

Breaking News, December 2017

Chronic Diseases and Birth Outcomes

Chronic diseases such as hypertension, diabetes, heart disease, and obesity put women at risk of pregnancy complications and adverse birth outcomes.

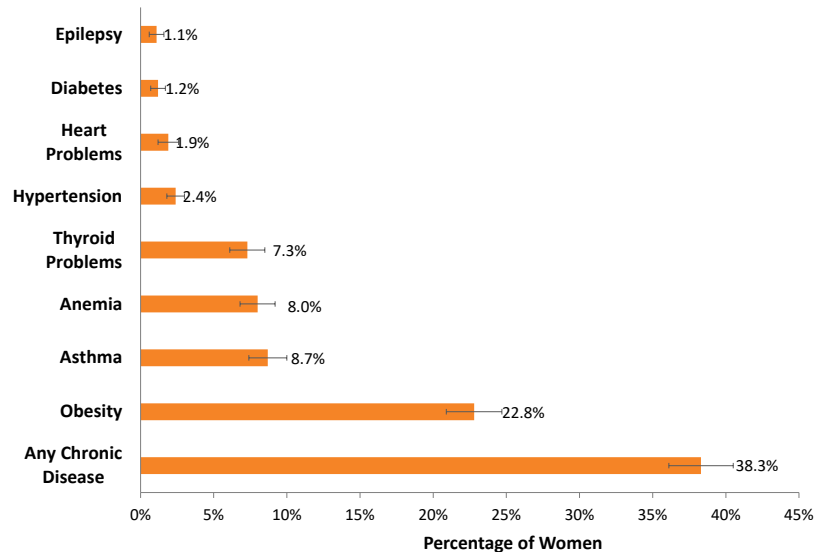
According to the Pregnancy Risk Assessment Monitoring System (PRAMS), in 2014 and 2015, about 38,122 Utah women who delivered a live infant had a chronic disease before becoming pregnant. Chronic diseases identified through PRAMS include anemia, asthma, diabetes (type I and II), epilepsy, heart problems, hypertension, obesity, and thyroid problems. The prevalence of these chronic diseases in Utah are shown in the accompanying figure.

According to PRAMS data from 2014–2015, chronic disease was associated with an increased risk of several adverse birth outcomes. The percentage of women having a preterm birth was 30% higher among women with any chronic disease compared to women without a chronic disease.

The percentage of women delivering by cesarean section was 40% higher among women with any chronic disease compared to women without a chronic disease. The percentage of women whose babies were admitted to a neonatal intensive care unit (NICU) was 44% higher among women with any chronic disease compared to women without a chronic disease.

Women with a chronic disease can minimize adverse birth outcomes by maintaining optimal health for their condition before pregnancy, having a preconception consultation with a healthcare provider, and managing their disease after becoming pregnant.

Percentage of Women with Chronic Diseases Before Pregnancy, Utah, 2014–2015



Source: Utah Pregnancy Risk Assessment Monitoring System

Community Health Spotlight, December 2017

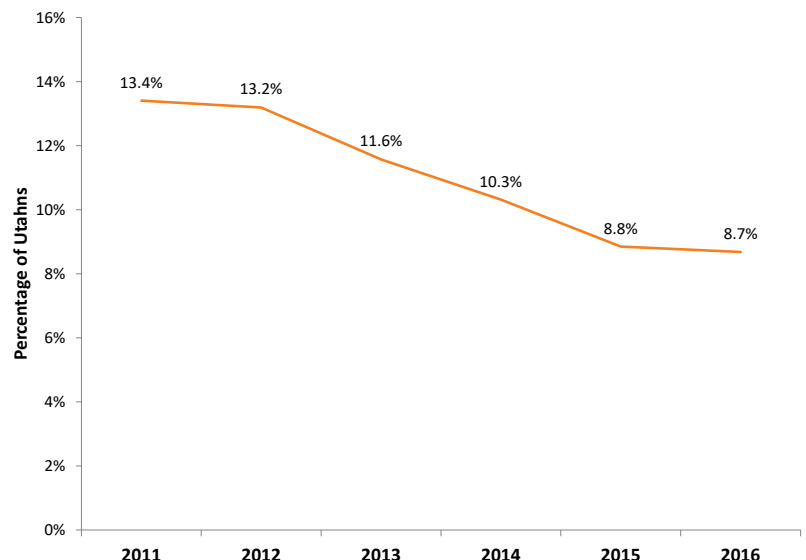
Uninsured Rate at Lowest Point in More than a Decade

The estimated overall rate of Utahns without health insurance remained the lowest it has been in more than 10 years at 8.7%. The decreasing trend over the last five years is significant. The 2016 rate of uninsured Utahns aged 19–26 was lower at 16% than the rate of 23.6% in 2011. Additionally, the number of Utah adults aged 19–64 that were self-employed and uninsured was at the lowest rate it has been in the last 10 years; decreasing from 29.1% in 2011 to 15.0% in 2016.

Estimates for the rate of uninsured in Utah come from the Behavioral Risk Factor Surveillance System (BRFSS), a survey that is conducted in all states and territories in partnership with the U.S. Centers for Disease Control and Prevention (CDC). Estimates are based on a sample of more than 5,000 Utahns. There are several surveys that collect data and estimate uninsured rates. These rates may vary based on differences in methodology. The estimates usually show the same trends. The Utah Department of Health uses BRFSS to create these estimates because it allows breakdown of the data by different geographic areas and demographics.

Access to healthcare is only one of the major factors to impact improved health. Improvements in using preventive and primary care as well as affordability of care are also needed.

Estimated Percentage of Uninsured Utahns, 2011–2016



Source: Utah Behavioral Risk Factor Surveillance System