

LOW BIRTH WEIGHT

The Low Birth Weight (LBW) rate refers to the percentage of live births weighing less than 2,500 grams. Multiple births, such as twins and triplets, are more likely to be LBW than singleton births. To remove the effect of multiple births on the total LBW rate, the rate for singleton births only is often reported. The singleton LBW rate is the percentage of singleton live births weighing less than 2,500 grams.

IMPORTANCE

LBW can have consequences for short and long term health. For example, low birth weight babies are at higher risk for childhood illnesses,¹ delays in social and motor development^{2,3} and chronic diseases such as diabetes and respiratory diseases in adulthood.^{4,5} The interaction among these factors further complicates the issue of LBW births and prevention efforts.

Low birth weight babies include:

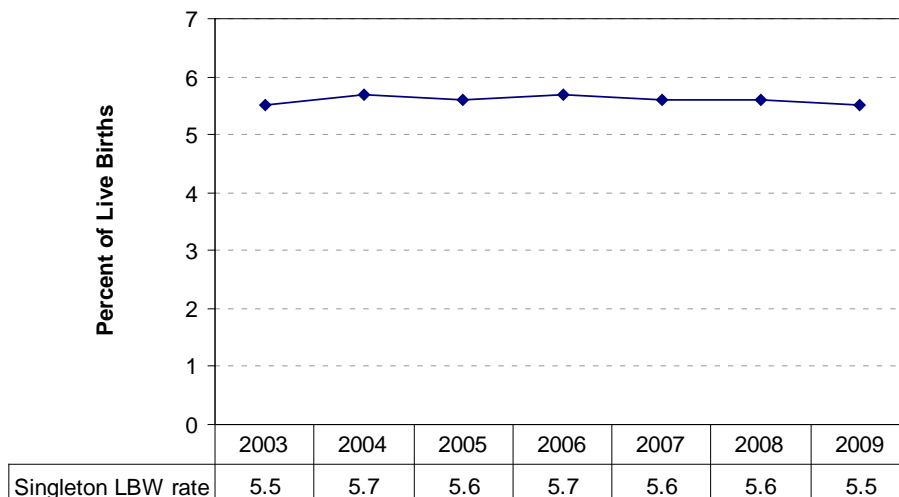
- Babies who have not had adequate time to develop because they are born prematurely (less than 37 weeks gestation), and
- Full term or preterm babies who have weights below the norm for their gestational age because of restricted growth in utero.

A range of risk factors are associated with LBW, including maternal age less than 20 or greater than 35 years, smoking and illicit drug use during pregnancy, low socioeconomic status and obstetric factors.^{6,7}

STATUS/TRENDS

In 2009, 7.4% of all babies born to women living in Toronto were LBW births, corresponding to approximately 2,300 babies. More than 7 in 10 (72%) of these LBW babies were singletons. The singleton LBW rate for Toronto was 5.5% in 2009. This rate remained relatively stable since 2003 (Figure 1).

Figure 1: Singleton Low Birth Weight Rate,¹ Toronto, 2003 to 2009



¹ The singleton low birth weight rate refers to the percentage of singleton live births weighing less than 2,500 grams.

Data Source: Inpatient Discharges 2003 to 2009, Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO, Date Extracted: December 2010.

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LBW is more common in lower income communities in Toronto. The Unequal City report released by Toronto Public Health in 2008 shows that there was a gradient in the singleton LBW rate across income quintiles in Toronto.⁸ These income quintiles were constructed by grouping census tracts based on the percent of individuals living under the Statistics Canada low income cut-off (before tax) (LICO). Each quintile consisted of 20% of the city's population. Quintile 1 was the "lowest" income quintile and included census tracts with the greatest proportion of people living below the LICO. Quintile 5 was the "highest" income quintile and included census tracts with the least proportion of people living below LICO. There was a step-wise decrease in the singleton LBW rate from quintile 1 through quintile 5. The rate in quintile 1 (6.3%) was 40% higher than the rate in quintile 5 (4.5%), and the difference was significant.

The LBW rate for singleton live births in the rest of the Greater Toronto Area (GTA) (Durham, Halton, Peel and York) was 5.0% in 2009. The Toronto rate was slightly higher than the rate for the rest of the GTA, but the difference was marginally significant.

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