Study Confirms Socioeconomic Factors May Not Be the Only Cause of Higher Preterm Birth Rates for Black Women and Women of Mixed Black and White Race

Findings indicate racial disparities persist even among those of high socioeconomic status

GRAPEVINE, Texas — Despite significant advances in medical care, preterm birth still remains a major global health issue, including in the United States. Prematurity, defined as a birth that occurs more than three weeks before the estimated due date, is the leading cause of infant deaths. Premature infants who survive are at greater risk of experiencing serious medical complications or lifelong health problems compared to full-term infants.

In the United States, the preterm birth rate is on the rise, with 1 in 10 infants born prematurely, according to the Centers for Disease Control and Prevention. Statistics show that black women and women of mixed black and white race are more likely than white women to give birth prematurely. One argument for the disparity is sociodemographic differences between racial groups.

In a study to be presented today at the Society for Maternal-Fetal Medicine’s (SMFM) annual meeting, The Pregnancy Meeting™, researchers will unveil findings that suggest racial disparities in prematurity persist even among women of high socioeconomic status in the United States.

The study examined more than 2.1 million birth certificates from 2015-2017 from the National Vital Statistics System. Each woman was grouped into one of three categories by her self-reported race: white, black, or mixed black and white race. All women had at least 15 years of education, private health insurance, and did not receive government assistance. Prematurity rates at < 37 weeks, < 34 weeks, and < 28 weeks were compared by group. At < 37 weeks, 9.9 percent of black women and 6.0 percent of mixed-race women delivered preterm as compared to 5.0 percent of white women. Similar disparities persisted for earlier preterm births, < 34 and < 28 weeks.

“Even among college-educated women with private insurance, we found that racial disparities in prematurity persist,” said the study’s lead author Jasmine D. Johnson, MD, a maternal-fetal medicine fellow and clinical instructor at the University of North Carolina. “Our results suggest that factors other than socioeconomics influence one’s preterm birth risk. The key takeaway from this study is that we need to investigate what else might be causing preterm birth racial disparities, including factors such as structural and societal racism, physiologic changes related to persistent stress, and epigenetic changes that may result from such factors.

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About SMFM
The Society for Maternal-Fetal Medicine (SMFM) is a non-profit, membership organization based in Washington, DC. With more than 4,000 physicians, scientists and women’s health professionals around the world, the Society supports the clinical practice of maternal-fetal medicine by providing education, promoting research and engaging in advocacy to optimize the health of high-risk pregnant women and their babies. SMFM hosts an annual scientific meeting in which new ideas and research related to high risk pregnancies are unveiled and discussed. For more information, visit SMFM.org and connect with organization on Facebook, Twitter, and Instagram. For the latest 2020 Annual Meeting news and updates, follow the hashtag #smfm20.