alfred	3706	91.1	363	8.9	0	0.0	4069	100.0	3850	94.6	219	5.4	4069	100.0
Camden	446	97.6	11	2.4	0	0.0	457	100.0	456	99.8	1	0.2	457	100.0
Fairfield	1304	80.3	319	19.7	0	0.0	1623	100.0	1622	99.9	1	0.1	1623	100.0
Liverpool	2711	88.1	365	11.9	0	0.0	3076	100.0	2870	93.3	206	6.7	3076	100.0
Campbelltown	1499	83.2	303	16.8	0	0.0	1802	100.0	1794	99.6	8	0.4	1802	100.0
Bankstown-Lidcombe	1533	84.3	286	15.7	0	0.0	1819	100.0	1810	99.5	9	0.5	1819	100.0
Sydney Southwest Private	859	78.5	235	21.5	0	0.0	1094	100.0	1088	99.5	6	0.5	1094	100.0
Bowral	578	86.5	90	13.5	0	0.0	668	100.0	660	98.8	8	1.2	668	100.0
ALL HOSPITALS	13898	86.6	2158	13.4	0	0.0	16056	100.0	15598	97.1	458	2.9	16056	100.0
South Eastern Sydney & Illa	awarra													
Royal Hospital for Women	3289	88.0	447	12.0	0	0.0	3736	100.0	3546	94.9	190	5.1	3736	100.0
St. George	1890	85.2	329	14.8	0	0.0	2219	100.0	2213	99.7	6	0.3	2219	100.0
Sutherland	835	88.8	105	11.2	0	0.0	940	100.0	938	99.8	2	0.2	940	100.0
Hurstville Community	803	80.5	194	19.5	0	0.0	997	100.0	989	99.2	8	8.0	997	100.0
Kareena Private	502	79.4	130	20.6	0	0.0	632	100.0	627	99.2	5	8.0	632	100.0
St. George Private	1332	80.2	329	19.8	0	0.0	1661	100.0	1649	99.3	12	0.7	1661	100.0
Prince of Wales Private	1310	85.2	212	13.8	16	1.0	1538	100.0	1533	99.7	5	0.3	1538	100.0
Shoalhaven	771	87.2	113	12.8	0	0.0	884	100.0	883	99.9	1	0.1	884	100.0
Wollongong	1744	82.0	382	18.0	0	0.0	2126	100.0	2113	99.4	13	0.6	2126	100.0
Illawarra Private	988	90.5	104	9.5	0	0.0	1092	100.0	1091	99.9	1	0.1	1092	100.0
Other area hospitals ALL HOSPITALS	46 13510	97.9 85.1	1 2346	2.1 14.8	0 16	0.0	47 15872	100.0 100.0	47 15629	100.0 98.5	0 243	0.0 1.5	47 15872	100.0
	13310	05.1	2340	14.0	10	0.1	15072	100.0	13029	30.5	243	1.5	13072	100
Sydney West														
Auburn	804	73.2	294	26.8	0	0.0	1098	100.0	1096	99.8	2	0.2	1098	100.0
Blacktown	2051	81.3	472	18.7	0	0.0	2523	100.0	2519	99.8	4	0.2	2523	100.0
Blue Mountains	228	91.2	22	8.8	0	0.0	250	100.0	248	99.2	2	0.8	250	100.0
Nepean	2683	87.0	400	13.0	0	0.0	3083	100.0	2687	87.2	396	12.8	3083	100.0
Westmead	3700	88.3	488	11.7	0	0.0	4188	100.0	3686	88.0	502	12.0	4188	100
The Hills Private	1046 638	82.0 80.8	229 152	18.0 19.2	0	0.0	1275	100.0	1266 786	99.3 99.5	9	0.7 0.5	1275	100.0
Hawkesbury	770	82.7	161	17.3	0	0.0	790 931	100.0 100.0	922	99.5	9	1.0	790 931	100.0
Nepean Private Westmead Private	1347	79.3	352	20.7	0	0.0	1699	100.0	1686	99.0	13	0.8	1699	100.0
Other area hospitals	187	93.0	14	7.0	0	0.0	201	100.0	194	96.5	7	3.5	201	100.
ALL HOSPITALS	13454	83.9	2584	16.1	0	0.0	16038	100.0	15090	94.1	948	5.9	16038	100.
Northern Sydney & Central		00.5	2004	10.1	Ü	0.0	10000	100.0	13030	54.1	340	0.0	10000	100.
Gosford	1899	86.0	310	14.0	0	0.0	2209	100.0	2180	98.7	29	1.3	2209	100.0
Wyong	262	94.9	14	5.1	0	0.0	276	100.0	273	98.9	3	1.1	276	100.0
Hornsby	578	60.5	377	39.5	0	0.0	955	100.0	952	99.7	3	0.3	955	100.
Manly	578 545	78.9	146	21.1	0	0.0	955 691	100.0	952 689	99.7	2	0.3	691	100.0
Mona Vale	482	78.5	132	21.5	0	0.0	614	100.0	614	100.0	0	0.0	614	100.
Royal North Shore	2122	93.3	153	6.7	0	0.0	2275	100.0	2024	89.0	251	11.0	2275	100.0
Ryde	233	88.3	31	11.7	0	0.0	264	100.0	264	100.0	0	0.0	264	100.
Mater, North Sydney	1593	88.5	206	11.5	0	0.0	1799	100.0	1793	99.7	6	0.3	1799	100.
North Shore Private	2242	91.9	197	8.1	0	0.0	2439	100.0	2426	99.5	13	0.5	2439	100.
Sydney Adventist	1866	83.6	366	16.4	0	0.0	2232	100.0	2223	99.6	9	0.5	2232	100.
North Gosford Private	790	86.3	125	13.7	0	0.0	915	100.0	901	98.5	14	1.5	915	100.
ALL HOSPITALS	12612	86.0	2057	14.0	0	0.0	14669	100.0	14339	97.8	330	2.2	14669	100.

TABLE 130 (continued)

LIVEBIRTHS BY ADMISSION TO SPECIAL CARE/NICU AND HOSPITAL, NSW 2004*

Health Area and Hospital	N	lo	Admissi Y	on to sp es	ecial ca Not s		то	TAL		nission to No	neonata Ye	al inte es		re OTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Hunter & New England														
Armidale	348	81.5	79	18.5	0	0.0	427	100.0	421	98.6	6	1.4	427	100.0
Inverell	223	95.7	10	4.3	0	0.0	233	100.0	230	98.7	3	1.3	233	100.0
Moree	177	88.5	23	11.5	0	0.0	200	100.0	198	99.0	2	1.0	200	100.0
Tamworth Base	416	61.0	266	39.0	0	0.0	682	100.0	669	98.1	13	1.9	682	100.0
Manning Base	596	85.6	100	14.4	0	0.0	696	100.0	690	99.1	6	0.9	696	100.0
Maitland	1188	83.7	232	16.3	0	0.0	1420	100.0	1417	99.8	3	0.2	1420	100.0
Muswellbrook	214	95.1	11	4.9	0	0.0	225	100.0	223	99.1	2	0.9	225	100.0
Belmont	515	87.6	73	12.4	0	0.0	588	100.0	586	99.7	2	0.3	588	100.0
John Hunter	2453	83.8	473	16.2	0	0.0	2926	100.0	2663	91.0	263	9.0	2926	100.0
Christo Road Private	412	84.3	77	15.7	0	0.0	489	100.0	489	100.0	0	0.0	489	100.0
NIB Private	806	87.6	114	12.4	0	0.0	920	100.0	907	98.6	13	1.4	920	100.0
Other area hospitals	922	96.3	35	3.7	0	0.0	957	100.0	951	99.4	6	0.6	957	100.0
ALL HOSPITALS	8270	84.7	1493	15.3	0	0.0	9763	100.0	9444	96.7	319	3.3	9763	100.0
	8270	04.7	1493	15.3	U	0.0	9763	100.0	9444	90.7	319	3.3	9763	100.0
North Coast														
Coffs Harbour	642	84.6	117	15.4	0	0.0	759	100.0	756	99.6	3	0.4	759	100.0
Grafton Base	348	89.2	42	10.8	0	0.0	390	100.0	385	98.7	5	1.3	390	100.0
Kempsey	292	91.0	29	9.0	0	0.0	321	100.0	319	99.4	2	0.6	321	100.0
Lismore Base	910	76.5	280	23.5	0	0.0	1190	100.0	1170	98.3	20	1.7	1190	100.0
Murwillumbah	328	86.1	53	13.9	0	0.0	381	100.0	376	98.7	5	1.3	381	100.0
Tweed Heads	706	78.0	199	22.0	0	0.0	905	100.0	900	99.4	5	0.6	905	100.0
Port Macquarie Base	589	80.9	139	19.1	0	0.0	728	100.0	725	99.6	3	0.4	728	100.0
Other area hospitals	432	95.2	22	4.8	0	0.0	454	100.0	453	99.8	1	0.2	454	100.0
ALL HOSPITALS	4247	82.8	881	17.2	0	0.0	5128	100.0	5084	99.1	44	0.9	5128	100.0
Greater Southern														
Cooma	196	95.1	10	4.9	0	0.0	206	100.0	204	99.0	2	1.0	206	100.0
Goulburn Base	244	86.5	38	13.5	0	0.0	282	100.0	282	100.0	0	0.0	282	100.0
Moruya	244	96.0	10	4.0	0	0.0	251	100.0	247	98.4	4	1.6	251	100.0
Queanbeyan	255	96.6	9	3.4	0	0.0	264	100.0	261	98.9	3	1.1	264	100.0
Griffith Base	302	69.3	134	30.7	0	0.0	436	100.0	435	99.8	ა 1	0.2	436	100.0
					-						4			
Wagga Wagga Base	514 510	79.6 89.8	132 54	20.4 9.5	0 4	0.0 0.7	646 568	100.0 100.0	642 563	99.4 99.1	4 5	0.6	646	100.0
Calvary, Wagga Wagga					1						_	0.9	568	100.0
Other area hospitals	1087	90.3	116	9.6	-	0.1	1204	100.0	1192	99.0	12	1.0	1204	100.0
ALL HOSPITALS	3349	86.8	503	13.0	5	0.1	3857	100.0	3826	99.2	31	8.0	3857	100.0
Greater Western														
Dubbo Base	1001	83.7	195	16.3	0	0.0	1196	100.0	1178	98.5	18	1.5	1196	100.0
Bathurst Base	510	90.4	54	9.6	0	0.0	564	100.0	555	98.4	9	1.6	564	100.0
Cowra	194	93.3	14	6.7	0	0.0	208	100.0	207	99.5	1	0.5	208	100.0
Orange Base	638	83.7	124	16.3	0	0.0	762	100.0	753	98.8	9	1.2	762	100.0
Broken Hill Base	238	91.9	21	8.1	0	0.0	259	100.0	259	100.0	0	0.0	259	100.0
Other area hospitals	561	94.0	36	6.0	0	0.0	597	100.0	591	99.0	6	1.0	597	100.0
ALL HOSPITALS	3142	87.6	444	12.4	0	0.0	3586	100.0	3543	98.8	43	1.2	3586	100.0
Other-Not stated	92	100.0	0	0.0	0	0.0	92	100.0	92	100.0	0	0.0	92	100.0
TOTAL NSW	72574	85.3	12466	14.7	21	0.0	85061	100.0	82645	97.2	2416	2.8	85061	100.0

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Baby discharge status in selected hospitals

Table 131 shows the discharge status of babies born in hospitals where the number of reported confinements exceeded 200 in 2004, totals for all hospitals within each health area, and the NSW total.

Health Area and Hospital							arge stat					
	Disch	arged	Still	born		natal ath	Trans	ferred	Not s		тс	TAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Sydney South West												
Canterbury	1434	98.6	6	0.4	2	0.1	12	0.8	0	0.0	1454	100.0
Royal Prince Alfred	3914	95.3	37	0.9	30	0.7	125	3.0	0	0.0	4106	100.
Camden	452	98.9	0	0.0	1	0.2	4	0.9	0	0.0	457	100.
Fairfield	1600	97.8	13	0.8	3	0.2	20	1.2	0	0.0	1636	100.
Liverpool	2825	90.6	41	1.3	27	0.9	224	7.2	0	0.0	3117	100.
Campbelltown	1772	97.7	12	0.7	2	0.1	28	1.5	0	0.0	1814	100.
Bankstown-Lidcombe	1799	98.0	16	0.9	2	0.1	18	1.0	0	0.0	1835	100.
Sydney Southwest Private	1082	98.4	6	0.5	2	0.2	10	0.9	0	0.0	1100	100.
Bowral	512	76.2	4	0.6	1	0.1	155	23.1	0	0.0	672	100.
ALL HOSPITALS	15390	95.1	135	0.8	70	0.4	596	3.7	0	0.0	16191	100.
	.0000	00.1	. 30	0.0	. 0	Ü.,	230	5.,	Ü	0.0	.0101	.00.
South Eastern Sydney & Illawarra	0000	00.0	07	1.0	05	0.7	00	0.0	0	0.0	0770	100
Royal Hospital for Women	3623	96.0	37	1.0	25	0.7	88	2.3	0	0.0	3773	100.
St. George	2194	98.3	12	0.5	7	0.3	18	0.8	0	0.0	2231	100.
Sutherland	935	99.3	2	0.2	0	0.0	5	0.5	0	0.0	942	100.
Hurstville Community	982	98.2	3	0.3	1	0.1	14	1.4	0	0.0	1000	100.
Kareena Private	624	98.3	3	0.5	0	0.0	8	1.3	0	0.0	635	100.
St. George Private	1642	98.6	4	0.2	0	0.0	19	1.1	0	0.0	1665	100.
Prince of Wales Private	1530	99.3	2	0.1	0	0.0	8	0.5	1	0.1	1541	100.
Shoalhaven	771	86.0	12	1.3	0	0.0	113	12.6	0	0.0	896	100.
Wollongong	1576	73.9	8	0.4	2	0.1	548	25.7	0	0.0	2134	100.
Illawarra Private	1073	98.0	3	0.3	0	0.0	19	1.7	0	0.0	1095	100.
Other area hospitals	41	85.4	1	2.1	0	0.0	6	12.5	0	0.0	48	100.
ALL HOSPITALS	14991	93.9	87	0.5	35	0.2	846	5.3	1	0.0	15960	100.
Sydney West												
Auburn	1084	98.1	7	0.6	0	0.0	14	1.3	0	0.0	1105	100.
Blacktown	2489	98.3	10	0.4	1	0.0	33	1.3	0	0.0	2533	100.
Blue Mountains	245	98.0	0	0.0	0	0.0	5	2.0	0	0.0	250	100.
Nepean	2937	94.7	16	0.5	9	0.3	137	4.4	1	0.0	3100	100.
Westmead	3875	91.4	50	1.2	35	0.8	278	6.6	0	0.0	4238	100.
The Hills Private	1260	98.2	8	0.6	0	0.0	15	1.2	0	0.0	1283	100.
Hawkesbury	769	97.0	3	0.4	2	0.3	19	2.4	0	0.0	793	100.
Nepean Private	921	98.6	3	0.4	0	0.0	10	1.1	0	0.0	934	100.
Westmead Private	1678	98.3	8	0.5	2	0.0	19	1.1	0	0.0	1707	100.
Other area hospitals	193	95.1	2	1.0	0	0.1	8	3.9	0	0.0	203	100.
ALL HOSPITALS	15451	95.7	107	0.7	49	0.3	538	3.3	1	0.0	16146	100.
	10401	55.7	107	0.7	70	0.0	300	0.0		0.0	10140	100.
Northern Sydney & Central Coast	1000	04.0	10	0.5	4	0.0	220	15.0	0	0.0	0001	100
Gosford	1866	84.0	12	0.5	-	0.2	339	15.3	0	0.0	2221	100.
Wyong	264	95.3	1	0.4	0	0.0	12	4.3	0	0.0	277	100.
Hornsby	943	98.2	5	0.5	1	0.1	11	1.1	0	0.0	960	100.
Manly	684	98.7	2	0.3	0	0.0	7	1.0	0	0.0	693	100.
Mona Vale	605	98.2	2	0.3	1	0.2	8	1.3	0	0.0	616	100.
Royal North Shore	2122	92.4	22	1.0	9	0.4	144	6.3	0	0.0	2297	100.
Ryde	262	99.2	0	0.0	0	0.0	2	0.8	0	0.0	264	100.
Mater, North Sydney	1786	99.1	4	0.2	3	0.2	10	0.6	0	0.0	1803	100.
North Shore Private	2428	99.0	13	0.5	1	0.0	10	0.4	0	0.0	2452	100.
Sydney Adventist	2221	99.1	10	0.4	1	0.0	10	0.4	0	0.0	2242	100.
North Gosford Private	898	97.8	3	0.3	0	0.0	17	1.9	0	0.0	918	100
North addictal livate	000		U	0.0	•	0.0						

Health Area and Hospital	Discl	narged	Still	lborn		by disch	arge stat	us ferred	Not s	tated	T	OTAL
		Ŭ			De	eath						
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Hunter & New England												
Armidale	409	94.9	4	0.9	0	0.0	18	4.2	0	0.0	431	100.0
Inverell	227	96.6	2	0.9	0	0.0	6	2.6	0	0.0	235	100.0
Moree	196	96.6	3	1.5	0	0.0	4	2.0	0	0.0	203	100.0
Tamworth Base	610	88.7	6	0.9	1	0.1	71	10.3	0	0.0	688	100.0
Manning Base	665	94.7	6	0.9	4	0.6	27	3.8	0	0.0	702	100.0
Maitland	1205	84.4	8	0.6	0	0.0	215	15.1	0	0.0	1428	100.0
Muswellbrook	217	96.0	1	0.4	1	0.4	7	3.1	0	0.0	226	100.0
Belmont	569	96.6	1	0.2	0	0.0	19	3.2	0	0.0	589	100.0
John Hunter	2547	85.9	38	1.3	21	0.7	358	12.1	0	0.0	2964	100.0
Christo Road Private	452	92.2	1	0.2	0	0.0	37	7.6	0	0.0	490	100.0
NIB Private	848	91.9	3	0.3	0	0.0	72	7.8	0	0.0	923	100.0
Other area hospitals	910	94.7	4	0.4	2	0.2	45	4.7	0	0.0	961	100.0
ALL HOSPITALS	8855	90.0	77	0.8	29	0.3	879	8.9	0	0.0	9840	100.0
North Coast												
Coffs Harbour	708	92.7	5	0.7	1	0.1	50	6.5	0	0.0	764	100.0
Grafton Base	382	97.7	1	0.3	2	0.5	6	1.5	0	0.0	391	100.0
Kempsey	310	96.6	0	0.0	0	0.0	11	3.4	0	0.0	321	100.0
Lismore Base	1040	86.7	9	0.8	2	0.2	148	12.3	0	0.0	1199	100.0
Murwillumbah	373	97.6	1	0.3	1	0.3	7	1.8	0	0.0	382	100.0
Tweed Heads	890	97.7	5	0.5	1	0.1	14	1.5	1	0.1	911	100.0
Port Macquarie Base	714	97.7	3	0.4	0	0.0	14	1.9	0	0.0	731	100.0
Other area hospitals	434	95.4	1	0.2	0	0.0	20	4.4	0	0.0	455	100.0
ALL HOSPITALS	4851	94.1	25	0.5	7	0.1	270	5.2	1	0.0	5154	100.0
Greater Southern		•		0.0	•	0		0.2	•	0.0	0.0.	
Cooma	204	98.6	1	0.5	0	0.0	2	1.0	0	0.0	207	100.0
Goulburn Base	275	97.2	1	0.4	0	0.0	7	2.5	0	0.0	283	100.0
Moruya	241	95.6	i	0.4	2	0.8	8	3.2	0	0.0	252	100.0
Queanbeyan	261	98.9	0	0.0	0	0.0	3	1.1	0	0.0	264	100.0
Griffith Base	430	98.2	2	0.5	1	0.0	5	1.1	0	0.0	438	100.0
Wagga Wagga Base	583	89.1	8	1.2	0	0.2	63	9.6	0	0.0	654	100.0
Calvary, Wagga Wagga	559	97.4	6	1.2	0	0.0	9	1.6	0	0.0	574	100.0
Other area hospitals	1164	96.6	1	0.1	0	0.0	40	3.3	0	0.0	1205	100.0
ALL HOSPITALS	3717	95.9	20	0.1	3	0.0	137	3.5	0	0.0	3877	100.0
Greater Western	· · · ·	00.0		0.0				0.0	ŭ	0.0		.00.0
Dubbo Base	811	67.2	10	0.8	1	0.1	384	31.8	0	0.0	1206	100.0
Bathurst Base	456	79.7	8	1.4	0	0.0	108	18.9	0	0.0	572	100.0
Cowra	200	95.7	1	0.5	0	0.0	8	3.8	0	0.0	209	100.0
Orange Base	627	81.2	10	1.3	1	0.1	134	17.4	0	0.0	772	100.0
Draken Hill Dage	027	01.2	10	0.4	1	0.1	104	17.4	0	0.0	000	100.0

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259

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91

91

80325

2900

Broken Hill Base

ALL HOSPITALS

ALL HOSPITALS

Other-Not stated

TOTAL NSW

Other area hospitals

Source: NSW Midwives Data Collection. Centre for Epidemiology and Research, NSW Health Department.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Postnatal length of stay in selected hospitals

Table 132 shows the mother's postnatal length of stay in the hospital of birth for hospitals where the number of reported confinements exceeded 200 in 2003, totals for all hospitals within each health area, and the NSW total.

Health Area and Hospital	Avera	ge postr	atal len	gth of s	tay (days)	Health Area and Hospital	Avera	ge postn	atal leng	th of st	ay (days
	1999	2000	2001	2002	2003		1999	2000	2001	2002	2003
Sydney South West						Hunter & New England					
Canterbury	2.9	2.8	2.7	2.9	3.0	Armidale	4.4	3.9	3.8	3.7	3.9
Royal Prince Alfred	4.0	3.6	3.7	3.8	3.7	Inverell	3.4	3.2	3.0	3.1	3.0
Camden	2.8	-	-	-	2.7	Tamworth Base	3.8	3.6	3.5	3.3	3.4
Fairfield	2.8	2.6	2.6	2.5	2.6	Manning Base	4.1	3.6	3.2	3.0	3.1
Liverpool	3.0	2.8	2.7	2.6	2.7	Maitland	3.4	2.9	2.6	2.5	2.4
Campbelltown	2.6	2.5	2.5	2.6	2.6	Muswellbrook	3.5	3.4	3.3	3.2	3.2
Bankstown/Lidcombe	2.9	2.8	2.8	2.7	2.8	Belmont	3.6	3.1	3.3	3.1	3.1
Sydney Southwest Private	4.5	4.9	4.6	4.3	4.5	John Hunter	3.6	3.3	3.3	3.2	3.2
Bowral	3.0	2.7	2.6	2.4	2.2	Christo Road Private	5.3	4.9	4.9	4.7	4.6
Other area hospitals	4.8	4.5	-	-	5.0	Other area hospitals	3.9	3.8	3.9	3.8	3.7
ALL HOSPITALS	3.2	3.0	3.0	3.0	3.1	ALL HOSPITALS	3.8	3.5	3.5	3.3	3.3
South Eastern Sydney & Illa	warra					North Coast	3.0	3.0	5.0		0.0
Royal Hospital for Women	3.6	3.5	3.6	3.6	3.5	Coffs Harbour	3.9	4.0	3.8	3.8	3.9
St. George	3.5	3.3	2.9	2.7	2.8	Grafton Base	3.9	3.8	3.5	3.6	3.6
Sutherland	3.6	3.2	3.0	3.1	3.1	Kempsey	3.8	3.6	3.2	3.0	3.1
Hurstville Community	5.5	4.5	4.4	4.5	4.5	Lismore Base	3.1	3.2	3.1	3.2	3.2
Kareena Private	5.9	5.7	5.2	5.0	4.8	Murwillumbah	3.7	3.7	3.6	3.6	3.4
St. George Private	5.3	5.1	5.2	4.9	4.6	Tweed Heads	3.4	3.0	3.0	3.1	3.1
Prince of Wales Private	5.2	4.9	4.6	4.8	4.8	Port Macquarie Base	4.1	3.8	3.7	3.8	3.5
Shoalhaven	2.7	2.6	2.5	2.3	2.4	Other area hospitals	3.9	3.7	3.7	3.5	3.6
Shellharbour	2.8	2.7	2.8	2.8	2.5	ALL HOSPITALS	3.6	3.6	3.4	3.4	3.4
Wollongong	2.8	2.2	2.6	2.6	2.7	Greater Southern	3.0	3.0	3.4	3.4	3.4
Illawarra Private	5.6	5.6	5.4	5.5	5.3		0.5	0.5	0.4	0.4	0.0
Other area hospitals	2.8	2.3	2.7	2.7	2.7	Goulburn Base	3.5	3.5	3.4	3.4	3.3
ALL HOSPITALS	3.9	3.7	3.8	3.7	3.7	Queanbeyan	3.4	3.2	3.1	3.2	3.0
	3.9	3.7	3.0	3.7	3.7	Griffith Base	3.1	3.1	3.1	3.1	3.2
Sydney West Auburn	2.8	2.8	2.8	2.8	2.8	Wagga Wagga Base	3.8	3.1	2.9	3.0	3.0
						Calvary, Wagga Wagga	5.2	4.7	5.0	4.6	5.0
Blacktown	3.0	3.0	3.0	2.9	3.1	Other area hospitals	3.9	3.6	3.7	3.6	3.6
Blue Mountains	3.5	3.5	3.7	3.6	3.4	ALL HOSPITALS	3.8	3.5	3.6	3.6	3.6
Nepean	3.3	3.3	3.2	3.0	3.2	Greater Western					
Westmead	3.4	3.3	3.2	3.2	3.2	Dubbo Base	2.9	2.7	2.5	2.4	2.5
The Hills Private	5.5	5.2	5.0	4.8	4.7	Mudgee	3.2	3.2	2.9	3.2	3.1
Hawkesbury	3.4	3.3	3.2	3.4	3.2	Bathurst Base	3.4	3.2	3.1	3.1	2.9
Nepean Private	-	4.3	4.8	4.7	4.7	Orange Base	3.4	3.2	3.2	3.3	3.1
Westmead Private		4.8	4.9	4.7	4.2	Broken Hill Base	4.4	3.4	3.6	3.4	3.3
Other area hospitals	4.9	4.3	4.0	3.1	3.5	Other area hospitals	3.7	3.5	3.5	3.2	3.3
ALL HOSPITALS	3.5	3.4	3.5	3.4	3.5	ALL HOSPITALS	3.3	3.1	3.0	3.0	2.9
Northern Sydney & Central (
Gosford	2.5	2.4	2.3	2.5	2.5	TOTAL NSW	3.7	3.5	3.5	3.5	3.4
Wyong	2.4	2.3	2.2	2.1	2.1						
Hornsby	3.7	3.6	3.5	3.1	2.9						
Manly	3.8	3.8	3.6	3.5	3.6						
Mona Vale	3.7	3.8	3.5	3.5	3.3						
Royal North Shore	4.3	3.9	3.7	3.6	3.5						
Ryde	3.4	3.3	3.1	3.4	3.3						
Mater, North Sydney	5.4	5.2	4.8	4.5	4.5						
North Shore Private	4.8	4.7	4.6	4.5	4.4						
Sydney Adventist	5.5	5.2	4.7	4.6	4.6						
North Gosford Private	5.6	5.3	4.9	4.9	4.7						
ALL HOSPITALS	4.2	4.1	3.9	3.9	3.8						

Source: Linked data of the NSW Midwives Data Collection and NSW Inpatient Statistics Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.
Hospitals with more than 200 deliveries are identified individually. All hospitals include all public and private hospitals.

Induction of labour for other than defined indications, Indicator 1.1

Definition: The number of patients undergoing induction of labour other than for defined indications (excluding augmentation of labour) as a percentage of the total number of patients undergoing induction of labour for any reason (excluding augmentation of labour).

Table 133 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area and the NSW total.

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	12.1	15.2	19.3	20.6	23.0	Armidale	40.3	36.6	35.7	51.5	38.9
Royal Prince Alfred	18.2	21.9	23.6	27.8	25.6	Inverell	48.4	42.0	38.5	52.2	52.5
Camden	-	-	-	21.3	23.3	Moree	29.7	34.9	36.6	49.0	32.3
Fairfield	18.7	12.9	16.9	20.6	22.6	Tamworth Base	26.3	24.9	27.2	18.4	15.3
Liverpool	26.2	27.9	31.5	27.6	25.8	Manning Base	37.3	43.3	43.9	49.0	55.2
Campbelltown	22.2	23.5	22.3	19.9	25.3	Maitland	21.9	29.0	29.4	29.8	30.1
Bankstown-Lidcombe	13.0	18.3	19.4	20.2	19.5	Muswellbrook	38.2	27.6	27.5	16.4	28.4
Sydney Southwest Private	43.5	45.1	47.9	50.2	50.6	Belmont	24.6	27.7	27.0	24.5	27.5
Bowral	22.7	26.3	44.1	39.5	42.5	John Hunter	25.4	24.9	27.2	24.1	27.1
Other area hospitals	55.3	-				Christo Road Private	40.7	31.8	32.1	36.1	32.1
ALL HOSPITALS	23.1	23.8	27.0	27.8	27.9	NIB Private	-	-	-	-	40.6
South Eastern Sydney & Illa	awarra					Other area hospitals	35.1	33.4	41.1	44.9	40.5
Royal Hospital for Women	18.2	21.2	24.2	25.2	28.6	ALL HOSPITALS	30.4	30.1	31.7	32.7	33.6
St. George	27.8	18.6	20.9	21.2	16.9	North Coast					
Sutherland	17.4	20.6	24.2	17.9	26.3	Coffs Harbour	41.1	45.5	41.5	44.0	44.6
Hurstville Community	63.4	61.3	55.5	63.2	60.9	Grafton Base	28.3	25.2	28.3	23.5	11.6
Kareena Private	59.4	60.4	62.6	64.7	71.7	Kempsey	26.7	26.8	26.9	17.2	22.5
St. George Private	48.5	44.6	41.4	40.2	53.6	Lismore Base	26.4	19.9	19.0	21.2	15.2
Prince of Wales Private	55.8	49.0	40.4	40.6	48.1	Murwillumbah	23.5	28.4	23.8	34.9	33.0
Shoalhaven	35.5	31.2	30.4	30.5	34.5	Tweed Heads	35.5	21.9	32.3	31.8	27.5
Wollongong	17.1	20.6	26.0	23.3	29.8	Port Macquarie Base	29.6	24.3	24.7	24.8	26.8
Illawarra Private	39.0	38.9	40.5	35.8	45.6	Other area hospitals	54.4	55.0	40.5	43.1	44.
Other area hospitals	18.5	19.0	22.7	19.5	50.0	ALL HOSPITALS	32.0	28.6	28.5	29.7	26.7
ALL HOSPITALS	32.9	34.1	34.3	34.2	39.4	Greater Southern					
Sydney West						Cooma	16.1	13.8	24.2	5.7	6.
Auburn	16.1	20.0	14.5	10.9	12.0	Goulburn Base	21.2	29.6	7.1	24.0	35.3
Blacktown	25.1	24.8	34.3	30.6	25.6	Moruya	32.1	35.0	28.0	18.8	44.8
Blue Mountains	19.5	26.0	17.9	26.6	20.4	Queanbeyan	29.9	33.9	26.7	24.2	25.
Nepean	26.1	25.3	29.8	30.4	32.5	Griffith Base	25.0	30.9	22.4	23.9	23.8
Westmead	24.4	21.9	24.2	22.2	21.5	Wagga Wagga Base	23.5	18.6	25.1	21.4	20.8
The Hills Private	51.6	53.3	55.0	58.7	67.2	Calvary, Wagga Wagga	61.1	56.5	62.9	60.3	49.
Hawkesbury	24.5	22.5	26.1	18.6	19.2	Other area hospitals	28.8	32.9	33.8	34.2	34.
Nepean Private	30.8	30.7	35.2	31.6	39.9	ALL HOSPITALS	32.8	33.6	35.6	33.8	33.0
Westmead Private	43.6	33.3	37.3	50.9	50.4	Greater Western					
Other area hospitals	29.8	28.6	25.0	28.1	25.5	Dubbo Base	39.4	31.9	39.3	39.1	47.0
ALL HOSPITALS	28.3	28.5	32.5	33.4	34.3	Bathurst Base	15.8	30.0	15.0	18.4	12.
Northern Sydney & Central						Cowra	51.4	26.5	29.7	35.1	17.
Gosford	26.5	22.5	25.2	21.3	23.9	Orange Base	28.0	22.8	17.5	25.9	29.6
Wyong	_	11.1	12.5	25.0	33.3	Broken Hill Base	13.0	24.4	15.9	26.7	35.7
Hornsby	31.4	25.9	29.7	32.5	34.1	Other area hospitals	26.5	30.3	34.6	34.3	26.4
Manly	28.2	31.0	24.9	19.7	22.2	ALL HOSPITALS	30.7	29.0	29.3	32.2	33.
Mona Vale	45.3	36.8	26.3	25.3	28.7	TOTAL 110111					
Royal North Shore	23.4	26.3	24.1	25.8	22.1	TOTAL NSW	31.2	31.7	33.1	33.5	35.
Ryde	15.8	27.0	30.7	14.3	21.4						
Mater, North Sydney	48.8	42.5	47.5	45.9	50.8						
North Shore Private	42.2	48.8	47.5	48.4	51.8						
Sydney Adventist	60.0	65.9	57.2	61.3	67.8						
North Gosford Private	55.6	51.5	52.6	60.8	60.2						
ALL HOSPITALS	40.2	42.1	41.3	41.0	43.6						

Source: Linked data of the NSW Midwives Data Collection and NSW Inpatient Statistics Collection (HOIST). Centre for Epidemiology and Research, NSW Department of Health.

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Induction of labour for other than defined indications, Indicator 1.2

Definition: The number of patients undergoing induction of labour other than for defined indications (excluding augmentation of labour) as a percentage of the total number of patients delivering (excluding augmentation of labour).

Table 134 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Sydney South West Canterbury Royal Prince Alfred Camden Fairfield Liverpool Campbelltown Bankstown–Lidcombe Sydney Southwest Private Bowral Other area hospitals ALL HOSPITALS	2.2 3.6	3.2									
Royal Prince Alfred Camden Fairfield Liverpool Campbelltown Bankstown-Lidcombe Sydney Southwest Private Bowral Other area hospitals		2.2				Hunter & New England					
Camden Fairfield Liverpool Campbelltown Bankstown-Lidcombe Sydney Southwest Private Bowral Other area hospitals	3.6	3.2	4.3	4.5	4.8	Armidale	11.5	11.1	13.9	15.7	12.0
Fairfield Liverpool Campbelltown Bankstown-Lidcombe Sydney Southwest Private Bowral Other area hospitals	-	4.6	5.2	5.9	5.3	Inverell	13.0	11.2	11.5	17.1	18.1
Liverpool Campbelltown Bankstown–Lidcombe Sydney Southwest Private Bowral Other area hospitals		-	-	3.6	4.4	Moree	7.8	9.4	10.3	13.0	10.3
Campbelltown Bankstown–Lidcombe Sydney Southwest Private Bowral Other area hospitals	3.8	2.6	3.2	3.9	4.4	Tamworth Base	7.2	6.9	8.3	5.4	4.3
Bankstown-Lidcombe Sydney Southwest Private Bowral Other area hospitals	5.5	6.8	7.5	7.0	5.7	Manning Base	9.3	10.2	11.4	14.8	17.0
Sydney Southwest Private Bowral Other area hospitals	5.7	5.9	5.3	5.3	7.5	Maitland	4.9	6.5	8.5	6.5	6.9
Bowral Other area hospitals	2.6	3.5	4.1	4.0	4.4	Muswellbrook	9.7	7.8	6.3	4.4	8.5
Other area hospitals	17.2	17.3	19.1	20.1	19.1	Belmont	6.5	7.3	7.3	6.2	6.5
	6.3	6.5	11.6	10.7	11.6	John Hunter	5.6	5.6	6.8	5.8	6.3
ALL HOSPITALS	18.9	-	-	0.0	-	Christo Road Private	11.5	9.4	10.4	11.7	9.1
	5.2	5.5	6.4	6.6	6.6	NIB Private	0.0	0.0	0.0	0.0	12.4
South Eastern Sydney & III	awarra					Other area hospitals	9.1	8.8	10.5	12.0	10.9
Royal Hospital for Women	3.8	4.4	5.5	5.6	5.8	ALL HOSPITALS	7.4	7.5	8.7	8.6	8.9
St. George	5.7	3.5	4.2	4.2	3.2	North Coast					
Sutherland	4.8	5.4	6.3	4.1	6.7	Coffs Harbour	11.9	12.5	10.4	12.0	10.0
Hurstville Community	18.0	20.0	16.0	18.9	17.3	Grafton Base	7.6	6.4	6.8	6.0	2.8
Kareena Private	23.0	22.8	23.6	22.5	26.7	Kempsey	5.5	6.7	5.8	4.0	5.0
St. George Private	11.6	12.8	10.0	10.4	14.9	Lismore Base	6.0	4.3	4.6	4.8	3.6
Prince of Wales Private	13.2	11.2	10.1	9.1	11.7	Murwillumbah	6.1	6.7	5.9	8.1	7.5
Shoalhaven	7.3	6.3	6.1	5.6	5.8	Tweed Heads	6.7	5.2	7.3	7.5	6.8
Wollongong	4.5	5.8	7.1	5.5	7.2	Port Macquarie Base	7.9	6.5	7.0	5.5	5.7
Illawarra Private	13.2	13.1	14.1	13.9	17.7	Other area hospitals	6.4	5.6	6.1	5.1	6.6
Other area hospitals	4.1	4.3	4.3	4.4	10.4	ALL HOSPITALS	7.4	6.5	6.7	6.7	6.0
ALL HOSPITALS	8.0	8.5	8.6	8.4	9.6	Greater Southern					
Sydney West						Cooma	2.8	2.6	4.8	1.3	1.5
Auburn	2.8	3.6	2.6	1.9	2.1	Goulburn Base	2.2	2.5	0.7	2.0	2.1
Blacktown	5.6	6.4	8.4	6.7	5.7	Moruya	4.9	4.2	4.5	3.3	10.4
Blue Mountains	3.6	5.0	5.0	6.7	4.0	Queanbeyan	6.0	5.9	4.7	5.9	5.3
Nepean	6.3	6.7	7.8	8.7	8.6	Griffith Base	6.7	6.0	4.9	4.7	4.4
Westmead	4.7	4.2	4.7	4.2	4.5	Wagga Wagga Base	5.9	4.6	6.0	4.7	4.9
The Hills Private	16.5	19.7	20.6	22.6	25.6	Calvary, Wagga Wagga	27.4	20.8	22.5	19.6	16.1
Hawkesbury	5.6	5.5	5.7	3.7	4.2	Other area hospitals	6.8	9.6	9.9	9.8	10.2
Nepean Private	8.8	10.5	10.3	10.0	12.6	ALL HOSPITALS	8.0	8.2	9.0	8.2	8.2
Westmead Private	13.8	9.1	10.4	15.3	14.8	Greater Western					
Other area hospitals	7.6	6.0	6.0	7.6	6.9	Dubbo Base	9.9	10.4	10.8	10.9	13.7
ALL HOSPITALS	6.4	7.1	8.0	8.3	8.6	Bathurst Base	3.0	5.2	2.8	3.3	2.1
Northern Sydney & Central	Coast					Cowra	10.2	5.6	6.5	10.6	4.8
Gosford	6.5	5.7	6.6	5.2	5.2	Orange Base	7.6	5.6	4.1	6.5	8.0
Wyong	0.0	0.3	0.3	0.8	1.8	Broken Hill Base	2.2	3.7	2.7	2.9	3.9
Hornsby	8.2	7.3	7.3	7.5	7.6	Other area hospitals	4.0	6.1	6.2	5.5	4.7
Manly	7.5	9.0	6.5	4.9	6.0	ALL HOSPITALS	6.6	7.0	6.6	7.3	7.9
Mona Vale	10.2	10.1	7.2	6.3	5.7						
Royal North Shore	4.8	6.0	5.1	5.8	4.9	TOTAL NSW	7.4	7.9	8.3	8.2	8.6
Ryde	3.3	6.6	6.5	2.7	2.3						
Mater, North Sydney	12.6	11.4	13.1	11.3	13.6						
North Shore Private	12.4	14.1	13.2	12.7	12.9						
Sydney Adventist	19.0	23.1	18.3	19.1	20.7						
North Gosford Private	18.7	15.9	15.8	18.2	16.8						
ALL HOSPITALS	10.3	11.6	11.0	10.3	10.6						

Vol. 16 No. S-4

Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour

rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Vaginal delivery following primary caesarean section, Indicator 2.1

Definition: The number of patients delivering vaginally following previous primary caesarean section as a percentage of the total number of patients delivering who have had a previous primary caesarean section with no intervening pregnancies greater than 20 weeks gestation.

Table 135 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	29.8	34.3	24.8	22.1	27.5	Armidale	47.6	19.0	46.4	33.3	25.6
Royal Prince Alfred	27.7	26.6	23.5	22.5	22.5	Inverell	10.5	8.3	8.3	9.5	11.1
Camden	_	-	-	50.0	-	Moree	5.3	35.7	33.3	34.6	13.6
Fairfield	32.4	17.4	34.1	18.6	20.2	Tamworth Base	11.9	13.3	24.3	8.3	14.8
Liverpool	29.5	22.6	20.8	13.4	15.5	Manning Base	34.0	18.4	40.8	35.7	21.7
Campbelltown	36.8	18.8	16.7	24.7	18.1	Maitland	17.0	14.0	11.0	16.4	10.9
Bankstown-Lidcombe	27.1	20.6	25.6	20.5	18.9	Muswellbrook	66.7	33.3	27.8	25.0	46.2
Sydney Southwest Private	14.3	10.8	11.6	12.6	9.8	Belmont	36.1	26.2	14.5	11.8	19.6
Bowral	14.0	22.4	25.0	10.4	24.5	John Hunter	29.4	25.2	28.0	25.9	21.9
Other area hospitals	12.1	-	-	-	-	Christo Road Private	11.2	9.4	12.9	14.4	17.9
ALL HOSPITALS	27.9	22.8	22.1	19.2	19.6	NIB Private	0.0	0.0	0.0	0.0	7.6
South Eastern Sydney & Illa	awarra					Other area hospitals	17.5	14.9	8.4	6.1	5.1
Royal Hospital for Women	14.2	11.9	13.1	13.3	10.6	ALL HOSPITALS	22.8	17.7	20.1	19.5	16.1
St. George	23.6	12.9	19.7	22.2	15.2	North Coast					
Sutherland	22.2	22.4	14.3	15.7	16.2	Coffs Harbour	8.3	13.8	13.5	9.5	13.1
Hurstville Community	2.3	9.6	7.1	6.7	6.1	Grafton Base	7.3	22.2	17.5	9.1	16.7
Kareena Private	6.7	4.1	4.1	2.8	3.0	Kempsey	29.2	33.3	55.0	40.7	15.4
St. George Private	9.1	11.4	11.6	6.8	4.4	Lismore Base	18.8	31.3	28.4	17.6	24.8
Prince of Wales Private	5.5	6.7	7.9	4.6	3.5	Murwillumbah	31.3	13.8	22.4	11.5	9.3
Shoalhaven	20.9	18.4	19.1	23.4	15.2	Tweed Heads	29.8	38.3	26.3	16.0	21.
Wollongong	30.7	26.7	25.2	21.6	31.0	Port Macquarie Base	22.6	20.0	14.5	14.3	21.5
Illawarra Private	16.7	11.5	12.8	7.5	11.6	Other area hospitals	8.0	5.6	13.9	11.8	14.7
Other area hospitals	0.0	13.6	12.5	18.8	100.0	ALL HOSPITALS	18.6	24.0	21.7	15.1	18.6
ALL HOSPITALS	14.8	12.4	12.9	11.7	11.0	Greater Southern					
Sydney West						Cooma	21.4	20.0	10.0	28.6	33.3
Auburn	36.0	31.7	26.5	30.0	6.8	Goulburn Base	31.8	36.4	36.7	13.0	28.9
Blacktown	31.1	29.3	23.2	21.8	18.0	Moruva	20.0	18.2	20.0	0.0	16.7
Blue Mountains	40.7	39.1	12.5	33.3	33.3	Queanbeyan	16.7	26.9	30.0	21.7	52.4
Nepean	29.3	22.8	18.6	16.9	16.6	Griffith Base	27.7	32.1	9.8	24.3	25.6
Westmead	30.1	28.5	28.2	20.9	17.5	Wagga Wagga Base	23.1	26.8	16.0	17.5	17.8
The Hills Private	12.1	15.1	14.6	11.2	11.4	Calvary, Wagga Wagga	3.6	16.3	18.2	15.6	19.7
Hawkesbury	31.6	28.6	26.3	14.8	14.5	Other area hospitals	19.1	15.8	22.0	9.4	17.0
Nepean Private	37.0	19.8	16.7	8.4	11.5	ALL HOSPITALS	20.8	22.5	19.8	15.0	22.6
Westmead Private	25.0	18.5	22.5	17.9	16.6	Greater Western					
Other area hospitals	21.7	14.3	5.3	20.8	23.1	Dubbo Base	25.0	37.3	29.5	34.4	31.
ALL HOSPITALS	28.3	24.7	22.1	18.4	15.8	Bathurst Base	13.0	15.0	7.7	14.8	17.8
Northern Sydney & Central	Coast					Cowra	18.8	38.5	15.0	20.0	27.8
Gosford	22.3	23.4	22.7	16.9	10.5	Orange Base	11.1	18.8	18.5	20.8	16.3
Wyong	100.0	100.0		_	_	Broken Hill Base	30.8	12.5	22.2	26.3	32.0
Hornsby	13.6	9.6	6.2	12.7	11.0	Other area hospitals	11.0	9.7	17.9	6.8	17.6
Manly	20.3	14.3	4.4	7.0	12.1	ALL HOSPITALS	16.2	21.4	18.8	20.4	22.2
Mona Vale	22.9	6.8	11.5	12.9	11.4						
Royal North Shore	9.9	13.8	7.5	11.2	16.1	TOTAL NSW	20.4	18.3	17.2	14.8	14.6
Ryde	14.3	12.1	23.3	5.3	5.3						
Mater, North Sydney	10.7	7.8	5.8	6.4	5.5						
North Shore Private	6.5	8.5	6.6	6.8	5.4						
Sydney Adventist	11.5	9.9	7.0	3.6	7.1						
North Gosford Private	8.9	9.1	6.2	3.8	8.0						
ALL HOSPITALS	13.1	11.4	9.1	7.8	8.3						

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Primary caesarean section for failure to progress, Indicator 3.1

Definition: The number of patients undergoing primary Caesarean section for failure to progress after a period of labour with cervical dilation of 3 cm or less as a percentage of the total number of patients undergoing primary non-elective Caesarean section.

Table 136 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	8.1	13.7	9.1	9.1	10.1	Armidale	0.0	2.9	5.4	0.0	6.7
Royal Prince Alfred	3.2	5.7	6.5	8.5	5.5	Inverell	15.4	0.0	12.5	0.0	12.5
Camden	_	_	_	16.7	14.3	Moree	3.8	0.0	12.0	12.5	26.7
Fairfield	7.1	10.0	13.0	11.5	10.3	Tamworth Base	6.7	15.4	9.5	7.1	3.4
Liverpool	14.2	9.2	12.4	5.0	9.1	Manning Base	10.9	17.1	14.0	15.7	15.8
Campbelltown	7.6	7.8	7.0	11.5	8.6	Maitland	5.6	8.7	8.0	10.0	9.8
Bankstown-Lidcombe	6.0	8.0	3.4	6.2	16.1	Muswellbrook	13.3	14.3	4.8	0.0	0.0
Sydney Southwest Private	7.3	13.2	18.1	6.3	11.4	Belmont	15.6	8.3	11.9	18.5	4.5
Bowral	16.0	7.7	8.1	18.2	4.8	John Hunter	9.7	8.7	13.1	9.2	10.3
Other area hospitals	22.4	_	_	0.0	_	Christo Road Private	5.4	11.8	2.7	3.6	3.7
ALL HOSPITALS	8.2	8.4	8.8	8.8	8.8	NIB Private	0.0	0.0	_	_	1.1
outh Eastern Sydney & III	awarra					Other area hospitals	11.7	16.7	16.9	10.6	12.5
Royal Hospital for Women	6.1	4.0	5.4	6.3	6.7	ALL HOSPITALS	8.8	10.2	10.4	8.8	8.4
St. George	8.1	9.3	6.6	9.8	4.6	North Coast					
Sutherland	9.4	12.9	16.1	9.4	8.2	Coffs Harbour	16.1	13.6	16.4	15.4	7.5
Hurstville Community	17.2	20.5	17.1	16.4	10.9	Grafton Base	17.3	16.3	10.4	5.8	21.4
Kareena Private	21.3	14.5	18.5	11.1	8.9	Kempsey	5.9	11.8	0.0	11.5	6.3
St. George Private	13.5	13.5	19.9	13.3	13.5	Lismore Base	3.9	10.1	7.8	9.4	12.0
Prince of Wales Private	9.5	11.0	9.4	7.7	11.3	Murwillumbah	17.0	7.9	19.1	19.1	20.0
Shoalhaven	12.9	8.8	9.2	9.7	13.5	Tweed Heads	3.9	16.7	10.7	14.5	7.7
Wollongong	9.9	7.1	6.9	7.3	5.3	Port Macquarie Base	8.8	6.8	5.8	2.3	5.1
Illawarra Private	18.0	15.8	11.5	19.2	9.1	Other area hospitals	0.0	20.0	0.0	0.0	50.0
Other area hospitals	0.0	11.8	2.4	3.8	0.0	ALL HOSPITALS	9.9	11.4	10.2	10.0	11.9
ALL HOSPITALS	9.9	9.8	10.1	9.8	8.2	Greater Southern	0.0	11.4	10.2	10.0	11.0
	0.0	0.0	10.1	0.0	0.2	Cooma	26.3	0.0	20.0	0.0	8.3
Sydney West Auburn	4.0	6.0	4.9	4 4	7.0						
Blacktown	4.2 7.3	6.3 9.9	14.2	4.1 4.3	7.6 8.7	Goulburn Base	16.7 36.4	8.7 9.5	10.5 15.0	0.0 17.6	20.0
Blue Mountains	7.3 2.9	9.9 6.3	11.1	12.0	8.7 8.7	Moruya	33.3	9.5		0.0	25.0
	2.9 9.8	6.9	5.9	10.4	9.2	Queanbeyan Griffith Base	6.5	24.4	11.8 12.5	14.3	25.U
Nepean	9.8	11.2	5.9 8.9		9.2 8.3			24.4 5.7		5.9	
Westmead The Hills Private	9.3	9.8	19.6	8.0 21.7	16.3	Wagga Wagga Base Calvary, Wagga Wagga	7.1 16.1	5.7 8.6	9.2 16.4	22.0	10.0
Hawkesbury	8.5	11.4	12.5	16.5	10.0	Other area hospitals	17.8	24.8	13.4	11.0	15.1
Nepean Private	0.0	9.1	13.2	10.5	14.1	ALL HOSPITALS	16.5	24.8 14.4	13.4	10.9	12.4
Westmead Private	12.5	11.3	9.0	17.5	14.1		10.5	14.4	13.1	10.9	12.4
Other area hospitals	9.1	14.3	12.5	16.7	10.0	Greater Western					
ALL HOSPITALS	9.1 8.8	9.5	10.2	10.7	10.0	Dubbo Base	11.7	9.9	11.2	8.7	14.1
		9.5	10.2	10.0	10.3	Bathurst Base	18.2	17.5	14.8	12.1	6.9
Northern Sydney & Central		0.5	0.0	0.0	7.0	Cowra	21.4	30.8	25.0	9.1	15.4
Gosford	8.0	9.5	9.9	6.2	7.2	Orange Base	18.1	18.6	17.1	9.5	7.7
Wyong	0.0	7.1	0.0	0.0	0.0	Broken Hill Base	25.0	5.7	21.7	13.6	12.9
Hornsby	11.6	8.2	14.8	15.2	1.9	Other area hospitals	11.8	11.3	4.4	11.9	13.3
Manly	18.0	9.1	12.5	4.3	8.6	ALL HOSPITALS	15.8	13.9	13.9	10.4	11.3
Mona Vale	16.7	14.5	2.0	5.5	9.4	TOTAL NIONA	40.0	40.0	40.0	0.0	
Royal North Shore	6.8	6.6	12.7	6.4	8.4	TOTAL NSW	10.2	10.2	10.6	9.6	9.3
Ryde	6.5	0.0	0.0	12.5	0.0						
Mater, North Sydney	12.4	9.9	11.3	10.3	12.6						
North Shore Private	17.1	15.5	13.5	9.6	11.1						
Sydney Adventist	13.7	10.6	11.4	5.6	5.0						
North Gosford Private	11.0	18.2	19.6	22.5	18.8						
ALL HOSPITALS	11.7	10.7	11.8	8.5	8.8						

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Primary caesarean section for failure to progress, Indicator 3.2

Definition: The number of patients undergoing primary caesarean section for failure to progress after a period of labour with cervical dilation of more than 3 cm as a percentage of the total number of patients undergoing primary non-elective Caesarean section.

Table 137 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	31.5	27.5	33.3	41.4	30.3	Armidale	13.3	23.5	24.3	28.6	26.7
Royal Prince Alfred	34.1	32.3	38.2	37.1	37.9	Inverell	15.4	25.0	25.0	12.5	25.0
Camden	_	_	_	54.8	47.6	Moree	19.2	37.5	24.0	12.5	20.0
Fairfield	42.9	16.3	30.4	24.0	39.7	Tamworth Base	31.1	11.5	28.6	16.7	28.8
Liverpool	31.6	33.9	30.3	28.2	36.9	Manning Base	37.0	31.7	31.6	29.4	40.4
Campbelltown	32.3	37.2	40.3	32.8	47.1	Maitland	42.6	30.1	33.3	30.8	34.1
Bankstown-Lidcombe	28.2	25.7	28.4	30.9	38.7	Muswellbrook	60.0	42.9	66.7	60.0	58.8
Sydney Southwest Private	29.3	19.1	31.3	24.2	29.5	Belmont	24.4	36.1	22.0	18.5	38.6
Bowral	56.0	43.6	32.4	29.5	40.5	John Hunter	37.6	36.6	34.7	42.3	41.4
Other area hospitals	37.9			0.0		Christo Road Private	32.3	27.5	17.3	4.3	5.6
ALL HOSPITALS	33.5	30.8	34.9	33.1	38.1	NIB Private	0.0	0.0			4.3
South Eastern Sydney & Illa	awarra					Other area hospitals	46.7	27.3	38.5	27.7	42.9
Royal Hospital for Women	41.4	40.9	41.4	49.4	56.6	ALL HOSPITALS	36.1	30.9	31.1	28.0	31.9
St. George	37.6	37.1	43.1	37.9	43.3	North Coast					
Sutherland	22.4	44.3	30.6	34.0	36.5	Coffs Harbour	24.2	47.0	40.0	38.5	43.4
Hurstville Community	17.2	26.5	31.1	34.3	38.0	Grafton Base	34.6	37.2	12.5	15.4	33.9
Kareena Private	16.4	10.1	13.6	22.2	19.6	Kempsey	35.3	41.2	20.0	30.8	25.0
St. George Private	26.9	29.4	26.5	25.0	25.5	Lismore Base	36.9	42.6	43.1	45.6	46.4
Prince of Wales Private	39.5	26.7	20.6	22.5	30.5	Murwillumbah	29.8	31.6	34.0	42.6	25.0
Shoalhaven	38.7	41.2	28.9	33.3	43.2	Tweed Heads	31.4	23.8	37.5	30.4	21.8
Wollongong	30.2	26.2	23.7	25.4	28.9	Port Macquarie Base	40.4	30.1	21.2	31.4	32.9
Illawarra Private	38.0	38.2	33.3	20.2	20.5	Other area hospitals	33.3	20.0	33.3	62.5	0.0
Other area hospitals	50.0	47.1	39.0	42.3	100.0	ALL HOSPITALS	33.4	37.3	34.5	36.2	34.4
ALL HOSPITALS	34.4	33.9	32.6	34.0	39.2	Greater Southern					
Sydney West						Cooma	36.8	57.1	33.3	50.0	41.7
Auburn	22.2	20.6	37.0	20.3	30.3	Goulburn Base	26.7	30.4	36.8	13.3	15.0
Blacktown	23.4	16.5	28.4	26.1	38.6	Moruya	18.2	33.3	25.0	17.6	48.0
Blue Mountains	48.6	37.5	38.9	44.0	39.1	Queanbeyan	44.4	40.0	17.6	44.4	31.3
Nepean	32.2	43.4	38.9	48.0	46.4	Griffith Base	35.5	17.8	15.0	16.3	23.8
Westmead	32.2	36.9	35.3	35.4	39.6	Wagga Wagga Base	26.8	18.6	23.1	26.5	22.9
The Hills Private	29.8	33.0	12.7	24.3	25.0	Calvary, Wagga Wagga	19.4	22.9	30.9	32.2	20.0
Hawkesbury	46.3	45.7	36.1	40.2	41.3	Other area hospitals	29.7	30.5	25.8	45.1	31.2
Nepean Private	38.5	34.1	33.3	37.3	46.5	ALL HOSPITALS	29.3	27.3	25.3	31.0	27.6
Westmead Private	50.0	16.3	21.5	25.7	31.4	Greater Western					
Other area hospitals	34.8	10.7	33.3	20.8	40.0	Dubbo Base	26.0	24.7	23.5	26.9	24.2
ALL HOSPITALS	31.8	31.6	32.2	34.3	39.2	Bathurst Base	25.5	32.5	37.0	24.1	37.9
Northern Sydney & Central	Coast					Cowra	42.9	38.5	50.0	27.3	15.4
Gosford	46.2	45.2	36.8	45.0	36.5	Orange Base	20.8	25.4	35.5	20.6	23.1
Wyong	53.3	64.3	45.5	87.5	72.7	Broken Hill Base	43.8	14.3	47.8	36.4	29.0
Hornsby	39.5	42.5	51.9	27.3	36.9	Other area hospitals	52.9	38.7	33.3	49.2	53.3
Manly	40.4	50.0	33.3	43.0	37.1	ALL HOSPITALS	31.2	28.8	33.6	30.0	30.9
Mona Vale	37.5	36.4	38.8	41.8	43.8						
Royal North Shore	27.9	34.2	26.9	37.0	37.3	TOTAL NSW	33.8	31.9	31.9	32.9	35.8
Ryde	35.5	31.0	23.1	29.2	44.4						
Mater, North Sydney	31.6	22.8	26.8	25.7	31.8						
North Shore Private	34.2	26.8	24.3	33.2	31.1						
Sydney Adventist	17.6	18.2	16.5	12.6	6.9						
North Gosford Private	53.7	37.5	37.4	33.8	45.0						
ALL HOSPITALS	35.3	31.7	29.1	32.5	32.3						

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Primary caesarean section for fetal distress, Indicator 4.1

Definition: The number of patients undergoing primary Caesarean section for fetal distress as a percentage of the total number of patients delivering.

Table 138 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	3.5	2.9	3.1	2.7	3.2	Armidale	0.7	2.8	2.6	0.9	3.8
Royal Prince Alfred	3.6	4.4	4.3	3.5	4.0	Inverell	0.9	1.9	2.3	2.4	2.2
Camden	-	-	-	1.1	1.5	Moree	4.5	3.4	3.6	0.5	2.0
Fairfield	1.3	2.7	1.7	3.2	1.5	Tamworth Base	2.5	2.5	2.4	3.1	2.4
Liverpool	3.6	3.7	3.7	4.9	4.0	Manning Base	1.1	1.5	2.5	1.9	1.9
Campbelltown	2.3	2.1	3.2	3.0	3.0	Maitland	2.8	4.1	5.4	4.6	3.5
Bankstown-Lidcombe	2.6	3.7	2.5	2.5	2.5	Muswellbrook	0.9	1.5	2.2	0.9	1.8
Sydney Southwest Private	3.9	3.5	3.4	3.7	3.3	Belmont	1.7	1.3	4.1	3.2	2.1
Bowral	1.4	0.6	2.0	1.2	1.7	John Hunter	3.6	3.6	3.9	3.0	3.4
Other area hospitals	2.6	-		0.0		Christo Road Private	2.8	3.7	2.7	2.6	3.9
ALL HOSPITALSI	2.9	3.3	3.2	3.3	3.2	NIB Private	0.0	0.0	0.0	0.0	3.5
South Eastern Sydney & Illa	warra					Other area hospitals	1.3	1.3	1.6	1.5	1.8
Royal Hospital for Women	3.4	3.3	3.5	3.9	4.1	ALL HOSPITALS	2.5	2.9	3.4	2.8	3.0
St. George	3.6	4.1	4.0	3.9	4.2	North Coast					
Sutherland	4.2	2.3	2.9	3.2	3.3	Coffs Harbour	2.3	0.6	0.9	1.6	2.1
Hurstville Community	3.2	2.7	3.6	2.8	3.5	Grafton Base	3.8	1.4	8.5	5.0	4.4
Kareena Private	4.4	5.3	3.6	4.1	3.2	Kempsey	2.0	0.7	1.6	2.2	2.8
St. George Private	5.0	3.4	3.0	4.1	3.3	Lismore Base	3.9	2.4	3.9	3.5	2.5
Prince of Wales Private	2.3	3.5	3.7	2.6	2.7	Murwillumbah	4.3	4.0	3.8	2.2	7.0
Shoalhaven	2.9	3.5	2.9	4.3	1.6	Tweed Heads	2.5	2.5	2.6	3.3	3.5
Wollongong	3.3	4.6	4.7	3.6	3.2	Port Macquarie Base	2.8	3.9	3.1	3.9	3.8
Illawarra Private	2.0	2.9	4.7	5.7	4.9	Other area hospitals	0.0	0.3	0.2	0.2	0.2
Other area hospitals	0.0	1.8	2.1	1.9	0.0	ALL HOSPITALS	2.8	2.1	3.0	2.9	3.1
ALL HOSPITALS	3.4	3.5	3.7	3.7	3.5	Greater Southern					
Sydney West						Cooma	2.8	2.0	3.0	3.2	1.5
Auburn	2.2	3.1	3.1	3.9	2.2	Goulburn Base	1.9	0.9	2.3	3.3	1.1
Blacktown	3.4	5.7	4.7	5.9	4.5	Moruya	1.1	1.8	3.9	3.3	1.2
Blue Mountains	2.0	3.7	3.5	2.2	2.4	Queanbevan	0.3	4.0	1.6	1.6	0.8
Nepean	4.3	3.9	4.6	4.6	4.8	Griffith Base	2.1	3.3	3.3	4.7	4.0
Westmead	5.1	5.7	5.0	5.9	6.8	Wagga Wagga Base	3.5	4.0	3.0	4.0	4.4
The Hills Private	1.9	3.0	2.9	3.3	2.3	Calvary, Wagga Wagga	1.4	1.8	3.6	1.2	3.5
Hawkesbury	1.8	1.6	2.1	3.7	3.4	Other area hospitals	1.3	1.5	1.6	1.6	2.2
Nepean Private	2.2	2.1	2.5	3.6	2.0	ALL HOSPITALS	1.9	2.4	2.5	2.6	2.7
Westmead Private	0.8	3.3	2.7	3.1	4.6	Greater Western	1.0		2.0		
Other area hospitals	2.8	6.5	2.8	6.7	3.4	Dubbo Base	2.4	2.7	2.1	2.5	3.5
ALL HOSPITALS	3.6	4.2	4.0	4.7	4.6	Bathurst Base	3.2	2.7	4.1	3.5	3.5 2.5
						Cowra	2.8	2.3 1.9	0.0	3.5 2.1	2.5 1.9
Northern Sydney & Central Gosford	2.7	2.8	3.5	3.6	5.9	Orange Base	2.8 3.8	2.9	2.5	2.1	3.3
Wyong	0.4	2.8 0.8	3.5 1.5	0.6	0.0	Broken Hill Base	3.8 0.7	3.0	2.5 0.8	1.5	3.3
Hornsby	1.9	3.1	3.0	3.7	4.4	Other area hospitals	1.3	1.8	1.8	1.6	3.5 1.8
	2.0	2.0	2.7	3.7 2.7	3.8	ALL HOSPITALS	2.4	2.5	2.2	2.3	2.9
Manly Mona Vale	2.0	2.0	2.7	3.3	2.6	ALL HUSPHALS	2.4	2.5	2.2	2.3	2.9
		3.4	3.8	3.3 6.6		TOTAL NICW	2.0	2.2	2.4	2.5	2.5
Royal North Shore	5.6				4.7	TOTAL NSW	3.0	3.3	3.4	3.5	3.5
Ryde	2.6	3.0	4.2	2.3	8.0						
Mater, North Sydney	3.5	4.5	4.1	4.2	3.6						
North Shore Private	2.7	2.6	3.7	3.7	3.7						
Sydney Adventist	2.5	3.2	3.0	2.3 1.3	2.3 1.8						
North Gosford Private	2.7	2.4									

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Primary caesarean section for fetal distress, Indicator 4.2

Definition: The number of patients undergoing primary caesarean section for fetal distress as a percentage of the total number of patients delivering by primary caesarean section.

Table 139 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	27.8	26.0	25.3	19.3	23.8	Armidale	10.7	16.5	21.4	9.5	20.0
Royal Prince Alfred	20.6	23.7	21.0	17.6	20.0	Inverell	6.3	11.5	18.5	14.7	12.1
Camden	-	-	_	12.5	25.9	Moree	28.1	25.0	22.2	5.9	21.1
Fairfield	18.0	25.1	17.8	30.8	17.2	Tamworth Base	17.1	15.8	19.4	21.2	16.5
Liverpool	28.2	24.2	29.1	32.2	21.6	Manning Base	11.1	11.9	17.7	13.9	12.8
Campbelltown	24.0	15.9	23.8	19.4	16.1	Maitland	18.1	26.7	25.8	21.9	18.2
Bankstown-Lidcombe	23.4	28.9	23.1	20.7	18.6	Muswellbrook	10.5	16.7	14.7	8.7	13.6
Sydney Southwest Private	25.0	18.4	19.7	20.0	18.8	Belmont	13.8	12.5	22.6	23.2	13.4
Bowral	20.0	4.7	18.2	9.7	16.2	John Hunter	21.1	22.2	21.7	16.9	18.0
Other area hospitals	13.2	_	_	0.0	_	Christo Road Private	15.5	16.2	12.4	11.4	17.0
ALL HOSPITALS	22.9	22.5	22.8	21.6	19.7	NIB Private	0.0	0.0	0.0	0.0	13.3
South Eastern Sydney & Illa						Other area hospitals	13.5	13.4	14.8	12.4	15.0
Royal Hospital for Women	16.9	16.1	16.9	17.7	17.2	ALL HOSPITALS	17.3	18.7	19.7	16.3	16.4
St. George	22.3	26.0	25.7	21.8	24.8	North Coast					
Sutherland	30.6	13.6	16.9	20.5	18.0	Coffs Harbour	12.6	3.6	5.4	8.1	13.6
Hurstville Community	16.8	13.1	14.7	12.3	14.5	Grafton Base	19.8	6.4	41.9	25.7	20.7
•	20.7	17.4		14.3	13.2		16.7	9.1	19.0	18.2	31.8
Kareena Private		14.3	13.4	17.6	13.4	Kempsey Lismore Base	25.8	15.2	19.0	17.4	13.2
St. George Private	21.4		13.7								
Prince of Wales Private	12.1	15.8	15.6	10.2	11.3	Murwillumbah	25.8	27.1	18.6	10.8	28.9
Shoalhaven	18.0	19.0	16.9	18.8	9.1	Tweed Heads	16.9	20.8	17.5	19.5	21.9
Wollongong	22.4	27.4	29.6	21.1	18.3	Port Macquarie Base	18.1	20.8	18.0	19.5	20.9
Illawarra Private	12.9	16.2	25.6	28.3	28.6	Other area hospitals	0.0	4.0	2.9	4.5	7.1
Other area hospitals	0.0	13.0	15.1	12.5	0.0	ALL HOSPITALS	18.5	14.4	18.1	16.8	19.0
ALL HOSPITALS	18.8	18.0	18.4	17.5	17.0	Greater Southern					
Sydney West						Cooma	20.8	15.0	20.0	26.3	10.7
Auburn	23.3	31.1	27.9	38.6	22.0	Goulburn Base	6.7	3.8	12.0	13.3	4.8
Blacktown	27.8	38.6	31.5	35.9	27.3	Moruya	10.5	7.7	16.7	20.8	5.4
Blue Mountains	16.3	19.6	21.2	12.5	17.1	Queanbeyan	3.4	31.0	14.3	15.8	7.7
Nepean	25.4	20.0	24.3	21.4	20.3	Griffith Base	16.1	20.0	15.9	27.3	22.7
Westmead	33.0	31.7	26.9	27.1	30.5	Wagga Wagga Base	24.5	25.4	20.2	26.4	25.2
The Hills Private	12.5	17.3	20.7	20.6	14.8	Calvary, Wagga Wagga	8.3	10.7	18.0	5.9	13.4
Hawkesbury	12.2	13.5	14.4	19.3	15.8	Other area hospitals	11.3	13.2	13.6	12.9	16.1
Nepean Private	13.9	11.9	11.0	12.7	9.8	ALL HOSPITALS	13.5	16.5	16.2	16.8	15.8
Westmead Private	0.0	15.5	13.2	14.1	20.8	Greater Western					
Other area hospitals	17.6	31.9	12.8	39.4	29.2	Dubbo Base	20.6	19.7	13.9	19.7	23.7
ALL HOSPITALS	24.7	25.0	22.9	24.1	23.0	Bathurst Base	17.0	10.9	17.4	21.1	13.3
Northern Sydney & Central	Coast					Cowra	26.3	14.3	0.0	23.5	12.0
Gosford Gosford	18.6	16.2	19.4	19.5	27.0	Orange Base	19.4	17.0	12.1	13.8	22.0
Wyong	11.8	18.8	35.7	16.7	0.0	Broken Hill Base	9.1	17.0	3.3	8.9	13.3
Hornsby	14.1	20.0	17.5	24.0	24.1	Other area hospitals	9.1	14.6	16.2	10.0	14.3
•	12.9	20.0 12.6	16.4	24.0 14.7	22.9	ALL HOSPITALS	16.9	15.9	13.4	16.1	18.8
Manly Mana Valo	14.5	15.7	14.8	20.2	17.0	ALL HOSPHALS	10.9	13.9	13.4	10.1	10.0
Mona Vale						TOTAL NICW	10.6	10.0	10.1	10.0	10.0
Royal North Shore	26.5	16.2	16.7	24.5	18.6	TOTAL NSW	19.6	19.2	19.1	18.9	18.6
Ryde	16.8	30.9	30.8	20.4	11.8						
Mater, North Sydney	15.9	16.8	14.0	14.9	13.9						
North Shore Private	11.4	10.0	12.9	14.2	13.5						
Sydney Adventist	17.3	17.7	15.7	12.7	11.8						
North Gosford Private	14.4	10.1	8.5	5.5	8.3						
ALL HOSPITALS	16.7	15.4	15.4	16.3	16.8						

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Intact lower genital tract in primiparous patients delivering vaginally, Indicator 5.1

Definition: The number of primiparous patients not requiring surgical repair of the lower genital tract as a percentage of the total number of primiparous patients delivering vaginally.

Table 140 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	31.4	28.4	28.9	31.2	24.4	Armidale	16.8	16.5	21.2	22.6	14.3
Royal Prince Alfred	31.4	29.3	28.0	31.0	31.8	Inverell	42.9	39.2	48.9	23.3	19.4
Camden	_	-	_	56.3	58.4	Moree	50.0	55.8	53.4	50.0	51.0
Fairfield	28.3	31.2	31.1	33.9	31.3	Tamworth Base	25.2	23.6	46.5	42.9	34.6
Liverpool	30.0	28.1	27.0	23.7	27.0	Manning Base	38.2	31.8	36.7	42.0	32.8
Campbelltown	29.6	28.6	30.5	28.8	29.5	Maitland	46.1	43.0	39.2	35.7	39.3
Bankstown-Lidcombe	21.4	25.1	26.7	24.7	22.6	Muswellbrook	45.7	42.0	53.2	36.0	42.0
Sydney Southwest Private	25.9	25.4	17.4	26.7	20.9	Belmont	43.5	43.4	38.7	45.6	47.2
Bowral	32.5	40.1	44.5	27.2	40.5	John Hunter	41.6	41.4	38.3	38.5	27.8
Other area hospitals	18.6			_	_	Christo Road Private	28.3	41.8	37.6	34.0	51.4
ALL HOSPITALS	28.9	28.9	28.5	29.7	29.7	NIB Private					30.1
South Eastern Sydney & Illa	awarra					Other area hospitals	33.5	32.1	33.2	38.2	30.8
Royal Hospital for Women	25.2	23.9	24.4	25.9	28.8	ALL HOSPITALS	38.3	38.3	38.4	37.7	33.3
St. George	27.1	30.7	34.4	38.5	28.8	North Coast					
Sutherland	22.8	27.8	28.7	27.6	24.9	Coffs Harbour	43.5	31.6	41.3	42.7	31.2
Hurstville Community	9.2	15.4	14.4	12.0	10.4	Grafton Base	21.3	29.6	46.8	45.0	36.7
Kareena Private	10.4	20.7	23.2	23.2	23.8	Kempsey	44.9	44.8	55.2	58.6	54.3
St. George Private	17.6	17.3	17.7	23.9	17.9	Lismore Base	43.7	38.9	35.1	35.0	22.5
Prince of Wales Private	14.1	13.5	13.3	12.5	14.5	Murwillumbah	13.5	22.1	25.9	18.3	29.6
Shoalhaven	46.7	34.2	33.8	32.5	33.9	Tweed Heads	33.5	34.5	47.4	40.0	34.1
Wollongong	44.0	35.5	29.6	27.4	21.9	Port Macquarie Base	26.1	26.4	23.0	36.4	36.9
Illawarra Private	22.6	19.7	14.1	10.6	13.8	Other area hospitals	38.8	48.2	32.8	34.4	41.2
Other area hospitals	32.0	29.5	32.2	25.0	57.1	ALL HOSPITALS	34.5	35.1	37.9	38.3	33.1
ALL HOSPITALS	27.6	25.2	25.1	25.8	24.1	Greater Southern					
Sydney West						Cooma	45.3	54.1	47.8	64.3	69.1
Auburn	26.2	28.9	29.7	35.8	36.5	Goulburn Base	17.6	30.2	27.8	17.9	11.4
Blacktown	23.7	22.5	31.2	25.3	25.9	Moruya	60.4	52.0	66.7	54.5	46.2
Blue Mountains	41.3	43.0	46.9	51.5	35.3	Queanbeyan	64.4	66.7	67.8	67.3	66.1
Nepean	40.3	38.6	42.1	34.3	35.2	Griffith Base	63.1	66.0	63.4	64.7	49.4
Westmead	25.3	27.2	27.7	23.4	18.5	Wagga Wagga Base	58.2	47.1	43.3	44.6	42.3
The Hills Private	19.9	18.8	24.6	23.5	14.8	Calvary, Wagga Wagga	25.5	32.3	27.3	27.0	22.2
Hawkesbury	48.7	46.8	47.6	55.3	47.3	Other area hospitals	37.2	41.0	45.2	37.0	45.0
Nepean Private	22.2	19.7	18.5	14.7	12.7	ALL HOSPITALS	46.9	47.3	46.5	44.2	45.3
Westmead Private	33.3	26.5	18.9	17.1	15.5	Greater Western					
Other area hospitals	18.0	13.5	25.0	26.3	30.0	Dubbo Base	36.4	34.5	39.0	34.4	29.7
ALL HOSPITALS	29.7	29.5	31.2	28.3	25.5	Bathurst Base	42.7	43.4	42.4	36.9	36.0
Northern Sydney & Central	Coast					Cowra	66.7	50.0	30.3	53.8	39.2
Gosford	33.6	25.9	30.4	33.3	29.4	Orange Base	38.9	28.8	31.4	33.3	37.0
Wyong	45.8	50.0	45.3	42.0	34.0	Broken Hill Base	60.0	65.1	63.2	58.3	51.7
Hornsby	14.5	15.1	14.0	18.6	20.5	Other area hospitals	47.4	46.9	38.2	40.6	34.0
Manly	16.7	27.2	22.1	21.4	18.9	ALL HOSPITALS	42.9	40.5	39.2	38.6	35.2
Mona Vale	33.6	26.3	41.4	30.9	36.8					- 3.0	30.2
Royal North Shore	20.9	20.7	15.6	20.0	21.3	TOTAL NSW	30.3	29.7	29.8	29.6	27.9
Ryde	25.8	21.5	19.3	20.0	34.2		00.0	20.7	20.0	20.0	27.0
Mater, North Sydney	13.2	11.0	9.7	11.6	14.3						
North Shore Private	9.9	12.3	9.7 7.5	10.7	13.0						
Sydney Adventist	12.1	12.5	11.5	12.9	12.5						
North Gosford Private	17.0	14.6	19.2	21.5	14.2						
ALL HOSPITALS	20.4	19.0	17.9	20.2	20.1						

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Apgar scores, Indicator 6.1

Definition: The number of babies born with an Apgar score of four or below at five minutes post delivery as a percentage of the total number of babies born.

Table 141 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

Health Area/ Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	1.1	0.9	1.2	1.1	0.8	Armidale	1.3	1.3	0.6	1.3	0.9
Royal Prince Alfred	2.0	1.5	1.6	1.4	1.6	Inverell	0.4	0.8	0.0	0.5	0.9
Camden	_	-	-	0.8	0.0	Moree	1.2	2.1	1.2	2.2	2.0
Fairfield	1.1	0.9	1.3	1.0	1.8	Tamworth Base	1.2	1.8	2.0	1.8	1.7
Liverpool	1.5	1.6	1.4	1.5	2.1	Manning Base	1.7	1.5	1.4	2.0	1.4
Campbelltown	1.2	1.3	1.3	1.4	1.0	Maitland	1.3	0.9	0.8	0.8	0.9
Bankstown-Lidcombe	1.4	1.4	1.1	1.0	1.1	Muswellbrook	0.9	0.0	0.0	0.0	0.9
Sydney Southwest Private	0.6	0.7	0.4	0.3	0.7	Belmont	1.2	0.3	0.9	0.6	0.5
Bowral	1.1	1.0	0.8	0.8	0.9	John Hunter	1.8	1.9	1.9	2.3	2.1
Other area hospitals	0.4	-	-	50.0	-	Christo Road Private	1.2	0.6	1.0	0.4	0.6
ALL HOSPITALS	1.4	1.3	1.3	1.2	1.4	NIB Private	0.0	0.0	0.0	0.0	0.4
South Eastern Sydney & Illa	awarra					Other area hospitals	0.9	0.7	0.3	0.4	0.7
Royal Hospital for Women	1.4	1.3	1.8	1.4	1.6	ALL HOSPITALS	1.4	1.3	1.2	1.4	1.3
St. George	1.0	1.2	1.2	1.2	1.2	North Coast					
Sutherland	0.5	0.7	0.1	0.6	0.2	Coffs Harbour	0.8	1.2	0.6	0.9	0.9
Hurstville Community	0.7	0.7	0.0	0.3	0.6	Grafton Base	1.1	1.4	1.0	1.2	0.8
Kareena Private	0.6	0.7	0.1	0.4	0.5	Kempsey	1.0	2.5	0.0	1.8	0.3
St. George Private	0.7	0.3	0.6	0.5	0.4	Lismore Base	1.5	1.2	1.4	1.7	1.3
Prince of Wales Private	0.5	0.5	0.6	0.2	0.4	Murwillumbah	1.1	1.0	0.2	0.8	1.0
Shoalhaven	1.2	0.7	0.6	1.4	1.8	Tweed Heads	1.0	1.9	1.3	1.5	1.2
Wollongong	0.8	1.1	1.0	0.7	0.5	Port Macquarie Base	1.4	1.1	1.0	1.4	0.5
Illawarra Private	0.7	0.4	0.6	0.2	0.4	Other area hospitals	0.9	0.0	0.7	0.8	0.4
Other area hospitals	0.0	0.4	0.0	8.0	2.1	ALL HOSPITALS	1.1	1.2	0.9	1.3	0.9
ALL HOSPITALS	0.9	0.9	0.9	0.8	0.9	Greater Southern					
Sydney West						Cooma	0.6	0.7	0.0	1.3	0.5
Auburn	0.8	1.3	0.7	1.3	1.2	Goulburn Base	0.3	0.6	1.3	2.3	0.4
Blacktown	1.2	1.2	1.2	1.1	0.7	Moruya	0.5	2.9	0.6	1.6	1.6
Blue Mountains	0.9	1.3	0.0	0.9	0.0	Queanbeyan	0.6	1.5	0.4	0.4	0.4
Nepean	1.9	1.3	1.2	1.0	0.9	Griffith Base	1.5	1.8	1.4	1.3	0.7
Westmead	1.9	2.2	1.8	1.8	2.1	Wagga Wagga Base	1.7	2.0	2.2	1.1	1.8
The Hills Private	0.7	0.3	0.6	0.3	0.7	Calvary, Wagga Wagga	1.6	0.4	1.0	0.3	1.9
Hawkesbury	0.7	1.1	0.4	0.9	0.5	Other area hospitals	0.8	0.3	0.4	0.4	0.2
Nepean Private	0.0	0.4	0.4	0.7	0.3	ALL HOSPITALS	1.0	1.1	1.0	0.9	0.9
Westmead Private	1.6	0.7	0.9	0.6	0.9	Greater Western					
Other area hospitals	0.3	0.0	0.5	0.5	2.5	Dubbo Base	1.3	1.1	1.4	2.0	1.1
ALL HOSPITALS	1.4	1.3	1.1	1.1	1.1	Bathurst Base	0.4	0.3	0.6	0.5	1.7
Northern Sydney & Central	Coast					Cowra	0.6	0.0	0.0	0.5	0.5
Gosford	1.4	0.8	1.1	0.5	0.9	Orange Base	0.6	1.1	1.2	0.7	2.1
Wyong	0.9	0.3	0.3	0.0	0.4	Broken Hill Base	1.4	1.6	0.8	1.1	0.8
Hornsby	1.3	0.6	0.9	8.0	1.0	Other area hospitals	1.3	0.9	1.2	0.6	1.2
Manly	1.1	1.0	1.1	0.8	0.6	ALL HOSPITALS	1.0	0.9	1.1	1.1	1.4
Mona Vale	1.0	0.8	0.7	0.3	0.5						
Royal North Shore	1.3	1.5	1.0	1.3	1.5	TOTAL NSW	1.2	1.1	1.0	1.0	1.1
Ryde	1.7	0.7	1.0	1.4	0.0						
Mater, North Sydney	0.7	0.4	0.7	0.4	0.4						
North Shore Private	0.7	0.8	0.7	1.0	0.6						
Sydney Adventist	0.7	0.3	0.7	8.0	0.6						
North Gosford Private	1.1	0.8	0.4	0.2	0.4						
ALL HOSPITALS	1.0	0.7	0.8	0.7	0.8						

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

Term infants admitted to NICU for reasons other than congenital abnormalities, Indicator 7.1

Definition: The number of term babies transferred/ admitted to a neonatal intensive care unit for reasons other than congenital abnormality as a percentage of all term live babies born.

Table 142 shows aggregate information for hospitals where the reported confinements exceeded 200 in 2004, totals for hospitals within each health area, and the NSW total.

TABLE 142 INDICATOR 7.1: TERM INFANTS ADMITTED TO NICU FOR REASONS OTHER THAN CONGENITAL ABNORMALITIES BY HOSPITAL, NSW 2000–2004

Health Area and Hospital	2000	2001	2002	2003	2004	Health Area and Hospital	2000	2001	2002	2003	2004
Sydney South West						Hunter & New England					
Canterbury	0.1	0.0	0.0	0.0	0.0	Armidale	0.7	0.5	0.0	0.0	0.6
Royal Prince Alfred	0.9	0.9	1.2	1.1	0.9	Inverell	0.0	0.8	0.0	0.5	0.0
Camden	-	-	_	0.4	0.2	Moree	0.9	0.5	0.9	1.3	0.0
Fairfield	0.1	0.2	0.2	0.1	0.0	Tamworth Base	0.6	0.4	0.0	0.2	0.5
Liverpool	0.8	0.5	0.4	0.6	0.7	Manning Base	0.8	0.5	0.9	0.2	0.5
Campbelltown	0.2	0.1	0.1	0.4	0.3	Maitland	0.0	0.1	0.2	0.2	0.1
Bankstown/Lidcombe	0.3	0.5	0.3	0.6	0.3	Muswellbrook	0.0	0.0	0.5	0.5	0.0
Sydney Southwest Private	0.2	0.1	0.3	0.4	0.4	Belmont	0.7	0.5	0.0	0.2	0.2
Bowral	0.2	0.3	0.2	0.3	0.7	John Hunter	1.4	1.5	1.3	1.3	2.0
Other area hospitals	0.2	_	_	0.0	_	Christo Road Private	0.2	0.4	0.1	0.1	0.0
ALL HOSPITALS	0.5	0.4	0.4	0.5	0.5	NIB Private	0.0	0.0	1.1	0.0	0.8
South Eastern Sydney & Illa	awarra					Other area hospitals	0.1	0.3	0.1	0.2	0.2
Royal Hospital for Women	0.6	0.4	1.3	2.3	1.3	ALL HOSPITALS	0.7	0.7	0.5	0.5	0.8
St. George	0.0	0.4	0.2	0.2	0.1	North Coast	0.7	0.7	0.0	0.0	0.0
Sutherland	0.4	0.2	0.2	0.0	0.2	Coffs Harbour	0.0	0.0	0.3	0.2	0.0
Hurstville Community	0.4	0.2	0.3	0.0	0.2		0.2	0.3			
Kareena Private	0.4	0.4	0.2	0.5	0.6	Grafton Base	0.2	0.5	0.8	1.4	0.3
St. George Private	0.0	0.4	0.0	0.5	0.4	Kempsey	0.0	0.0	0.0	0.0	0.3
Prince of Wales Private	0.3	0.1	0.0	0.1		Lismore Base	0.5	0.3	0.6	0.1	0.3
					0.3	Murwillumbah	0.0	0.0	0.0	0.0	0.3
Shoalhaven	0.0	0.0	0.0	0.0	0.0	Tweed Heads	0.0	0.4	0.0	0.0	0.3
Wollongong	0.0	0.0	0.0	0.5	0.2	Port Macquarie Base	0.2	0.5	0.0	0.5	0.2
Illawarra Private	0.0	0.0	0.1	0.3	0.0	Other area hospitals	0.4	0.0	0.6	0.2	0.0
Other area hospitals	0.0	0.0	0.0	0.0	0.0	ALL HOSPITALS	0.2	0.3	0.3	0.3	0.2
ALL HOSPITALS	0.3	0.2	0.4	0.7	0.5	Greater Southern					
Sydney West						Cooma	0.6	2.2	1.4	1.4	0.0
Auburn	0.2	0.3	0.1	0.1	0.2	Goulburn Base	0.7	0.4	0.4	1.1	0.0
Blacktown	0.2	0.2	0.1	0.1	0.1	Moruya	0.6	0.0	0.0	2.5	0.9
Blue Mountains	1.0	0.6	0.0	0.0	0.9	Queanbeyan	0.7	2.3	1.8	2.1	0.8
Nepean	3.5	4.4	4.9	5.4	6.0	Griffith Base	0.2	0.2	0.7	0.2	0.0
Westmead	5.2	3.1	2.9	3.7	3.2	Wagga Wagga Base	0.1	0.1	0.0	0.0	0.0
The Hills Private	0.4	0.3	0.2	0.2	0.3	Calvary, Wagga Wagga	0.0	0.2	0.4	0.2	0.8
Hawkesbury	0.0	0.5	0.2	0.0	0.4	Other area hospitals	0.4	0.2	0.7	0.4	0.5
Nepean Private	0.0	0.3	0.2	0.4	0.2	ALL HOSPITALS	0.4	0.5	0.6	0.6	0.4
Westmead Private	0.9	0.3	0.4	0.1	0.1	Greater Western					
Other area hospitals	0.3	0.0	0.0	0.5	2.9	Dubbo Base	0.3	0.0	0.5	0.5	0.7
ALL HOSPITALS	2.2	1.8	1.8	2.0	2.1	Bathurst Base	0.3	0.0	0.5	0.3	0.7
Northern Sydney & Central	Coast					Cowra	0.0	0.2	0.9	0.2	0.5
Gosford	0.2	0.4	0.7	0.3	0.4		0.8	0.0	0.5	0.0	0.5
Wyong	0.5	0.0	0.0	0.3	0.4	Orange Base Broken Hill Base	0.0	0.3	0.0	0.4	0.5
Hornsby	1.3	0.0	0.0	0.3	0.4	Other area hospitals	0.0	0.4	0.0	0.0	0.0
Manly	0.1	0.0	0.0	0.0	0.0	ALL HOSPITALS	0.7	0.4	0.4	0.5	0.4
Mona Vale	0.1	0.0	0.0	0.0	0.0	ALL HUSPHALS	0.4	0.2	0.5	0.4	0.5
Royal North Shore	3.4	6.1	5.4	2.3	1.6	TOTAL NEW	0.0	0.7	0.0	0.0	0.0
Ryde	0.3	0.0	0.0	0.0	0.0	TOTAL NSW	0.8	0.7	8.0	0.8	8.0
Mater, North Sydney	0.3	0.0	0.0	0.0	0.0						
North Shore Private	0.2	0.4	0.2	0.2	0.2						
Sydney Adventist	0.2	0.1	0.4	0.2	0.3						
,	0.4	0.1	0.2	0.1							
North Gosford Private ALL HOSPITALS	0.3	0.1	0.2	0.4	0.5 0.4						
ALL HUSPITALS	0.7	0.7	0.7	0.4	0.4						

[#] Defined indications include: diabetes, hypertensive disease, fetal distress, fetal death, chorioamnionitis, blood group isoimmunisation, prelabour rupture of membranes, prolonged pregnancy (41 or more weeks), and suspected intrauterine growth retardation.

12. PERINATAL DEATHS

Review of perinatal deaths 2004

This chapter presents the results of perinatal death reviews carried out by the NSW Maternal and Perinatal Committee, which is a quality assurance committee established under the *NSW Health Administration Act 1982*. The Committee is privileged under the Act to carry out confidential reviews of maternal and perinatal deaths.

NSW Department of Health Policy Directive No. 2005_228 describes hospital procedures for review and reporting of perinatal deaths. The circular is available on the Department's website at www.health.nsw.gov. au/policies/PD/2005/PD2005_228.html. The Maternal and Perinatal Committee carries out reviews of perinatal deaths occurring among fetuses or infants of at least 22 weeks gestation or at least 500 grams birth weight. The criteria used by the NSW Midwives Data Collection (MDC) for reporting of births is at least 400 grams birth weight or at least 20 weeks gestation. The Maternal and Perinatal Committee reviews deaths that have a slightly higher threshold to focus attention on deaths that are more likely to be preventable.

Perinatal deaths were reviewed by the Committee's Perinatal Outcomes Working Party. Both stillbirths and neonatal deaths were classified according to an obstetric cause-specific classification, the Perinatal Society of Australia and New Zealand Perinatal Death Classification (PSANZ-PDC). Neonatal deaths were also classified by neonatal cause according to the Perinatal Society of Australia and New Zealand Neonatal Death Classification (PSANZ-NDC).

There were 649 perinatal deaths of at least 22 weeks gestation or at least 500 grams birth weight reported to the MDC in 2004. Confidential reports on 643 deaths were reviewed. Of the 471 stillbirths reported to the MDC, reviews were carried out on 449 (95.3 per cent). The MDC was notified of 178 neonatal deaths. However, reviews were carried out on 194 neonatal deaths, reflecting underenumeration of neonatal deaths on the MDC. Comparative information is also presented for 2001, 2002 and 2003.

Trends in obstetric antecedents of perinatal death

Between 2001 and 2004, the pattern of antecedent causes of death remained fairly stable (Table 143). Unexplained antepartum deaths comprised the largest category in 2004 (Figure 18), as for previous years. The next most common categories were fetal abnormalities followed by spontaneous preterm birth.

Obstetric antecedents of perinatal death 2004

1. Congenital abnormality

In 2004, congenital abnormalities were the underlying cause for 125 deaths (Table 144). The most common abnormalities were chromosomal (n=35, 28.0 per cent). Of these, 14 were trisomy 18, 8 were trisomy 21, 5 were trisomy 13, 1 was Turner syndrome, and there were 7 other abnormalities.

Nineteen deaths were associated with abnormalities of the central nervous system (15.2 per cent), of which 8 were neural tube defects and a further 6 deaths were among babies with congenital hydrocephalus.

Twenty-four deaths were due to multiple abnormalities not associated with a chromosomal abnormality.

Twelve deaths were associated with abnormalities of the cardiovascular system, of which 4 were cases of hypoplastic left heart syndrome. Four deaths were associated with congenital diaphragmatic hernia.

2. Perinatal infection

Fourteen deaths were found to be due to infection, of which 6 were stillbirths and 8 were neonatal deaths. In 25 deaths there was an associated chorioamnionitis.

The most common infective organism identified was group B streptococcus, which was considered responsible for 3 stillbirths and 2 neonatal deaths. Two neonatal deaths were caused by *Escherichia coli* infection, one neonatal death following a *Staphylococcus aureus* infection, and one stillbirth following congenital cytomegalovirus infection. The causative organism was not specified for 5 deaths.

3. Hypertension

Thirty (23.4 per cent) deaths were considered to be due to maternal hypertension. There were 26 stillbirths and 4 neonatal deaths. The majority (n=19, 63.3 per cent) occurred in mothers with pre-eclampsia. Only one death in this group was associated with placental abruption, and one was associated with maternal diabetes.

4. Antepartum haemorrhage

Fifty-nine deaths were due to antepartum haemorrhage, of which 50 were due to placental abruption, one was due to placenta praevia, and 2 due to vasa praevia.

5. Maternal disease

Twenty-one deaths were attributed to other maternal conditions including: diabetes (8), maternal injury (2), termination of pregnancy (2), cholestasis (1), systemic lupus erythematosis (1), antiphospholipid syndrome (1), and maternal death (1).

TABLE 143

PERINATAL DEATHS BY OBSTETRIC ANTECEDENT AND YEAR, NSW 2001–2004

Obstetric antecedent				Υ	ear			
	2	001	20	02	2	003	20	004
	No.	%	No.	%	No.	%	No.	%
Fetal abnormality	90	14.6	103	16.8	95	16.0	125	19.4
Perinatal infection	28	4.5	27	4.4	30	5.0	14	2.2
3. Hypertension	41	6.7	34	5.5	32	5.4	30	4.7
Antepartum haemorrhage	48	7.8	52	8.5	44	7.4	59	9.2
5. Maternal disease	14	2.3	27	4.4	28	4.7	21	3.3
6. Specific perinatal conditions	52	8.4	45	7.3	51	8.6	43	6.7
7. Hypoxic peripartum death	22	3.6	23	3.8	21	3.5	20	3.1
8. Fetal growth restriction	5	0.8	13	2.1	10	1.7	16	2.5
9. Spontaneous preterm	120	19.5	126	20.6	94	15.8	121	18.8
10. Unexplained antepartum death	191	31.0	161	26.3	184	30.9	191	29.7
11. No obstetric antecedent	5	8.0	2	0.3	6	1.0	3	0.5
TOTAL	616	100.0	613	100.0	595	100.0	643	100.0

Source: NSW Maternal and Perinatal Committee, NSW Department of Health.

FIGURE 18 PERINATAL DEATHS BY OBSTETRIC ANTECEDENT AND YEAR, NSW 2004 Obstetric antecedent Fetal abnormality Perinatal infection Hypertension Antepartum haemorrhage Maternal disease Specific perinatal conditions Hypoxic peripartum death Fetal grow th restriction Spontaneous preterm Unexplained antepartum death No obstetric antecedent 0 10 40 50 30 Per cent

Source: NSW Maternal and Perinatal Committee, NSW Department of Health.

TABLE 144

Obstetric antecedent	Still	birth		I outcome tal death	то	TAL
	No.	%	No.	%	No.	%
. Fetal abnormality						
Central nervous system	10	2.2	9	4.6	19	3.0
Cardiovascular system	6	1.3	6	3.1	12	1.9
Urinary tract	3	0.7	4	2.1	7	1.1
Gastrointestinal system	1	0.2	1	0.5	2	0.3
Chromosomal	21	4.7	14	7.2	35	5.4
Metabolic	1	0.2	3	1.5	4	0.6
Multiple	7	1.6	17	8.8	24	3.7
Other	10	2.2	11	5.7	21	3.3
Unspecified	1	0.2	0	0.0	1	0.2
Total	60	13.4	65	33.5	125	19.4
	00	10.1	00	00.0	120	10.1
Perinatal infection	_				_	
Group B Streptococcus	3	0.7	2	1.0	5	0.8
E. coli	0	0.0	2	1.0	2	0.3
Other bacterial	0	0.0	1	0.5	1	0.2
Unspecified bacterial	2	0.4	1	0.5	3	0.5
Cytomegalovirus	1	0.2	0	0.0	1	0.2
Unspecified organism	0	0.0	2	1.0	2	0.3
Total	6	1.3	8	4.1	14	2.2
8. Hypertension						
Chronic: Essential	2	0.4	0	0.0	2	0.3
Chronic: Secondary (for example, renal)	2	0.4	0	0.0	2	0.3
Gestational	3	0.7	0	0.0	3	0.5
Pre-eclampsia	14	3.1	3	1.5	17	2.6
Pre-eclampsia superimposed on	17	0.1	0	1.5	17	2.0
pre-existing hypertension	1	0.2	1	0.5	2	0.3
Unspecified	4	0.2	0	0.0	4	0.6
Total	26	5.8	4	2.1	30	4.7
	20	5.0	4	2.1	30	4.7
Antepartum haemorrhage						
Placental abruption	36	8.0	14	7.2	50	7.8
Placenta praevia	1	0.2	0	0.0	1	0.2
Vasa praevia	2	0.4	0	0.0	2	0.3
Undetermined origin	5	1.1	1	0.5	6	0.9
Total	44	9.8	15	7.7	59	9.2
i. Maternal disease						
Termination of pregnancy	4	0.0	4	0.5	0	0.0
other than for fetal abnormality	1	0.2	1	0.5	2	0.3
Diabetes–gestational diabetes	8	1.8	0	0.0	8	1.2
Maternal injury: Accidental	1	0.2	1	0.5	2	0.3
Other	8	1.8	1	0.5	9	1.4
Total	18	4.0	3	1.5	21	3.3
5. Specific perinatal conditions						
Twin-to-twin transfusion	14	3.1	7	3.6	21	3.3
Fetomaternal haemorrhage	4	0.9	0	0.0	4	0.6
Antepartum cord complications	6	1.3	0	0.0	6	0.9
Uterine abnormality	0	0.0	1	0.5	1	0.2
Haemolytic disease	1	0.2	0	0.0	1	0.2
	1 5			2.1	9	
Idiopathic hydrops		1.1	4			1.4
Other	1	0.2	0	0.0	1	0.2
Total	31	6.9	12	6.2	43	6.7
7. Hypoxic peripartum death						
Uterine rupture	1	0.2	2	1.0	3	0.5
Cord prolapse	2	0.4	0	0.0	2	0.3
Shoulder dystocia	0	0.0	1	0.5	1	0.2
Other intrapartum complication	3	0.7	6	3.1	9	1.4
No intrapartum complication	1	0.2	1	0.5	2	0.3
Unspecified	2	0.4	i	0.5	3	0.5
Total	9	2.0	11	5.7	20	3.1
	3	2.0	- 11	0.7	20	0.1
B. Fetal growth restriction						
With evidence of uteroplacental insufficiency	6	1.3	2	1.0	8	1.2
With chronic villitis	0	0.0	2	1.0	2	0.3
Without the above placental pathology	2	0.4	2	1.0	4	0.6
No placental examination	0	0.0	2	1.0	2	0.3
Total	8	1.8	8	4.1	16	2.5

Obstetric antecedent	C4:II	birth		il outcome tal death	TO	TAL
	No.	% %	No.	%	No.	%
Spontaneous preterm						
Intact membranes or membrane rupture						
less than 24 hours:						
with chorioamnionitis	12	2.7	21	10.8	33	5.1
without chorioamnionitis	9	2.0	16	8.2	25	3.9
no placental examination	2	0.4	4	2.1	6	0.9
unspecified placental examination	3	0.7	0	0.0	3	0.5
Membrane rupture 24 hours or more:						
with chorioamnionitis	18	4.0	15	7.7	33	5.1
without chorioamnionitis	3	0.7	5	2.6	8	1.2
no placental examination	0	0.0	1	0.5	1	0.2
Membrane rupture unknown duration:						
with chorioamnionitis	4	0.9	0	0.0	4	0.6
without chorioamnionitis	2	0.4	2	1.0	4	0.6
no placental examination	3	0.7	1	0.5	4	0.6
Total	56	12.5	65	33.5	121	18.8
0. Unexplained antepartum death						
With evidence of uteroplacental insufficiency	40	8.9	0	0.0	40	6.2
With chronic villitis	5	1.1	0	0.0	5	0.8
Without the above placental pathology	127	28.3	0	0.0	127	19.8
No placental examination	14	3.1	0	0.0	14	2.2
Unspecified placental examination	5	1.1	0	0.0	5	0.8
Total	191	42.5	0	0.0	191	29.7
1. No obstetric antecedent	0	0.0	3	1.5	3	0.5
OTAL 449	100.0	194	100.0	643	100.0	

6. Specific perinatal conditions

Of the 43 deaths in this group, twin-to-twin transfusion accounted for 21 deaths, followed by idiopathic hydrops (9), antepartum cord complications (6) and fetomaternal haemorrhage (4). Other causes were: uterine abormality (1), haemolytic disease (1), and maternal autoimmune disease (1).

7. Hypoxic peripartum death

There were 20 deaths associated with peripartum hypoxia. Three deaths followed uterine rupture. Two deaths followed cord prolapse and one death followed shoulder dystocia.

One death occurred before the onset of labour, 4 during labour and 4 at an unspecified time prior to birth. The remaining 11 deaths occurred in the neonatal period.

8. Fetal growth restriction

In 16 cases, the main obstetric cause of death was considered to be fetal growth restriction (FGR). Of these, 8 were stillbirths and 8 were neonatal deaths.

FGR is defined as less than the tenth percentile of birth weight for gestational age with no major congenital abnormalities. If a maternal or fetal cause of FGR was known then the cause of death was classified to the underlying cause of the FGR. Stillbirths with evidence of maceration were not classified as FGR unless there was evidence of growth restriction on serial ultrasound during pregnancy.

9. Spontaneous preterm

There were 121 perinatal deaths associated with spontaneous preterm birth, which comprises normally formed and appropriately grown babies born before 37 weeks gestation. Of these, 56 (46.3 per cent) were stillbirths and 65 (53.7 per cent) were neonatal deaths.

Forty-four deaths (36.4 per cent) were at less than 23 weeks gestation, 59 (48.8 per cent) were at 23–25 weeks gestation, and 18 (14.9 per cent) occurred between 26 and 36 weeks gestation. Thirty-six deaths (29.8 per cent) were associated with membrane rupture of 24 hours or more.

10. Unexplained antepartum death

Of the 191 unexplained stillbirths, 122 (63.9 per cent) were low birth weight babies and 114 (59.7 per cent) were premature. A variety of associated maternal conditions were reported in this group including: multiple pregnancy (9 deaths), maternal hypertension (11), diabetes (5), epilepsy (2), asthma (2), systemic lupus erythematosis (2), drug abuse (1) and cholestasis of pregnancy (1). Placental histopathology results were provided for 176 unexplained antepartum deaths (92.1 per cent) and evidence of uteroplacental insufficiency was found in 40.

11. No obstetric antecedent

No obstetric cause of death could be identified for 3 neonatal deaths. Two of these babies had a post-mortem examination. Placental histopathology examination had been carried out in 2 cases.

Obstetric cause of perinatal death by hospital service level 2004

Obstetric service levels are described in the Explanatory Notes of the Methods section (page 16). The majority of perinatal deaths occurred in level 6 hospitals (52.7 per cent, Table 145). The proportion of unexplained intrauterine deaths was substantially lower in level 6 hospitals than other hospitals, possibly due to better access to perinatal post-mortem services. The proportion of deaths associated with congenital abnormalities was highest in level 6 hospitals, reflecting patterns of referral for diagnosis and treatment.

Time of death 2004

Of the 643 perinatal deaths in 2004, 292 (45.4 per cent) occurred before the onset of labour, 46 (7.2 per cent) occurred during labour, 111 (17.3 per cent) occurred at an unknown time before birth, and 194 (30.3 per cent) were neonatal deaths.

Trends in neonatal causes of death

Between 2001 and 2004 extreme prematurity was the most common cause of neonatal death, accounting for over one-third of all neonatal deaths in 2004 (Table 146). Congenital abnormalities were the next most common cause of neonatal death for the 4 years. There were slightly more deaths attributed to congenital abnormalities in 2004 compared with previous years.

Neonatal causes of death 2004

Of the 194 neonatal deaths reviewed for 2004, 154 (79.4 per cent) were less than 37 weeks gestation (Table 147). The most common neonatal cause of death was extreme prematurity (n=67, 34.5 per cent). Fifty-six infants died from a congenital abnormality. There were 20 deaths due to hypoxic ischaemic encephalopathy and 12 deaths due to intracranial haemorrhage.

Perinatal deaths associated with maternal drug dependency-abuse 2004

No perinatal deaths were directly attributed to maternal drug dependency or drug abuse. Eleven deaths occurred among mothers who had a history of drug dependency or abuse, but drug use was not considered to be the main cause of death.

Post-mortem examination 2004

Postmortem examination is valuable in ascertaining or confirming the cause of death, identifying additional factors that may have contributed to the death, and counselling parents about the cause of death. Postmortem examinations were carried out for 212 (33.0 per cent) deaths: 166 stillborn infants (37.0 per cent of all reported stillbirths) and 46 neonatal deaths (23.7 per cent of all reported neonatal deaths). Placental histopathology was carried out in 543 perinatal deaths (84.5 per cent).

Obstetric antecedent					Н	ospital s	ervice	level						
	Le	vel 2	Le	vel 3	Le	vel 4	Le	evel 5	Le	vel 6	Pri	vate	TC	DTAL
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Fetal abnoramality	0	0.0	6	14.6	9	9.2	11	12.6	93	27.4	6	8.7	125	19.4
2. Perinatal infection	0	0.0	0	0.0	2	2.0	1	1.1	9	2.7	2	2.9	14	2.2
3. Hypertension	0	0.0	1	2.4	6	6.1	6	6.9	13	3.8	4	5.8	30	4.7
4. Antepartum haemorrhage	2	28.6	4	9.8	11	11.2	9	10.3	29	8.6	4	5.8	59	9.2
5. Maternal disease	0	0.0	2	4.9	5	5.1	2	2.3	10	2.9	2	2.9	21	3.3
6. Specific perinatal conditions	0	0.0	2	4.9	3	3.1	7	8.0	24	7.1	7	10.1	43	6.7
7. Hypoxic peripartum death	2	28.6	2	4.9	0	0.0	2	2.3	13	3.8	1	1.4	20	3.1
8. Fetal growth restriction#	0.0	0	0.0	3	3.1	1	1.1	12	3.5	0	0.0	16	2.5	
9. Spontaneous preterm	0	0.0	8	19.5	13	13.3	13	14.9	74	21.8	12	17.4	121	18.8
10. Unexplained antepartum death	3	42.9	15	36.6	46	46.9	35	40.2	61	18.0	31	44.9	191	29.7
11. No obstetric antecedent	0	0.0	1	2.4	0	0.0	0	0.0	1	0.3	0	0.0	3	0.5

Source: NSW Maternal and Perinatal Committee, NSW Department of Health.

The spontaneous preterm and no obstetric antecedent categories each include one perinatal death that occurred in a level 1 hospital.

TABLE 146

NEONATAL DEATHS BY CAUSE AND YEAR, NSW 2001–2004

Ne	eonatal cause		0004	,		Year	0000		0004
		No.	2001 %	No.	2002 %	No.	2003 %	No.	2004 %
1	Congenital abnormality								
٠.	Central nervous system	6	3.2	6	3.0	9	4.7	12	6.2
	Cardiovascular system	8	4.2	2	1.0	11	5.7	6	3.1
	Urinary tract	5	2.6	2	1.0	3	1.6	3	1.5
	Gastrointestinal tract	2	1.1	2	1.0	2	1.0	4	2.1
	Chromosomal	3	1.6	8	4.0	3	1.6	11	5.7
	Metabolic	0	0.0	1	0.5	0	0.0	2	1.0
	Multiple	5	2.6	5	2.5	2	1.0	9	4.6
	Unspecified	0	0.0	1	0.5	0	0.0	7	3.6
	Other	14	7.4	12	5.9	7	3.6	2	1.0
	Total	43	22.8	39	19.3	37	19.3	56	28.9
		40	22.0	39	19.5	37	13.5	50	20.9
2.	Extreme prematurity		40.0						
	Not resuscitated	34	18.0	39	19.3	45	23.4	36	18.6
	Unsuccessful resuscitation	34	18.0	31	15.3	22	11.5	23	11.9
	Resuscitation unspecified								
	or unknown	16	8.5	10	5.0	19	9.9	8	4.1
	Total	84	44.4	80	39.6	86	44.8	67	34.5
3.	Cardio-respiratory disorders Hyaline membrane disease–								
	Respiratory distress syndrome	8	4.2	5	2.5	6	3.1	3	1.5
	Meconium aspiration syndrome	1	0.5	1	0.5	1	0.5	1	0.5
	Primary persistent pulmonary								
	hypertension	2	1.1	2	1.0	1	0.5	3	1.5
	Pulmonary hypoplasia	6	3.2	8	4.0	5	2.6	5	2.6
	Chronic neonatal lung disease	0	0.0	0	0.0	2	1.0	0	0.0
	Other	6	3.2	8	4.0	6	3.1	4	2.1
	Total	23	12.2	24	11.9	21	10.9	16	8.2
4	Infection								
	Congenital bacterial	2	1.1	7	3.5	3	1.6	6	3.1
	Acquired bacterial	4	2.1	8	4.0	6	3.1	3	1.5
	Fungal	0	0.0	1	0.5	1	0.5	0	0.0
	Unspecified organism	2	1.1	0	0.0	Ö	0.0	1	0.5
	Other	0	0.0	1	0.5	1	0.5	2	1.0
	Total	8	4.2	17	8.4	11	5.7	12	6.2
_		0	4.2	17	0.4	- ''	5.7	12	0.2
5.	Neurological								
	Hypoxic ischaemic encephalopathy			4.0					
	perinatal asphyxia	8	4.2	16	7.9	13	6.8	20	10.3
	Intracranial haemorrhage	10	5.3	11	5.4	10	5.2	12	6.2
	Other	0	0.0	0	0.0	1	0.5	0	0.0
	Total	18	9.5	27	13.4	24	12.5	32	16.5
6.	Gastrointestinal								
	Necrotising enterocolitis	2	1.1	5	2.5	5	2.6	2	1.0
	Other	1	0.5	1	0.5	1	0.5	1	0.5
	Total	3	1.6	6	3.0	6	3.1	3	1.5
7	Other								
/.	SIDS	0	0.0	0	0.0	1	0.5	0	0.0
		0	0.0	1	0.0	0	0.5	0	0.0
	Trauma Other	7	0.0 3.7	3	1.5	5	0.0 2.6	7	3.6
	Undetermined-not stated	3	3.7 1.6	5 5	1.5 2.5	5 1	2.6 0.5	1	0.5
	Total	10	5.3	5 9	2.5 4.5	7	0.5 3.6	8	0.5 4.1
	IUlai	10	5.3	9	4.5	/	3.0	8	4.1
TO	OTAL	189	100.0	202	100.0	192	100.0	194	100.0
		109	100.0	202	100.0	192	100.0	194	100.0

Source: NSW Maternal and Perinatal Committee, NSW Department of Health.

TABLE 147

NEONATAL DEATHS BY CAUSE AND GESTATIONAL AGE, NSW 2004

Neonatal cause	Less	than 37		al age (weeks) 37+	т	OTAL	
	No.	%	No.	%	No.	%	
Congenital abnormality							
Central nervous system	9	5.8	3	7.5	12	6.2	
Cardiovascular system	2	1.3	4	10.0	6	3.1	
Urinary tract	3	1.9	0	0.0	3	1.5	
Gastrointestinal tract	3	1.9	1	2.5	4	2.1	
Chromosomal	9	5.8	2	5.0	11	5.7	
	0		2				
Metabolic	-	0.0		5.0	2	1.0	
Multiple	7	4.5	2	5.0	9	4.6	
Other	5	3.2	2	5.0	7	3.6	
Unspecified	0	0.0	2	5.0	2	1.0	
Total	38	24.7	18	45.0	56	28.9	
2. Extreme prematurity							
Not resuscitated	36	23.4	0	0.0	36	18.6	
Unsuccessful resuscitation	23	14.9	0	0.0	23	11.9	
Resuscitation unspecified or unknown	8	5.2	0	0.0	8	4.1	
Total	67	43.5	0	0.0	67	34.5	
	01	70.0	0	0.0	01	04.0	
3. Cardio-respiratory disorders Hyaline membrane disease							
Respiratory distress syndrome	3	1.9	0	0.0	3	1.5	
Meconium aspiration syndrome	0	0.0	1	2.5	1	0.5	
	1	0.6	2	5.0	3	1.5	
Primary persistent pulmonary hypertension							
Pulmonary hypoplasia	3	1.9	2	5.0	5	2.6	
Other	4	2.6	0	0.0	4	2.1	
Total	11	7.1	5	12.5	16	8.2	
4. Infection							
Congenital bacterial	5	3.2	1	2.5	6	3.1	
Acquired bacterial	3	1.9	0	0.0	3	1.5	
Unspecified organism	1	0.6	0	0.0	1	0.5	
Other	0	0.0	2	5.0	2	1.0	
Total	9	5.8	3	7.5	12	6.2	
5. Neurological							
Hypoxic ischaemic encephalopathy-							
perinatal asphyxia	7	4.5	13	32.5	20	10.3	
Intracranial haemorrhage	12	7.8	0	0.0	12	6.2	
Total	19	7.8 12.3	13	32.5	32	16.5	
5. Gastrointestinal							
		0.0	0	0.0		0.5	
Other	1	0.6	0	0.0	1	0.5	
Necrotising enterocolitis	2	1.3	0	0.0	2	1.0	
Total	3	1.9	0	0.0	3	1.5	
7. Other							
Undetermined-Unknown	0	0.0	1	2.5	1	0.5	
Other	7	4.5	0	0.0	7	3.6	
Total	7	4.5	1	2.5	8	4.1	
TOTAL	154	100.0	40	100.0	194	100.0	
IOIAL	134	100.0	40	100.0	194	100.0	

13. HOW USEFUL ARE HOSPITAL MORBIDITY DATA FOR MONITORING CONDITIONS OCCURRING IN THE PERINATAL PERIOD?

The results of this study were originally published in the *Australian and New Zealand Journal of Obstetrics and Gynaecology*¹. This version of the article includes additional and extended tables of results. The results section has been modified accordingly.

Reference

 Taylor L, Travis S, Pym M, Olive E, Henderson-Smart DJ. How useful are hospital morbidity data for monitoring conditions occurring in the perinatal period? *Aust N Z J Obstet Gynaecol* 2005; 45:36–41.

Introduction

The main source of information on perinatal morbidity in Australia is state and territory perinatal data collections. Some jurisdictions collect information on all maternal and neonatal conditions, others collect information on a limited set of conditions. Thus there is currently no published information on the full range of conditions affecting mothers and newborns in Australia. It is also recognised that there is variable under-enumeration of those conditions that are covered by perinatal data collections. 1.2.3.4.5

Data that are routinely collected by hospitals for administrative purposes are a possible source of information on the full range of medical conditions and obstetric complications that may affect mothers and newborn babies, and could potentially supplement information available through perinatal data collections. All hospitals in Australia contribute to state and territory hospital morbidity data collections, which are primarily used for resourcing and management of health services. Hospital morbidity data collections contain information on the reason for admission, known as the primary diagnosis, and on comorbidities including other medical conditions present at the time of admission and medical complications that arise during hospital stay.

There has been a reluctance to use hospital morbidity data collections for monitoring maternal and perinatal morbidity because of concerns about accuracy of the data. A study examining the accuracy of reporting of eclampsia to both the hospital morbidity data collection and the perinatal data collection in Victoria supports this view. However there is no published information on the accuracy of the range of conditions reported by hospital morbidity data collections.

The aim of this review was to assess the accuracy and reliability of the NSW Inpatient Statistics Collection (ISC) in identifying perinatal morbidity during the hospital admission at time of birth.

Methods

The ISC covers demographic and episode related data for every inpatient who is separated from any public, private, and repatriation hospital, private day procedure centre, or public nursing home in NSW. It is maintained by the NSW Department of Health's Information Management and Support Unit. From July 1998, the NSW ISC has contained 21 fields for principal diagnosis and comorbidities, which are coded according to the International Classification of Diseases and Related Health Problems (ICD-10-AM).⁷ Conditions reported to the ISC for a sample of records were compared with information obtained through an audit of the corresponding medical records.

A random sample of 1,000 records was selected from computerised records of the ISC: 500 records of mothers who gave birth during the hospital admission and 500 records of liveborn babies born during the admission. Records were selected from NSW public and private hospitals with 50 or more births reported to the ISC in the financial year 1999–00. In 1999–00, 99.2 per cent of deliveries in NSW occurred in hospitals with 50 or more births.

For mothers, records with codes for vaginal or caesarean section deliveries were initially selected (Australian National Diagnosis-Related Group version 4.1 codes O01A, O01B, O01C, O01D, O02Z, O60A, O60B, O60C, or O60D). Records were excluded for hospitals where there were less than 50 mothers giving birth in the financial year (for logistical reasons), for 2 hospitals that had closed, and where the medical record number was not reported. A random number was assigned to each ISC record using a random number generator in SAS version 8.02.8 Records were sorted by ascending number and the first 500 records were selected as the sample. For liveborn babies, records indicating a livebirth (code Z38) were selected. The remainder of the sampling procedure was repeated as for mother records.

All selected hospitals agreed to participate in the audit. Each medical record was reviewed independently by a health information manager and a clinical nurse consultant in midwifery, both of whom are Department of Health employees. These staff then compared their findings and came to an agreement on conditions that should be coded. Coding was carried out according to the Australian National Coding Standards, Volume 1.7 Data collection was carried out over a 16 month period between October 2002 and February 2004. Coding of conditions was checked for logical consistency by a second health information manager in consultation with the review team, and any discrepancies were corrected by consensus. Information was entered on to a Microsoft Access 2002 database. Information collected through the audit process is referred to as the validation data.

Analyses were carried out using SAS version 8.02. A list of all coded conditions in the validation data was reviewed by an obstetrician and a neonatologist. Clinically important conditions or conditions that were otherwise considered

to be potentially useful for monitoring the health of mothers and babies over time were retained. The most common exclusions were: non-specific morbidity codes; symptoms, signs and abnormal clinical and laboratory findings; external causes of injury; and factors influencing the person's health status but which are not current illnesses. In addition, certain conditions were grouped. For example, condition codes for degrees of pre-eclampsia were combined into a single group for pre-eclampsia. Codes for premature rupture of membranes were crossmatched with codes for duration of pregnancy to create separate groups for term- and preterm-premature rupture of membranes.

Records in the ISC and validation datasets were compared. Sensitivity, specificity, positive predictive values (PPV) and negative predictive values (NPV) for single codes and grouped codes were calculated using the validation data as the 'gold standard'. Definitions are shown in Table 148. Percentage agreement and kappa measures of agreement were also calculated. Kappa is a measure of inter-rater reliability that corrects for agreement that could occur by chance. A kappa value of one represents perfect agreement and a value of 0 represents only chance agreement. Values greater than 0.75 may be taken to represent excellent agreement beyond chance, values between 0.40 and 0.75 may be taken to represent fair to good agreement beyond chance and values below 0.40 may be taken to represent poor agreement beyond chance.

Published validation studies of Australian state perinatal data collections were reviewed and measures of accuracy and reliability compared with the results obtained in this review.

As this review is an audit of a data collection and conforms to the standards established by the National Health and Medical Research Council for ethical quality review, ¹⁰ ethics committee approval was not sought.

Results

Of the 1,000 records sampled, 981 were available for review: 490 mother records (98.0 per cent) and 491 baby records (98.2 per cent). In the validation data 64 maternal conditions and 45 neonatal conditions were identified that were considered to be relevant to monitoring the health of mothers and babies. Measures of accuracy and reliability are shown in Tables 149 and 150.

Overall agreement was greater than 93 per cent for all conditions. However, many conditions were uncommon, and much of the agreement is due to conditions being correctly recorded as absent on the ISC. Kappa was at a level of 0.75 or above, indicating excellent agreement beyond chance, for 52 (48 per cent) conditions (maternal: n=26, 41 per cent; neonatal: n=26, 58 per cent); a level of 0.40 to 0.74, indicating fair to good agreement beyond chance, for a further 35 (32 per cent) conditions (maternal: n=26,41 per cent; neonatal: n=9, 20 per cent) neonatal conditions; and a level of less than 0.40, indicating poor agreement beyond chance, for 22 (20 per cent) (maternal: n=12,19 per cent; neonatal: n=10,22 per cent).

There was a wide range in the sensitivities of reported conditions, with only 34 (32 per cent) conditions (maternal: n=12, 19 per cent; neonatal: n=22, 49 per cent) having a sensitivity of 100 per cent, and 51 (47 per cent) conditions (maternal: n=25, 39 per cent; neonatal: n=26, 58 per cent) having a sensitivity of 80 per cent or more. Nine maternal conditions and 9 neonatal conditions that were found in the validation data were not reported at all in the ISC (sensitivity 0 per cent). These conditions were all uncommon, with only one or 2 cases in the validation data.

PPVs were generally higher than the sensitivities, with 46 (42 per cent) conditions (maternal: n=22, 34 per cent; neonatal: n=26, 58 per cent) having a perfect PPV of 100

ISC data		Validation data				
	Present	Absent	Total			
Present	a	b	a+b			
Absent	С	d	c+d			
Total	a+c	b+d	a+b+c+d			
Term	Formula	Definition				
Sensitivity	a/(a+c)	Proportion of those with the condition who are reported on the NSW IS having it				
Specificity	d/(b+d)	Proportion of those wit as not having it	hout the condition who are reported on the NSW I			
Positive predictive value (PPV)	a/(a+b)	Proportion of those rep have the condition	orted to have the condition on the NSW ISC who			
Negative predictive value (NPV)	d/(c+d)	Proportion of those rep	orted not to have the condition on the NSW ISC von			

per cent, and 74 (68 per cent) conditions (maternal: n=41, 64 per cent; neonatal: n=33, 73 per cent having a PPV of 80 per cent or more. Levels of specificity, were generally high, with all but 2 maternal and neonatal conditions having specificity of more than 96 per cent. Similarly, NPVs were generally high.

Some of the more common conditions reported are of particular interest for health monitoring purposes. Gestational diabetes was found to have a sensitivity of 96 per cent and almost perfect specificity. While the specificities for gestational hypertension and pre-eclampsia were high at over 99 per cent, the sensitivities were

relatively low at 59 per cent and 50 per cent respectively. If these two groups are combined into a general group of 'pregnancy induced hypertension' then the sensitivity rises to 63 per cent, suggesting some misclassification between these two groups. Only two-thirds of all cases of preterm premature rupture of membranes were correctly reported to the ISC (sensitivity 67 per cent). Placenta praevia was reasonably well reported, with a sensitivity of 88 per cent and a specificity of 100 per cent, while placental abruption was less well reported with a sensitivity of 50 per cent and a specificity of 100 per cent. Post partum haemorrhage was similarly under-reported, with a sensitivity of 59 per cent but a high specificity of 99 per cent.

TABLE 149	
COMPARISON	OF REPORTING MATERNAL CONDITIONS IN ISC AND VALIDATION DATA:
MEASURES	E ACCUPACY AND DELIABILITY

ICD-10-AM code	Description	ISC data No.	Validation data No.	Sensitivity %	Specificity %	PPV %	NPV %	Percentage agreement %	Kappa
A53.9	Syphilis	0	1	0.0	100.0	0.0	99.8	99.8	0.00
A60.0	Herpes virus infection of genitalia and urogenital tract	1	2	50.0	100.0	100.0	99.8	99.8	0.67
B01.9	Varicella	2	2	100.0	100.0	100.0	100.0	100.0	1.00
B18.2	Chronic viral hepatitis C	0	1	0.0	100.0	0.0	99.8	99.8	0.00
D25.9	Leiomyoma	3	2	100.0	99.8	66.7	100.0	99.8	0.80
D50	Iron deficiency anaemia†	6	7	57.1	99.6	66.7	99.4	99.0	0.61
D56	Thalassemia [†]	4	4	75.0	99.8	75.0	99.8	99.6	0.75
D50-D64	Any anaemia†	5	6	33.3	99.4	40.0	99.2	98.6	0.36
D68.0	Von Willebrand's disease	1	1	100.0	100.0	100.0	100.0	100.0	1.00
D69	Platelet disorders†	2	5	40.0	100.0	100.0	99.4	99.4	0.57
E03.9,E89.0	Hypothyroidism [†]	6	6	100.0	100.0	100.0	100.0	100.0	1.00
E05	Thyrotoxicosis [†]	0	3	0.0	100.0	0.0	99.4	99.4	0.00
E06.3	Autoimmune thyroiditis	0	1	0.0	100.0	0.0	99.8	99.8	0.00
F11.2	Mental and behavioural disorders due use of opioids— dependence syndrome	1	1	100.0	100.0	100.0	100.0	100.0	1.00
F12.2	Mental and behavioural disorders due use of cannabinoids— dependence syndrome	1	1	100.0	100.0	100.0	100.0	100.0	1.00
G40.9	Epilepsy	2	2	100.0	100.0	100.0	100.0	100.0	1.00
J45.9	Asthma	3	4	50.0	99.8	66 .7	99.6	99.4	0.57
M32.1	SLE with organ or system involvement	1	1	100.0	100.0	100.0	100.0	100.0	1.00
N18.90	Chronic renal failure	0	1	0.0	100.0	0.0	99.8	99.8	0.00
O09.3	Duration of pregnancy 20–25 completed weeks	0	1	0.0	100.0	0.0	99.8	99.8	0.00
O09.4	Duration of pregnancy 26–33 completed weeks	5	6	66.7	99.8	80.0	99.6	99.4	0.72
O09.5	Duration of pregnancy 34–36 completed weeks	11	21	52.4	100.0	100.0	97.9	98.0	0.68
O10	Pre-existing hypertension [†]	7	7	85.7	99.8	85.7	99.8	99.6	0.86
O13	Gestational hypertension	21	29	58.6	99.1	81.0	97.4	96.7	0.66
O14	Pre-eclampsia [†]	12	22	50.0	99.8	91.7	97.7	97.6	0.64
O13,O14	Pregnancy induced hypertension [†]	33	51	62.7	99.8	97.0	95.8	95.9	0.74
O23.4	Urinary tract infection in pregnancy	4	3	33.3	99.4	25.0	99.6	99.0	0.28
O24.0	Diabetes in pregnancy	1	2	50.0	100.0	100.0	99.8	99.8	0.67
O24.4	Gestational diabetes	22	22	95.5	99.8	95.5	99.8	99.6	0.95
O30.0	Twin pregnancy	4	3	100.0	99.8	75.0	100.0	99.8	0.86

TABLE 149 (continued)

COMPARISON OF REPORTING MATERNAL CONDITIONS IN ISC AND VALIDATION DATA: MEASURES OF ACCURACY AND RELIABILITY

ICD-10-AM code	Description	ISC data	data	Sensitivity		PPV	NPV	Percentage agreement	Kapp
		No.	No.	%	%	%	%	%	
O34.2	Maternal care due to uterine scar from previous surgery	40	40	92.5	99.3	92.5	99.3	98.8	0.92
O36.0,O36.1	Maternal care for isoimmunisation†	7	8	62.5	99.6	71.4	99.4	99.0	0.66
O41.1	Infection of amniotic sac and membranes	0	2	0.0	100.0	0.0	99.6	99.6	0.00
O42.0	Premature rupture of membranes: onset of labour within 24 hours	21	23	47.8	97.9	52.4	97.4	95.5	0.48
O42.1	Premature rupture of membranes: onset of labour after 24 hours	13	19	57.9	99.6	84.6	98.3	98.0	0.68
O42.11	Premature rupture of membranes: onset of labour between 1–7 days later	11	13	69.2	99.6	81.8	99.2	98.8	0.74
O42.12	Premature rupture of membranes: onset of labour more than 7 days later	2	4	25.0	99.8	50.0	99.4	99.2	0.33
O42.2	Premature rupture of membranes: labour delayed by therapy	0	1	0.0	100.0	0.0	99.8	99.8	0.00
O42.9	Premature rupture of membranes: unspecified	2	1	100.0	99.8	50.0	100.0	99.8	0.67
O42	Any premature rupture of membranes [†]	36	44	61.4	98.0	75.0	96.3	94.7	0.65
	Preterm premature rupture of membranes (PPROM)‡	6	9	66.7	100.0	100.0	99.4	99.4	0.80
	Term premature rupture of membranes (TPROM) [‡]	30	35	54.3	97.6	63.3	96.5	94.5	0.56
O44	Placenta praevia†	7	8	87.5	100.0	100.0	99.8	99.8	0.93
O45	Placental abruption†	2	4	50.0	100.0	100.0	99.6	99.6	0.6
O48	Prolonged pregnancy	45	47	95.7	100.0	100.0	99.6	99.6	0.98
O64-O66	Obstructed labour [†]	33	40	75.0	99.3	90.9	97.8	97.3	0.8
O68	Labour and delivery complicated by fetal stress (distress) [†]	76	72	87.5	96.9	82.9	97.8	95.5	0.82
O69.1	Labour and delivery complicated by cord around neck, with compression	13	15	80.0	99.8	92.3	99.4	99.2	0.85
O69.4	Labour and delivery complicated by vasa previa	1	2	50.0	100.0	100.0	99.8	99.8	0.67
O70.0	First degree perineal laceration	69	64	92.2	97.7	85.5	98.8	96.9	0.87
O70.1	Second degree perineal laceration	91	94	94.7	99.5	97.8	98.7	98.6	0.9
O70.2	Third degree perineal laceration	10	11	90.9	100.0	100.0	99.8	99.8	0.9
O70.3	Fourth degree perineal laceration	1	1	100.0	100.0	100.0	100.0	100.0	1.00
O70	Any perineal laceration [†]	171	170	95.3	97.2	94.7	97.5	96.5	0.9
O72	Post partum haemorrhage [†]	18	29	58.6	99.8	94.4	97.5	97.3	0.7
O75.7	Vaginal delivery following previous caesarean section	4	11	36.4	100.0	100.0	98.6	98.6	0.53
O85,O86.0,O86.2	Postpartum infection [†]	7	12	50.0	99.8	85.7	98.8	98.6	0.62
O90.1	Disruption of perineal obstetric wound	1	2	50.0	100.0	100.0	99.8	99.8	0.6
O90.2	Haematoma of obstetric wound	2	1	100.0	99.8	50.0	100.0	99.8	0.6
Z37.0	Single live birth §	474	472	99.4	72.2	98.9	81.3	98.4	0.70
Z37.1	Single stillbirth §	6	8	75.0	100.0	100.0	99.6	99.6	0.8
Z37.2	Twins, both liveborn §	5	6	83.3	100.0	100.0	99.8	99.8	0.9
Z37.5	Other multiple births, all liveborn	0	1	0.0	100.0		99.8	99.8	0.00
Z72.0	Tobacco use, current	57	80	66.3	99.0	93.0	93.8	93.7	0.74

[†] Conditions for which ICD-10 codes were grouped ‡ PPROM categorised using any code for premature rupture of membranes (042) with any code for duration of pregnancy less than 37 weeks (009.0–009.5). Other cases of premature rupture of membranes classified as TPROM. § Number of births do not sum to 490 as 3 mothers gave birth prior to arrival at hospital.

TABLE 150

COMPARISON OF REPORTING OF NEONATAL CONDITIONS IN NSW ISC AND VALIDATION DATA: MEASURES OF ACCURACY AND RELIABILITY

ICD-10-AM code	Description	NSW ISC data	data	Sensitivity	Specificity	PPV	NPV	Percentage agreement	Kappa
		No.	No.	%	%	%	%	%	
P07.2	Extreme immaturity (Less than 28 completed weeks)	2	2	100.0	100.0	100.0	100.0	100.0	1.00
P07.3	Other preterm infants (28 comple weeks to 37 completed weeks)	ted 24	31	74.2	99.8	95.8	98.3	98.2	0.83
E84.1	Cystic fibrosis with intestinal manifestations	1	1	100.0	100.0	100.0	100.0	100.0	1.00
E87.1	Hypo-osmolality and hyponatraemia	0	1	0.0	100.0	0.0	99.8	99.8	0.00
E87.2	Acidosis	1	1	100.0	100.0	100.0	100.0	100.0	1.00
K21.9	Gastro-oesophageal reflux disease without oesophagitis	1	1	0.0	99.8	0.0	99.8	99.6	0.00
K42.9	Umbilical hernia without obstruction or gangrene	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P05.0,P05.1	Small for gestational age	0	0	0.0	100.0	0.0	100.0	100.0	0.00
P07.0	Extremely low birth weight (999 gms or less)	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P07.1	Other low birth weight (1,000–2,499 gms)	12	11	100.0	99.8	91.7	100.0	99.8	0.96
P11.3,P13.1, P13.3,P13.4	Birth injuries [†]	0	0	0.0	100.0	0.0	100.0	100.0	0.00
P21.0	Severe birth asphyxia (Apgar score 0–3 at 1–minute)	1	2	50.0	100.0	100.0	99.8	99.8	0.67
P21.1	Mild and moderate birth asphyxic (Apgar score 4–7 at one minute)		1	100.0	99.6	33.3	100.0	99.6	0.50
P22.0	Respiratory distress of newborn (hyaline membrane disease)	7	14	50.0	100.0	100.0	98.6	98.6	0.66
P22.1	Transient tachypnoea of newborn	n 9	11	63.6	99.6	77.8	99.2	98.8	0.69
P24.0	Neonatal aspiration of meconiur	n 1	4	25.0	100.0	100.0	99.4	99.4	0.40
P24.2	Neonatal aspiration of blood	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P28.2	Cyanotic attacks of newborn	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P28.3	Primary sleep apnoea of newbor	n 1	1	100.0	100.0	100.0	100.0	100.0	1.00
P29.2	Neonatal hypertension	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P36.0	Sepsis of newborn due to streptococcus, group B	0	1	0.0	100.0	0.0	99.8	99.8	0.00
P52.0	Intraventricular (nontraumatic) haemorrhage, grade 1, of fetus and newborn	2	2	100.0	100.0	100.0	100.0	100.0	1.00
P52.1	Intraventricular (nontraumatic) haemorrhage, grade 2, of fetus and newborn	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P52.5	Subarachnoid (nontraumatic) haemorrhage of fetus and newborn	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P55	Haemolytic disease of fetus and newborn*	3	5	60.0	100.0	100.0	99.6	99.6	0.75
P59.0-P59.9	Neonatal jaundice†	22	25	80.0	99.6	90.9	98.9	98.6	0.84
P70.0-P70.4	Neonatal hypoglycaemia†	18	20	85.0	99.8	94.4	99.4	99.2	0.89
P75	Meconium ileus	1	1	100.0	100.0	100.0	100.0	100.0	1.00
P90	Convulsions of newborn	1	1	0.0	99.8	0.0	99.8	99.6	0.00
P92.0-P92.9	Feeding problems of newborn [†]	20	35	48.6	99.3	85.0	96.2	95.7	0.60
P96.1	Neonatal withdrawal symptoms from maternal use of drugs of addiction	2	2	100.0	100.0	100.0	100.0	100.0	1.00
Q03.9	Congenital hydrocephalus	1	1	100.0	100.0	100.0	100.0	100.0	1.00
Q21.0	Ventricular septal defect	1	1	100.0	100.0	100.0	100.0	100.0	1.00
Q33.9	Congenital malformation of lung, unspecified	0	1	0.0	100.0	0.0	99.8	99.8	0.00
Q53.1	Undescended testicle, unilateral	2	4	50.0	100.0	100.0	99.6	99.6	0.66
Q53.2	Undescended testicle, bilateral	1	2	50.0	100.0	100.0	99.8	99.8	0.67

TABLE 150 (continued)

COMPARISON OF REPORTING OF NEONATAL CONDITIONS IN ISC AND VALIDATION DATA: **MEASURES OF ACCURACY AND RELIABILITY**

ICD-10-AM	Description	ISC data	Validation data	Sensitivity	Specificity	PPV	NPV	Percentage agreement	Kappa
		No.	No.	%	%	%	%	%	
Q54.9	Hypospadias	1	1	100.0	100.0	100.0	100.0	100.0	1.00
Q65.0	Congenital dislocation of hip, unilateral	1	1	100.0	100.0	100.0	100.0	100.0	1.00
Q66.0	Talipes equinovarus	2	2	50.0	99.8	50.0	99.8	99.6	0.50
Q66.1	Talipes calcaneovarus	0	1	0.0	100.0	0.0	99.8	99.8	0.00
Q66.2	Metatarsus varus	1	1	100.0	100.0	100.0	100.0	100.0	1.00
Q66.4	Talipes calcaneovalgus	1	1	100.0	100.0	100.0	100.0	100.0	1.00
Z38.0	Singleton, born in hospital	472	471	99.8	90.0	99.6	94.7	99.4	0.92
Z38.2	Singleton, unspecified as to place of birth	0	1	0.0	100.0	0.0	99.8	99.8	0.00
Z38.3	Twin, born in hospital	19	19	94.7	99.8	94.7	99.8	99.6	0.95

TABLE 151

COMPARISON OF NSW ISC AND OTHER STATE PERINATAL DATA COLLECTIONS FOR SELECTED CONDITIONS

Condition	Data collection†	Sensitivity %	Specificity %	PPV %	NPV %	Percentage %	Карра
Premature rupture of membranes	NSW ISC	61.4	98.0	75.0	96.3	94.7	0.65
	WA perinatal data collection	75.0	98.6	63.2	99.2	97.8	-
Pre-existing hypertension	NSW ISC	85.7	99.8	85.7	99.8	99.6	0.86
	Victorian perinatal data collection	71.4	-	-	-	-	-
	SA perinatal data collection	-	-	-	-	99.3	0.72
	NSW perinatal data collection	62.5	99.8	-	-	99.6	0.59
Pre-eclampsia	NSW ISC	50.0	99.8	91.7	97.7	97.6	0.64
	Victorian perinatal data collection	87.0	-	-	-	-	-
	WA perinatal data collection	65.6	98.1	70.0	97.7	96.1	_
	NSW perinatal data collection	66.7	99.3	-	-	96.4	0.75
Pregnancy induced hypertension	NSW ISC	62.7	99.8	97.0	95.8	95.9	0.74
	Victorian perinatal data collection	60.0	_	-	-	_	-
	SA perinatal data collection	-	-	-	-	98.3	0.87
Gestational diabetes	NSW ISC	95.5	99.8	95.5	99.8	99.6	0.95
	WA perinatal data collection	100.0	99.2	69.2	100.0	99.2	-
	NSW perinatal data collection	86.7	99.6	-	-	99.1	0.87
Postpartum haemorrhage	NSW ISC	58.6	99.8	94.4	97.5	97.3	0.71
	Victorian perinatal data collection	100.0	-	-	-	-	-
	SA perinatal data collection	-	-	-	-	96.5	0.68
	WA perinatal data collection	80.0	99.4	88.9	98.8	98.2	-
Fetal distress	NSW ISC	87.5	96.9	82.9	97.8	95.5	0.82
	SA perinatal data collection	-	-	-	-	95.3	0.79
	WA perinatal data collection	90.5	93.3	65.5	98.6	92.9	-
Third degree perineal laceration	NSW ISC	90.9	100.0	100.0	99.8	99.8	0.95
	SA perinatal data collection	-	-	_	_	100.0	1.00

[†] Conditions presented where 10 or more cases reported from medical records in the NSW ISC and comparative published information available from

perinatal data collections.

Sources: Publications listed in the references as follows: SA perinatal data collection², Victorian perinatal data collection³, WA perinatal data collection⁴, NSW perinatal data collection⁵

Table 151 shows a comparison of measures of accuracy and reliability for common conditions reported to both the ISC and other state perinatal data collections, where published information is available. On the limited information available, reporting of pregnancy related conditions to state perinatal data collections has similar characteristics to the ISC: high levels of specificity, high NPVs, generally high levels of overall agreement, and a wide variation in sensitivities. Compared with perinatal data collections the accuracy of reporting to the ISC was better for pre-existing hypertension, worse for premature rupture of membranes, pre-eclampsia and postpartum haemorrhage, and similar for other conditions for which comparative information was available.

Discussion

Hospital administrative data have the advantage of being routinely collected and are therefore inexpensive as a resource for monitoring perinatal health. However, there has been reluctance on the part of clinicians to use such data due to concerns about data quality. This review provides evidence of the accuracy of ISC data based on a review of large random sample of mother and baby records. Not all conditions that might be of interest to clinicians occurred in our sample. However, results for common conditions of clinical interest are presented, and information on patterns of accuracy of less common conditions helps provide a picture of the value of the ISC as a source of information on perinatal health.

We found that the accuracy and reliability of the ISC is characterised by:

- variable levels of overall agreement, with about half
 of all conditions reported at a level considered to be
 excellent agreement beyond chance and a further
 one third at a level indicating fair to good agreement
 beyond chance;
- high levels of specificity, indicating that false positive reports are uncommon;
- variable levels of sensitivity, indicating a variable level of under-enumeration;
- generally higher levels of accuracy and reliability for neonatal records than maternal records.

The findings of overseas studies are similar in terms of variable levels of sensitivity and high levels of specificity and in both the perinatal area, 11,12 and for morbidities generally. 13 A population based Canadian study found that the prevalence of a range of pregnancy conditions reported from hospital admission records was within a reasonable range of those reported in the literature. 14 From the limited amount of published information available, it appears that state perinatal data collections have similar characteristics, although we could only make comparisons for a small number of maternal conditions and some of the published studies are several years old and may not reflect current levels of accuracy.

This review assessed the extent to which the ISC records conditions documented in the medical record. The Australian Coding Standards permit clinical coders to code a condition only if the diagnosis is documented in the medical record or otherwise confirmed by a clinician. For example, the Coding Standards state that postpartum haemorrhage (PPH) is a haemorrhage of 500 mls or more in the case of a vaginal delivery and 750 mls or more in the case of a caesarean section. However, if the diagnosis of PPH is not documented in the medical record, it should be confirmed by a clinician before it is coded. Thus clinical coders are not permitted to infer a diagnosis. Confirmation of a suspected diagnosis is unlikely to occur in a busy medical record department and, in practice, it is likely that a condition will generally only be coded if the diagnosis is clearly documented in the medical record. The higher levels of accuracy found for neonatal versus maternal conditions in this study may reflect better documentation of diagnoses for babies than mothers. Levels of documentation may also by influenced by screening practices, for example, for gestational diabetes.

Further, the Coding Standards state that, in general, a condition may be coded if it affects patient management. Thus, essential hypertension will not be coded if it did not affect the management of the mother during her hospital stay. In addition, hospitals may sometimes be directed by state health authorities or their own administrators to vary their coding practice from the national standard for local reasons, thus introducing inconsistent practices between states and territories, and between hospitals.

These results have several implications for use of hospital data for the purpose of monitoring patterns in the health of mothers and babies:

- The less than perfect sensitivities and high specificities
 found in this review suggest that ISC data could be
 used to measure the burden of disease in mothers or
 infants where the condition is common and there is
 independent evidence that enumeration of cases is
 reasonable. Our results suggest that ISC data could
 be used to assess the number of cases of diagnosed
 gestational diabetes, placenta praevia, prolonged
 pregnancy, vaginal laceration, and possibly pre-existing
 hypertension.
- 2. For rare conditions, even a high specificity can result in a substantial proportion of cases reported to the ISC being false positives. For example, *maternal care for isoimmunisation* has a specificity of 99.8 per cent. However, of the 7 cases reported to the ISC, 5 were true positives (7XPPV=7X71.4 per cent=5) and 2 were false positives. In a hospital setting, it would be advisable to confirm reporting of rare conditions by reference to the medical record.
- 3. Even where under-enumeration exists, if the condition is common, the specificity is high (that is, there are few false positives), and there is evidence that the level of under-enumeration has not changed over time, then

the data could be used to indicate whether the burden of disease is increasing or decreasing over time.

- 4. For conditions with high PPVs and NPVs, ISC data could be used as a source of information for certain study types, such as multivariate analyses of factors (for example demographic factors and hospital insurance status) thought to be associated with the condition, or as a sampling frame for nested case—control studies.
- 5. Conditions examined in this review are more likely to be studied as risk factors for birth outcomes rather than as outcomes themselves. If the degree of misclassification of mothers and babies to not having a condition when they have it, or vice versa, is not dependent on the birth outcome, then this is known as non-differential bias and may result in a reduction in the estimate of risk found. Alternatively, the ascertained risk could be viewed as an estimated minimum level of risk, which is nevertheless valuable information. There are no published validation studies that have been carried out using this approach in the area of perinatal health. A Canadian validation study found that multivariate risk models for all-cause mortality from percutaneous coronary intervention that were constructed from a provincial hospitalisation database were almost identical to the same models constructed from data obtained through medical record review, despite a variable level of misclassification (particularly under-enumeration) of comorbidities on the hospital database. 15 The nature and degree of likely bias should be considered separately for individual studies.
- 6. Recognising the strengths and limitations of hospital administrative data, it has been proposed that such data are useful as a screening tool for identifying problems in quality of health care. ^{16,17}

Thus, while hospital administrative data such as the NSW ISC have the advantage of being readily available and inexpensive, data quality is a valid concern. The quality of hospital administrative data could be improved by clinicians recognising that clinical coders are not permitted to make diagnoses and ensuring that relevant diagnoses are documented in the medical record; and through improvements in the quality and consistency of coding practice. If the quality of hospital administrative data is viewed critically in terms of the purpose of its use, the data can be a useful resource for monitoring the health of mothers and babies.

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References

- Haynes K, Stone C, King J. Major conditions associated with childbirth in Australia: Obstetric haemorrhage and associated hysterectomy. Melbourne: Department of Human Services, 2004.
- McLean A, Scott J, Keane RK, Sage L, Chan A. Validation of the 1994 South Australian Perinatal Data Collection Form. Adelaide: Department of Human Services, 2001.
- Vagg L, Taylor O, Riley M, Palma S, Halliday J. Validation of the Victorian Perinatal Morbidity Statistics form: new items, pre-coded text and free text. *Health Inf Manag*. 1999–2000; 29: 118–22.
- 4. Gee V, Dawes V. Validation Study of the Western Australian Midwives' Notification System 1992. Perth: Health Department of Western Australia, 1994.
- Taylor L, Pym M, Bajuk B, Sutton L, Travis S, Banks C. New South Wales Mothers and Babies 1998. Sydney: NSW Department of Health, 2000.
- Riley M, Halliday J. The accuracy of eclampsia cases reported to the Victorian Inpatient Minimum Database and the Perinatal Data Collection Unit. *Health Inf Manag.* 1998; 28: 13–15.
- The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM). Sydney: National Centre for Classification in Health, 1998.
- 8. The SAS System for Windows version 8.02. Cary, NC: SAS Institute, 1996.
- 9. Fleiss J. Statistical Methods for Rates and Proportions. New York: John Wiley and Sons, 1981.
- 10. National Health and Medical Research Council. When does quality assurance in health care require independent ethical review? Canberra: NHMRC, 2003.
- Korst LM, Gregory KD, Gornbein JA. Elective primary caesarean delivery: Accuracy of administrative data. *Paediatr Perinat Epidemiol.* 2004; 18: 112–119.
- 12. Parrish KM, Holt VL, Connell FA, Williams B, LoGerfo JP. Variations in the accuracy of obstetric procedures and diagnoses on birth records in Washington State, 1989. *Am J Epidemiol.* 1993; 138: 119–27.
- 13. Quan H, Parsons GA, Ghali WA. Validity of information on comorbidity derived from ICD-9-CM administrative data. *Med Care.* 2002; 40: 675–85.
- Wen SW, Liu S, Marcoux S, Marcoux S, Fowler D. Uses and Limitations of Routine Hospital Admission—Separation Records for Perinatal Surveillance. *Chronic Dis Can* 1997; 18: 113–9.
- 15. Humphries KH, Rankin JM, Carere RG, Buller CE, Kiely FM, Spinelli JJ. Co-morbidity data in outcomes research: are clinical data derived from administrative databases a reliable alternative to chart review?. *J Clin Epidemiol* 2000;53:343-9.
- 16. Schwartz RM, Gagnon DE, Muri JH, Zhao QR, Kellogg R. Administrative data for quality improvement. *Pediatrics*. 103:291-301.
- 17. Iezzoni LI. Assessing quality using administrative data. *Ann Intern Med. 1997*;127:666-74.

14. APPENDICES

APPENDIX 1

DESCRIPTION OF SELECTED BIRTH DEFECTS

The following include descriptions of some of the birth defects included in this report:

Anencephaly Absence of the cranial vault, with the brain tissue completely missing or markedly reduced.

Spina bifida Defective closure of the bony encasement of the spinal cord, through which the spinal cord may protrude.

Encephalocele Protrusion of brain through a congenital opening in the skull

Hydrocephalus Dilatation of the cerebral ventricles accompanied by an accumulation of cerebral fluid within the skull.

Buphthalmos Enlargement and distension of the fibrous coats of the eye.

Hypospadias The opening of the urethra lies on the underside of the penis or on the perineum.

Absence of the upper wall of the urethra. The opening of the urethra lies on the dorsum of the penis in males, **Epispadias**

and anterior to or onto the clitoris in females.

Chordee Downward bowing of the penis.

Talipes equinovarus A deformity of the foot in which the heel is elevated and turned outward.

Polydactyly Presence of additional fingers or toes on hands or feet. Syndactyly Attachment of adjacent fingers or toes on hands or feet.

Craniosynostosis Premature closure of the sutures of the skull.

Exomphalos Herniation of the abdominal contents into the umbilical cord

Gastroschisis A defect in the abdominal wall not involving the umbilicus and through which the abdominal contents herniate.

Cystic hygroma A sac, cyst or bursa distended with fluid.

APPENDIX 2

BIRTH DEFECT EXCLUSION LIST

The following is a general list of minor defects and non-structural disorders which are excluded from the NSW Birth Defects Register:

Abnormal palmar creases and congential hypothyroidism. Intrauterine growth retardation Accessory nipples

Balanced chromosomal translocation (unless occurring with structural Low birth weight

Meconium ileus Birthmarks (single, < 4 cms diameter) Minor ear anomalies

Bronchopulmonary dysplasia Minor finger/hand anomalies Cerebral palsy Minor toe/foot anomalies

Clicky hips

Muscular dystrophies & myopathies Congenital infections (unless occurring with structural defects)

Oesophageal reflux Congenital neoplasms/tumours (exception: cystic hygroma)

Patent ductus arteriosus (less than 37 weeks gestation) Developmental disability Pilonidal sinus Deviated nasal septum Sacral dimples

Fetal alcohol syndrome Single umbilical artery (unless occurring with structural defects) Glucose-6-phosphate dehydrogenase (G6PD) deficiency

Skin tag Haemophilia

Heart murmurs (functional) Talipes (exception: those requiring surgery)

Hernia (epigastric, hiatus, inguinal, umbilical)

Hydrocele (testis) Undescended testes (exception: those requiring surgery)

Hypoplastic lung (less than 37 weeks gestation) Webbing of 2nd & 3rd toes Imperforate hymen

Wide sutures Inborn errors of metabolism other than phenylketonuria, galactosemia

APPENDIX 3

MATERNAL COUNTRIES OF BIRTH AND COUNTRY OF BIRTH GROUPS

English speaking Australia Christmas Island Cocos (Keeling) Islands Norfolk Island New Zealand United Kingdon Channel Islands Isle of Man

Ireland Bermuda Canada

United States of America

South Africa

Central and South America

Argentina Bolivia Brazil Chile Colombia Ecuador Falkland Islands French Guiana Guyana Paraguay Peru Surinam Uruguay Venezuela Belize Costa Rica El Salvador Guatamala

Honduras Mexico Nicaragua Panama Antigua and Barbuda Bahamas Barbados

Cayman Islands Cuba Grenada Guadeloupe

Jamaica Netherlands Antilles Puerto Rico St Kitts-Nevis St Lucia

St Vincent and the Grenadines Trinidad and Tobago Turks and Caicos Islands

Eastern Europe, Russia, **Central Asian and Baltic States**

Bulgaria Czechoslovakia Hungary Poland Romania Armenia Azerbaijan

Belarus (formerly Byelorussia) Estonia

Georgia Kazakhstan Kyrgyzstan (formerly Kirghizia) Latvia

Lithuania Moldova (formerly Moldavia) Russian Federation

Llkraine Uzbekistan Melanesia, Micronesia and Polynesia

New Caledonia Papua New Guinea Solomon Islands Vanuatu Guam Kiribati Nauru Cook Islands

French Polynesia (including

Tahiti) Niue American Samoa Western Samoa Tokelau Tonga Tuvalu

Fiii

Wallis and Fortuna

Middle East and Africa

Bahrain Gaza Strip Iran Iraq Israel Jordan Kuwait Lebanon Qatar Saudi Arabia Syria Turkey

United Arab Emirates

West Bank Yemen Algeria Egypt Libya Mauritania Morocco Sudan Tunisia Cameroon

Central African Republic

Congo Cote d'Ivoire Gambia Ghana Guinea-Bissau Liberia Mali Nigeria Senegal Sierra Leone Zaire Angola Botswana Diibouti Ethiopia Kenya Malawi Mauritius Mozambique Namibia

Reunion Rwanda Seychelles Somalia Swaziland Tanzania Uganda Zambia Zimbabwe

North East Asia

China (excluding Taiwan)

Hong Kong Japan North Korea South Korea Macau Mongolia Taiwan

South East Asia

Brunei Cambodia Indonesia Laos Malaysia Burma (Myanmar) Philippines Singapore Thailand Vietnam

Southern Asia

Afganistan Bangladesh Bhutan India Maldives Nepal

PakistanSri Lanka

Southern Europe

Albania Andorra Cyprus Gibraltar Greece Italy Malta Portugal Spain

Former Yugoslavia (not otherwise defined)

Croatia

Slovenia

Western and Northern Europe

Austria Belgium France Germany (United) Luxembourg Netherlands Switzerland Denmark Faeroe Islands Finland Iceland

Norway

Sweden

APPENDIX 4

NSW MIDWIVES DATA COLLECTION FORM

NSW MIDWIVES DATA COLLECTION								
Mother Unit	Hospital	Code						
Record No.	Позріка	Code						
First Name	Fairly Name							
Address		Postcode						
Mother's	LABOUR AND DELIVERY	BABY						
birth date day month year	If labour induced, main indication:	Place of birth						
Country of birth Australia 36	Diabetes 1	Hospital theatre/delivery suite						
Other If other, specify	Hypertensive disease 2	Birth centre 2						
	Fetal distress 3	Planned birth centre/delivery suite birth						
Indigenous status: Aboriginal 1	Fetal death 4 Chorioamnionitis 5	Planned homebirth Planned homebirth Planned homebirth/hospital admission						
Indigenous status: Aboriginal 1 Torres Strait Islander 2	Blood group isoimmunisation 6	Born before arrival						
Aboriginal and Torres Strait Islander 3	Prelabour rupture of membranes 7	Unit Record No.						
None of the above 4	Prolonged pregnancy (41+ weeks) 8							
PREVIOUS PREGNANCIES	Suspected intrauterine growth restriction 9	Birth date:						
Previous pregnancy greater	Other 10	day month year						
than 20 weeks? Yes 1 No 0	Pain relief/ anaesthetics (tick 1 or more) None Pudendal	Sex: M 1 F 2 Indet. 3						
If no, go to next section. If yes:	Nitrous oxide Spinal	Plurality: Single 1 Multiple 2						
Specify the number of previous	IM narcotics General	If multiple, total number						
pregnancies > 20 weeks	Local to perineum anaesthetic anaesthetic	If multiple birth, specify baby number						
Was the last birth by caesarean Yes 1 No 0	Epidural/caudal Other Presentation at birth							
Total number of previous	Vertex 1 Face 3	Birthweight (grams)						
caesarean sections?	Breech 2 Brow 4	Estimated gestational age						
THIS PREGNANCY	Other 5 Type of delivery	Apgar						
Date of LMP	Normal vaginal 1 Vacuum extr. 3	1 min 5 min						
day month year	Forceps 2 Vaginal breech 4	Resuscitation of baby (tick 1 or more)						
Prenatal diagnosis (< 20 weeks gestation) CVS	Caesarean section 5	None 1 IPPR: bag + mask 4 Suction 2 Intubation + IPPR 5						
Amniocentesis	If caesarean section, main indication: Failure to progress	O2 therapy 3 External cardiac 6						
Antenatal care Duration of pregnancy	- Cx dilatation unknown	massage + ventilation						
at first visit (weeks)	- Cx 3cm dilated or less 2	Other 7						
Not booked	- Cx dilated more than 3 cm 3	POSTNATAL CARE - BABY						
Medical conditions Diabetes mellitus	Fetal distress 4	Birth defect? Yes 1 No 0						
Gestational diabetes	Other 5 Perineal status	If yes, specify:						
Chronic hypertension	Intact 1 4th deg. tear 5							
Pre-eclampsia	1st deg. tear/graze 2 Episiotomy 6	Admitted to NICU? Yes 1 No 0						
Smoking Did the mother smoke at all	2nd deg. tear 3 Both tear and 7	Admitted to SCN? Yes 1 No 0						
during pregnancy? Yes 1 No 0	3rd deg. tear 4 episiotomy Other 8	If yes, observation only? Yes 1 No 0						
If yes, how many cigarettes each day on average in the second half of pregnancy?	Surgical repair of the vagina or	If admitted to SCN/NICU: Was a birth defect the main						
None 7 > 10 per day 2	perineum? Yes 1 No 0	reason for admission? Yes 1 No 0						
≤ 10 per day 3 Unknown 4	DISCHARGE STATUS - MOTHER AND BABY							
LABOUR AND DELIVERY	Mother Baby	Baby's date						
Onset of labour	Discharged 1 Discharged 1	of discharge day month year						
Spontaneous 1 Induced 2	Transferred 2 Transferred 2	Hospital						
No labour 3	Died 3 Stillbirth 3	transferred to:						
If labour augmented/ induced (tick 1 or more):	Neonatal death 4	date of death day month year						
Oxytocins ARM	Transferred 5 and died	Signature of midwife						
Prostaglandins Other	and died	at discharge						

Health Department Copy

Please complete and forward to: NSW Midwives Data Collection Patient Data Management Unit, Level 6 Locked Bag 961, North Sydney, NSW 2059