About 1 out of every 33 babies is born with a major birth defect.

Birth defects cause one in five deaths among infants less than a year old.

Birth defects lead to \$2.6 billion per year in hospital costs alone in the U.S.

Selected birth defects counts and birth prevalence, Illinois and US

	Illinois [†]		US [‡]	
Defects	Average annual no. of cases	Birth prevalence*	Average annual no. of cases	Birth prevalence*
Central nervous system				
Anencephalus	33	1.81	1,009	2.51
Spina bifida without anencephalus	51	2.85	1,477	3.68
Cardiovascular				
Transposition of great arteries	48	2.66	1,901	4.73
Tetralogy of Fallot	59	3.27	1,574	3.92
Atrioventricular septal defect (also known as endocardial cushion defect)	65	3.58	1,748	4.36
Hypoplastic left heart syndrome	36	1.99	975	2.43
Orofacial				
Cleft lip with and without cleft palate	156	8.65	4,209	10.47
Cleft palate without cleft lip	87	4.84	2,567	6.39
Musculoskeletal				
Upper limb defect	50	2.77	1,521	3.79
Lower limb defect	26	1.45	763	1.90
Gastroschisis	59	3.26	1,497	3.73
Chromosomal				
Down syndrome	237	13.15	5,132	12.78

per 10,000 live births

Note: Due to variability in the methods used by state birth defects surveillance systems and differences in populations and risk factors, state prevalence estimates may not be directly comparable with national estimates or those of other states.

Preventing birth defects

- The causes of about 70% of birth defects are unknown.
- Many birth defects happen during early pregnancy, often before a woman knows she is pregnant.
- Addressing health risks and behaviors before pregnancy can reduce the risk of poor birth outcomes, including some birth defects.
- All women who could become pregnant should take 400 micrograms of folic acid every day to help prevent serious defects of the baby's brain and spinal cord.

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Illinois's Birth Defect Surveillance System

The Illinois Department of Public Health's (IDPH) Adverse Pregnancy Outcomes Reporting System (APORS) is a statewide system, established in 1986. Information is collected about children with birth defects, very-low birth weights, fetal or neonatal death, prenatal exposure to controlled substances, serious infections, disorders and conditions. This information includes demographic and medical data on infants and their mothers, as well as diagnostic and treatment information.

How birth defects data are used in Illinois

APORS' purpose is twofold. First, families of infants reported to APORS are contacted by local health department nurses to offer a series of home visits and assistance. Infants with some conditions are referred to other IDPH programs for additional follow-up. Second, the collected information is used for public health surveillance of birth defects and other adverse pregnancy outcomes to monitor the status of these conditions for reporting, policy development and research.

t estimates based on pooled data from birth years 2002-2006

[‡] estimates based on pooled data from birth years 1999-2001