

Patient Education Page  
**Keeping Baby Safe**  
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It sounds morbid and unpleasant to study how infants die, but it makes sense to learn how and why bad outcomes occur in order to develop ways to get good outcomes and prevent suffering.

To put this in perspective, we estimate that prior to understanding about forceps delivery, clean surgical C-section, the value of clean water, proper hygiene, antibiotics, and vaccinations, we lost something like half the children born before they turned six, and many of the mothers. By 1911, we know that the US recorded 135 infant deaths per thousand live births. That was better.

Now, more than 100 years later, the infant death rate is even lower. There are about two deaths per thousand live births for the countries of Monaco, Japan, and Norway. Not so impressive is that in the US it is at about 6 per thousand; right next to Serbia and Poland.

Looking at South Dakota, we are 35th in the 50 states, at about seven per thousand, which is about the same as in Chile and Russia. And what is more challenging is that the rate for the South Dakota Indian population is almost twice as high as whites, more than 12 per thousand, and is the highest rate for Indian populations per state in the country, right there with the worst poverty.

Why is the rate so high in the US and especially South Dakota? Experts explain that infant deaths increase when babies are born too early and immature, or with malformations; often because mothers are too young, are smoking, are drinking alcohol, are not getting enough folic acid vitamins, are over/under-nourished and are not receiving enough prenatal advice and monitoring from a healthcare provider. After delivery, deaths happen because parents lack knowledge of safe baby-sleep practices; or of enough dad, family and community support when times get tough.

So what can we do better in this state and country in keeping our babies safe? The most important effort should be to nourish, educate, protect, and empower the girl or young woman who will be their mother, and by enhancing her health prior to getting pregnant, which is called "preconception care."

Dad shouldn't be off the hook, but after all, it's up to mom. She chooses to protect her future baby by delaying pregnancy until her body is mature enough, by avoiding smoke and alcohol, and by taking vitamins with folic acid, all BEFORE pregnancy might happen. Then, once pregnant, she should carry through with what is called "prenatal care," getting the advice and monitoring of a health care professional, all in keeping her baby safe.

How can we better empower her? Studying how babies can die will help us keep them safe.