

# Full-term births a goal of hospitals

Banner latest to ban on-demand deliveries

By Ken Alltucker  
 The Arizona Republic

Arizona hospitals are taking a stricter stance on doctors and mothers who want to deliver babies before full term.

Banner Health is the latest to join a growing number of hospitals that are informing doctors and expectant mothers that they will no longer schedule deliveries before 39 weeks of pregnancy unless there is a medical reason to do so.

Hospitals are citing medical research that shows even the last few weeks of a full-term pregnancy are critical for a newborn's development. Babies who are born at 39 or 40 weeks are more likely to have improved brain, lung and eye development as well as lower risk of death compared with babies born earlier.

The change marks a cultural shift for Phoenix-area obstetricians and expectant mothers who have grown accustomed to planning births due to schedules, convenience, family visits or other

**See BIRTHS, Page A13**

non-medical reasons.

More than one dozen Valley hospitals have taken a hard stance, no longer scheduling elective Caesarean sections or inducing labor before 39 weeks.

"We've sort of gotten into this habit (of scheduling deliveries)," said Dr. Ken Welch, an obstetrician and Banner Estrela's chief medical officer. "We have gotten

very good at inducing labor. Just because we can do it doesn't mean we should do it."

Banner Health will stop scheduling elective C-sections or inducing births for pre-term babies beginning July 18. Banner's decision will impact 19 hospitals in Arizona and other states.

Other Valley hospitals, including Scottsdale Healthcare, Abrazo Health Care and Catholic Healthcare West, already have made the switch.

The new policies will likely affect a significant number of mothers-to-be in metro Phoenix.

Local experts estimate that such convenience births represent 20 to 30 percent of all deliveries at some Valley hospitals.

Banner Health said that 42 percent of babies born at its hospitals last year were delivered before 39 weeks. Those deliveries covered the spectrum of births, including medically necessary births and natural births that occurred before full term. It included elective C-sections or early inductions of labor, although hospital representatives said they did not have reliable data on the number of such early, elective births.

The rate of Caesarean births climbed steadily over the past decade. About one out of three births in the United States are delivered via C-section. In Arizona, 26.2 percent of all births were by C-section in 2007, up from 16.1 percent in 1996, according to Centers for Disease Control and Prevention statistics.

Hospitals that already have targeted the early, elective births said that reaction has been mixed among doctors and patients. Some doctors have said they've successfully induced labor or performed C-sections before 39 weeks and saw no reason to change.

"There has been a transition," said Dr. BJ Johnson, chairman of the board of trustees for Arizona Perinatal Trust, which certifies Arizona hospitals with labor and delivery wards.

"Initially, there was some significant pushback from the doctors."

Johnson said doctors have become more receptive to the policy after they reviewed medical data and told their patients about the new hospital policies. It also has emboldened doctors pressured by patients who want to schedule a birth.

"They changed their culture and basically moved forward and informed patients this is policy now," Johnson said.

When doctors need to intervene early for medical reasons, they will still be free to do so.



Banner Health cited nearly two dozen medical reasons that would prompt an early delivery. Some common medical reasons could include high blood pressure, kidney disease, pre-eclampsia or placenta previa, a condition in which the placenta is too close to the cervix.

Organizations such as the American Congress of Obstetricians and Gynecology, Joint Commission and March of Dimes have advocated that the medical community adhere to the 39-week standard.

The March of Dimes, a non-profit that promotes baby health, has launched a public-awareness campaign that encourages hospitals, doctors and patients to follow the standards.

The group believes that if expectant mothers see the evidence for the benefits of full-term births, they'll be willing to wait a little longer rather than pressure their doctors for an early birth.

Of particular concern to the March of Dimes and physician organizations is the rise in the number of "late pre-term" births between 34 and 36 weeks. They believe the likely culprit is elective early births.

The March of Dimes' "2010 Premature Birth Report Card" gave Arizona a "D" and estimated that 12.9 percent of births in this state were premature, higher than the national target rate of 7.6 percent. Other factors contribute to premature births, such as a mother's health and habits; and availability of medical insurance can be a factor, too, paying for needed health care before and during a pregnancy.

One complicating factor is getting an ac-

curate estimate on the fetus' age. If a mother-to-be does not get an ultrasound during the first trimester, it becomes more difficult to accurately gauge the fetus' age, said Dr. Michael Foley, Scottsdale Healthcare's chief medical officer.

"The size of the baby doesn't necessarily reflect the maturity," Foley said. "A baby may in fact be 40 weeks and only measure 36 weeks."

Still, those final weeks can be critical for a newborn's development. Full-term babies are less likely to have hearing, vision, feeding or birth-weight problems. Those final weeks of a pregnancy also give the lungs, eyes and brain enough time to fully develop.

Babies born early are more likely to spend time in a neonatal intensive-care unit, which can be expensive for the parents.

In rare cases, those final weeks can be the difference between life and death. Babies born at 39 weeks or later were 50 percent less likely to die than babies who were born earlier, according to a study in the June 2011 issue of the medical journal *Obstetrics and Gynecology*.

"The ones that are 37 weeks have twice the amount of problems of babies at 39 or 40 weeks," Welch said. "If I am looking at my child or grandchild, I want to have the best odds of them doing well."

*Reach the reporter at  
ken.alltucker@arizonarepublic.com or  
602-444-8285.*