About the Issue: Elective Delivery Prior to 39 Weeks of Gestation

Between 1990 and 2006, the United States saw a 50% increase in deliveries at 37 to 38 weeks of gestation. During that period, the rise in rates for elective inductions outpaced those for medically indicated induction. In a healthy pregnancy, allowing the baby to remain in the womb at least 39 weeks is safest for both baby and mother. Non-medically indicated deliveries between 37 and 39 weeks of gestation pose increased health risks for both mother and baby.

Key Messages

- Studies show that long- and short-term adverse outcomes may be avoided if a healthy pregnancy is allowed to continue until at least 39 weeks of gestation.
- Clinical evidence shows that a fetus goes through a significant amount of development and growth in several key organ systems between 37 and 39 weeks of gestation.
- Infants born prior to 39 weeks face a 20% greater risk of significant medical consequences.
- If mother and baby are healthy, wait to deliver until at least 39 weeks of gestation.

Critical Development Between Weeks 37 and 39

- Critical development of the brain, lungs, and liver occurs between 37 and 39 weeks.³
- A baby's brain doubles in size between 35 and 39 weeks.

Risks to Baby

- Babies delivered before 39 weeks are at greater risk of being admitted into the neonatal intensive care unit (NICU). They have a 20% greater risk of complications after birth than do babies born after 39 weeks. These complications include:
 - Breathing, feeding, and temperature problems
 - Sepsis⁵
 - Cerebral palsy⁶
- Babies born before 39 weeks have a 5% greater risk of having developmental disabilities.⁷

¹ Martin, J. A., Hamilton, B. E., Ventura, S. J., et al. (2012). Births: Final data for 2010. *National Vital Statistics Reports*, *6*(1). Hyattsville, MD: National Center for Health Statistics.

² Zhang, X., Joseph, K.S., & Kramer, M.S. (2010). Decreased term and postterm birthweight in the United States: impact of labor induction. *American Journal of Obstetrics and Gynecology*, 203, 124, e1-7.G.

³ http://www.marchofdimes.com/pregnancy/getready_atleast39weeks.html

⁴ National Child and Maternal Health Education Program (NCMHEP). (no date). National Child and Maternal Health Education Program (NCMHEP) continuing medical education (CME) course: Raising awareness: Late preterm birth and non-medically indicated inductions prior to 39 weeks. Accessed April 19, 2013, from http://www.nichd.nih.gov/ncmhep/focus/toolkit/Documents/CME_One_Pager.pdf.

⁵ http://dss.mo.gov/mhd/oversight/pdf/121113-early-elective-delivery.pdf

⁶ NCMHEP CME, op. cit.

• Babies born between 37 and 38 weeks have a 50% greater chance of death within the first year of life than do babies born between 39 and 41 weeks.⁸

Risks to Mother

- Elective early delivery increases the mother's risk of:
 - Postpartum depression⁹
 - Stronger and more frequent contractions¹⁰
 - The need for a cesarean delivery, which carries its own risks, including ¹¹
 - Increased risk of negative health outcomes for the baby¹²
 - Longer recovery time (weeks rather than days)¹³
 - Risks associated with major surgery, including infection¹⁴
 - Increased chance that future pregnancies will require cesarean delivery¹⁵

⁷ NCMHEP CME, op. cit.

⁸ http://www.leapfroggroup.org/media/file/ACOGRethinkingDefinitionofTermPregnancy.pdf

⁹ NCMHEP CME, op. cit.

¹⁰ http://www.marchofdimes.com/pregnancy/getready_atleast39weeks.html

¹¹ NCMHEP CME, op. cit.

¹² http://www.marchofdimes.com/pregnancy/getready atleast39weeks.html

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¹⁴ NCMHEP CME, op. cit.

¹⁵ http://www.marchofdimes.com/pregnancy/getready_atleast39weeks.html