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**UT Southwestern teaching hospital halves its rate
of premature births, researchers find**

DALLAS – Feb. 27, 2009 – UT Southwestern Medical Center’s primary adult teaching hospital has cut its rate of preterm births by more than half in the past 15 years, even as national rates are rising, researchers have found.

The drop at Parkland Memorial Hospital, from 10.4 percent in 1988 to 4.9 percent in 2006, was associated with a program of strictly coordinated and easy-to-access care – including prenatal care – for the largely minority, indigent population served by the county hospital, the UT Southwestern researchers said.

“This is a model for the uninsured in the country,” said Dr. Kenneth Leveno, professor of obstetrics and gynecology and lead author of the study, which appears in the March issue of *Obstetrics & Gynecology*. “I think we all should be proud of this system.”

The researchers began their analysis in response to a 2006 report on preterm births by the Institute of Medicine. The institute stated that the national rate of prematurity was 9.4 percent in 1981 and 12.5 percent in 2004, representing a 33 percent increase.

“Infant mortality is one way in which societies measure how they take care of their people, and two-thirds of infant mortality is due to premature birth,” said Dr. Leveno. “It’s a measure of the social fabric.”

Parkland has one of the country’s largest and busiest obstetrics services, with about 16,000 births a year. One in every 250 births in the U.S. takes place at Parkland. Attending physicians are faculty members of UT Southwestern’s Department of Obstetrics and Gynecology.

The researchers studied data from 260,167 women who had given birth to singleton babies at Parkland from 1988 to 2006.

Preterm birth was defined as birth before the 37th week of pregnancy, with babies weighing 1.1 pounds or more.

The decrease at Parkland was especially notable, as minority women are more likely to have

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Preterm births – 2

premature babies because of their higher rate of poverty, the researchers noted. In 1988, Parkland began a program designed to provide minority women better care during pregnancy and birth and just after birth. When the program started, 88 percent of Parkland patients received prenatal care. By 2006, that number had increased to 98 percent.

One feature that allows smooth care in the Parkland system is a strict protocol that lays out how to respond to specific situations. For instance, if a woman goes to a satellite clinic for prenatal care and is found to have a condition that makes the pregnancy risky, she is automatically referred to the main hospital, Dr. Leveno said.

In addition, Parkland has a large staff of nurse-midwives and nurse practitioners who handle routine births, freeing the doctors to work on high-risk cases. And because the hospital is the only public hospital in Dallas County, many indigent patients receive all their medical care through the system, so they have a single medical record that is easily tracked.

“It’s a complex interaction of a lot of pieces,” Dr. Leveno said.

Other UT Southwestern researchers involved in the study were Dr. Donald McIntire, professor of obstetrics and gynecology; Dr. Steven Bloom, chairman of obstetrics and gynecology; Miriam Sibley, chief nursing officer of Parkland Health & Hospital System; and Dr. Ron Anderson, president and chief executive officer of Parkland Health & Hospital System.

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