

Stillbirth in Inuit and First Nations women higher than for non-Aboriginal residents

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Stillbirth rates in First Nations and Inuit populations in Quebec are higher than in the general population, especially in late gestation and at term, found a new study in *Canadian Medical Association Journal*.

"Aboriginal populations in Canada [First Nations and Inuit] rank at the top of the list of disadvantaged groups with the highest rates of stillbirth in the Western world," writes Dr. Nathalie Auger, Institut national de santé publique du Québec, with coauthors. Rates are 2 times those of the non-Aboriginal population.

Researchers looked at data on 9983 [stillbirths](#) and 2 397 971 live births in Quebec to understand the causes and timing of stillbirths, which are potentially preventable after 28 weeks in Inuit and First Nations women. Rates of stillbirth were 6.8/1000 total births for the Inuit women and 5.7/1000 births for the First Nations women, compared with 3.6/1000 for the non-Aboriginal women. In Inuit women, stillbirths were more likely to be caused by poor fetal growth and short gestation, and placental and related disorders, as well as birth defects. Stillbirths in First Nations women were more likely to be caused by diabetic and hypertensive disorders, although the previous causes were also linked.

Stillbirth rates have fallen for Inuit and non-Aboriginal populations but have not improved for First Nations people. For Aboriginal groups, the risk was higher for late stillbirths (after 28 weeks) and peaked at 37 weeks and beyond, compared with non-Aboriginal groups.

"The gap widened at later gestational ages, and was largest at term, a period when most stillbirths are potentially preventable." write the authors. They suggest that efforts to reduce smoking and manage weight might help prevent stillbirths in some mothers.

"The high rates of stillbirth at term in the Inuit and First Nations groups nonetheless are cause for concern, especially the possibility that quality of antenatal care may underlie the disparities," write the authors.

Provided by Canadian Medical Association Journal

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