

At A Glance: S.C. 2009 Infant Mortality Statistics

Maternal and Child Health Bureau and

Office of Public Health Statistics and Information Systems

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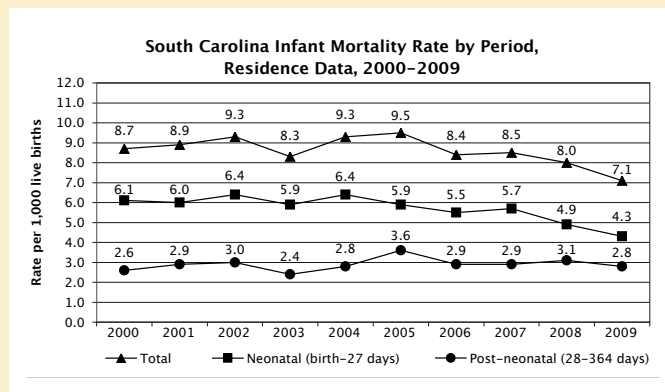
The infant mortality rate is an indicator of the overall health of mothers and infants in a population. Though the S.C. infant mortality rate remains higher than the latest reported U.S. infant mortality rate (6.75 deaths per 1,000 live births in 2007), the S.C. infant mortality rate has decreased by 25.3% from 2005 (9.5 deaths per 1,000 live births) to 2009 (7.1 deaths per 1,000 live births).

2009 Infant Mortality Key Facts

- The S.C. infant mortality rate fell to 7.1 deaths per 1,000 live births in 2009, an 11.3% decline from the previous year's rate of 8.0.
- The infant mortality rate among the black/other population group has declined in four consecutive years (2005-14.3, 2006-13.2, 2007-12.9, 2008-11.4, 2009-10.5). However, the infant mortality rate among minority mothers remains over twice that of white mothers.
- The overall reduction in infant mortality is the result of a 12.2% decline in the neonatal mortality rate (infant death in the first 27 days) and a 9.7% reduction in the post-neonatal mortality rate (infant death from 28-364 days).
- Substantial decreases in Sudden Infant Death Syndrome (SIDS) and accidental suffocation and strangulation in bed appear to be factors in the observed reductions in post-neonatal mortality rates.
- This drop in SIDS and accidental suffocation deaths coincides with an 8.6% increase in infants being placed down to sleep on their backs (62.3% in 2008 to 67.7% in 2009).

Leading Causes of Infant Death in 2009

- The three leading causes of infant deaths (congenital malformations and deformations, disorders related to short gestation and low birth weight, and SIDS) are responsible for 42.6% of all infant deaths in S.C.
- There was a notable reduction (47.2%) in the number of deaths classified under "fetus and newborn affected by maternal complications of pregnancy" likely contributing to the overall reduction in the neonatal mortality rate.
- A notable decrease (15.5%) in deaths due to "congenital malformations and deformations" was also observed.
- Within the broad classification of Accidents, there was a decrease in deaths related to accidental suffocations and strangulation in bed (37 in 2008 to 22 in 2009).



- Almost no change was observed in the number of infant deaths due to "disorders related to short gestation and low birth weight" (69 in 2008 to 68 in 2009).

Characteristics Associated with Infant Death in 2009

- The likelihood of having an infant that died was higher among women that were less than 18 years of age, unmarried, and women that did not begin prenatal care in the first trimester of pregnancy.
- Multiple births (twins, triplets, etc.) were more likely to result in infant death than singleton births.
- Hispanic mothers were neither more nor less likely to have an infant death than non-Hispanic mothers.
- Up to 62.5% of all infant deaths in 2009 are potentially attributable to low infant birthweight (less than 2,500 grams or 5 pounds, 8 ounces).



Data Source:

Division of Biostatistics,
Pregnancy Risk Assessment
Monitoring System-S.C.
Department of Health
and Environmental Control.

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