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# National Women's Health Report

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## Delaying Childbirth

### *A Reassuring Study*

**T**he decision to delay pregnancy is a growing trend which is expected to continue through the next decade as women decide to pursue educational and professional goals before beginning a family. The number of women who had their first child in their thirties has doubled in the last twenty years. A recent study had some reassuring news for women who are delaying motherhood.

This study of women over thirty who were having their first child revealed that except for a slightly higher risk of low birth weight, their children are not at higher risk than those of women under thirty. The researchers reported no increase in premature

births, stillbirths or infant deaths. The infants of older women were not more likely to be born small or to score lower on the Apgar



test which gives physicians a quick appraisal of the newborn's status. Older mothers do tend to have more complications during pregnancy such as morning

sickness, pregnancy-induced high blood pressure, and bleeding, but these complications are usually manageable. There also was a higher incidence of cesarean births, although there was not a clear indication for the increase. Doctors attribute the good outcomes in older women to good routine medical care.

Although older mothers do have healthy babies, there are other factors women must consider when planning to delay pregnancy. Women become less fertile as they age, and interventions such as *in vitro* fertilization and artificial insemination are not as successful in older women. The incidence of chromosomal abnormalities such as Down Syndrome increases with age, as does the risk of miscarriage. With advances in genetic testing such as amniocentesis and chori-  
*(Continued on page 6...)*

# Health Care in the U.S.

## The Gaps Are Widening

A recent U.S. Government report, "Health United States 1989," revealed that while life expectancy is increasing for white Americans, factors such as high murder rates, AIDS and lack of adequate medical care are curtailing the lives of black Americans. The overall life expectancy for Americans is at an all time

ity has decreased from 20 deaths per 1,000 live births in 1970 to 10.1 deaths in 1987, but the difference between infant mortality rates for black and white babies is even greater. For blacks the infant mortality rate is 17.9, compared to 8.6 for white babies. The United States is ranked 22nd overall among industrialized na-

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**39% of black women received no prenatal care in the first trimester compared to 21% of white women. For blacks the infant mortality rate is 17.9, compared to 8.6 for white babies.**

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high of 75 years; blacks' life expectancy is 69.4 compared to 75.6 for whites. The life expectancy for black men has declined to 65.1 years compared to 75.6 years for white men. "We need to move toward equal health opportunity for our citizens, including the good health information and the family and community support that will help every American make the right choices for healthy and productive lives," said Dr. Louis W. Sullivan, the Secretary of Health and Human Services.

Lack of prenatal care remains a grave problem for black women; 39% of black women received no prenatal care in the first trimester compared to 21% of white women. Infant mortal-

ities in infant mortality. For the first time in over twenty years, the rate of stillbirths among blacks increased 2.4% in 1987. Secretary Sullivan attributed this increase to the widespread use of crack cocaine.

Deaths from heart disease have decreased 33% and strokes have dropped 54% from 1970 to 1987. But those decreases were distributed unevenly between gender and race. Deaths from heart disease decreased 35% for white men, 31% for white women, 28% for black women and 24% for black men. The death rate from strokes is twice as high among blacks as whites.

Lung cancer deaths have risen from 28.4 deaths per

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onic-villus testing, women are now able to obtain accurate information upon which to base their options.

The study population (3,917 women) were private patients who were mainly white, non-smoking, married and college-educated. This is a fairly typical profile of an urban woman who has delayed her pregnancy for her career, but researchers warn that their findings may not be applicable to other populations.

Source: New England Journal of Medicine, 3/8/90, Vol. 322, No. 10, pp. 659-664, 693-694.



100,000 in 1970 to 39.7 deaths in 1987. For black men deaths from lung cancer have risen even more dramatically from 60.8 deaths per 100,000 in 1970 to 84.2 deaths in 1987.

AIDS is also affecting minorities disproportionately. In 1988, blacks accounted for 29% of AIDS cases, up from 25% in 1984. A continued increase in the number of minorities suffering from AIDS is expected.

More than half of premature deaths were associated with lifestyle patterns. The government report suggests that a more healthy lifestyle includes quitting smoking, using seat belts, reducing violence and eating more nutritiously.

