



Message from the President



This has been a busy and productive year for the Network. The Surveillance and Guidelines Committee deserves a huge pat-on-the-back and a well-deserved breather after the release of *Guidelines for Conducting Birth Defects Surveillance* this summer. I recently received a phone call from someone who had accessed it from the website and who had further questions about the Network and birth defects surveillance. Isn't that terrific? Speaking of the website, the Publications and Communications committee has been busy on enhancements and a template that I hope we will be seeing soon. The last issue of the monthly NBDPN News Brief outlined several ongoing collaborative research projects from the State Data Committee. The Birth Defect Prevention Month Packet looks terrific, as usual, thanks to the Education and Outreach Committee. Membership and Elections developed a survey to determine the needs of the membership. The ELSI committee created templates for interstate data exchange agreements and HIPAA fact sheets for families and health care professionals. Finally, the Annual Meeting committee is busy planning for our next meeting in Scottsdale, Arizona, on January 24-26, 2005.

The Executive Committee was able to meet face-to-face at the National Center for Birth Defects and Developmental Disabilities (NCBDDD) meeting in Washington, DC, at the end of July for a planning session. We also hope to meet for an extended session just prior to our annual meeting. We will discuss additional funding sources, different organizational structures, etc. We have started by looking at other similar organizations (NAACCR, AMCHP, AUCD) for comparison. We also discussed trying to tap into funds targeted for Environmental Health Tracking.

I appreciate all of the hard work and dedication of the members this year. I look forward to seeing everyone again in January in sunny Scottsdale!

-- LAURIE SEAVER, GREENWOOD, SC
NBDPN PRESIDENT

News from the CDC



Centers for Birth Defects Research and Prevention

The Centers for Birth Defects Research and Prevention (CBDRP) have continued to collaborate on the National Birth Defects Prevention Study (NBDPS), which now includes over 18,000 completed maternal interviews and over 7,000 infant DNA samples. The NBDPS data have been presented at numerous national scientific meetings in 2004 including the: Society for Epidemiologic Research, Teratology Society, American Society for Human Genetics, and International Society for Pharmacoepidemiology. Two epidemiologic studies of the combined NBDPS data have been recently published:

Centers for Disease Control and Prevention. Evaluation of an Association Between Loratadine and Hypospadias. *MMWR* 2004;53(10):219-221.

Cleves MA, Savell Jr VH., Raj S, Zhao W, Correa A, Werler MM, Hobbs CA. Maternal use of acetaminophen and nonsteroidal anti-inflammatory drugs (NSAIDs), and muscular ventricular septal defects. *Birth Defects Research (Part A)*, 2004;70:107-113.

Several NBDPS investigators will present their most recent research projects at the NBDPN meeting in January 2005. Topics will include: 1) predictors of vitamin use during pregnancy; 2) over-the-counter medication use in pregnancy; 3) the association between congenital heart defects and small for gestational age; 4) maternal dietary fat intake and gastroschisis; and 5) fertility treat-

ments associated with oral clefts, neural tube defects, and hypospadias.

We are also very pleased that centers have been able to build on the foundation of the NBDPS to seek supplemental funding. There are now two CDC funded supplemental studies. The California Birth Defects Monitoring Program is in their 2nd year of funding for the supplemental spina bifida study. They continue to make progress in innovative methods to identify risk factors, including utilizing the mid-pregnancy serum samples collected as part of maternal alpha fetoprotein screening. And, the National Foundation for Facial Reconstruction recently received funding to assist two NBDPS sites in examining follow-up of infants with craniofacial malformations, access to treatment, and resulting outcomes into early childhood. In addition, four of the centers have NIH grants supporting work related to the centers project.

Birth Defects Surveillance Cooperative Agreements

On Tuesday, August 31, 2004, CDC issued a program announcement for new birth defects cooperative agreements. In addition to surveillance and prevention activities, the cooperative agreements will focus on activities to improve the access of children with birth defects to health services and early intervention programs as well as the evaluation of those activities. CDC received 29 applications, and notification of funding will be made in late January/early February 2005. Due to continuing resolution for FY2005 budget, it is still unclear how many programs will be funded.

CDC held another birth defects regional meeting in Chicago, IL, on October 25-26, 2004. The participating states included: IA, IL, IN, MI, MN, OH, and WI. The agenda included discussions of case ascertainment methodology, prenatal surveillance, data sharing issues, quality assurance, and birth defects prevention and intervention strategies. Dr. Angela Lin presented the anatomy and coding of congenital heart malformations. The next regional meeting will cover the eastern states in spring 2005.

Updates from the Birth Defects Prevention Research Team

Preconceptional Health Message Development Project

The Birth Defects Prevention Research Team worked with members of the Fetal Alcohol Prevention Team to develop two preconception health message programs for an Adherence Program Library established by a company called Medem. Medem has designed a physician-patient communications network (<http://www.medem.com>) to facilitate online access to information and care for more than 100,000 physicians, their practices, and their patients - thus saving physicians time while allowing patients to feel more connected to their healthcare providers. The Adherence Program Library, which is still in development, will house a number of programs on different health topics. Physicians will be able to sign their patients up for programs that are pertinent to their particular needs and institute periodic, relevant email health messages directly to those patients. This program is offered without charge to physicians and their patients.

The first program is called *Pregnancy planning: what to know about your health before you get pregnant* and is targeted to women who are actively planning a pregnancy. The messages in this program describe how women can prepare for pregnancy. The second program is called *Healthy living: how women of childbearing age can gain and maintain a healthy lifestyle* - and is targeted to all women of childbearing age who are not planning a pregnancy but who are capable of becoming pregnant. The messages in this program describe how women can maintain or improve their overall health.

Development of Folic Acid Material for Children in Grades 5 through 8

The Birth Defects Prevention Research team is still working through the IRB approval process in testing drafts of the folic acid material with pre- and early adolescents. We hope to gain approval and begin pre-testing the new material within the next three months. The end result of this process will be a new folic acid brochure or informational card that is appropriate for use with school children in grades five through eight. Once this piece

has been approved and published, it will be made available online along with CDC's other free folic acid materials

(<http://www2.cdc.gov/ncbddd/faorder>).

New Folic Acid PowerPoint Presentation for Use with College-Age Women Now Available

Over the summer, the Birth Defects Prevention Research team designed and tested a PowerPoint presentation about folic acid for use with college-age women who are not contemplating pregnancy in the near future. If you plan to address this population and would like to use this presentation, please contact Katie Kilker at kpk9@cdc.gov.

Science Ambassador

The NCBDDD announces the continued development of a pilot project for science teachers entitled the Science Ambassador Program. This program aims to foster excitement and interest in public health among students and teachers and to nurture future public health professionals during their formative educational years.

This professional development program allows top current and future science teachers to work directly with the CDC scientists in an interactive format. During the first two years of this pilot project, eighteen teachers participated in the workshop. There are currently twenty-two completed lesson plans based on workshop topics with even more continuing the development process. These lesson plans meet National Science Education Standards, ensuring that teachers across the nation can use them in their classrooms. Lesson plans developed during the first two years are available to all teachers through NCBDDD's website (<http://www.cdc.gov/ncbddd>) and the Georgia Learning Connections website (<http://www.glc.k12.ga.us/gei/NCBDDD/homepg.htm>). We urge you to share this information with your state contacts to ensure that teachers around the U.S. can benefit from lesson plans developed by the Science Ambassador Program. Also, be sure to check back with us soon for more information on our website about the upcoming 2005 program!

Prevention of Birth Defects and Other Adverse Pregnancy Outcomes Associated with Diabetes

Maternal diabetes has been associated with an increased risk of various major defects and other adverse pregnancy outcomes. Good control of diabetes before and during pregnancy is effective in reducing risks to both the mother and her baby. However, the extent to which recommendations for control of diabetes before and during pregnancy are being followed by health care providers and diabetic women is unclear. In recent years, the prevalence of diabetes in the population has increased, and there is some evidence to suggest that the prevalence of diabetes also might be increasing among pregnant women. These findings raise a number of questions about factors that might modify the risk of birth defects associated with diabetes and that need to be addressed in order to develop effective measures to prevent an increasing prevalence of diabetes associated birth defects.

Currently, the NCBDDD is conducting an exploratory, qualitative study among health care providers and women who have a history of diabetes during pregnancy to obtain information about knowledge and practices related to preconception and prenatal care of diabetic women and possible barriers to diabetes management before and during pregnancy.

Several observations have been made that a number of women with diabetes might not plan their pregnancies and low levels of health literacy might predict poor glycemic control. Such observations underscore the need for more research that will identify effective, targeted health communication strategies for diabetic women.

Detection of Vitamin B₁₂ Deficiency in Clinical Settings

In 1998, the U.S. food supply was fortified with folic acid for birth defect prevention. Some researchers hypothesized that folic acid fortification would mask the anemia of vitamin B₁₂ deficiency because folic acid might correct hematologic but will not correct neurologic manifestations of B₁₂ deficiency. Although the FDA selected a fortification concentration estimated not to mask the anemia of B₁₂ deficiency, it is prudent for public health programs to monitor the timely diagnosis of B₁₂ deficiency. Because clinicians will make

the diagnoses of B₁₂ deficiency, provider practices for B₁₂ deficiency detection are of public health interest.

In collaboration with Emory University physicians and Battelle Centers for Public Health Research and Evaluation, CDC is developing an interactive web-based health care provider education module titled "Why vitamin B₁₂ deficiency should be on your radar screen, a CME update." This CME update covers the natural history of vitamin B₁₂ deficiency, manifestations of low vitamin B₁₂ levels, risk factors, prevalence, screening, detection, diagnosis, management and prevention of vitamin B₁₂ deficiency. Case studies and a post test evaluation are also included. Module testing is completed, and web development is underway.

SFACES

The SFACES (Spanish-language Folic Acid Communication and Evaluation Survey) campaign is currently entering its fifth year. This year, the campaign will not be taking place in select cities. Instead, formative research will be conducted to evaluate the effectiveness of existing campaign materials and messages. The same materials have been used for several years, and we want to make sure that the messages are not outdated. Focus groups with Spanish-speaking Hispanic women of childbearing age will give researchers insight into whether new materials and campaign messages are needed. Researchers from The Media Network are under contract with CDC to assess the need for new materials during this phase of the campaign.

News from NBDPN Liaisons

The National Council on Folic Acid (NCFA) held its Annual Members Meeting and Steering Committee Meeting on July 28, 2004, at the NCBDDD Conference in Washington, DC. Dr. Godfrey P. Oakley received an award from NCFA for all his work in establishing the folic acid guidelines, educating the public and professionals, and ensuring enrichment of breads and cereals. The NCFA

website, <http://www.folicacidinfo.org>, has an award summary and an interview with Dr. Oakley.

The NCFA has scheduled the week of January 24–30, 2005, as National Folic Acid Awareness Week. The Alabama Department of Health has scheduled a two-hour satellite teleconference for Wednesday, January 26, 2005. The keynote speakers will be Godfrey Oakley, José Cordero, and Katherine Wenstrom. Information about the teleconference will be available on their website: <http://www.adph.org> - click on News/Information, Satellite Conferences, Conference Schedule and scroll down the table to the date, 1/26/05. Wyeth Consumer Healthcare is a sponsor of Awareness Week and has offered Edelman Public Relations to develop messages and materials. The theme of the week is Folic Acid – You Don't Know What You're Missing! The NCFA will have sample press releases, letters to the editor, proclamations, and educational kits (posters, pamphlets, book-maker) in pdf files at the NCFA website: <http://www.folicacidinfo.org>.

In August 2004, a letter was sent to the U.S. Health and Human Services 2005 Dietary Guidelines Advisory Committee with a copy to the USDA stressing the importance of enriched grains and fortification with folic acid in the reduction of neural tube defects. The letter stated that until whole grains are enriched with folic acid, the guidelines should encourage consumption of enriched grains as well as a multivitamin to insure adequate folic acid intake.

Adriane Griffen is the Chair Elect and will become the Chair of NCFA in 2006. Adrian is the Director of Public Health Programs for the Spina Bifida Association of America.

-- KAY PEARSON, OKLAHOMA CITY, OK

News from the March of Dimes



Since publication of the last newsletter, the March of Dimes has been working to increase federal funding for birth defects surveillance (BDS), research and prevention programs. On October 11, 2004, Congress adjourned until after the election without finishing the health appropriations bill for fiscal year 2005. The House version of the Labor, Health and Human Services and Education Appropriations bill—which was approved on September 9—recommends a modest increase for the folic acid education campaign and both the House and Senate bills call for increased funding for CDC's NCBDDD. When Congress reconvenes, the March of Dimes will continue its work to ensure these increases are included in the final bill negotiated after the election.

This year, March of Dimes Chapters have led successful advocacy efforts in several states to create and improve birth defects surveillance programs.

Creation By Law:

- The March of Dimes Chapter in Puerto Rico led the advocacy effort to enact legislation that codified the state's BDS registry. The bill was signed by the Governor on September 16, 2004.

Program Improvements:

- In Indiana, the March of Dimes Chapter spearheaded the advocacy effort to improve the state BDS program by including data from additional disorders (developmental and fetal alcohol spectrum disorders) and increasing the reporting age from one to three years.
- In Kansas, the Chapter led the advocacy drive to secure authorizing legislation to improve the statewide birth defects information program (SB 418) by making the case ascertainment system more active.
- In Minnesota, the Chapter led the advocacy effort to enact BDS authorizing legislation to improve data privacy under the program.

- In South Carolina, the Chapter worked to enact legislation to expand the Birth Defects Monitoring system to include additional types of birth defects beyond neural tube defects.

Funding Protection:

- In California, the Chapters worked to protect the California Birth Defects Monitoring Program from proposed budget cuts of more than \$900,000.
- In Colorado, the Chapter led a successful advocacy campaign to deflect budget cuts proposed for the BDS program.
- In Iowa, the Chapter led the advocacy effort to secure earmarked funding from the birth certificate fee for the BDS program.

EMIL WIGODE, WASHINGTON, DC

News from NBDPN Affiliates

The Association of Maternal and Child Health Programs (AMCHP) conference, "**Delivering Results: Improving Pregnancy and Birth**," will take place in Washington, D.C., February 19 - 23, 2005. The conference will address the public health aspects of pregnancy and childbirth, including the prevention of prematurity, provider training, parent education, data systems and tools, best practices, and racial and ethnic disparities in birth outcomes. Participants will also learn about emerging trends and best practices from a broad range of maternal and child health issues. At AMCHP 2005, you'll also network with federal and state policymakers, educators in maternal and child health, community health practitioners, health and social service providers, and family advocates. For more information, visit <http://www.amchp.org/conference>.

Committee News



SURVEILLANCE GUIDELINES AND STANDARDS COMMITTEE (SGSC)

The NBDPN reached a significant milestone in June 2004 with the publication of *Guidelines for Conducting Birth Defects Surveillance*. Many NBDPN members, technical writers, and support from CDC allowed a vision that began over four years ago to become a reality.

There are ten chapters: take a look and tell us what you think. If you did not receive a copy please go to <http://www.nbdpn.org> and click on Guidelines.

The committee is currently reorganizing and planning new projects and areas for development. If you would like to be part of a very dynamic and creative process, consider joining. Contact me at carol.stanton@state.co.us.

-- CAROL STANTON, DENVER, CO

EDUCATION AND OUTREACH COMMITTEE

The 2005 Birth Defects Prevention Month packet has been finalized and is in assembly to date. This year's packet highlights the many challenging facets of Fetal Alcohol Syndrome. The committee has compiled multiple resources on such topics as family support groups, FAS awareness websites, and FAS clinician-based training tools. New to the packet this year are fact sheets for families and health care providers on how HIPAA affects birth defect surveillance and cultural competency resources. These fact sheets are in English and Spanish. As included each year in the packet are lists of suggested activities for Birth Defects Prevention Month, sample letters to legislators, and proclamation templates.

The packet will be distributed in the next few weeks to the state birth defect program contacts, Fetal Alcohol Syndrome state directors, and Children with Special Health Care Needs state directors. Packet materials are available online at <http://nbdpn.org/NBDPN/bdpm2005.html>.

-- DENISE HIGGINS, HELENA, MT

STATE DATA COMMITTEE

A lot of wonderful work continues to be done by the State Data Committee. The 2004 Annual Report has been published and discussions are underway regarding the 2005 report. Requests for data and directory information for the 2005 report will be sent to state programs in November with a January 3, 2005, due date.

Progress has been made on several collaborative projects. Both the Preterm Births and Neural Tube Defects-Mortality/Survival studies are currently analyzing the data they received from 15 and 16 states, respectively. To date, 12 states have agreed to participate in the Abdominal Wall Defects (e.g., gastroschisis and omphalocele) study.

Work groups are also underway for the development of the following: a publication acknowledgement policy; a prevalence terminology paper; national prevalence estimates; a manuscript describing the impact of fortification on birth defects other than neural tube defects; and sessions on research and analysis to be held at the 2005 NBDPN Annual Meeting.

If you would like to become involved with the Data Committee or if you have any questions, please contact Sam Viner-Brown (samv@doh.state.ri.us).

-- SAM VINER-BROWN, PROVIDENCE, RI

PUBLICATIONS AND COMMUNICATIONS COMMITTEE

This fall, the major efforts of this committee have focused on the "Call for Manuscripts" for the 2005 NBDPN annual report, the "Call for Posters" for the 2005 NBDPN Annual meeting, and working on the NBDPN website redesign/overhaul. The template for the website is complete. All of the current information will be available on the main site, and there will be an archive area for information and materials from past years. We hope that it will be easier to find information on the site now. The redesigned site will have a feature for new members to join the NBDPN. Current members will be able to update and renew their membership on-line beginning in late winter 2004/early spring 2005.

-- KIMBERLEA W. HAUSER, TAMPA, FL

ANNUAL MEETING COMMITTEE

The Annual Meeting Committee, co-chaired by Russell Kirby (AL) and Phil Cross (NY), is hard at work finalizing the program for the 2005 Annual Meeting, which will be held January 23-26, 2005, at the La Posada Doubletree Resort in Scottsdale, Arizona. The conference theme is "NBDPN 2005: Advances and Opportunities for Birth Defects Surveillance, Research, and Prevention." Pre-conference activities will include committee meetings and a hands-on record linkage training seminar on January 23rd. The conference will begin on Monday January 24th, with three full days of plenary sessions, concurrent sessions and educational workshops. The agenda has been planned in response to suggestions and recommendations from evaluation forms from the 2004 conference and from a questionnaire sent to members of the Executive and Annual Meeting Committees. There are still many opportunities to make this the best NBDPN conference yet. We need assistance with identifying exhibitors and volunteers to help with the poster session. We are in early stages of planning social activities for the conference. Most of all, we look forward to your attendance and active participation at the conference! If you would like more information, contact Russ Kirby (rkirby@uab.edu), Phil Cross (pkc02@health.state.ny.us) or for details concerning conference registration and logistics, Cara Mai at cwm7@cdc.gov.

-- PHIL CROSS, TROY, NY

-- RUSS KIRBY, BIRMINGHAM, AL

MEMBERSHIP AND ELECTIONS (M&E)

The M&E committee has entered the annual election cycle, and will be sending out the ballot for elected positions in November. We recently assisted the Executive Committee in comparing our organization's structure, function, and staffing to that of similar organizations that address conditions such as cancer, maternal and children's health, and developmental disabilities. This information may help us plan for expanding the services provided by the Network.

--TIM FLOOD, PHOENIX, AZ

ETHICAL, LEGAL, AND SOCIAL ISSUES (ELSI)

Since the spring of 2004, the ELSI Committee has worked extremely hard on interstate data ex-

change agreements and finalizing HIPAA fact sheets for families and health care professionals. The committee created three templates for interstate data exchange agreements that are now posted on the Network website

(<http://www.nbdpn.org/NBDPN/committees/elsi.html>). In addition, a survey on interstate data exchange was created and distributed to all state contacts to obtain information on interstate data exchange specific to birth defects. About 34 of 52 states and territories responded, which yielded a 65.4% participation rate. The results were distributed to all the state contacts and will be presented at the NBDPN 2005 Annual Meeting the morning of January 26, 2005.

With the Education and Outreach Committee (many thanks to Civillia Hill), the committee finalized a fact sheet for families regarding questions and concerns over HIPAA. This fact sheet has been translated into Spanish (thanks to Kim Hauser). The committee also finalized a similar fact sheet for health care providers, which is specific to birth defects surveillance, research, and prevention. Both of these fact sheets are forthcoming on the NBDPN website and will be distributed in the 2005 NBDPN packets. A huge "thanks" goes to all the committee members (and Cara Mai) who helped with these very important projects throughout this year!!!

-- CYNTHIA CASSELL, RALEIGH, NC

NTD SURVEILLANCE AND FOLIC ACID EDUCATION

The committee has several projects at various stages: just completed to early planning stages. We enthusiastically welcome new members, and encourage you to join if you find any of the projects appealing. Contact Mark Canfield at Mark.Canfield@tdh.state.tx.us or Kay Pearson at kayp@health.state.ok.us.

The committee continues to work on completing existing projects:

- 1) 16 states submitted data for the Neural Tube Defect/Infant Mortality Study, totaling approximately 4,000 records. The work group is busy finalizing data analysis and writing results.

- 2) The Folic Acid Surveys to be updated on the NBDPN website summarize information from 18 different surveys, including three national surveys: Behavioral Risk Factor Surveillance System (BRFSS), Pregnancy Risk Assessment Monitoring System (PRAMS) and the Health Care Professional Survey. The update will be coming soon.
- 3) The work group developing the project on the effects of folic acid pre- and post-fortification on non-NTD birth defects is making fantastic progress. This project utilizes data from 23 states from 1995 through 2000. The manuscript should be finalized by November 1, 2004, in time to meet the submission deadline.

Looking to the future, we are in the planning stages for new projects:

- 1) The committee would like to identify cost effective models for NTD recurrence prevention programs. We will be working with the Executive Committee to determine the best approach to obtaining the information.
- 2) There is an interest in developing folic acid curriculum for use in medical schools to educate new physicians entering practice.
- 3) Looking for new avenues to educate women of childbearing age, the committee would like to identify or develop an education pamphlet to include in OB take-home packs or at the six-week postpartum visit, instructing new moms to switch from prenatal vitamins to multivitamins.

-- KAY PEARSON, OKLAHOMA CITY, OK
 -- MARK CANFIELD, AUSTIN, TX

State Profile: Arkansas

Arkansas Center for Birth Defects Research and Prevention

The Arkansas Reproductive Health Monitoring System (ARHMS) was enacted by state law in 1985 by former President Bill Clinton who was then the Governor of Arkansas. After more than

10 years of birth defects surveillance, the Arkansas Center for Birth Defects Research and Prevention (Arkansas Center) was established in 1997 at the University of Arkansas for Medical Sciences (UAMS) in Little Rock by a competitive grant award from CDC.

Charlotte A. Hobbs, M.D., Ph.D., Associate Professor and Chief of the Section of Birth Defects Research in the University of Arkansas for Medical Sciences College of Medicine Department of Pediatrics and the first chairholder of The Pamela D. Stephens Endowed Chair in Birth Defects Research, is the Director of the Arkansas Center for Birth Defects Research and Prevention. In addition to directing the Arkansas Center and the Arkansas Reproductive Health Monitoring System, Dr. Hobbs is an Attending Physician in the Divisions of Neonatology and Emergency Medicine at UAMS College of Medicine and ACH, conducts independent research funded by National Institute of Child Health and Human Development, and is co-investigator of multiple research studies.

The ARHMS plays a key role in the Center's daily operations. Since the establishment of the Arkansas Center, the ARHMS has expanded from a surveillance system with a small staff to a research and prevention organization with clinicians and scientists. These professionals focus on three interdisciplinary research themes: 1) gene-environment interactions; 2) epidemiology and surveillance; and 3) health services research and community interventions. Each research group uses a multidisciplinary approach to advance its understanding of the causes of birth defects and their impact on Arkansas and the nation. Clinicians and experts in pediatrics, neonatology, human genetics, pediatric cardiology, clinical dysmorphism, biostatistics, biochemistry, nutrition, molecular biology, health economics, health services research, and genetic epidemiology combine their skills to advance the Center's research agenda. The Center's partnership with the Arkansas Department of Health facilitates collaboration with public health professionals in maternal and child health, nutrition, health education, and health statistics.

The Arkansas Center's capacity to perform genetic studies was greatly enhanced in 2002 with the support from Arkansas Biosciences Institute

(ABI) through the establishment of the Center's state-of-the-art Genomics Laboratory at Arkansas Children's Hospital Research Institute (ACHRI). The ABI, founded through state appropriations from national tobacco settlement revenues, stimulates important research into areas of health affected by use of tobacco products. The Genomics Laboratory plays a key role in all of the major studies currently underway at the Arkansas Center.

The Arkansas Center also serves as the lead agency for the Arkansas Folic Acid Coalition, which encourages Arkansas women of childbearing age to take a multivitamin containing 400 micrograms of folic acid daily and to eat foods rich in folate to help prevent neural tube defects such as spina bifida. This important message is communicated through various public media, health-care and patient education and consistent involvement in folic acid awareness initiatives.

In addition to the CDC funding, essential funding support has also come from the National Institute of Child Health and Human Development, the Arkansas state legislature, the Arkansas Children's Hospital Research Institute, the Arkansas Biosciences Institute, the Arkansas Blue Cross and Blue Shield Foundation for a Healthier Arkansas and the Pamela D. Stephens Endowed Chair. Through continued support of sponsors and study participants and collaborative efforts, the Arkansas Center will work to combine surveillance, research and prevention to help diminish the consequences of birth defects and help make a difference in the lives of children and families affected by birth defects.

To learn more about the Arkansas Center for Birth Defects Research and Prevention visit <http://arbirthdefectsresearch.uams.edu> or contact Dr. Charlotte Hobbs toll-free at 1-877-662-4567.

Arkansas Children's Hospital Confers The Pamela D. Stephens Endowed Chair in Birth Defects Research to Charlotte A. Hobbs

Charlotte A. Hobbs, M.D., Ph.D., Associate Professor/Section Chief of Birth Defects Research at Arkansas Children's Hospital and University of Arkansas for Medical Sciences and director of the Arkansas Center for Birth Defects Research and Prevention, was invested as the first chair-holder of The Pamela D. Stephens Endowed Chair in Birth Defects Research in a formal ceremony on August 12, 2004, at Arkansas Children's Hospital.

Endowed chairs are essential in recruiting and retaining the best and brightest medical professionals. Arkansas Children's Hospital is the state's only pediatric medical facility and one of the ten largest children's hospitals in the nation. Holding an endowed chair at Arkansas Children's Hospital is a professional honor and distinction that represents the greatest recognition of professional achievement. The endowment fund was made possible by a gift made in memory of Pamela D. Stephens, who passed away in September 2003.



Birth Defects on the Internet



Reveal the inner beauty and meaning of those great statistics: An online tool to help select good color schemes for maps and graphics

<http://www.personal.psu.edu/faculty/c/a/cab38/ColorBrewerBeta.html>

Used up your phone a friend lifeline?

http://www.wirelessrecycling.com/home/donations/march_of_dimes.html

The ABCs of a Healthy Pregnancy

<http://www.cdc.gov/ncbddd/bd/abc.htm>

Note: These sites have been assessed as useful for educational purposes. However, the NBDPN cannot guarantee the accuracy of all of the content on these pages.

Mark Your Calendar



December 8-10, 2004

The Tenth Annual Maternal and Child Health Epidemiology Conference
Atlanta, GA

Contact: MCHEPI@cdc.gov

Website:

<http://www.cdc.gov/reproductivehealth/index.htm>

January 9-11, 2005

Canadian Congenital Anomalies Surveillance Network 3rd Scientific Meeting
Ottawa, Ontario

Website: <http://www.healthcanada.ca/ccasn>

January 24-26, 2005

2005 National Birth Defects Prevention Network Annual Meeting
Scottsdale, AZ

Contact: Cara Mai, cmai@cdc.gov

Website: <http://www.nbdpn.org>

February 19-23, 2005

Association of Maternal and Child Health Programs Annual Conference

“Delivering Results: Improving Pregnancy and Birth”

Washington, D.C.

Contact: Sara Brandspigel,

sbrandspigel@amchp.org

March 1-3, 2005

19th National Conference on Chronic Disease Prevention and Control

Health Disparities: Progress, Challenges, and Opportunities

Atlanta, GA

Website: <http://www.cdc.gov/nccdphp/conference>

March 6-10, 2005

Society of Toxicology 44th Annual Meeting
New Orleans, LA

Contact: <http://www.toxicology.org>

April 20-22, 2005

Environmental Public Health Tracking: Vision to Reality

Atlanta, GA

Contact: Sascha Fielding, epht@cdc.gov

June 25-30, 2005

The Teratology Society 45th Annual Meeting
St. Pete Beach, Florida

Website: <http://teratology.org/meetings/index.htm>

June 27-30, 2005

Epidemiology without Borders

A joint meeting of Society for Epidemiologic Research and Canadian Society for Epidemiology and Biostatistics Annual Meeting

Toronto, Ontario, Canada

Contact: meeting@epiresearch.org

June 27-30, 2005

Society for Pediatric and Perinatal Epidemiologic Research

Annual Meeting

Toronto, Ontario, Canada

Contact: mailto:dmisra@umich.edu

NATIONAL BIRTH DEFECTS PREVENTION NETWORK

EXECUTIVE COMMITTEE

President:	Laurie Seaver (SC)
President-Elect:	Marcia Feldkamp (UT)
Past-President:	Bob Meyer (NC)
Secretary-Treasurer:	Amy Case (TX)
Member-at-Large:	Ruth Merz (HI)
Centers for Disease Control and Prevention:	Larry Edmonds and Cara Mai
March of Dimes:	Joanne Petrini
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NTD Surveillance and Folic Acid Education:	Kay Pearson (OK) and Mark Canfield (TX)
Publications and Communications:	Kimberlea Hauser (FL)
State Data:	Sam Viner-Brown (RI)
Surveillance Guidelines and Standards:	Carol Stanton (CO)

For membership information contact:

Cara Mai at (404) 498-3918 or email: cwm7@cdc.gov

NBDPN Newsletter Editorial Board: Kimberlea Hauser, Civilla Hill, Wendy Nembhard, Russel Rickard, and Cara Mai

The National Birth Defects Prevention Network (NBDPN) is a group of individuals involved in birth defects surveillance, research, and prevention.

This newsletter is published twice a year. If you would like to be added to the mailing list, please contact Cara Mai at cwm7@cdc.gov.

The newsletter and additional information are also available on the internet at <http://www.nbpdn.org>.

Please send comments or questions about this newsletter to Kim Hauser at khauser@hsc.usf.edu