



*The Aberdeen Area Perinatal Infant Mortality Review
Committee*

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Background

- The Aberdeen Area Indian Health Service serves the four state area of North Dakota, South Dakota, Nebraska and Iowa. A Perinatal Infant Mortality Review (PIMR) Committee sponsored by the Office of Women's Health has been established by the Indian Health Service to review perinatal and infant deaths that occur within this four state region. This committee has been functioning for over 20 years

Mission

- The Aberdeen Area Perinatal Infant Mortality Review Committees mission is to decrease perinatal and infant deaths throughout our area

Objectives of the Committee

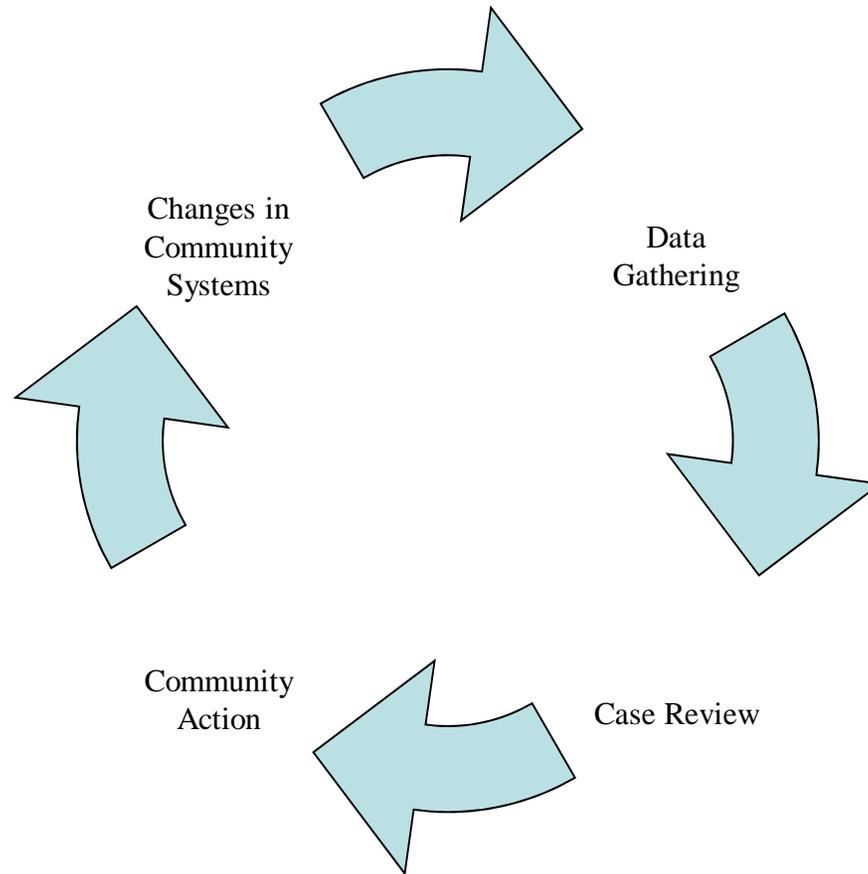
- ❖ To examine significant social, economic, cultural, safety and health system factors associated with infant mortality through review of individual cases
- ❖ To identify causes of infant death and action plans for decreasing infant mortality and health disparities associated with infant mortality
- ❖ To engage community members in the implementation of community based policies and interventions to combat infant mortality

Members of the PIMR

- Interdisciplinary team that consist of physicians, scientists, advanced practice nurses, pathologists, public health nurses and community representatives. Individuals from Indian Health Service, local community and nationwide represented.

PIMR

Cycle of Improvement

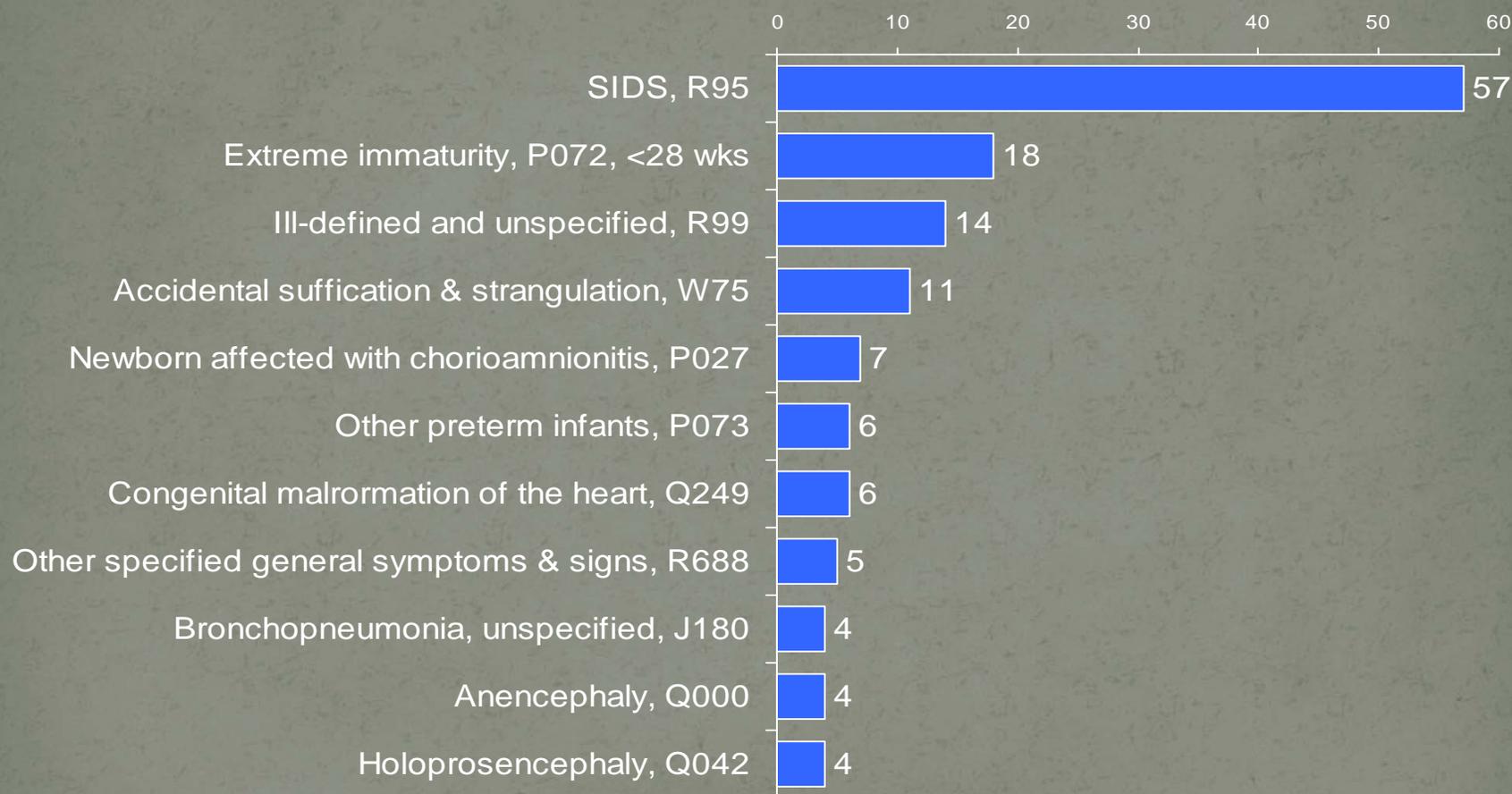


Birth Rates of Northern Plains American Indians (1998-2008)

State	AI/AN	Whites
Nebraska	4,497	218,703
North Dakota	8,674	69,086
South Dakota	19,936	89,105
Iowa	2,371	357,713

Rates of Mortality 1999-2008	AI/AN
Nebraska	
Infant Mortality (birth to 364 days)	12.2%
Neonatal Mortality (birth -27 days)	6.0%
Postneonatal Mortality (28- 364 days)	6.2%
North Dakota	
Infant Mortality (birth to 364 days)	11.9%
Neonatal Mortality (birth -27 days)	6.2%
Postneonatal Mortality (28- 364 days)	5.6%
South Dakota	
Infant Mortality (birth to 364 days)	13.0%
Neonatal Mortality (birth -27 days)	5.4%
Postneonatal Mortality (28- 364 days)	7.6%
Iowa	
Infant Mortality (birth to 364 days)	4.6%
Neonatal Mortality (birth -27 days)	2.1%
Postneonatal Mortality (28- 364 days)	2.5%

Leading individual causes of American Indian infant deaths, South Dakota, 2000-2009



Adopted from Tribal Presentation by Lon Kightlinger,
MSPH, PhD
State Epidemiologist

Challenges

- ❖ Alcoholism
- ❖ Substance abuse
- ❖ Overcrowding of homes
- ❖ High incidence of teenage pregnancy
- ❖ Lack of variety of contraception options due to costs
- ❖ Low breastfeeding rates
- ❖ Necessity of genetic counseling in rural and remote area

Strategies to Decrease Mortality

- ❖ Preconception Counseling
- ❖ Increase public awareness about infant mortality through social networking, text messages and public service announcements
- ❖ Increase access to larger variety of contraceptive methods
- ❖ Continue to build partnerships with Obstetrical & Pediatric specialist and tertiary care facilities
- ❖ The Baby Friendly Hospital Initiative
- ❖ Public Health Nursing prenatal and post partum visit on every birth in service unit area