



NATIONAL OBSTETRIC INFORMATION SYSTEM (NOIS)

MALTA

Third Quarterly Report: July to September 2013

*Department of Health Information and Research (DHIR)
National Obstetric Information System (NOIS), Malta*

https://ehealth.gov.mt/HealthPortal/chief_medical_officer/healthinfor_research/registries/births.aspx

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NATIONAL OBSTETRIC INFORMATION SYSTEMS (NOIS)

Background

A national obstetric information system was launched at the Department of Health Information and Research (DHIR) at the beginning of 1999 and now covers practically all deliveries taking place on the islands of Malta and Gozo.

Systematic data collection for NOIS commences once the mother delivers her baby. Information regarding the course and outcome of each pregnancy is recorded by the relevant staff at each centre on a standard NOIS sheet. Once the data are recorded, the sheets are forwarded to the DHIR on a regular basis. At the DHIR the relevant sheets are processed and entered into the NOIS database. All data is kept in accordance with the Data Protection Act, 2001.

The maternity centres actively participating in this information system are: Mater Dei Hospital, Gozo General Hospital, St James Hospital Sliema and Zabbar.

Report analysis

This report analyses the national maternities/deliveries and infant births that occurred in the third quarter of 2013 and where appropriate compares it to the figures reported for the same period of last year. The data in this report describes the birth statistics for all maternities (Maltese and non-Maltese) and infant births registered into the system. All births, live or still, of gestation 22 weeks and above are registered and analysed in this report.

Data is sent to the Registry from all hospitals on the Maltese Islands. Accuracy and completeness of data sent on the NOIS reporting sheets is the responsibility of the Hospital providing data.

This report provides basic statistics regarding births and deliveries in the Maltese Islands. If required, further information and details may be obtained from our website: https://ehealth.gov.mt/HealthPortal/chief_medical_officer/healthinfor_research/registries/births.aspx or by e-mail: healthinfo@gov.mt.

ANALYSIS

There were a total of 1044 maternities/deliveries registered in the Maltese Islands for the third quarter of 2013, which resulted in a total of 1065 infant births.

Comparing these figures with those reported for the same period last year one can see that the number of infant births decreased by 87 births (*1152 births reported in 3rd quarter 2012*).

MATERNITIES / DELIVERIES

MATERNAL AGE, MARITAL STATUS, NATIONALITY AND PARITY

Maternal Age:

The maternities have been grouped according to standard age groupings and the frequency distribution of deliveries according to maternal age at delivery has been analysed. In the third quarter of 2013, the greatest number of deliveries (35.2%), occurred in the age group 30-34 years, followed by the 25-29 year age group (30.6%). There was one delivery in the age group <15 years and one in the 45+ age group. The minimum age of mothers at delivery was 13 years while the maximum age was 47 years. The most frequent age at delivery was 31 years (93 mothers) and the average age at delivery was 29.5 years.

The frequency distribution of deliveries according to maternal age group is given in the following table.

Table 1- Deliveries according to maternal age group

Age in years	3 rd Quarter 2013		3 rd Quarter 2012	
	Frequency	%	Frequency	%
<15	1	0.1	1	<1
15-19	40	3.8	54	4.8
20-24	142	13.6	154	13.7
25-29	319	30.6	352	31.2
30-34	367	35.2	384	34.0
35-39	155	14.8	159	14.1
40-44	19	1.8	24	2.1
45+	1	0.1	0	0
Unspecified	0	0	0	0

Marital Status:

For the third quarter of 2013, 25% (261) of all deliveries occurred to mothers who were reported as single (never married); while 71% (741) of all deliveries occurred to mothers reported as married, and 4% (42) of mothers were reported as widowed, separated or divorced. Marital status was specified for all mothers.

In the third quarter of 2013, all mothers were registered as having 'Support at home to raise the infant'.

Nationality:

86.1% (899) of all deliveries this quarter occurred to women of Maltese nationality while 13.7% (143) were Non-Maltese. In 2 cases mother's nationality was not specified.

Parity:

There were 51.4% (537) of mothers who were primiparas (ie. delivering for the first time) while 48.6% (507) were multiparas (ie. having already delivered at least one live or still birth) in the third quarter of 2013.

MATERNAL LIFESTYLES

There were 72 (6.9%) mothers who were reported to smoke one or more cigarettes during pregnancy in the second quarter of this year. Two mothers were reported to drink some alcohol in pregnancy and 6 were reported to be drug abusers.

The following table gives the smoking, alcohol and drug habits of mothers for the third quarters of 2013 and 2012.

Table 2 – Maternal lifestyles

	<i>3rd Quarter 2013</i>		<i>3rd Quarter 2012</i>	
	<i>No.</i>		<i>No.</i>	
<i>Cigarette smoking during pregnancy</i>				
1 to 3/day	17		26	
> than 3/day	55		55	
Do not smoke	972		1047	
Unspecified	0		0	
<i>Alcohol consumption during pregnancy</i>				
Up to 1unit/day	2		1	
> than 1unit/day	0		0	
None	1042		1127	
Unspecified	0		0	
<i>Drug Abuse during pregnancy</i>				
Yes	6		4	
No	1038		1124	
Unspecified	0		0	

SPECIAL CONDITIONS OF PREGNANCY

In the third quarter of 2013, there were 22 cases of assisted reproduction (ART) reported, this includes all forms of ART namely ovulation stimulation, IVF and ICSI (16 cases of ART reported in 3rd quarter 2012).

The table below gives the number and frequency of mothers recorded with specific obstetric conditions during pregnancy. The most frequently recorded was gestational hypertension; in fact 4.8% of mothers were registered as having gestational hypertension in the third quarter of 2013.

Table 3 – Pregnancy related conditions

	<i>3rd Quarter 2013</i>		<i>3rd Quarter 2012</i>	
	<i>Frequency</i>	<i>%</i>	<i>Frequency</i>	<i>%</i>
Antepartum Haemorrhage	15	1.4	14	1.2
Gestational hypertension	50	4.8	51	4.5
Pre-eclampsia	10	1.0	15	1.3
Eclampsia	0	0	0	0
Placenta praevia	6	0.6	7	0.6
Abruption of placenta	3	0.3	5	0.4

Diabetes in Pregnancy

In the third quarter of this year, there were 3 mothers who were reported as being Insulin Dependent Diabetics before the current pregnancy while no mothers were reported with Non-Insulin Dependent diabetes prior to pregnancy. In addition, there were a total of 24 mothers (2.3%) registered with gestational diabetes who were controlled without the use of insulin, and no mothers registered as having gestational diabetes treated with insulin.

DELIVERIES ACCORDING TO PLURALITY

For the third quarter of 2013, there were a total of 1023 (98.0%) singleton and 21 (2.0%) twin deliveries, there were no triplet or quadruplet deliveries.

Table 4 –Delivery by Plurality

	<i>3rd Quarter 2013</i>	<i>3rd Quarter 2012</i>
Singleton	1023	1106
Twin	21	20
Triplet	0	2
Quadruplet	0	0

INFANT BIRTHS

TOTAL INFANT BIRTHS AND GENDER DISTRIBUTION

In the third quarter of this year, there were a total of 1065 infant births, while there were 1152 in the same quarter of 2012.

There were more male infants born than female, the gender distribution for this quarter was 579 (54.4%) males and 486 (45.6%) females (*3rd quarter 2012: males – 595; females – 557*).

INFANTS AND METHOD OF BIRTH

Of the 1065 infants born between July and September 2013, 685 (64.3%) were delivered as unassisted vertex delivery, 333 (31.3%) by emergency or elective Caesarean Section and 47 (4.4%) by assisted vaginal delivery (this includes forceps, ventouse and breech deliveries).

Table 5 – Distribution of births by method of delivery

	<i>3rd Quarter 2013</i>	<i>3rd Quarter 2012</i>
Vaginal vertex delivery	685	662
Emergency/elective Caesarean Section	333	425
Forceps delivery	6	2
Ventouse	38	62
Breech	3	1

**Data analysed according to total infant births*

This quarter there were 333 babies born by caesarian section but 313 caesarean deliveries performed, this due to the fact that a number of caesareans are done in multiple birth deliveries. The Caesarean section operation rate was 30.0% of the total maternal deliveries (1044) this quarter.

BIRTHS BY GESTATIONAL AGE CATEGORY

This quarter there were 75 (7.0%) preterm babies of less than 37 weeks gestation, of these 17 (1.4%) were very preterm being less than 32 weeks of gestation.

Table 6 – Distribution by gestational age categories

	<i>3rd Quarter 2013</i>	<i>3rd Quarter 2012</i>
Extremely Preterm (22 - 27 wks)	7	3
Very Preterm (28 - 31 wks)	10	5
Moderately Preterm (32 - 36wks)	58	82
Term (37 - 41wks)	990	1062
Post term (41+ wks)	0	0
Unknown	0	0

INFANT BIRTH WEIGHTS

In the third quarter of 2013, 980 (92.0%) of the total births occurred in the birth weight range of 2500g to 4499g, 66 (6.2%) were in the low birth weight range of 1500g to 2499g and 12 (1.1%) of births were of very low birth weight 500g to 1499g. Two babies were less than 500g although having a gestation of 22 completed weeks, one was a stillbirth at 22 weeks gestation and the other was a very early neonatal death at 23 weeks gestation. There were 4 infants with a birth weight of 4500g or over, in one case the birth weight was not specified.

Table 7 – Births by birth weight

	<i>3rd Quarter 2013</i>	<i>3rd Quarter 2012</i>
<500g	2	0
500-999g	6	5
1000-1499g	6	7
1500-1999g	18	15
2000-2499g	48	58
2500-2999g	209	234
3000-3499g	465	511
3500-3999g	268	266
4000-4499g	38	52
4500-4999g	4	4
5000+	0	0
Unspecified	1	0
Average Birth weight (g)	3205	3214

OUTCOME OF BIRTH

The number of live births for the third quarter of this year was 1057 which accounted for 99.2% of the total births at a national level. The remaining 8 births were stillbirths. Stillbirths are defined as fetal death at or after 22 completed weeks of gestation.

Table 8 – Live and still births

	<i>3rd Quarter 2013</i>	<i>3rd Quarter 2012</i>
Babies born alive	1057	1149
Stillbirths	8	3

Of the 1057 live births this quarter, there were 3 early neonatal deaths and one late neonatal death.

Table 9 – Early and late neonatal deaths

	<i>3rd Quarter 2013</i>	<i>3rd Quarter 2012</i>
Early Neonatal deaths	3	1
Late Neonatal deaths	1	0

INFANT FEEDING METHODS AT DISCHARGE

Infant feeding habits are recorded by hospital staff at the time of discharge; little can be said on the actual infant feeding habits as these may change soon after discharge from the birthing facilities.

Table 10 – Infant feeding methods at time of discharge

	<i>3rd Quarter 2013</i>	<i>3rd Quarter 2012</i>
Breast only	628	633
Bottle only	294	343
Mixed (Breast & Bottle)	131	171
Other*	12	5
Unspecified	0	0

* 'Other' - include babies who are still at hospital after 28 days and those who die before discharge

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St. James Hospital, Zabbar