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Infant Mortality Statistics From the 2007 Period Linked Birth/Infant Death Data Set

by T.J. Mathews, M.S., and Marian F. MacDorman, Ph.D., Division of Vital Statistics

Abstract

Objectives—This report presents 2007 period infant mortality statistics from the linked birth/infant death data set (linked file) by a variety of maternal and infant characteristics. The linked file differs from the mortality file, which is based entirely on death certificate data.

Methods—Descriptive tabulations of data are presented and interpreted.

Results—The U.S. infant mortality rate was 6.75 infant deaths per 1,000 live births in 2007, not significantly different than the rate of 6.68 in 2006. Infant mortality rates ranged from 4.57 per 1,000 live births for mothers of Central and South American origin to 13.31 for non-

Hispanic black mothers. Infant mortality rates were higher for those infants who were born in multiple deliveries; for those whose mothers were born in the 50 states or the District of Columbia; and for mothers who were unmarried. Infant mortality was also higher for male infants and infants born preterm or at low birthweight. The neonatal mortality rate was essentially unchanged from 2006 (4.46) to 2007 (4.42). The postneonatal mortality rate increased 5 percent from 2.22 in 2006 to 2.33 in 2007, similar to the rate in 2005 (2.32). Infants born at the lowest gestational ages and birthweights have a large impact on overall U.S. infant mortality. For example, more than one-half of all infant deaths in the United States in 2007 (54 percent) occurred to the 2 percent of infants born very preterm (less than 32 weeks of gestation). Still, infant mortality rates for late preterm infants (34–36 weeks

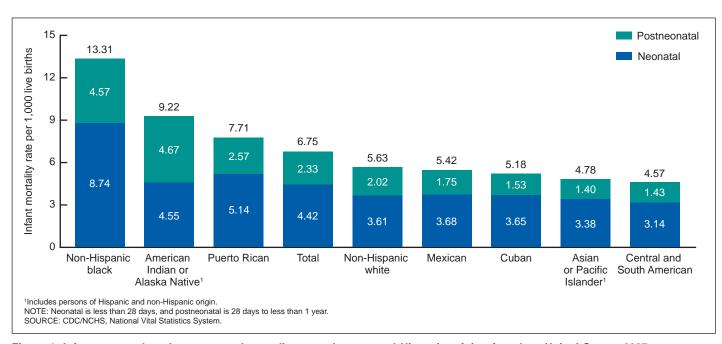


Figure 1. Infant, neonatal, and postneonatal mortality rates, by race and Hispanic origin of mother: United States, 2007





of gestation) were 3.6 times, and those for early term (37–38 weeks) infants were 1.5 times, those for infants born at 39–41 weeks of gestation, the gestational age with the lowest infant mortality rate. The three leading causes of infant death—congenital malformations, low birthweight, and sudden infant death syndrome—accounted for 45 percent of all infant deaths. The percentage of infant deaths that were "preterm-related" was 36.0 percent in 2007. The preterm-related infant mortality rate for non-Hispanic black mothers was 3.4 times higher, and the rate for Puerto Rican mothers was 71 percent higher than for non-Hispanic white mothers.

Keywords: infant health • birthweight • gestational age • maternal characteristics

Introduction

This report presents infant mortality data from the 2007 period linked file. The 2007 period linked file contains a numerator file that consists of all infant deaths occurring in 2007 that have been linked to their corresponding birth certificates, whether the birth occurred in 2006 or in 2007.

In the linked file, information from the death certificate is linked to information from the birth certificate for each infant under age 1 year who died in the 50 states, District of Columbia, Puerto Rico, Virgin Islands, or Guam during 2007 (1). Linked birth-infant death data are not available for American Samoa and the Commonwealth of the Northern Marianas. The purpose of the linkage is to use the many additional variables available from the birth certificate to conduct more detailed analyses of infant mortality patterns (2,3). This report presents infant mortality data by race and Hispanic origin of the mother, birthweight, period of gestation, sex of infant, plurality, maternal age, live-birth order, mother's marital status, mother's place of birth, age at death, and underlying cause of death (Tables 1–8 and A–D, and Figures 1–4).

Another report, based on data exclusively from the vital statistics mortality file, provides further information on trends in infant mortality and on causes of infant death (4). The linked file is used for analysis and for calculating infant mortality rates by race and ethnicity, which are more accurately measured from the birth certificate. Some rates calculated from the mortality file differ from those published using the linked file. A more detailed discussion of the differences in the number of infant deaths and infant mortality rates between the linked file and the mortality file is presented in the "Technical Notes."

Methods

Data shown in this report are based on birth and infant death certificates registered in all states, District of Columbia, Puerto Rico, Virgin Islands, and Guam. As part of the Vital Statistics Cooperative Program (VSCP), each state provided to the Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) matching birth and death certificate numbers for each infant under age 1 year who died in the state during 2007. When the birth and death occurred in different states, the state of death was responsible for contacting the state of birth identified on the death certificate to obtain the original birth certificate number. NCHS used the matching birth and death certificate numbers provided by the states to extract final edited data from the NCHS natality and

mortality statistical files. These data were linked to form a single statistical record, thereby establishing a national linked record file.

After the initial linkage, NCHS returned lists of unlinked infant death records and records with inconsistent data between the birth and death certificates to each state. State additions and corrections were incorporated, and a final national linked file was produced. In 2007, 98.4 percent of all infant death records were successfully linked or matched to their corresponding birth records. Records were weighted to adjust for the 1.6 percent of infant death records that were not linked to their corresponding birth certificates; see "Technical Notes."

Information on births by age, race, or marital status of the mother is imputed if it is not reported on the birth certificate. These items were not reported for less than 1 percent of U.S. births in 2007 (2,3).

Race and Hispanic origin are reported independently on the birth certificate. In tabulations of birth data by race and Hispanic origin, data for Hispanic persons are not further classified by race as the vast majority of women of Hispanic origin are reported as white. Data for American Indian or Alaska Native (AIAN) and Asian or Pacific Islander (API) births are not shown separately by Hispanic origin because the vast majority of these populations are non-Hispanic.

Cause-of-death statistics in this publication are classified in accordance with the *International Statistical Classification of Diseases* and *Related Health Problems, Tenth Revision* (ICD-10) (5); see "Technical Notes."

This report includes data based on the 1989 and 2003 revisions of the birth certificate. Twenty-two states and Puerto Rico implemented the 2003 revision of the U.S. Standard Certificate of Live Birth on or before January 1, 2007 (revised). The remaining reporting areas include data that are based on the 1989 revision of the U.S. Standard Certificate of Live Birth (unrevised). Revised and unrevised data are combined when comparable (2,3).

Three key data items are considered noncomparable between the 1989 and 2003 revisions: trimester of pregnancy prenatal care began, maternal educational attainment, and maternal smoking during pregnancy (2,3); see "Technical Notes." Since infants who died in 2007 included those born in both 2006 and 2007, this report includes data on these three topics from the 19 states that implemented the 2003 revision as of January 1, 2006. Data for these limited reporting areas are shown in Table II in "Technical Notes." The 19 states are California, Delaware, Florida, Idaho, Kansas, Kentucky, Nebraska, New Hampshire, New York (excluding New York City), North Dakota, Ohio, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, and Wyoming. Data on smoking are not available for California and Florida, and data on prenatal care are not available for California. Results for these three items from the limited reporting area are not generalizable to the country as a whole (2,3,6). The 19 revised states represent 49 percent of all births in 2006.

Data by maternal and infant characteristics

This report presents descriptive tabulations of infant mortality data by a variety of maternal and infant characteristics. These tabulations are useful for understanding the basic relationships between risk factors and infant mortality, *unadjusted for the possible effects of other variables*. In reality, women with one risk factor often have other risk factors as well. For example, teenage mothers are more likely to also be unmarried and of a low-income status, and mothers who do not receive prenatal care are more likely to be of a

low-income status and uninsured. The preferred method for disentangling the multiple interrelationships among risk factors is multivariate analysis; however, an understanding of the basic relationships between risk factors and infant mortality is a necessary precursor to more sophisticated types of analyses and is the aim of this publication.

Race and Hispanic origin data—Infant mortality rates are presented here by race and detailed Hispanic origin of mother. The linked file is particularly useful for computing accurate infant mortality rates for this purpose because the race and Hispanic origin of the mother from the birth certificate are used in both the numerator and denominator of the infant mortality rate. In contrast, for the vital statistics mortality file, race information for the denominator is the race of the mother as reported on the birth certificate, whereas the race information for the numerator is the race of the decedent as reported on the death certificate (2,3,5). Thus, standard infant mortality rates can be based on inconsistent race information. Race information from the birth certificate reported by the mother is considered to be more reliable than that from the death certificate where the race and ethnicity of the deceased infant are reported by the funeral director based on information provided by an informant or by observation. These different reporting methods can lead to differences in race- and ethnicityspecific infant mortality rates between the two data files (4,7).

The 2003 revision of the U.S. Standard Certificate of Live Birth allows the reporting of more than one race (multiple races) for each parent (2,3,8,9). Twenty-seven states reported multiple race on their birth certificate for either part or all of 2007, and 23 states in 2006. To provide uniformity and comparability of the data, multiple race is imputed to a single race; see "Technical Notes."

Statistical significance—Text statements have been tested for statistical significance, and a statement that a given infant mortality rate is higher or lower than another rate indicates that the rates are significantly different. Information on the methods used to test for statistical significance, as well as information on differences between period and cohort data, the weighting of the linked file, and a comparison of infant mortality data between the linked file and the vital statistics mortality file, are presented in "Technical Notes." Additional

information on maternal age, marital status, period of gestation, birthweight, and cause-of-death classification is also presented in "Technical Notes."

Results and Discussion

Trends in infant mortality

The overall 2007 infant mortality rate from the linked file was 6.75 infant deaths per 1,000 live births, not significantly different from the rate of 6.68 in 2006 (Table B). The 2007 rate from the mortality file was also 6.75 (4). The neonatal mortality rate for 2007 (4.42) was not significantly different from 2006 (4.46). The postneonatal mortality rate increased from 2.22 in 2006 to 2.33 in 2007 (Tables A and B).

While the infant mortality rate was 9 percent lower in 2000 (6.89) than in 1995 (7.57), the rate has declined only 2 percent since 2000 (Table B). There were no significant changes between 2006 and 2007 for any population subgroups (Table B).

Infant mortality by race and Hispanic origin of mother

In 2007, infant mortality rates varied considerably by race and Hispanic origin of mother (10,11). The highest rate, 13.31 per 1,000 live births, was for infants of non-Hispanic black mothers, nearly three times greater than the lowest rate of 4.57 for infants of Central and South American mothers. Rates were also fairly high for infants of AIAN (9.22) and Puerto Rican (7.71) mothers. Rates were intermediate, but all below the U.S. rate, for infants of non-Hispanic white (5.63) and Mexican mothers (5.42) (Figure 1 and Tables A and B). Cuban mothers (5.18) also had low rates. Disparities in the infant mortality rate between non-Hispanic black and non-Hispanic white mothers by state are discussed in the section, "Disparities in infant mortality rate by state."

Table A. Infant, neonatal, and postneonatal deaths and mortality rates, by race and Hispanic origin of mother: United States, 2007 linked file

	Live		Number of de	eaths	Mortality rate per 1,000 live births			
Hispanic origin and race of mother	births	Infant	Neonatal	Postneonatal	Infant	Neonatal	Postneonatal	
Total	4,316,233	29,153	19,094	10,059	6.75	4.42	2.33	
Non-Hispanic white	2,310,333	13,005	8,329	4,676	5.63	3.61	2.02	
Non-Hispanic black	627,191	8,351	5,484	2,867	13.31	8.74	4.57	
American Indian or Alaska Native	49,443	456	225	231	9.22	4.55	4.67	
Asian or Pacific Islander	254,488	1,216	860	357	4.78	3.38	1.40	
Hispanic	1,062,779	5,855	3,952	1,903	5.51	3.72	1.79	
Mexican	722,055	3,914	2,654	1,260	5.42	3.68	1.75	
Puerto Rican	68,488	528	352	176	7.71	5.14	2.57	
Cuban	16,981	88	62	26	5.18	3.65	1.53	
Central and South American	169,851	777	534	243	4.57	3.14	1.43	
Other and unknown Hispanic	85,404	548	349	198	6.42	4.09	2.32	

NOTES: Infant deaths are weighted, so numbers may not exactly add to totals due to rounding. Neonatal is less than 28 days and postneonatal is 28 days to under 1 year. Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. Persons of Hispanic origin may be of any race. In this table, Hispanic women are classified only by place of origin; non-Hispanic women are classified by race (see reference 3). Twenty-seven states reported multiple-race data on the birth certificate for 2007 that were bridged to the single-race categories of the 1977 standards for comparability

Table B. Infant, neonatal, and postneonatal mortality rates, by race and Hispanic origin of mother: United States, 1995, 2000–2007 linked files

										Percent	change
Race and Hispanic origin of mother	1995	2000	2001	2002	2003	2004	2005	2006	2007	2000– 2007	2006– 2007
					Infa	ant mortali	ty rate				
All races	7.57	6.89	6.84	6.95	6.84	6.78	6.86	6.68	6.75	**-2.0	1.0
Non-Hispanic white	6.28	5.70	5.72	5.80	5.70	5.66	5.76	5.58	5.63	-1.2	0.9
Non-Hispanic black	14.65	13.59	13.46	13.89	13.60	13.60	13.63	13.35	13.31	-2.1	-0.3
American Indian or Alaska Native	9.04	8.30	9.65	8.64	8.73	8.45	8.06	8.28	9.22	11.1	11.4
Asian or Pacific Islander	5.27	4.87	4.73	4.77	4.83	4.67	4.89	4.55	4.78	-1.8	5.1
Hispanic	6.27	5.59	5.44	5.62	5.65	5.55	5.62	5.41	5.51	-1.4	1.8
Mexican	6.03	5.43	5.22	5.42	5.49	5.47	5.53	5.34	5.42	-0.2	1.5
Puerto Rican	8.88	8.21	8.53	8.20	8.18	7.82	8.30	8.01	7.71	-6.1	-3.7
Cuban	5.29	4.54	4.28	3.72	4.57	4.55	4.42	5.08	5.18	14.1	2.0
Central and South American	5.52	4.64	4.98	5.06	5.04	4.65	4.68	4.52	4.57	-1.5	1.1
					Ned	onatal mor	tality rate				
All races	4.92	4.62	4.54	4.67	4.63	4.52	4.54	4.46	4.42	**-4.3	-0.9
Non-Hispanic white	4.04	3.78	3.79	3.85	3.79	3.70	3.71	3.64	3.61	**-4.5	-0.8
Non-Hispanic black	9.65	9.19	8.97	9.33	9.26	9.13	9.13	8.95	8.74	**-'4.9	-2.3
American Indian or Alaska Native	3.94	4.39	4.20	4.60	4.55	4.26	4.04	4.30	4.55	3.6	5.8
Asian or Pacific Islander	3.37	3.43	3.12	3.37	3.40	3.20	3.37	3.18	3.38	-1.5	6.3
Hispanic	4.13	3.77	3.64	3.83	3.92	3.83	3.86	3.74	3.72	-1.3	-0.5
Mexican	3.94	3.61	3.49	3.64	3.76	3.74	3.78	3.73	3.68	1.9	-1.3
Puerto Rican	6.11	5.80	5.99	5.81	5.70	5.34	5.95	5.44	5.14	-11.4	-5.5
Cuban	3.61	3.20	2.50	3.23	3.36	2.81	3.05	3.60	3.65	14.1	1.4
Central and South American	3.65	3.26	3.36	3.45	3.65	3.43	3.23	3.12	3.14	-3.7	0.6
					Postn	eonatal m	ortality rat	te			
All races	2.65	2.27	2.30	2.28	2.22	2.25	2.32	2.22	2.33	2.6	**5.0
Non-Hispanic white	2.23	1.92	1.93	1.95	1.91	1.96	2.05	1.94	2.02	**5.2	4.1
Non-Hispanic black	5.00	4.40	4.48	4.55	4.34	4.47	4.50	4.40	4.57	3.9	3.9
American Indian or Alaska Native	5.10	3.94	5.45	4.04	4.18	4.19	4.02	3.98	4.67	18.5	17.3
Asian or Pacific Islander	1.90	1.44	1.61	1.40	1.43	1.47	1.51	1.37	1.40	-2.8	2.2
Hispanic	2.14	1.82	1.79	1.79	1.73	1.71	1.76	1.67	1.79	-1.6	7.2
Mexican	2.09	1.82	1.73	1.78	1.73	1.73	1.75	1.61	1.75	-3.8	**8.7
Puerto Rican	2.77	2.41	2.55	2.38	2.48	2.48	2.37	2.57	2.57	6.6	0.0
Cuban	1.68	*	1.71	ž.00 *	ž. 4 0	1.74	1.37	1.42	1.53		7.7
Central and South American	1.86	1.38	1.61	1.60	1.39	1.22	1.46	1.42	1.43	3.6	1.4
Contrar and Could American	1.00	1.00	1.01	1.00	1.03	1.22	1.40	1.41	1.40	5.0	1.4

^{*} Figure does not meet standards of reliability or precision; based on fewer than 20 deaths in the numerator

NOTES: Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. Persons of Hispanic origin may be of any race. In this table, Hispanic women are classified only by place of origin, and non-Hispanic women are classified by race; see reference 2. Twenty-seven states reported multiple-race data on the birth certificate for 2007, and 23 states in 2006. The multiple-race data for these states were bridged to the single-race categories of the 1977 standards for comparability with other states; see references 2 and 3.

Infant mortality by state

To examine variations across states in more detail and to obtain statistically reliable state-specific rates by race and Hispanic origin, 3 years of data were combined (Table 3). Across the United States, rates are generally higher in the South and Midwest and lower elsewhere. For 2005–2007, infant mortality rates ranged from 10.64 for Mississippi to 4.88 for Washington and 4.89 for Utah. The highest rate noted (12.80) was for the District of Columbia; however, the District of Columbia rate is more appropriately compared with rates for other large U.S. cities because of the high concentrations of high-risk women in these areas.

Variations in infant mortality rates by state differ among race and Hispanic origin groups. For infants of non-Hispanic black mothers, mortality rates ranged from 21.08 in Hawaii to 7.80 in Washington. For infants of non-Hispanic white mothers, Oklahoma had the highest infant mortality rate (7.85) and New Jersey had the lowest rate (3.49).

Among the 41 states where infant mortality rates could be reliably computed (20 or more infant deaths) for Hispanic mothers, Rhode Island had the highest rate (8.73) and Minnesota had the lowest (4.30).

For infants of AIAN mothers, mortality rates could be reliably computed for only 14 states, and for API mothers, rates could be computed for only 28 states. For infants of AIAN mothers, mortality rates ranged from 23.19 in Mississippi to 7.29 in New Mexico. Infant mortality rates for infants of API mothers ranged from 7.38 in Utah to 3.38 in New York.

Disparities in infant mortality rates by state

The data shown in Table 3 and summarized above illustrate the wide disparities that exist in infant mortality rates across states. One method for describing racial and ethnic disparities in infant mortality is to calculate the ratio between the infant mortality rates of two different racial and ethnic groups. The U.S. infant mortality rate ratio

^{**} Significant at p < 0.05.

⁻⁻⁻ Data not available.

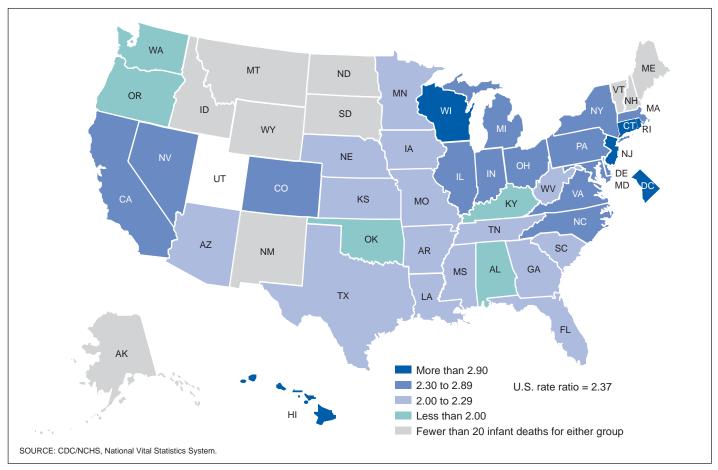


Figure 2. Infant mortality rate ratio of non-Hispanic black and non-Hispanic white populations, by state: United States, 2005-2007

for non-Hispanic black relative to non-Hispanic white populations for the 3-year period 2005–2007 was 2.37. Infant mortality rate ratios by state for non-Hispanic black and non-Hispanic white infants for 2005–2007 are shown in Figure 2 and Table 3. It is important to keep in mind that large ratios can occur for two reasons: the infant mortality rate for non-Hispanic black infants can be comparatively high, or the rate for non-Hispanic white infants can be relatively low. The reverse can be true when the rate ratio is low. The rate ratio is not shown for several states that lack a calculable infant mortality rate for non-Hispanic black infants due to fewer than 20 infant deaths.

Areas with the highest rate ratios of 2.9 or greater for 2005–2007 were Hawaii, District of Columbia, New Jersey, Connecticut, Rhode Island, and Wisconsin. Five areas had ratios less than 2.0: Kentucky, Alabama, Washington, Oklahoma, and Oregon (see Table 3 for rates).

Sex of infant

In 2007, the overall infant mortality rate for male infants was 7.37 per thousand live births, 21 percent higher than the rate for female infants (6.11). Infant mortality rates were higher for male than female infants in each race and Hispanic-origin group (Tables 1 and 2), although the difference was not significant for infants of Cuban and Puerto Rican mothers.

Multiple births

For multiple births, the infant mortality rate was 30.33, more than five times the rate of 5.93 for singleton births (Tables 1 and 2). Infant mortality rates for multiple births were higher than the rates for singleton births for all but one of the race and Hispanic-origin groups; rates could not be reliably computed for Cuban mothers due to small numbers of events.

The risk of infant death increases with the increasing number of infants in the pregnancy. In 2007, the infant mortality rate for twins (28.39) was nearly five times the rate for singleton births (5.93). The rate for triplets (64.69) was 11 times, the rate for quadruplets (140.92) was 24 times, and the rate for quintuplet and higher-order births (296.70) was 50 times higher than the rate for singleton births (tabular data not shown). Changes in infant mortality rates from 2006 to 2007 for specific multiple-birth categories were not statistically significant.

Multiple pregnancy can lead to an accentuation of maternal risks and complications associated with pregnancy (2,12–14). For example, infants of multiple births are much more likely to be born preterm and at low birthweight than singletons (2,12–14). The higher risk profile of multiple births has a substantial impact on overall infant mortality (13,15). For example, in 2007 multiple births accounted for 3 percent of all live births but 15 percent of all infant deaths in the United States (Table 1).

Table C. Infant mortality rates, by state: 2000, 2006, and 2007 linked files

(By place of residence)

	Infant	mortality	rate per	1,000 live births
Area	2000	2006	2007	Number of infant deaths in 2007
Total	6.89	6.68	6.75	29,153
Alabama	9.51	8.98	9.94	644
Alaska	6.92	7.00	6.61	73
Arizona	6.75	6.36	6.87	707
Arkansas	8.23	8.45	7.81	323
California	5.42	5.04	5.20	2,947
Colorado	6.14	5.77	6.13	434
Connecticut	6.51	6.17	6.70	279
Delaware	9.59	8.09	7.64	93
District of Columbia	12.13	11.85	12.97	115
Florida	6.91	7.26	7.08	1,694
Georgia	8.45	8.07	8.01	1,210
Hawaii	8.09	5.85	6.64	127
Idaho	7.56	6.82	6.83	171
Illinois	8.48	7.29	6.80	1,229
Indiana	7.79	7.91	7.58	681
lowa	6.43	5.12	5.48	224
Kansas	6.55	7.15	8.00	336
Kentucky	7.10	7.50	6.69	397
Louisiana	9.03	9.96	9.17	608
Maine	4.85	6.29	6.37	90
Maryland	7.51	7.95	8.02	626
Massachusetts	4.61	4.85	4.94	385
Michigan	8.19	7.33	7.94	994
Minnesota	5.62 10.64	5.18 10.53	5.56 9.98	410 464
Mississippi	7.19	7.45	7.42	608
Montana	6.02	6.00	6.27	78
Nebraska	7.18	5.54	6.76	182
Nevada	6.45	6.62	6.29	259
New Hampshire	5.82	5.91	5.43	77
New Jersey	6.26	5.44	5.12	594
New Mexico	6.72	5.71	6.14	188
New York	6.40	5.64	5.56	1,409
North Carolina	8.60	8.09	8.52	1,117
North Dakota	8.34	5.92	7.58	67
Ohio	7.66	7.76	7.77	1,172
Oklahoma	8.40	7.96	8.41	463
Oregon	5.57	5.38	5.71	282
Pennsylvania	7.10	7.65	7.53	1,135
Rhode Island	6.24	6.22	7.27	90
South Carolina	8.77	8.32	8.51	535
South Dakota	5.22	6.88	6.28	77
Tennessee	9.11	8.65	8.30	720
lexas	5.60	6.19	6.30	2,567
Utah	5.32	5.12	5.02	277
Vermont	6.46	5.68 7.10	5.07	33
Virginia	6.91	7.10 4.70	7.73 4.88	842 434
Washington	5.20 7.38	4.70 7.07	4.00 7.27	160
Wisconsin	6.64	6.37	6.42	467
Wyoming	6.72	6.78	7.35	58
, ,				
Guam	6.07	13.73	10.25	36
Puerto Rico	9.60	8.62	8.43	393 10
virgin islands				10

^{*} Figure does not meet standards of reliability or precision; based on fewer than 20 deaths in the numerator.

Age at death

In 2007, nearly two-thirds of all infant deaths (65 percent) occurred during the neonatal period (from birth through 27 days of age) (Figure 1 and Tables A and B). In 2007, the neonatal mortality

rate was 4.42 deaths per 1,000 live births, essentially unchanged from the previous year (4.46). The 2007 postneonatal (28 days to under 1 year) mortality rate of 2.33 was 5 percent higher than the 2006 rate (2.22) but was not significantly different from the 2005 rate (2.32) (16).

Non-Hispanic black women had the highest neonatal mortality rate (8.74), followed by Puerto Rican (5.14) and AIAN (4.55) women. Neonatal mortality rates were lowest for non-Hispanic white (3.61), API (3.38), Central and South American (3.14), Cuban (3.65), and Mexican (3.68) women (Table A). Neonatal mortality rates did not decline significantly for any racial or ethnic group from 2006 to 2007 (Table B).

Infants of non-Hispanic black (4.57) and AIAN (4.67) mothers had the highest postneonatal mortality rates of any group—more than twice those for non-Hispanic white women (2.02) (Tables A and B). The postneonatal mortality rate for Puerto Rican women (2.57) was 27 percent higher than for non-Hispanic white women. In contrast, postneonatal mortality rates for Mexican (1.75), API (1.40), and Central and South American women (1.43) were 13–31 percent lower than for non-Hispanic white women (Table A). Postneonatal mortality rates increased by 9 percent for Mexican women from 2006 to 2007; rates for other race and Hispanic origin groups were essentially unchanged (Table B) (16). Postneonatal mortality rates increased by 5 percent for non-Hispanic white women from 2000 to 2007 but no other groups had a significant change (Table B).

Period of gestation

The gestational age of an infant is perhaps the most important predictor of his or her subsequent health and survival. Infants born too small and too soon have a much greater risk of death and both short- and long-term disability than those born at term (37-41 weeks of gestation), and the percentage of preterm births has been linked to variations in infant mortality rates among countries (17-22). Infant mortality rates are highest for very preterm (less than 32 weeks) infants, and the risk decreases sharply with increasing gestational age (16,17,21). In 2007, the infant mortality rate for very preterm infants (178.36) was 73 times the rate of 2.43 for term infants (Table D). The infant mortality rate for infants born at 32–33 weeks of gestation was 16.12, more than six times the rate for term infants. Although mortality falls with increasing gestational age, even infants born only a few weeks early have a substantially increased risk of death and disability when compared with term infants (23-25). In 2007, the infant mortality rate for late preterm infants (34-36 weeks) was 7.42, three times the rate for infants born at term. Even within the term period, infants born at 37-38 weeks of gestation had mortality rates that were 1.5 times higher than those born at 39-41 weeks of gestation (Tables D, 1, and 2). Infant mortality rates for specific gestational age categories were essentially unchanged from 2006 to 2007 (Table D).

Because of their much greater risk of death, infants born at the lowest gestational ages have a large impact on the U.S. infant mortality rate. For example, infants born very preterm (less than 32 weeks of gestation) accounted for only 2 percent of births but more than one-half of all infant deaths (54 percent) in the United States in 2007 (Table D).

Trends for recent years show that late preterm (34–36 weeks) and early term (37–38 weeks) births are making up an ever greater proportion of both live births and infant deaths, and events at 39 weeks of gestation or greater an ever smaller proportion. From 2000 to 2007,

Table D. Infant mortality rates and percent distribution of live births and infant deaths, by period of gestation: United States, 2000–2007 linked files

			Preterm (less the	han 37 we	eeks)	Te	rm (37–41 we	eks)	Post-term
	All		Very preterm		Late preterm		Early term		
Year	gestational ages	Total preterm	Less than 32 weeks	32–33 weeks	34–36 weeks	Total term	37–38 weeks	39–41 weeks	42 weeks or more
				Infan	t mortality rate ¹				
2007	6.75	36.05	178.36	16.12	7.42	2.43	3.09	2.07	2.62
2006	6.68	35.15	175.94	16.19	7.08	2.39	3.02	2.05	2.80
2005	6.86	36.55	183.24	16.69	7.30	2.43	3.08	2.07	2.66
2004	6.78	36.56	182.47	16.06	7.32	2.39	3.12	2.03	2.87
2003	6.84	37.21	188.24	16.42	7.12	2.42	3.07	2.10	2.88
2002	6.95	37.86	186.39	17.63	7.66	2.48	3.13	2.16	3.07
2001	6.84	36.94	181.00	17.62	7.32	2.54	3.23	2.22	2.95
2000	6.89	37.88	180.95	17.37	7.96	2.59	3.38	2.24	2.91
			Per	rcent distri	bution of infant	deaths ²			
2007	100.0	68.2	54.4	3.8	10.0	29.6	13.2	16.4	2.2
2006	100.0	68.1	54.3	4.0	9.8	29.5	13.2	16.3	2.4
2005	100.0	68.6	54.9	3.9	9.8	29.1	12.9	16.3	2.3
2004	100.0	68.3	54.7	3.8	9.7	29.1	12.7	16.4	2.7
2003	100.0	68.1	55.0	3.8	9.3	29.2	12.3	16.8	2.7
2002	100.0	67.3	53.7	4.0	9.7	29.6	12.2	17.4	3.0
2001	100.0	66.1	52.8	3.8	9.0	30.9	12.5	18.4	3.0
2000	100.0	65.6	52.0	3.7	9.4	31.2	12.3	18.9	3.2
			Р	ercent dis	tribution of live b	irths ²			
2007	100.0	12.7	2.0	1.6	9.0	81.7	28.6	53.1	5.6
2006	100.0	12.8	2.0	1.6	9.1	81.5	28.9	52.6	5.7
2005	100.0	12.7	2.0	1.6	9.1	81.4	28.3	53.1	5.8
2004	100.0	12.5	2.0	1.6	8.9	81.3	27.2	54.1	6.2
2003	100.0	12.3	2.0	1.6	8.8	81.3	27.1	54.2	6.4
2002	100.0	12.1	2.0	1.5	8.6	81.2	26.4	54.8	6.7
2001	100.0	11.9	1.9	1.5	8.4	81.2	25.8	55.3	6.9
2000	100.0	11.6	1.9	1.5	8.1	81.1	24.5	56.6	7.3

¹Infant mortality rates are deaths under age 1 year per 1,000 live births in specified group.

the percentage of both live births and infant deaths increased for every gestational age category less than 39 weeks, and decreased for every gestational age category of 39 weeks or more (Figure 3). The largest increases were for late preterm (up 12 percent) and early term births (up 17 percent) from 2000 to 2007. Because late preterm and early term births have a significantly higher risk of infant mortality than births at 39–41 weeks of gestation, increases in the proportions of these early births have a negative effect on the U.S. infant mortality rate. The percentage of preterm births has been impacted by rising multiple-birth rates, as well as by increases in cesarean section and induction of labor for preterm infants (2,26–30). Small declines in the percentage of preterm births have been noted in 2008 and 2009 (12,31).

There were large differences in the percentage of preterm births by race and ethnicity, and these differences have a large impact on infant mortality rates (16,31). In 2007, the percentage of preterm births ranged from 10.9 percent of births to API mothers to 18.3 percent of births to non-Hispanic black mothers (Tables 4 and 5). Gestational age-specific infant mortality rates also vary widely by race and ethnicity (Tables 1 and 2). Compared with non-Hispanic white mothers, infant mortality rates were significantly higher for non-Hispanic black mothers for all gestational age categories except for 32–33 weeks, and for AIAN mothers at 34–36 and 37–41 weeks. Compared with non-Hispanic

white mothers, infant mortality rates for API mothers were lower at 34–36 and 37–41 weeks of gestation; for Mexican mothers, infant mortality rates were lower at 37–41 weeks of gestation; and for Central and South American mothers, infant mortality rates were lower at less than 32, 34–36, and 37–41 weeks of gestation.

Birthweight

Birthweight is another important predictor of infant health. It is closely associated with, but does not exactly correspond with, the period of gestation. Infant mortality rates are highest for the smallest infants and decrease sharply as birthweight increases. In 2007, infant mortality rates were about 25 times higher for low birthweight (less than 2,500 grams) infants (56.12 per 1,000) than for infants with birthweights of 2,500 grams or more (2.29) (Table 1). The infant mortality rate for very low birthweight (less than 1,500 grams) infants was 240.88, more than 100 times the rate for infants with birthweights of 2,500 grams or more. Among very small infants [less than 500 grams (1 lb. 1 oz. or less)] (Table 6), 86 percent were reported to have died within the first year of life. Reporting of deaths among these very small infants may be incomplete (32). Infant mortality rates were lowest at birthweights of 3,000–4,999 grams.

²Infant deaths and births with not-stated gestational age are subtracted from the total number of events used as denominators for percentage computations.

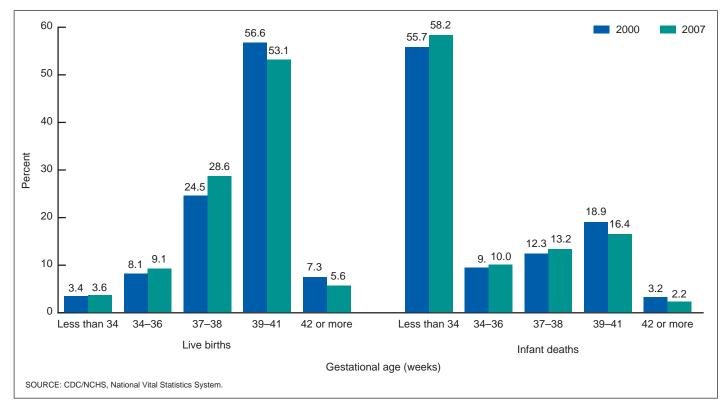


Figure 3. Percent distribution of live births and infant deaths, by gestational age: United States, 2000 and 2007

Because of their much higher mortality rates, infants born at the lowest birthweights have a substantial impact on overall infant mortality rates. For example, infants born weighing less than 1,000 grams accounted for only 0.7 percent of births but nearly one-half of all infant deaths (47.7 percent) in the United States in 2007 (tabular data not shown). Conversely, 91.8 percent of infants born in the United States in 2007 weighed 2,500 grams or more, but these infants accounted for less than one-third (31.3 percent) of infant deaths. The large race and Hispanic-origin variations in the percentage of births at low birthweight (less than 2,500 grams)—from 6.5 percent for Mexican mothers to 14.0 percent for non-Hispanic black mothers—mean that some racial and ethnic groups are disproportionately impacted by the high infant mortality rates for low birthweight infants (Tables 4 and 5).

From 2000 through 2007, infant mortality rates for the total population declined by 5 percent for infants weighing 500-749 grams, and by 7-11 percent for infants weighing 2,000-3,999 grams at birth (Table 6). Changes for other detailed birthweight categories were not statistically significant. From 2000 through 2007, for non-Hispanic white women, birthweight-specific infant mortality rates declined for specific birthweight categories: 500-749, 2,500-2,999, and 3,000-3,499 grams, while for non-Hispanic black women, declines were significant for infants with birthweights of 3,000-3,499 grams. For Hispanic women, infant mortality rates declined for birthweights of 2,500-3,999 grams, and for API women, for birthweights of 1,500-1,999 grams. There were no significant changes from 2000 through 2007 for any detailed birthweight category for AIAN women. Some of the larger race and Hispanic-origin groups had declines for the summary categories less than 2,500 grams and/or 2,500 grams or more (Table 6).

Maternal age

Infant mortality rates vary with maternal age. In 2007, infants of teenage mothers and mothers aged 40 years and over had the highest rates (9.80 and 8.57, respectively). The lowest rates were for infants of mothers in their late 20s and early 30s (Tables 1 and 2).

In 2007, among births to teenagers, infants of the youngest mothers (under age 15) had the highest mortality rate (14.53). The rate for infants of mothers aged 15–17 was 10.27, similar to 2006 (10.42); the rate for infants of mothers aged 18–19 was 9.49 in 2007 compared with 9.30 in 2006 (tabular data not shown). The rate for infants of mothers aged 20–24 was 7.67 in 2007 compared with 7.55 in 2006.

Within racial and ethnic subgroups, among groups for which rates could be reliably computed, infant mortality rates for non-Hispanic white mothers under age 20 were higher than for mothers aged 40 and over. In contrast, for non-Hispanic black and Mexican mothers, rates for the oldest mothers were higher than rates for infants of teenagers.

Live birth order

Infant mortality rates were generally higher for first births than for second births, and then generally increased as birth order increased (Tables 1 and 2). Overall, the infant mortality rate for first births (6.75) was 12 percent higher than for second births (5.96). The rate for fifth and higher-order births (10.06) was 69 percent higher than the rate for second births. The higher parities and, therefore, the highest-order births (fifth child and higher) are more

likely to be associated with older maternal age, multiple births, and lower socioeconomic status (2,33).

Marital status

Marital status may be a marker for the presence or absence of social, emotional, and financial resources (34,35). Infants of mothers who are not married have been shown to be at higher risk for poor outcomes (36). In 2007, infants of unmarried mothers had an infant mortality rate of 9.17 per 1,000, 78 percent higher than the rate for infants of married mothers (5.16) (Tables 1 and 2). Within each race and Hispanic origin group, infants of unmarried mothers had higher rates of mortality, and with the exception of Cuban and Central and South American infants, these differences were significant.

Nativity

In 2007, the infant mortality rate for mothers born in the 50 states and the District of Columbia (7.15 per 1,000) was 40 percent higher than the rate for mothers born elsewhere (5.10) (Tables 1 and 2). Among race and Hispanic origin groups, mothers born in the 50 states and the District of Columbia had higher infant mortality rates than mothers born elsewhere for non-Hispanic white, non-Hispanic black, API, and Mexican mothers (Tables 1 and 2).

A variety of hypotheses have been advanced to account for the lower infant mortality rate among infants of mothers born outside the 50 states and the District of Columbia, including possible differences in migration selectivity, social support, and risk behaviors (37,38). In addition, women born outside the 50 states and the District of Columbia have been shown to have different characteristics than their U.S.-born counterparts with regard to socioeconomic and educational status (39).

Leading causes of infant death

Infant mortality rates for the five leading causes of infant death are presented in Table 7 by race and Hispanic origin of mother. The leading cause of infant death in the United States in 2007 was Congenital malformations, deformations and chromosomal abnormalities (congenital malformations), accounting for 20 percent of all infant deaths. Disorders relating to short gestation and low birthweight, not elsewhere classified (low birthweight) was second, accounting for 17 percent of all infant deaths, followed by SIDS, accounting for 8 percent of infant deaths. The fourth and fifth leading causes in 2007 were Newborn affected by maternal complications of pregnancy (maternal complications) (6 percent), and Accidents (unintentional injuries) (4 percent). Together, the five leading causes accounted for 56 percent of all infant deaths in the United States in 2007. The order of the top five leading causes was the same as in 2006. The infant mortality rate from unintentional injuries increased by 11 percent from 2006 to 2007, although much of this increase was among the accidental suffocation and strangulation in bed subcategory and may represent deaths that might formerly have been classified as SIDS (16,40,41). Infant mortality rates for the other four leading causes did not change significantly from 2006 to 2007.

In 2007, the rank order of leading causes of infant death varied substantially by race and Hispanic origin of the mother. Congenital

malformations was the leading cause of infant death for all groups except for non-Hispanic black and Puerto Rican women, for whom low birthweight was the leading cause.

When differences between cause-specific infant mortality rates were examined by race and ethnicity, infant mortality rates from congenital malformations were 48 percent higher for AIAN, 33 percent higher for non-Hispanic black, and 19 percent higher for Mexican than for non-Hispanic white women.

Infants of non-Hispanic black mothers had the highest mortality rates from low birthweight. The rate for non-Hispanic black mothers was nearly three times the rate for non-Hispanic white mothers. The infant mortality rate for Puerto Rican mothers due to low birthweight was more than twice that for non-Hispanic white mothers.

Compared with non-Hispanic white mothers, SIDS rates were 2.4 times higher for AIAN mothers and 1.9 times higher for non-Hispanic black mothers. As most SIDS deaths occur during the postneonatal period, the high SIDS rates for infants of non-Hispanic black and AIAN mothers accounted for much of their elevated risk of postneonatal mortality. Compared with non-Hispanic white mothers, SIDS rates were 52 percent lower for Mexican mothers, 63 percent lower for API mothers, and 74 percent lower for Central and South American mothers.

For maternal complications (which include incompetent cervix, premature rupture of membranes, and multiple pregnancy, for example), infants of non-Hispanic black mothers had the highest mortality rates—nearly three times those for non-Hispanic white mothers. Non-Hispanic black women have a much higher percentage of preterm births (Tables 4 and 5), which may help to explain the high infant mortality rates from maternal complications, as this cause occurs predominantly among preterm infants. Infant mortality rates from maternal complications were 14 percent lower for Mexican and 35 percent lower for Central and South American than for non-Hispanic white women.

For AIAN women, the infant mortality rate from unintentional injuries was 2.3 times higher than the rate for non-Hispanic white women. For non-Hispanic black women, the rate from unintentional injuries was double that for non-Hispanic white women. Infant mortality rates from unintentional injuries were 55 percent lower for Mexican and 58 percent lower for API women than for non-Hispanic white women.

Preterm-related causes of death

To more fully assess the impact of preterm birth on infant mortality, CDC researchers have developed a grouping of *preterm-related* causes of death. A cause of death was considered preterm-related if 75 percent or more of infants whose deaths were attributed to that cause were born at less than 37 weeks of gestation, and the cause of death was a direct consequence of preterm birth based on a clinical evaluation and review of the literature (42,43).

The preterm-related cause-of-death grouping includes Disorders related to short gestation and low birthweight not elsewhere classified, and most of the Maternal complications of pregnancy category from the five leading causes of death. Also included are a variety of other causes of death closely associated with prematurity, such as Respiratory distress of newborn, Bacterial sepsis of newborn, Necrotizing enterocolitis of newborn, and others. The comprehensive list of preterm-related cause-of-death categories (ICD-10 codes) is shown in the Note for Table 8. Even this comprehensive grouping probably

underestimates the total impact of preterm-related infant mortality, as some cause-of-death categories (notably those beginning with the words "Other" and "All other") had a high percentage of preterm infant deaths but lacked sufficient specificity to be able to establish the etiologic connection to prematurity with any degree of certainty.

Table 8 shows trends in preterm-related infant mortality by race and Hispanic origin of mother from 2000 through 2007. In 2007, 10,498 out of a total of 29,153 infant deaths (36.0 percent) in the United States were preterm-related. The percentage of preterm-related infant deaths in 2007 was similar to the level in 2006, 36.1 percent, but 4 percent higher than in 2000 (34.6 percent).

The impact of preterm-related infant deaths varied considerably by maternal race and ethnicity. In 2007, 45 percent of infant deaths to non-Hispanic black women and 39 percent of infant deaths to Puerto Rican women were due to preterm-related causes, while the percentage was somewhat lower for other racial and ethnic groups (Table 8).

Preterm-related infant mortality rates varied considerably by race and ethnicity of the mother (Figure 4 and Table 8). The preterm-related infant mortality rate was 3.4 times higher for non-Hispanic black (5.99) than for non-Hispanic white mothers (1.78). In fact, in 2007, the preterm-related infant mortality rate for non-Hispanic black women was higher than the total infant mortality rate for non-Hispanic white, Mexican, Central and South American, and API women. The preterm-related infant mortality rate for Puerto Rican women (3.04) was 71 percent higher and for AIAN women (2.25), 26 percent higher, than for non-Hispanic white women. For Central and South American

P360–P369, P520–P523, or P77; see "Technical Notes. SOURCE: CDC/NCHS, National Vital Statistics System.

women, the preterm-related infant mortality rate (1.58) was 11 percent lower than for non-Hispanic white women. Changes in preterm-related infant mortality rates by race and ethnicity from 2006 to 2007 were not statistically significant.

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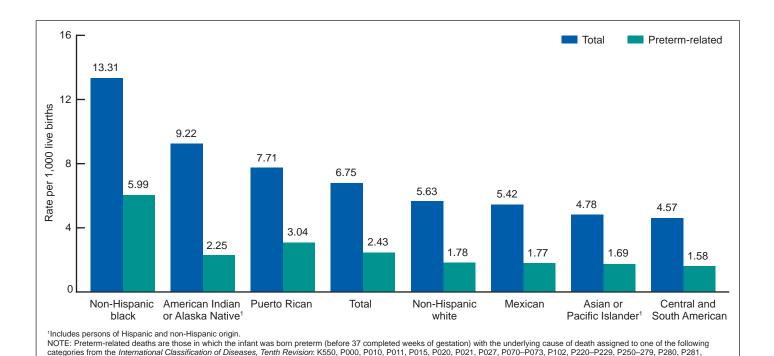


Figure 4. Total and preterm-related infant mortality rates, by race and ethnicity of mother: United States, 2007

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List of Detailed Tables

1.	Infant mortality rates, live births, and infant deaths, by selected characteristics and race of mother: United States, 2007	
	linked file	13
2.	Infant mortality rates, live births, and infant deaths, by selected characteristics and Hispanic origin of mother and by race of mother for mothers of non-Hispanic origin: United States, 2007	
	linked file	16
3.	Infant mortality rates, by race and Hispanic origin of mother: United States and each state, Puerto Rico, Virgin Islands, and	
	Guam, 2005–2007 linked files	19
4.	Percentage of live births with selected maternal and infant characteristics, by race of mother: United States, 2007	
	linked file	20

5.	Percentage of live births with selected maternal and infant characteristics, by Hispanic origin of mother and race of mother for mothers of non-Hispanic origin: United States, 2007	
	linked file	20
6.	Live births and infant, neonatal, and postneonatal deaths and mortality rates, by race and Hispanic origin of mother and birthweight: United States, 2007 linked file, and percent change in	
	birthweight-specific infant mortality, 2000-2007 linked files	21
7.	Infant deaths and mortality rates for the five leading causes of infant death, by race and Hispanic origin of mother: United States,	
	2007 linked file	24
8.	Number and percentage of preterm-related infant deaths and preterm-related infant mortality rates, by race and Hispanic origin	
	of mother: United States, 2000–2007 linked files	25

Table 1. Infant mortality rates, live births, and infant deaths, by selected characteristics and race of mother: United States, 2007 linked file

			Race of	mother	
Characteristic	All races	White	Black	American Indian or Alaska Native	Asian or Pacific Islande
		Infant mortali	ty rates per 1,000	live births in specified g	roup
otal	6.75	5.62	12.92	9.22	4.78
Age at death					
otal neonatal . Early neonatal (less than 7 days) Late neonatal (7–27 days) ostneonatal .	4.42 3.51 0.92 2.33	3.67 2.90 0.77 1.94	8.51 6.80 1.71 4.42	4.55 3.36 1.19 4.67	3.38 2.75 0.62 1.40
Sex					
ale	7.37 6.11	6.15 5.06	14.07 11.74	10.13 8.28	5.19 4.33
Plurality					
ingle births	5.93 30.33	4.92 25.78	11.43 51.69	8.59 35.10	4.16 25.76
Birthweight					
ess than 2,500 grams Less than 1,500 grams 1,500–2,499 grams. 500 grams or more.	56.12 240.88 14.62 2.29	51.23 230.05 15.02 2.08	71.99 261.95 14.55 3.54	63.41 273.16 20.20 4.81	40.87 229.73 9.53 1.56
Period of gestation					
ess than 32 weeks 2–33 weeks 4–36 weeks 7–41 weeks 37–38 weeks 39–41 weeks	178.36 16.12 7.42 2.43 3.09 2.07 2.62	165.13 15.88 6.93 2.21 2.86 1.87 2.36	207.75 16.40 9.27 3.73 4.37 3.33 4.26	156.99 28.51 14.27 4.59 6.14 3.79	173.30 14.84 5.59 1.67 2.12 1.43 1.69
Age of mother					
nder 20 years 0-24 years 5-29 years 0-34 years 5-39 years 0-54 years	9.80 7.67 5.97 5.37 6.20 8.57	8.32 6.31 5.01 4.53 5.23 7.28	13.59 13.02 11.93 12.35 14.26 16.84	11.46 9.57 7.97 8.48 7.62	11.89 5.41 4.22 3.96 4.85 8.10
Live-birth order					
or more	6.75 5.96 6.62 7.79 10.06	5.68 5.00 5.50 6.50 7.98	13.07 11.88 11.92 13.44 16.62	8.05 8.33 11.78 8.56 11.66	4.60 4.34 5.81 5.11 7.14
Marital status					
larried	5.16 9.17	4.67 7.39	11.27 13.59	6.93 10.44	4.39 6.76
Mother's place of birth					
orn in the 50 states or D.C	7.15	5.75	13.37	9.49	6.32

Table 1. Infant mortality rates, live births, and infant deaths, by selected characteristics and race of mother: United States, 2007 linked file—Con.

			Race of r	nother	
Characteristic	All races	White	Black	American Indian or Alaska Native	Asian or Pacific Islander
			Live bi	rths	
Total	4,316,233	3,336,626	675,676	49,443	254,488
Male	2,208,071 2,108,162	1,708,315 1,628,311	343,279 332,397	25,177 24,266	131,300 123,188
Plurality					
Single births	4,170,845 145,388	3,224,813 111,813	650,584 25,092	48,218 1,225	247,230 7,258
Birthweight					
Less than 2,500 grams Less than 1,500 grams 1,500–2,499 grams. 2,500 grams or more. Not stated	355,745 65,249 290,496 3,959,945 543	239,449 40,321 199,128 3,096,785 392	91,916 21,344 70,572 583,639 121	3,706 637 3,069 45,729 8	20,674 2,947 17,727 233,792 22
Period of gestation					
Less than 32 weeks 32–33 weeks 34–36 weeks 37–41 weeks 39–41 weeks 42 weeks or more Not stated	88,052 68,914 389,636 3,520,550 1,232,462 2,288,088 242,235 6,846	56,355 48,356 286,001 2,749,398 945,623 1,803,775 191,464 5,052	26,826 16,276 78,168 517,768 198,243 319,525 35,417 1,221	1,051 912 4,907 39,001 13,672 25,329 3,485 87	3,820 3,370 20,560 214,383 74,924 139,459 11,869 486
Age of mother					
Under 20 years	451,094 1,082,354 1,208,408 961,931 499,914 112,532	318,103 818,503 954,168 762,239 395,658 87,955	116,006 215,052 170,270 105,466 54,567 14,315	9,077 16,831 12,425 7,079 3,279 752	7,908 31,968 71,545 87,147 46,410 9,510
Live-birth order					
1	1,725,699 1,363,190 722,461 293,941 189,980 20,962	1,329,109 1,068,228 566,483 224,122 134,516 14,168	262,750 192,186 115,674 55,046 44,528 5,492	17,646 13,321 8,832 4,789 4,631 224	116,194 89,455 31,472 9,984 6,305 1,078
Marital status					
Married	2,601,186 1,715,047	2,176,830 1,159,796	194,877 480,799	17,177 32,266	212,302 42,186
Mother's place of birth					
Born in the 50 states or D.C. Born elsewhere	3,231,944 1,069,120 15,169	2,569,232 759,140 8,254	567,497 102,880 5,299	46,041 3,296 106	49,174 203,804 1,510

Table 1. Infant mortality rates, live births, and infant deaths, by selected characteristics and race of mother: United States, 2007 linked file—Con.

			Race of I	mother	
Characteristic	All races	White	Black	American Indian or Alaska Native	Asian or Pacific Islander
			Infant d	eaths	
- otal	29,153	18,749	8,732	456	1,216
Age at death					
otal neonatal	19,094	12,261	5,748	225	860
Early neonatal (less than 7 days)	15,139	9,677	4,594	166	701
Late neonatal (7–27 days)	3,956 10,059	2,585 6,487	1,154 2,984	59 231	158 357
Sex	.,	-, -	,		
lale	16,274	10,506	4,830	255	682
emale	12,880	8,242	3,902	201	534
Plurality					
Single births	24,744	15,867	7,435	414	1,029
Plural births	4,409	2,882	1,297	43	187
Birthweight					
Less than 2,500 grams	19,963	12,266	6,617	235	845
Less than 1,500 grams	15,717 4,246	9,276 2,990	5,591 1,027	174 62	677 169
,500 grams or more	9,081	6,429	2,067	220	365
ot stated	109	54	48	1	6
Period of gestation					
ess than 32 weeks	15,705	9,306	5,573	165	662
2–33 weeks	1,111 2,890	768 1,981	267 725	26 70	50 115
7–41 weeks	8,549	6,082	1,929	179	358
37–38 weeks	3,810	2,701	866	84	159
39–41 weeks	4,739 635	3,381 451	1,063 151	96 13	199 20
lot stated	264	161	88	3	12
Age of mother					
Inder 20 years	4,421	2,647	1,577	104	94
0–24 years	8,297	5,162	2,801	161	173
5–29 years	7,210	4,776	2,032	99	302
0–34 years	5,163 3,098	3,455 2,070	1,303 778	60 25	345 225
0–54 years	964	640	241	7	77
Live-birth order					
	11,654	7,544	3,434	142	535
	8,127 4,781	5,345 3,115	2,283 1,379	111 104	388 183
	2,289	1,457	740	41	51
or more	1,912	1,073	740	54	45
lot stated	391	215	158	4	14
Marital status					
Married	13,421 15,733	10,173 8,575	2,197 6,535	119 337	931 285
Mother's place of birth					
Born in the 50 states or D.C.	23,119	14,784	7,587	437	311
Born elsewhere	5,454 581	3,674 291	895 250	18 1	867 39

^{*} Figure does not meet standards of reliability or precision; based on fewer than 20 deaths in the numerator.

NOTES: Infant deaths are weighted, so numbers may not exactly add to totals due to rounding. "Not stated" responses were included in totals but not distributed among groups for rate computations. Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. In this table, all women, including Hispanic women, are classified only according to their race; see reference 2. D.C. is District of Columbia.

16

Table 2. Infant mortality rates, live births, and infant deaths, by selected characteristics and Hispanic origin of mother and by race of mother for mothers of non-Hispanic origin: United States, 2007 linked file

				-	Hispanic			Non-Hispanic		
Characteristic	All origins ¹	Total	Mexican	Puerto Rican	Cuban	Central and South American	Other and unknown Hispanic	Total ²	White	Black
			In	fant mortality	rates per 1	,000 live births in	specified group)		
Total	6.75	5.51	5.42	7.71	5.18	4.57	6.42	7.10	5.63	13.31
Age at death										
Total neonatal	4.42	3.72	3.68	5.14	3.65	3.14	4.09	4.59	3.61	8.74
Early neonatal (less than 7 days)	3.51	2.93	2.90	4.21	2.77	2.49	3.11	3.63	2.84	6.98
Late neonatal (7–27 days)	0.92	0.78	0.78	0.93	*	0.65	0.97	0.96	0.77	1.76
Postneonatal	2.33	1.79	1.75	2.57	1.53	1.43	2.32	2.51	2.02	4.57
Sex	7.07	- 0-	.	7.04	0.45	5.07	7.40	7.70	0.40	44.40
Male	7.37 6.11	5.95 5.04	5.82 5.00	7.91 7.53	6.15 4.15	5.07 4.05	7.19 5.59	7.76	6.19 5.03	14.48 12.11
Female	0.11	5.04	5.00	7.55	4.13	4.05	5.59	6.40	5.05	12.11
Plurality										
Single births	5.93	4.95	4.89	6.65	4.99	4.09	5.81	6.21	4.88	11.77
Plural births	30.33	29.47	29.98	40.63		24.95	28.31	30.20	24.56	52.76
Birthweight	50.40	F 4 70	50.07	F0.70	40.00	47.00	54.00	55.04	40.07	70.40
Less than 2,500 grams	56.12 240.88	54.72 236.63	56.97 245.19	56.70 231.64	48.20 227.27	47.22 218.14	51.30 216.24	55.91 239.88	49.07 224.00	72.48 262.70
1,500–2,499 grams	14.62	15.79	16.91	14.17	*	11.24	17.80	14.20	14.47	14.61
2,500 grams or more	2.29	1.82	1.81	2.37	1.59	1.50	2.18	2.44	2.19	3.64
Period of gestation										
Less than 32 weeks	178.36	158.71	161.31	172.18	167.79	142.09	154.02	182.01	165.61	209.03
32–33 weeks	16.12	14.64	15.11	*	*	13.52	14.95	16.57	16.23	16.91
34–36 weeks	7.42	6.48	6.67	8.15	*	5.24	6.35	7.69	7.10	9.42
37–41 weeks	2.43 3.09	2.03 2.63	2.01 2.69	2.60 3.11	2.02	1.62 2.02	2.54 2.99	2.55 3.22	2.29 2.95	3.82 4.45
39–41 weeks	2.07	1.70	1.66	2.32	*	1.41	2.25	2.19	1.95	3.43
42 weeks or more	2.62	2.04	2.10	*	*	*	*	2.81	2.51	4.40
Age of mother										
Under 20 years	9.80	6.91	6.53	9.08	*	6.64	8.44	11.17	9.51	13.80
20–24 years	7.67	5.36	5.21	6.99	6.21	4.70	6.07	8.52	6.80	13.39
25–29 years	5.97 5.37	4.89 4.82	4.75 4.99	7.61 6.03	5.11	4.11 3.77	6.03 5.07	6.25 5.45	5.02 4.35	12.42 12.95
30-34 years	6.20	6.24	6.36	9.97	3.11	4.56	7.12	6.12	4.91	14.51
40–54 years	8.57	9.39	9.71	*	*	7.84	*	8.24	6.44	17.08
Live-birth order										
1	6.75	5.62	5.63	7.70	4.88	4.48	6.21	7.01	5.66	13.47
2	5.96	5.03	4.87	6.95	5.62	4.38	6.01	6.20	4.97	12.27
3	6.62	5.28	5.08	7.72	*	4.76	6.50	7.12	5.62	12.35
4	7.79 10.06	5.81 7.27	5.62 7.36	6.26 13.35	*	5.36 4.25	8.69 6.16	8.74 11.26	6.96 8.48	13.88 16.89
	10.00	1.21	7.50	10.00		4.23	0.10	11.20	0.40	10.03
Marital status	F 40	4.00	4.00	0.00	4.00	4.54	F 04	F 40	4.57	44.50
Married	5.16 9.17	4.96 6.03	4.88 5.96	6.86 8.22	4.96 5.50	4.51 4.62	5.31 7.44	5.16 10.55	4.57 8.37	11.59 14.00
Mother's place of birth		3.00	3.00	2	5.00			. 3.00	3.0.	
Born in the 50 states or D.C	7.15	6.25	6.11	7.60	4.79	4.80	6.53	7.26	5.66	13.55
Born elsewhere	5.10	4.96	4.96	7.73	5.33	4.52	5.31	5.23	4.14	9.82
			****	****			2.2.			

Table 2. Infant mortality rates, live births, and infant deaths, by selected characteristics and Hispanic origin of mother and by race of mother for mothers of non-Hispanic origin: United States, 2007 linked file—Con.

				Hi	spanic			1	Non-Hispanic		
Characteristic	All origins ¹	Total	Mexican	Puerto Rican	Cuban	Central and South American	Other and unknown Hispanic	Total ²	White	Black	Not stated
Total	4,316,233	1,062,779	722,055	68,488	16,981	Live births 169,851	85,404	3,222,460	2,310,333	627,191	30,994
Male	2,208,071 2,108,162	542,174 520,605	368,423 353,632	34,882 33,606	8,783 8,198	86,713 83,138	43,373 42,031	1,650,061 1,572,399	1,184,634 1,125,699	318,692 308,499	15,836 15,158
Plurality Single births	4,170,845 145,388	1,038,517 24,262	706,778 15,277	66,322 2,166	16,426 555	165,883 3,968	83,108 2,296	3,102,573 119,887	2,222,142 88,191	603,478 23,713	29,755 1,239
Birthweight Less than 2,500 grams Less than 1,500 grams 1,500–2,499 grams 2,500 grams or more Not stated	355,745 65,249 290,496 3,959,945 543	73,906 13,029 60,877 988,836 37	47,062 8,259 38,803 674,971 22	6,755 1,321 5,434 61,729 4	1,307 220 1,087 15,674	11,414 1,985 9,429 158,431 6	7,368 1,244 6,124 78,031 5	278,946 51,550 227,396 2,943,246 268	168,570 27,839 140,731 2,141,599 164	87,496 20,411 67,085 539,607 88	2,893 670 2,223 27,863 238
Period of gestation											
Less than 32 weeks 32–33 weeks 34–36 weeks 37–41 weeks 37–38 weeks 39–41 weeks 42 weeks or more. Not stated	1,232,462	19,281 16,735 94,307 865,964 300,771 565,193 64,325 2,167	12,454 11,053 62,183 590,829 202,135 388,694 43,877 1,659	1,754 1,272 6,868 54,244 19,280 34,964 4,255 95	298 284 1,696 13,836 5,544 8,292 856 11	2,970 2,588 14,894 138,909 47,416 91,493 10,221 269	1,805 1,538 8,666 68,146 26,396 41,750 5,116 133	67,948 51,662 292,542 2,629,977 923,489 1,706,488 176,247 4,084	37,903 32,292 195,245 1,912,771 655,255 1,257,516 129,565 2,557	25,566 15,380 73,583 479,104 184,825 294,279 32,500 1,058	823 517 2,787 24,609 8,202 16,407 1,663 595
Age of mother											
Under 20 years		150,974 305,262 287,942 201,430 95,758 21,413	107,749 212,769 194,926 132,918 60,722 12,971	11,786 21,467 17,487 11,104 5,416 1,228	1,387 3,866 4,124 4,504 2,552 548	15,368 41,315 49,176 38,704 20,186 5,102	14,684 25,845 22,229 14,200 6,882 1,564	297,029 770,086 912,230 753,404 399,926 89,785	174,201 526,482 675,899 565,491 301,530 66,730	108,453 200,188 157,302 97,290 50,671 13,287	3,091 7,006 8,236 7,097 4,230 1,334
Live-birth order											
1	1,725,699 1,363,190 722,461 293,941 189,980 20,962	377,541 319,474 209,222 94,876 57,903 3,763	242,754 212,810 150,044 70,789 43,316 2,342	27,394 20,724 11,783 4,955 3,370 262	7,779 6,054 2,167 632 265 84	66,258 54,106 29,850 11,938 7,057 642	33,356 25,780 15,378 6,562 3,895 433	1,336,245 1,034,870 508,535 196,879 130,348 15,583	966,135 760,014 364,111 131,988 78,258 9,827	243,571 177,719 107,377 51,567 42,262 4,695	11,913 8,846 4,704 2,186 1,729 1,616
Marital status											
Married	, ,	517,246 545,533	360,439 361,616	25,070 43,418	9,884 7,097	80,271 89,580	41,582 43,822	2,065,403 1,157,057	1,667,712 642,621	177,958 449,233	18,537 12,457
Mother's place of birth											
Born in the 50 states or D.C		412,876 647,737 2,166	265,979 455,294 782	49,609 18,362 517	8,147 8,820 14	24,381 145,118 352	64,760 20,143 501	2,796,049 414,991 11,420	2,166,564 138,186 5,583	544,864 77,906 4,421	23,019 6,392 1,583

Table 2. Infant mortality rates, live births, and infant deaths, by selected characteristics and Hispanic origin of mother and by race of mother for mothers of non-Hispanic origin: United States, 2007 linked file—Con.

				Hi	ispanic			1			
Characteristic	All origins ¹	Total	Mexican	Puerto Rican	Cuban	Central and South American	Other and unknown Hispanic	Total ²	White	Black	Not stated
						Infant death	s				
Total	29,153	5,855	3,914	528	88	777	548	22,873	13,005	8,351	426
Age at death											
Total neonatal	19,094	3,952	2,654	352	62	534	349	14,795	8,329	5,484	348
Early neonatal (less than 7 days) Late neonatal (7–27 days)	15,139 3,956	3,118 834	2,094 560	288 64	47 15	423 111	266 83	11,712 3,083	6,556 1,773	4,379 1,106	308 39
Postneonatal	10,059	1,903	1,260	176	26	243	198	8,078	4,676	2,867	78
Sex											
Male Female	16,274 12,880	3,228 2,626	2,146 1,767	276 253	54 34	440 337	312 235	12,808 10,065	7,338 5,667	4,615 3,736	237 188
Plurality											
Single births	24,744 4,409	5,140 715	3,456 458	441 88	82 6	678 99	483 65	19,253 3,620	10,839 2,166	7,100 1,251	351 75
Birthweight											
Less than 2,500 grams	19,963	4,044	2,681	383	63	539	378	15,596	8,272	6,342	323
Less than 1,500 grams	15,717 4,246	3,083 961	2,025 656	306 77	50 13	433 106	269 109	12,366 3,230	6,236 2,036	5,362 980	268 55
2,500 grams or more	9,081	1,802	1,223	146	25	238	170	7,189	4,695	1,964	90
Not stated	109	9	9	-	-	-	-	88	38	45	12
Period of gestation											
Less than 32 weeks	15,705	3,060	2,009	302	50	422	278	12,367	6,277	5,344	278
32-33 weeks	1,111 2,890	245 611	167 415	18 56	2 7	35 78	23 55	856 2,251	524 1,387	260 693	10 28
37–41 weeks	8,549	1,755	1,187	141	28	225	173	6,708	4,389	1,831	87
37–38 weeks	3,810	792	543	60	13	96	79	2,975	1,932	823	43
39–41 weeks	4,739 635	963 131	644 92	81 10	15 1	129 12	94 16	3,733 496	2,457 325	1,008 143	44 7
Not stated	264	53	43	1	_	5	3	196	103	81	15
Age of mother											
Under 20 years	4,421	1,043	704	107	7	102	124	3,319	1,657	1,497	59
20-24 years	8,297 7,210	1,635 1,408	1,109 926	150 133	24 12	194 202	157 134	6,562 5,697	3,580 3,393	2,680 1,953	100 105
30–34 years	5,163	971	663	67	23	146	72	4,106	2,462	1,260	86
35–39 years	3,098	598	386	54	15	92	49	2,448	1,482	735	52
40–54 years	964	201	126	17	7	40	12	740	430	227	24
Live-birth order	11,654	2,120	1,367	211	38	297	207	9,368	5,470	3,280	167
1	8,127	1,607	1,037	144	34	237	155	6,418	3,777	2,180	102
3	4,781	1,105	762	91	10	142	100	3,623	2,047	1,326	53
4	2,289 1,912	551 421	398 319	31 45	1 2	64 30	57 24	1,720 1,468	918 664	716 714	17 23
Not stated	391	51	30	6	3	7	5	277	128	136	63
Marital status											
Married	13,421	2,563	1,759	172	49	362	221	10,666	7,627	2,062	192
Unmarried	15,733	3,291	2,155	357	39	414	326	12,207	5,378	6,290	234
Mother's place of birth											
Born in the 50 states or D.C	23,119 5,454	2,581 3,211	1,625 2,258	377 142	39 47	117 656	423 107	20,312 2,171	12,268 572	7,381 765	226 72
Not stated	5,454	63	2,230	9	2	3	18	390	165	205	128

^{*} Figure does not meet standards of reliability or precision; based on fewer than 20 deaths in the numerator.

NOTES: Infant deaths are weighted, so numbers may not exactly add to totals due to rounding. "Not stated" responses were included in totals but not distributed among groups for rate computations. Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. Persons of Hispanic origin may be of any race. In this table, Hispanic women are classified only by place of origin, and non-Hispanic women are classified by race; see reference 2. D.C. is District of Columbia.

⁻ Quantity zero.

¹Includes origin not stated.

²Includes races other than black or white.

Table 3. Infant mortality rates, by race and Hispanic origin of mother: United States and each state, Puerto Rico, Virgin Islands, and Guam, 2005–2007 linked files

[By place of residence]

			Race and His	spanic origin of mo	ther		
Area	Total	Non-Hispanic white	Non-Hispanic black	American Indian or Alaska Native	Asian or Pacific Islander	Hispanic	Ratio of rate, non-Hispanic black and non- Hispanic white
		Int	ant mortality rates	per 1,000 live birt	hs in specifie	d group	
United States ¹	6.76	5.66	13.43	8.54	4.74	5.51	2.37
Alabama	9.49	7.60	14.09	*	*	6.58	1.85
Alaska	6.52	4.68	*	10.15	*	*	*
Arizona	6.69	6.21	13.12	7.77	5.22	6.53	2.11
Arkansas	8.04	6.78	14.00	*	*	5.67	2.06
California	5.19	4.73	11.19	7.46	4.33	4.88	2.37
Colorado	6.11	5.20	13.53	*	4.52	6.98	2.60
Connecticut	6.24	4.59	13.87	*	4.21	7.03	3.02
Delaware	8.24	5.78	13.87	*	*	7.53	2.40
District of Columbia	12.80	4.19	18.63	*	*	5.67	4.45
Florida	7.20	5.73	12.90	*	5.25	5.38	2.25
Georgia	8.05	5.92	12.74	*	5.58	4.87	2.15
Hawaii	6.35	4.21	21.08	*	6.75	5.74	5.01
Idaho	6.56	6.13	*	*	*	7.60	*
Illinois	7.16	5.66	13.81	*	5.52	5.95	2.44
Indiana	7.84	6.91	15.96	*	*	6.40	2.31
lowa	5.35	5.00	10.36	*	7.19	5.71	2.07
Kansas	7.51	6.87	15.73	*	*	7.08	2.29
Kentucky	6.98	6.45	12.45	*	*	6.17	1.93
Louisiana	9.65	6.56	14.53	*	*	5.14	2.21
Maine	6.51	6.36	*	*	*	*	*
Maryland	7.76	5.23	12.77	*	5.35	5.39	2.44
Massachusetts	4.97	4.19	9.95	*	3.58	5.95	2.37
Michigan	7.72	5.91	15.42	*	4.80	7.66	2.61
Minnesota	5.28	4.59	10.46	9.48	5.20	4.30	2.28
Mississippi	10.64	6.88	15.13	23.19	*	6.38	2.20
Missouri	7.46	6.35	14.44	*	4.81	5.36	2.27
Montana	6.49	5.77	*	9.82	*	*	*
Nebraska	5.99	5.41	12.32	*	*	5.29	2.28
Nevada	6.20	5.47	13.04	*	5.36	5.56	2.38
New Hampshire	5.54	5.35	*	*	*	*	*
New Jersey	5.24	3.49	11.74	*	3.80	5.15	3.36
New Mexico	6.01	6.24	*	7.29	*	5.54	*
New York	5.67	4.47	11.22	*	3.38	5.10	2.51
North Carolina	8.47	6.36	15.16	12.76	5.80	6.32	2.38
North Dakota	6.50	5.98	*	11.28	*	*	*
Ohio	7.90	6.43	15.32	*	5.42	6.62	2.38
Oklahoma	8.11	7.85	13.94	8.50	6.74	5.11	1.78
Oregon	5.69	5.59	8.85	8.96	5.38	5.61	1.58
Pennsylvania	7.49	5.74	14.52	*	5.53	7.87	2.53
Rhode Island	6.65	3.98	11.66	*	*	8.73	2.93
South Carolina	8.75	6.15	14.01	*	*	6.69	2.28
South Dakota	6.70	5.70	*	11.12	*	*	*
Tennessee	8.57	6.85	15.33	*	7.15	6.31	2.24
Texas	6.34	5.67	12.32	*	4.35	5.60	2.17
Utah	4.89	4.73	*	*	7.38	4.86	*
Vermont	5.75	5.62	*	*	*	*	*
Virginia	7.43	5.65	14.17	*	4.59	5.64	2.51
Washington	4.88	4.27	7.80	9.68	4.22	4.49	1.83
West Virginia	7.50	7.25	15.29	*	*	*	2.11
Wisconsin	6.44	5.28	15.46	9.17	5.95	6.24	2.93
Wyoming	6.95	6.53	*	*	*	*	*
Puerto Rico	8.77						
Virgin Islands	6.21	*	6.28	*	*	*	*
Guam	11.53	*	*	*	11.91	*	*

^{*} Figure does not meet standards of reliability or precision; based on fewer than 20 deaths in the numerator.

NOTES: Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. Persons of Hispanic origin may be of any race. In this table, Hispanic women are classified only by place of origin, and non-Hispanic women are classified by race; see reference 2.

⁻⁻⁻ Data not available.

¹Excludes data for Puerto Rico, Virgin Islands, and Guam.

Table 4. Percentage of live births with selected maternal and infant characteristics, by race of mother: United States, 2007 linked file

Characteristic	All races	White	Black	American Indian or Alaska Native	Asian or Pacific Islander
Birthweight:					
Less than 1,500 grams	1.51	1.21	3.16	1.29	1.16
Less than 2,500 grams	8.2	7.2	13.6	7.5	8.1
Preterm births ¹	12.7	11.7	18.0	13.9	10.9
Births to mothers under 20 years	10.5	9.5	17.2	18.4	3.1
Fourth and higher-order births	11.3	10.8	14.9	19.1	6.4
Births to unmarried mothers	39.7	34.8	71.2	65.3	16.6
Mothers born in the 50 states and D.C	75.1	77.2	84.7	93.3	19.4

¹Born prior to 37 completed weeks of gestation.

NOTES: Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. In this table, all women, including Hispanic women, are classified only according to their race; see reference 2. Twenty-seven states reported multiple-race data on the birth certificate for 2007 that were bridged to the single-race categories of the 1977 standards for comparability with other states; see reference 2. D.C. is District of Columbia.

Table 5. Percentage of live births with selected maternal and infant characteristics, by Hispanic origin of mother and race of mother for mothers of non-Hispanic origin: United States, 2007 linked file

			Hispanic							Non-Hispanic		
Characteristic	All origins ¹	Total	Mexican	Puerto Rican	Cuban	Central and South American	Other and unknown Hispanic	Total ²	White	Black		
Birthweight:												
Less than 1,500 grams	1.51	1.23	1.14	1.93	1.30	1.17	1.46	1.61	1.21	3.25		
Less than 2,500 grams	8.2	7.0	6.5	9.9	7.7	6.7	8.6	8.7	7.3	14.0		
Preterm births ³	12.7	12.3	11.9	14.5	13.4	12.1	14.1	12.8	11.5	18.3		
Births to mothers under 20 years	10.5	14.2	14.9	17.2	8.2	9.0	17.2	9.2	7.5	17.3		
Fourth and higher-order births	11.3	14.4	15.9	12.2	5.3	11.2	12.3	10.2	9.1	15.1		
Births to unmarried mothers	39.7	51.3	50.1	63.4	41.8	52.7	51.3	35.9	27.8	71.6		
Mothers born in the 50 states and D.C	75.1	38.9	36.9	73.0	48.0	14.4	76.3	87.0	94.0	87.5		

¹Includes origin not stated.

NOTES: Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. In this table, all women, including Hispanic women, are classified only according to their race; see reference 2. Twenty-seven states reported multiple-race data on the birth certificate for 2007 that were bridged to the single-race categories of the 1977 standards for comparability with other states; see reference 2. D.C. is District of Columbia.

²Includes races other than black or white.

³Born prior to 37 completed weeks of gestation.

Table 6. Live births and infant, neonatal, and postneonatal deaths and mortality rates, by race and Hispanic origin of mother and birthweight: United States, 2007 linked file, and percent change in birthweight-specific infant mortality, 2000–2007 linked file

Live births Infant deaths Neonatal deaths Postneonatal deaths Infant deaths Neona All races¹ 4,316,233 29,153 19,094 10,059 6.75 4.4 Less than 2,500 grams 355,745 19,963 16,005 3,959 56.12 44.9 Less than 1,500 grams 65,249 15,717 13,523 2,194 240.88 207.2	2 2.33 9 11.13 5 33.63	mortality rate, 2000–2007
Less than 2,500 grams	9 11.13 5 33.63	**-2.0
	5 33.63	
	5 33.63	**-5.5
2000 than 1,000 gramo		-1.4
Less than 500 grams	1 24.44	1.6
500-749 grams		**-4.6
750–999 grams		-1.1
1,000-1,249 grams		-6.3
1,250–1,499 grams		-4.6
1,500-1,999 grams		-5.1
2,000–2,499 grams		**-7.9
2,500 grams or more	5 1.54	**-7.3
2,500–2,999 grams	5 2.60	**-9.4
3,000–3,499 grams	4 1.47	**-11.3
3,500–3,999 grams		**-9.6
4,000-4,499 grams	8 0.89	-6.8
4,500-4,999 grams	5 1.12	-9.3
	* *	-13.6
Not stated		
White	7 1.94	-1.6
Less than 2,500 grams	5 9.57	**-5.3
Less than 1,500 grams	3 28.12	-1.1
Less than 500 grams	5 17.64	0.4
500-749 grams 6,939 3,221 2,788 433 464.19 401.7	9 62.40	-5.1
750–999 grams	39.16	-1.7
1,000–1,249 grams	1 18.63	-6.3
1,250–1,499 grams	5 11.81	-4.0
1,500-1,999 grams	9.01	-1.5
2,000–2,499 grams	9 4.83	**-8.0
2,500 grams or more	2 1.35	**-7.1
2,500–2,999 grams	8 2.37	**-10.0
3,000–3,499 grams	2 1.31	**-11.4
3,500–3,999 grams	1 0.97	**-8.6
4,000–4,499 grams	5 0.78	-8.9
4,500–4,999 grams	9 0.95	-6.2
5,000 grams or more	* *	*
Not stated		
Black		**-4.2
Less than 2,500 grams		**-5.0
Less than 1,500 grams		-1.8
Less than 500 grams		3.1
500-749 grams		-5.8
750–999 grams		3.6
1,000–1,249 grams		-5.5
1,250–1,499 grams		-6.5
1,500–1,999 grams		-11.0
2,000–2,499 grams		-4.6 ** 0.5
2,500 grams or more		**-9.5
2,500–2,999 grams		-6.9 ** 15.0
3,000–3,499 grams		**-15.0
3,500–3,999 grams		-13.8
4,000–4,499 grams	* 1.73 *	-1.7 *
4,500—4,555 grains	* *	*
5,000 grains of more		
Not stated		

22

Table 6. Live births and infant, neonatal, and postneonatal deaths and mortality rates, by race and Hispanic origin of mother and birthweight: United States, 2007 linked file, and percent change in birthweight-specific infant mortality, 2000-2007 linked file—Con.

		Num	ber, 2007		М	Percent change in infant		
Race and birthweight	Live births	Infant deaths	Neonatal deaths	Postneonatal deaths	Infant	Neonatal	Postneonatal	mortality rate, 2000–2007
American Indian or Alaska Native ²	49,443	456	225	231	9.22	4.55	4.67	11.1
Less than 2,500 grams	3,706	235	170	65	63.41	45.87	17.54	1.8
Less than 1,500 grams	637	174	142	32	273.16	222.92	50.24	2.2
Less than 500 grams	71	56	52	3	788.73	732.39	*	-12.2
500–749 grams	115	64	54	10	556.52	469.57	*	22.4
750–999 grams	124	16	12	4	*	*	*	*
1,000–1,249 grams	138	20	11	8	144.93	*	*	*
1,250–1,499 grams	189	18	11	6	*	*	*	*
1,500–1,999 grams	710	28	14	14	39.44	*	*	*
2,000–2,499 grams	2,359	33	14	19	13.99	*	*	-10.6
2,500 grams or more	45,729	220	54	166	4.81	1.18	3.63	12.4
2,500–2,999 grams	8,417	75	22	52	8.91	2.61	6.18	44.9
3,000–3,499 grams	18,380	81	20	62	4.41	1.09	3.37	-7.2
3,500–3,999 grams	14,198	51	8	43	3.59	*	3.03	18.9
4,000–4,499 grams	3,940	8	2	6	*	*	*	*
4,500–4,999 grams	692	3	1	2	*	*	*	*
5,000 grams or more	102	2	1	1	*	*	*	*
Not stated	8	1	1	_				
Asian or Pacific Islander	254,488	1,216	860	357	4.78	3.38	1.40	-1.8
Less than 2,500 grams	20,674	845	705	141	40.87	34.10	6.82	-8.0
Less than 1,500 grams	2,947	677	586	91	229.73	198.85	30.88	-1.9
Less than 500 grams	309	278	269	9	899.68	870.55	*	3.8
500–749 grams	460	228	191	37	495.65	415.22	80.43	8.3
750–999 grams	502	78	59	18	155.38	117.53	*	-8.2
1,000–1,249 grams	731	42	30	12	57.46	41.04	*	-16.3
1,250–1,499 grams	945	51	36	15	53.97	38.10	*	-23.8
1,500–1,999 grams	3,809	74	59	14	19.43	15.49	*	**-29.8
2,000–2,499 grams	13,918	95	60	35	6.83	4.31	2.51	-17.2
2,500 grams or more	233,792	365	149	216	1.56	0.64	0.92	-4.9
2,500-2,999 grams	58,566	123	62	62	2.10	1.06	1.06	-21.1
3,000–3,499 grams	108,085	157	59	97	1.45	0.55	0.90	18.9
3,500–3,999 grams	55,218	64	20	44	1.16	0.36	0.80	-12.8
4,000–4,499 grams	10,476	20	7	12	1.90	*	*	*
4,500–4,999 grams	1,265	1	_	1	*	*	*	*
5,000 grams or more	182	_	_	_	*	*	*	*
Not stated	22	6	6	-				
Hispanic	1,062,779	5,855	3,952	1,903	5.51	3.72	1.79	-1.4
Less than 2,500 grams	73,906	4,044	3,286	758	54.72	44.46	10.26	-2.5
Less than 1,500 grams	13,029	3,083	2,674	409	236.63	205.23	31.39	0.4
Less than 500 grams	1,338	1,107	1,084	23	827.35	810.16	17.19	0.6
500–749 grams	2,397	1,140	970	170	475.59	404.67	70.92	-0.4
750–999 grams	2,646	455	325	130	171.96	122.83	49.13	5.1
1,000–1,249 grams	2,978	236	180	56	79.25	60.44	18.80	5.0
1,250-1,499 grams	3,670	145	115	30	39.51	31.34	8.17	-19.6
1,500–1,999 grams	13,907	454	320	134	32.65	23.01	9.64	-0.5
2,000–2,499 grams	46,970	507	292	215	10.79	6.22	4.58	-6.7
2,500 grams or more	988,836	1,802	656	1,145	1.82	0.66	1.16	**-12.1
2,500–2,999 grams	193,314	639	262	376	3.31	1.36	1.95	**-13.4
3,000–3,499 grams	435,518	736	254	482	1.69	0.58	1.11	**-12.9
3,500–3,999 grams	283,054	319	87	233	1.13	0.31	0.82	**-23.6
4,000–4,499 grams	66,396	82	35	47	1.24	0.53	0.71	-0.8
4,500–4,999 grams	9,367	16	10	6	*	*	*	*
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
5,000 grams or more	1,187	9	8	1	*	*	*	*

Table 6. Live births and infant, neonatal, and postneonatal deaths and mortality rates, by race and Hispanic origin of mother and birthweight: United States, 2007 linked file, and percent change in birthweight-specific infant mortality, 2000-2007 linked file—Con.

		Num	ber, 2007		М	ortality rate p	,	Percent change in infant mortality
Race and birthweight	Live births	Infant deaths	Neonatal deaths	Postneonatal deaths	Infant	Neonatal	Postneonatal	rate, 2000–2007
Non-Hispanic white	2,310,333	13,005	8,329	4,676	5.63	3.61	2.02	-1.2
Less than 2,500 grams	168,570	8,272	6,699	1,574	49.07	39.74	9.34	**-7.1
Less than 1,500 grams	27,839	6,236	5,482	755	224.00	196.92	27.12	-2.4
Less than 500 grams	2,844	2,462	2,408	54	865.68	846.69	18.99	0.7
500–749 grams	4.641	2.108	1.829	280	454.21	394.10	60.33	**-7.7
750–999 grams	5.478	824	633	191	150.42	115.55	34.87	-5.4
1,000–1,249 grams	6.611	479	358	121	72.45	54.15	18.30	-10.4
1,250–1,499 grams	8,265	363	253	109	43.92	30.61	13.19	1.6
1,500–1,999 grams	33,554	853	565	288	25.42	16.84	8.58	-5.6
2,000–2,499 grams	107,177	1,183	652	531	11.04	6.08	4.95	-7.6
2,500 grams or more	2,141,599	4,695	1,593	3,102	2.19	0.74	1.45	**-4.4
2,500–2,999 grams	377,594	1,603	631	972	4.25	1.67	2.57	**-8.0
3,000–3,499 grams	879,971	1,819	566	1,254	2.07	0.64	1.43	**-9.2
3,500–3,999 grams	674,054	994	297	697	1.47	0.44	1.03	-3.9
4,000–4,499 grams	181,723	227	78	148	1.25	0.43	0.81	-8.1
4,500–4,999 grams	25,647	43	15	28	1.68	*	1.09	- 5.1
5,000 grams or more	2,610	8	5	3	*	*	*	*
Not stated	164	38	38	-				
Non-Hispanic black	627,191	8,351	5,484	2,867	13.31	8.74	4.57	-2.1
Less than 2,500 grams	87,496	6,342	4.933	1,410	72.48	56.38	16.12	**-4.1
Less than 1,500 grams	20,411	5,362	4,456	907	262.70	218.31	44.44	-1.1
Less than 500 grams	2,765	2,382	2,289	93	861.48	827.85	33.63	3.0
500–749 grams	4.365	1,884	1,480	404	431.62	339.06	92.55	-5.2
750–999 grams	4.019	587	382	205	146.06	95.05	51.01	3.9
1,000–1,249 grams	4,414	303	188	115	68.65	42.59	26.05	-4.9
1,250–1,499 grams	4,848	206	116	90	42.49	23.93	18.56	-4.4
1,500–1,999 grams	16,874	425	241	183	25.19	14.28	10.85	-9.6
2,000–2,499 grams	50,211	556	236	320	11.07	4.70	6.37	-5.9
2,500 grams or more	539,607	1.964	506	1,458	3.64	0.94	2.70	**-7.8
2,500–2,999 grams	158,045	845	245	600	5.35	1.55	3.80	-5.6
3,000–3,499 grams	240,922	757	174	583	3.14	0.72	2.42	**-14.0
3,500–3,999 grams	114,380	288	66	222	2.52	0.72	1.94	-14.0 -11.9
	22,709	57	14	42	2.52	v.50 *	1.85	4.6
4,000–4,499 grams			5	8	Z.31 *	*	1.00	4.0
4,500–4,999 grams	3,115	13	2	8 2	*	*	*	*
5,000 grams or more	436	4 45	45	2				
Not stated	88	45	45	_				

^{*} Figure does not meet standards of reliability or precision; based on fewer than 20 deaths in the numerator.

NOTES: Infant deaths are weighted, so numbers may not exactly add to totals due to rounding. Neonatal is less than 28 days and postneonatal is 28 days to under 1 year. Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. Persons of Hispanic origin may be of any race. In this table, Hispanic women are classified only by place of origin, and non-Hispanic women are classified by race; see reference 2.

^{**} Statistically significant at p < 0.05 level.

^{...} Category not applicable.

⁻ Quantity zero.

¹Includes races other than white or black.

²Includes Aleuts and Eskimos.

Table 7. Infant deaths and mortality rates for the five leading causes of infant death, by race and Hispanic origin of mother: United States, 2007 linked file

[Rates per 100,000 live births in specified group]

Cause of death (based on International Classification		All races		Non-	-Hispanic	white	Nor	n-Hispanic	black		erican India aska Nativ		Pa	Asian or cific Island	
of Diseases, Tenth Revision, 1992)	Rank	Number	Rate	Rank	Number	Rate	Rank	Number	Rate	Rank	Number	Rate	Rank	Number	Rate
All causes		29,153	675.4		13,005	562.9		8,351	1,331.5		456	922.3		1,216	477.8
Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99) Disorders related to short gestation and low	1	5,823	134.9	1	2,867	124.1	2	1,037	165.3	1	91	184.1	1	284	111.6
birth weight, not elsewhere classified(P07)	2	4,863	112.7	2	1,767	76.5	1	1,864	297.2	3	47	95.1	2	212	83.3
Sudden infant death syndrome (R95) Newborn affected by maternal	3	2,461	57.0	3	1,341	58.0	3	677	107.9	2	70	141.6	4	55	21.6
complications of pregnancy (P01)	4	1,773	41.1	4	751	32.5	4	599	95.5	6	17	*	3	78	30.6
Accidents (unintentional injuries) (V01–X59)	5	1,283	29.7	5	690	29.9	5	381	60.7	4	34	68.8	8	32	12.6

Cause of death (based on International Classification	Total Hispanic ³			Mexican ⁴			Puerto Rican ⁵			Central and South American ⁶		
of Diseases, Tenth Revision, 1992)	Rank	Number	Rate	Rank	Number	Rate	Rank	Number	Rate	Rank	Number	Rate
All causes		5,855	550.9		3,914	542.1		528	770.9		777	457.5
Congenital malformations, deformations and chromosomal abnormalities (Q00–Q99) Disorders related to short gestation and low	1	1,502	141.3	1	1,067	147.8	2	94	137.3	1	190	111.9
birth weight, not elsewhere classified (P07)	2	900	84.7	2	568	78.7	1	112	163.5	2	141	83.0
Sudden infant death syndrome (R95) Newborn affected by maternal	3	310	29.2	4	199	27.6	3	40	58.4	6	26	15.3
complications of pregnancy (P01)	4	286	26.9	3	201	27.8	4	19	*	3	36	21.2
Accidents (unintentional injuries) (V01–X59)	8	142	13.4	9	98	13.6	9	12	*	11	14	*

^{...} Category not applicable.

NOTES: Reliable cause-specific infant mortality rates cannot be computed for Cuban women because of the small number of infant deaths (88). Race and Hispanic origin are reported separately on birth certificates. Race categories are consistent with 1977 Office of Management and Budget standards. Persons of Hispanic origin may be of any race. In this table, Hispanic women are classified only by place of origin, and non-Hispanic women are classified by race; see reference 2. Twenty-seven states reported multiple-race data on the birth certificate for 2007 that were bridged to the single-race categories of the 1977 standards for comparability with other states; see reference 2.

^{*} Figure does not meet standards of reliability or precision; based on fewer than 20 deaths in the numerator.

¹For American Indian or Alaska Native women, Bacterial sepsis of newborn (P36) was the fifth leading cause of death with 18 deaths.

²For Asian or Pacific Islander women, Newborn affected by complications of placenta, cord and membranes (P02) was the fifth leading cause of death with 41 deaths and a rate of 16.1.

³For Hispanic women, Newborn affected by complications of placenta, cord and membranes (PO2) was the fifth leading cause of death with 230 deaths and a rate of 21.6.

⁴For Mexican women, Newborn affected by complications of placenta, cord and membranes (P02) was the fifth leading cause of death with 155 deaths and a rate of 21.5.

⁵For Puerto Rican women, Newborn affected by complications of placenta, cord and membranes (PO2) was tied for the fourth leading cause of death with 19 deaths.

⁶For Central and South Americans, Newborn affected by complications of placenta, cord and membranes (P02) and Neonatal hemorrhage (P50–52,54) were tied for the fourth leading cause of death, each with 28 deaths and a rate of 16.5.

Table 8. Number and percentage of preterm-related infant deaths and preterm-related infant mortality rates, by race and Hispanic origin of mother: United States, 2000–2007 linked files

Year	All races and origins	Non-Hispanic white	Non-Hispanic black	American Indian or Alaska Native	Asian or Pacific Islander	Total Hispanic ¹	Mexican	Puerto Rican	Central and South American
			Number of	of preterm-re	elated infar	nt deaths			
2007. 2006. 2005. 2004. 2003. 2002. 2001.	10,498 10,303 10,364 10,180 10,331 9,965 9,767	4,104 4,134 4,206 4,171 4,358 4,342 4,289	3,755 3,709 3,655 3,641 3,615 3,581 3,561	111 100 86 83 91 90 79	430 358 401 378 364 321 280	1,753 1,868 1,880 1,752 1,761 1,540 1,436	1,276 1,229 1,266 1,192 1,163 1,018 951	208 221 218 195 200 190 196	269 252 241 238 256 192 189
2000	9,673	4,141	3,586	96	298	1,411	929	189	170
			Percent of total	infant death	s that are	preterm–rela	ited		
2007. 2006. 2005. 2004. 2003. 2002. 2001. 2000.	36.0 36.1 36.5 36.5 36.9 35.6 35.5 34.6	31.6 32.1 32.0 32.1 32.9 32.6 32.2 30.8	45.0 45.9 46.3 46.1 44.6 44.9	24.3 25.3 23.8 22.4 24.2 24.6 19.6 27.7	35.4 32.6 35.5 35.3 34.1 31.9 29.6 30.5	29.9 33.2 34.0 33.4 34.2 31.3 31.0 30.9	32.6 32.0 33.0 32.2 32.4 29.9 29.8 29.4	39.4 41.2 41.4 40.7 41.8 40.3 39.9 39.6	34.6 33.7 34.0 35.7 37.4 30.1 31.3 32.3
2007. 2006. 2005. 2004. 2003. 2002. 2001. 2000.	2.43 2.42 2.50 2.48 2.53 2.48 2.43 2.38	1.78 1.79 1.84 1.82 1.88 1.89 1.84	5.99 6.01 6.26 6.29 6.28 6.19 6.04 5.93	n-related infa 2.25 2.10 1.92 1.89 2.11 2.12 1.89 2.30	1.69 1.49 1.74 1.65 1.65 1.52 1.40 1.49	1.65 1.80 1.91 1.85 1.93 1.76 1.69 1.73	1.77 1.71 1.83 1.76 1.78 1.62 1.56 1.60	3.04 3.30 3.44 3.19 3.42 3.31 3.40 3.25	1.58 1.52 1.59 1.66 1.89 1.52 1.56

¹Includes Cuban and other and unknown Hispanic. Cuban data are not shown separately because of small numbers of infant deaths.

NOTES: Preterm-related deaths are those where the infant was born preterm (before 37 completed weeks of gestation) with the underlying cause of death assigned to one of the following categories from the International Classification of Diseases, Tenth Revision: K550, P000, P010, P011, P015, P020, P021, P027, P070-P073, P102, P220-229, P250-279, P280, P281, P360-369, P520-523, and P77. Twenty-seven states reported multiple-race data on the birth certificate for all of 2007 that were bridged to the single-race categories of the 1977 standards for comparability with other states; see reference 2.

²Rate per 1,000 live births in specified group.

Technical Notes

Differences between period and cohort data

From 1983–1991, NCHS produced linked files in a birth cohort format (44). Beginning with 1995 data, linked files are produced first using a period format and then using a birth cohort format. The 2007 period linked file contains a numerator file that consists of all infant deaths occurring in 2007 that have been linked to their corresponding birth certificates, whether the birth occurred in 2006 or in 2007. In contrast, the 2007 birth cohort linked file will contain a numerator file that consists of all infant deaths occurring to babies born in 2006, whether the death occurred in 2007 or 2008. Beginning with 1995 data, the period linked file is the basis for all official NCHS linked file statistics.

Weighting

In 2007, a record weight was added to the linked file to compensate for the 1.6 percent of infant death records that could not be linked to their corresponding birth certificates. This procedure was initiated in 1995. Records for Puerto Rico, Virgin Islands, and Guam were not weighted. The percentage of records linked varied by registration area (from 93.6 to 100.0 percent, with all but six areas—Alaska, Arizona, California, Louisiana, Nevada, and Texas—at 97.5 percent or higher) (Table I). The number of infant deaths in the linked file for the 50 states and the District of Columbia was weighted to equal the sum of the linked plus unlinked infant deaths by state of occurrence at birth and age at death (less than 7 days, 7–27 days, and 28 days to under 1 year). The addition of the weight reduced the potential for bias in comparing infant mortality rates by characteristics.

The 2007 linked file started with 29,182 infant death records. Of these records, 28,715 were linked; 467 were unlinked because corresponding birth certificates could not be identified. The 29,182 linked and unlinked records contained 29 records of infants whose mothers' usual place of residence was outside of the United States. These 29 records were excluded to derive a weighted total of 29,153 infant deaths for 2007.

Comparison of infant mortality data between linked file and vital statistics mortality file

The overall infant mortality rate from the 2007 period linked file of 6.75 is the same as from the 2007 vital statistics mortality file (4). The number of infant deaths differs slightly from the number in the mortality file (29,138) (4). Differences in numbers of infant deaths between the two data sources are primarily due to geographic coverage differences. For the vital statistics mortality file, all deaths occurring in the 50 states or the District of Columbia are included regardless of the place of birth of the infant. In contrast, to be included in the U.S. linked file, both the birth and death must occur in the 50 states or the District of Columbia (the territory linked file is a separate file). Weighting of the linked file also may contribute to small differences in numbers and rates by specific variables between these two data sets.

Table I. Percentage of infant death records that were linked to corresponding birth records: United States and each state, Puerto Rico, Virgin Islands, and Guam, 2007 linked file

ruerto nico, virgini islanus, and Guain, 2007	illikeu ille
Area	Percent linked by state of occurrence of death
United States ¹	98.4
Alabama	100.0 95.6 97.0 100.0 95.7 100.0 100.0 100.0 99.6 100.0
Georgia Hawaii Idaho. Illinois Indiana. Iowa Kansas. Kentucky. Louisiana Maine	99.4 100.0 100.0 98.5 99.7 100.0 100.0 99.1 93.7 100.0
Maryland. Massachusetts Michigan. Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire	99.8 99.3 99.6 100.0 99.8 99.6 100.0 100.0 96.5 100.0
New Jersey . New Mexico . New York (excluding New York City) New York City . North Carolina . North Dakota . Ohio . Oklahoma . Oregon . Pennsylvania . Rhode Island	99.2 98.3 98.0 99.1 99.9 100.0 98.5 99.5 100.0 99.6 100.0
South Carolina South Dakota Tennessee. Texas. Utah Vermont Virginia. Washington West Virginia Wisconsin Wyoming	100.0 100.0 100.0 93.6 99.0 100.0 99.7 99.8 100.0 100.0
Puerto Rico	99.7 90.0 100.0

¹Excludes data for Puerto Rico, Virgin Islands, and Guam.

1989 and 2003 revisions of U.S. Standard Certificate of Live Birth

This report includes 2007 data on items that are collected on both the 1989 revision of the U.S. Standard Certificate of Live Birth (unrevised) and the 2003 revision of the U.S. Standard Certificate of Live Birth (revised) (3). The 2003 revision is described in detail elsewhere (45–47).

Maternal education, prenatal care, and smoking during pregnancy

Data for educational attainment, prenatal care, and tobacco use, although collected on both the revised and unrevised certificates, are not considered comparable between revisions. Because the 2007 linked file has birth records from both 2006 and 2007, the reporting areas for these three items from the 2003 revised certificate are those that were revised by January 1, 2006. Nineteen states had implemented the revised birth certificate by January 1, 2006: California, Delaware, Florida, Idaho, Kansas, Kentucky, Nebraska, New Hampshire, New York (excluding New York City), North Dakota, Ohio, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, and Wyoming. Data for Florida are excluded from the smoking results because the state's birth certificate question on smoking is not comparable with the 2003 revision (3). Data for California are excluded from the smoking and the prenatal care results because while the state revised the certificate, it did not revise these items (3).

However, maternal education, prenatal care, and smoking during pregnancy continue to have important relationships with infant mor-

Table II. Infant mortality rates for 2007, by trimester of pregnancy prenatal care began, smoking status during pregnancy, and education of mother: 19-state reporting area as of January 1, 2006

[Rates per 1,000 live births in specified group]

NOTES: Rates are based on data from California, Delaware, Florida, Idaho, Kansas, Kentucky, Nebraska, New Hampshire, New York (excluding New York City), North Dakota, Ohio, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, and Wyoming. These states had revised the birth certificate as of January 1, 2006; see "Methods" and "Technical Notes." Information on smoking status excludes data for California and Florida. Information on prenatal care excludes data for California.

tality rates for smokers, those with late or no prenatal care, or those with less than a high school education (Table II). Analyses of these important variables will be expanded when all of the states adopt the 2003 revision.

Marital status

National estimates of births to unmarried women are based on two methods of determining marital status. In 2007, marital status was based on a direct question in 48 states and the District of Columbia. In the two states that used inferential procedures to compile birth statistics by marital status (Michigan and New York), a birth is inferred as nonmarital if either of the following factors, listed in priority-of-use order, is present: a paternity acknowledgment was received or the father's name is missing (3).

Multiple race

For the birth certificates in the 2007 data year, multiple race was reported by 27 states (both revised and unrevised): California, Colorado, Delaware, Florida, Georgia (for births occurring after January 1 only), Hawaii, Idaho, Indiana, Iowa, Kansas, Kentucky, Michigan (for births at most facilities), Minnesota, Nebraska, New Hampshire, New York (excluding New York City), North Dakota, Ohio, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Washington, and Wyoming (3). Twenty-three states reported multiple race in 2006 (48). Data from the vital records of the remaining states, the District of Columbia, and New York City followed 1977 Office of Management and Budget standards in which a single race is reported (49,50). In addition, these areas report the minimum set of four races as stipulated in the 1977 standards, compared with the minimum of five races mandated by the 1997 standards (3).

To provide uniformity and comparability of the data during the transition period before multiple-race data are available for all reporting areas, the responses of those who reported more than one race are bridged to a single race. Multiple race is imputed to a single race (American Indian or Alaska Native, Asian or Pacific Islander, black, or white) according to the combination of races, Hispanic origin, sex, and age indicated on the birth certificate, using methods described elsewhere (3,9,51).

Period of gestation

The primary measure used to determine the gestational age of the newborn is the interval between the first day of the mother's last normal menstrual period (LMP) and the date of birth. It is subject to error for several reasons, including imperfect maternal recall or misidentification of the LMP because of postconception bleeding, delayed ovulation, or intervening early miscarriage. These data are edited for LMP-based gestational ages that are clearly inconsistent with the infant's plurality and birthweight (see below), but reporting problems for this item persist and may occur more frequently among some subpopulations and among births with shorter gestations (52,53).

The U.S. Standard Certificate of Live Birth contains an item, "obstetric estimate of gestation," which is compared with length of gestation computed from the date the LMP began when the latter appears to be inconsistent with birthweight. This is done for normal-

weight births of apparently short gestations and very-low-birthweight births reported to be full term. The obstetric estimate was also used if the LMP date was not reported. The period of gestation for 5.8 percent of the births in 2007 was based on the obstetric estimate of gestation. For 97 percent of these records, the obstetric estimate was used because the LMP date was not reported. For the remaining 3 percent, the obstetric estimate was used because it was consistent with the reported birthweight, whereas the LMP-based gestation was not. In cases where the reported birthweight was inconsistent with both the LMP-computed gestation and the clinical estimate of gestation, the LMP-computed gestation was used and birthweight was reclassified as "not stated." This was necessary for about 0.01 percent of all birth records in 2007 (3).

Birthweight

For the linked file, not-stated birthweight was imputed for 4,048 records, or 0.09 percent of the birth records in 2007 when birthweight was not stated but the period of gestation was known. In this case, birthweight was assigned the value from the previous record with the same period of gestation, maternal race, sex, and plurality. If birthweight and period of gestation were both unknown, the not-stated value for birthweight was retained. This imputation was done to improve the accuracy of birthweight-specific infant mortality rates, because the percentage of records with not-stated birthweight was higher for infant deaths (3.09 percent before imputation) than for live births (0.11 percent before imputation). The imputation reduced the percentage of not-stated records to 0.37 percent for infant deaths and 0.01 percent for births. The not-stated birthweight cases in the natality/birth file, as distinct from the linked file, are not imputed (3).

Cause-of-death classification

The mortality statistics presented in this report were compiled in accordance with World Health Organization (WHO) regulations, which specify that member nations classify and code causes of death in accordance with the current revision of the *International Statistical Classification of Diseases and Related Health Problems* (ICD). The ICD provides the basic guidance used in virtually all countries to code and classify causes of death. The ICD not only details disease classification but also provides definitions, tabulation lists, the format of the death certificate, and the rules for coding cause of death. Cause-of-death data presented in this report were coded by procedures outlined in annual issues of the *NCHS Instruction Manual* (54,55).

In this report, tabulations of cause-of-death statistics are based solely on the underlying cause of death. The underlying cause is defined by WHO as "the disease or injury which initiated the train of events leading directly to death, or the circumstances of the accident or violence which produced the fatal injury" (5). It is selected from the conditions entered by the physician in the cause-of-death section of the death certificate. When more than one cause or condition is entered by the physician, the underlying cause is determined by the sequence of conditions on the certificate, ICD provisions, and associated selection and modification rules. Generally, more medical infor-

mation is reported on death certificates than is directly reflected in the underlying cause of death. This is captured in NCHS multiple cause-of-death statistics (56,57).

About every 10–20 years, the ICD is revised to take into account advances in medical knowledge. Effective with deaths occurring in 1999, the United States began using the ICD's Tenth Revision (ICD–10) (5); during the 1979–1998 period, causes were coded and classified according to the Ninth Revision (ICD–9) (58).

Changes in classification of causes of death due to these revisions may result in discontinuities in cause-of-death trends. Measures of this discontinuity are essential to the interpretation of mortality trends and are discussed in detail in other NCHS publications (4.59.60).

Tabulation lists and cause-of-death ranking

The cause-of-death rankings for ICD-10 are based on the List of 130 Selected Causes of Infant Death. The tabulation lists and rules for ranking leading causes of death are published in the NCHS *Instruction Manual, Part 9, ICD-10 Cause-of-Death Lists for Tabulating Mortality Statistics, Effective 1999* (61). Briefly, category titles that begin with the words "other" and "all other" are not ranked to determine the leading causes of death. When one of the titles that represents a subtotal is ranked [for example, Influenza and pneumonia (J10–J18)], its component parts are not ranked [in this case, Influenza (J10–J11) and Pneumonia (J12–18)].

Preterm-related causes of death

Preterm-related causes of death are those causes that have a direct etiological connection to preterm birth. For an underlying cause of death to be considered preterm-related, 75 percent or more of infants whose deaths were attributed to that cause had to be born preterm, and the cause of death had to be a direct consequence of preterm birth based on a clinical evaluation and review of the literature (42). The cause-of-death categories included in this grouping are shown in the Table 8 footnote. Causes that are incidental to preterm birth (for example, a motor vehicle accident involving a preterm infant) are not included. This grouping of preterm-related causes probably underestimates the total impact of preterm-related infant death, as some ICD categories (notably those beginning with the words "other" and "all other") had a high percentage of preterm infant deaths but lacked sufficient specificity to be able to establish the etiologic connection to prematurity with any degree of certainty. Further details on the development of this cause-of-death grouping are available in related publications (42,43).

Computation of rates

Infant mortality rates are the most commonly used index for measuring the risk of dying during the first year of life. For the linked birth/infant death data set, they are calculated by dividing the number of infant deaths in a calendar year by the number of live births registered for the same period and are presented as rates per 1,000 or per 100,000 live births. Both the mortality file and the linked birth/infant death file use this computation method, but due to unique numbers of infant deaths (as explained in the section above on the comparison of these two files), the rates will often differ for specific

variables, particularly for race and ethnicity. Infant mortality rates use the number of live births in the denominator to approximate the population at risk of dying before the first birthday. In contrast to the infant mortality rates based on live births, infant death rates, used only in age-specific death rates with the mortality file, use the estimated population of persons under 1 year of age as the denominator.

For all variables, not-stated responses were shown in tables of frequencies but were dropped before rates were computed. Rates per 1,000 live births display two digits after the decimal place to provide a more precise and sensitive measurement. For rates per 100,000 live births (by cause of death), the infant mortality rate is shown for one decimal place. Adding an additional decimal for rates per 100,000 does not increase precision as it does for rates per 1,000.

Infant death records for the 50 states and the District of Columbia in the U.S. linked file are weighted so that the infant mortality rates are not underestimated for those areas that did not successfully link all records.

Random variation in infant mortality rates

The number of infant deaths and live births reported for an area represent complete counts of such events. As such, they are not subject to sampling error, although they are subject to nonsampling error in the registration process. However, when the figures are used for analytic purposes, such as the comparison of rates over time, for different areas, or among different subgroups, the number of events that actually occurred may be considered as one of a large series of possible results that could have arisen under the same circumstances (62). As a result, numbers of births, deaths, and infant mortality rates are subject to random variation. The probable range of values may be estimated from the actual figures according to certain statistical assumptions.

In general, distributions of vital events may be assumed to follow the normal distribution. When the number of events is large, the relative standard error (RSE) is usually small. When the number of events is small (perhaps less than 100) and the probability of such an event is small, considerable caution must be observed in interpreting the data. Such infrequent events may be assumed to follow a Poisson probability distribution (3,4). Estimates of RSEs and 95 percent confidence intervals are shown below.

The formula for the RSE of infant deaths and live births is:

$$RSE(D) = 100 \cdot \sqrt{\frac{1}{D}},$$

where D is the number of deaths, and

$$RSE(B) = 100 \cdot \sqrt{\frac{1}{B}}$$

where B is the number of births.

For example, suppose that for group A, the number of infant deaths was 497, while the number of live births was 81,555, yielding an infant mortality rate of 6.09 infant deaths per 1,000 live births.

The RSE of the deaths =
$$100 \cdot \sqrt{\frac{1}{497}} = 4.49$$
,

while the RSE of the births = $100 \cdot \sqrt{\frac{1}{81,555}} = 0.35$.

The formula for the RSE of the infant mortality rate (IMR) is:

$$RSE(IMR) = 100 \cdot \sqrt{\frac{1}{D} + \frac{1}{B}}.$$

The RSE of the IMR for the example above

$$= 100 \cdot \sqrt{\frac{1}{497} + \frac{1}{81,555}} = 4.50.$$

Normal distribution—When the number of events is greater than 100, the normal distribution is used to estimate the 95 percent confidence intervals as follows:

Lower:
$$R_1 - 1.96 \cdot R_1 \cdot \frac{\mathsf{RSE}(R_1)}{100}$$

Upper:
$$R_1 + 1.96 \cdot R_1 \cdot \frac{RSE(R_1)}{100}$$

Thus, for Group A:

Lower:
$$6.09 - \left(1.96 \cdot 6.09 \cdot \frac{4.50}{100}\right) = 5.55.$$

Upper:
$$6.09 + \left(1.96 \cdot 6.09 \cdot \frac{4.50}{100}\right) = 6.63.$$

The chances are 95 out of 100 that the true IMR for Group A lies somewhere in the 5.55–6.63 interval.

Poisson distribution—When the number of events in the numerator is less than 100, the confidence interval for the rate can be estimated based on the Poisson distribution using the values in Table III.

Lower: IMR •
$$L(0.95, D_{adi})$$

where $D_{\rm adj}$ is the adjusted number of infant deaths (rounded to the nearest integer) used to take into account the RSE of the number of infant deaths and live births. It is computed as:

$$D_{\text{adj}} = \frac{D \cdot B}{D + B}$$

L (0.95, $D_{\rm adj}$) and U (0.95, $D_{\rm adj}$) refer to the values in Table III corresponding to the value of $D_{\rm adj}$.

For example, suppose that for Group B the number of infant deaths was 53, the number of live births was 9,241, and the infant mortality rate was 5.74.

$$D_{\text{adj}} = \frac{53 \cdot 9,241}{53 + 9,241} = 53.$$

Therefore, the 95 percent confidence interval (using the formula in Table III for 1–99 infant deaths) is:

Lower: 5.74 • 0.74907 = 4.30.

Upper: 5.74 • 1.30802 = 7.51.

Comparison of two infant mortality rates—If either of the two rates to be compared is based on fewer than 100 deaths, compute

Table III. Values of L and U for calculating 95 percent confidence limits for numbers of events and rates when the number of events is less than 100

	0.02532 0.12110 0.20622 0.27247 0.32470 0.36698	5.57164 3.61234 2.92242 2.56040	51	0.74457 0.74685	1.31482 1.31137
	0.20622 0.27247 0.32470	2.92242 2.56040	52		1 31137
	0.27247 0.32470	2.56040	53		
	0.32470			0.74907	1.30802
		0.00007	54	0.75123	1.30478
		2.33367	55	0.75334	1.30164
		2.17658	56	0.75539	1.29858
	0.40205	2.06038	57	0.75739	1.29562
	0.43173	1.97040	58	0.75934	1.29273
	0.45726	1.89831	59	0.76125	1.28993
0	0.47954	1.83904	60	0.76311	1.28720
1	0.49920	1.78928	61	0.76492	1.28454
	0.51671	1.74680		0.76669	1.28195
2			62		
3	0.53246	1.71003	63	0.76843	1.27943
4	0.54671	1.67783	64	0.77012	1.27698
5	0.55969	1.64935	65	0.77178	1.27458
6	0.57159	1.62394	66	0.77340	1.27225
7	0.58254	1.60110	67	0.77499	1.26996
8	0.59266	1.58043	68	0.77654	1.26774
9	0.60207	1.56162	69	0.77806	1.26556
0	0.61083	1.54442	70	0.77955	1.26344
1	0.61902	1.52861	71	0.78101	1.26136
2	0.62669	1.51401	72	0.78244	1.25933
3	0.63391	1.50049	73	0.78384	1.25735
4	0.64072	1.48792	74	0.78522	1.25541
5	0.64715	1.47620	75	0.78656	1.25351
6	0.65323	1.46523	76	0.78789	1.25165
7	0.65901	1.45495	77	0.78918	1.24983
8	0.66449	1.44528	78	0.79046	1.24805
	0.66972	1.43617	79	0.79171	1.24630
9	0.67470	1.42756	80	0.79294	1.24459
0					
1	0.67945	1.41942	81	0.79414	1.24291
2	0.68400	1.41170	82	0.79533	1.24126
3	0.68835	1.40437	83	0.79649	1.23965
4	0.69253	1.39740	84	0.79764	1.23807
5	0.69654	1.39076	85	0.79876	1.23652
6	0.70039	1.38442	86	0.79987	1.23499
7	0.70409	1.37837	87	0.80096	1.23350
8	0.70766	1.37258	88	0.80203	1.23203
9	0.71110	1.36703	89	0.80308	1.23059
0	0.71441	1.36172	90	0.80412	1.22917
1	0.71762	1.35661	91	0.80514	1.22778
2	0.72071	1.35171	92	0.80614	1.22641
3	0.72370	1.34699	93	0.80713	1.22507
4	0.72660	1.34245	94	0.80810	1.22375
5	0.72941	1.33808	95	0.80906	1.22245
6	0.73213	1.33386	96	0.81000	1.22117
7	0.73476	1.32979	97	0.81093	1.21992
8	0.73732 0.73981	1.32585 1.32205	98	0.81185 0.81275	1.21868 1.21746
9	0.74222	1.32205	99	0.012/5	1.21/40

the confidence intervals for both rates and check to see if they overlap. If so, the difference is not statistically significant at the 95 percent level. If they do not overlap, the difference is statistically significant. If both of the two rates to be compared $(R_1 \text{ and } R_2)$ are based on 100 or more deaths, the following *z*-test may be used to define a significance test statistic:

$$z = \frac{R_1 - R_2}{\sqrt{R_1^2 \left(\frac{\text{RSE}(R_1)}{100}\right)^2 + R_2^2 \left(\frac{\text{RSE}(R_2)}{100}\right)^2}}$$

If |z| is greater than or equal to 1.96, then the difference is statistically significant at the 0.05 level, and if |z| is less than 1.96, the difference is not significant.

Availability of linked file data

Beginning with 2005, the public-use file no longer includes geographic detail; such files are available upon special request. Linked file data are available for download from: http://www.cdc.gov/nchs/data_access/VitalStatsOnline.htm. Prebuilt tables are available at VitalStats from: http://www.cdc.gov/nchs/VitalStats.htm. Data are also available in issues of Vital and Health Statistics, Series 20, and the National Vital Statistics Reports from the NCHS website: http://www.cdc.gov/nchs.

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Contents

Abstract
Introduction
Methods
Data by maternal and infant characteristics
Results and Discussion
Trends in infant mortality
Infant mortality by race and Hispanic origin of mother
Infant mortality by state
Sex of infant
Multiple births
Age at death
Period of gestation
Birthweight
Maternal age
Live birth order
Marital status
Nativity
Leading causes of infant death
Preterm-related causes of death
References
List of Detailed Tables
Technical Notes

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National Center for Health Statistics

Edward J. Sondik, Ph.D., *Director* Jennifer H. Madans, Ph.D., *Associate Director* for Science

Division of Vital StatisticsCharles J. Rothwell, M.S., *Director*