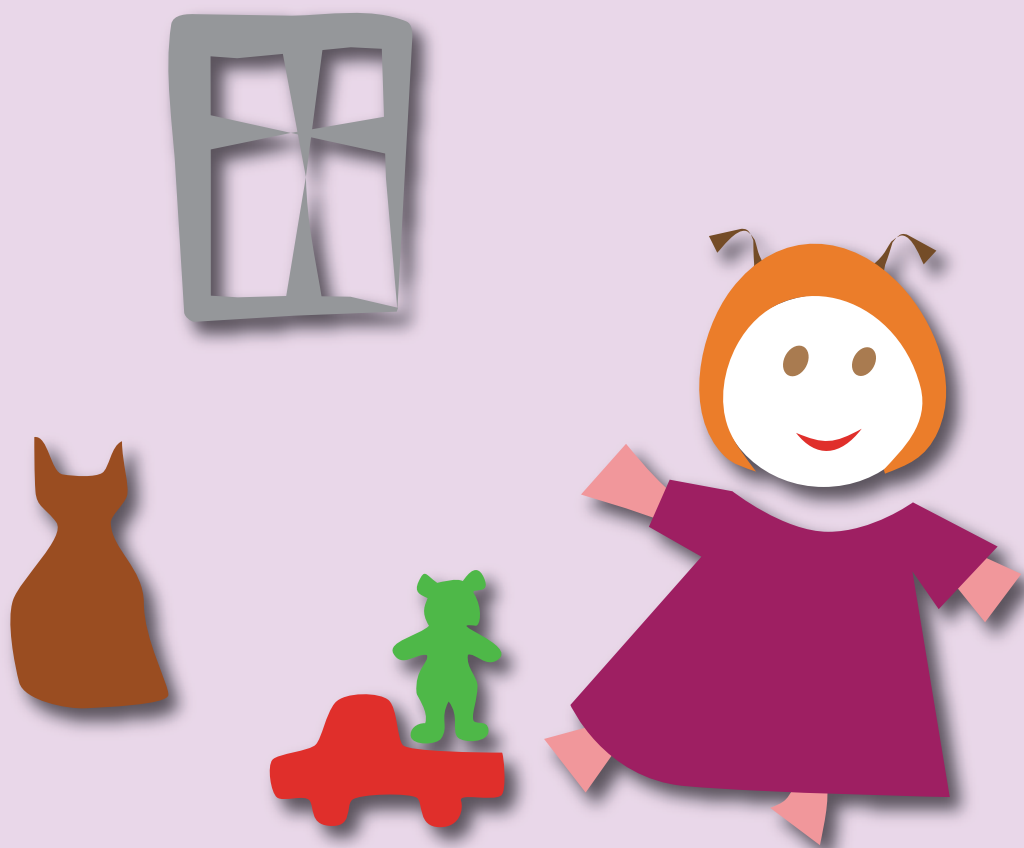


ANNUAL REPORT

2011

with data
for 2009

INTERNATIONAL CLEARINGHOUSE FOR BIRTH DEFECTS SURVEILLANCE AND RESEARCH



Published by

**INTERNATIONAL CLEARINGHOUSE
FOR BIRTH DEFECTS SURVEILLANCE AND RESEARCH
(ICBDSR)**

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with data for 2009

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INTERNATIONAL CLEARINGHOUSE FOR BIRTH DEFECTS SURVEILLANCE AND RESEARCH

ANNUAL REPORT 2011 (WITH DATA FOR 2009)

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Multiple Congenital Anomalies (MCA), 2009

Monica Rittler (South America, ECLAMC)

Jorge López Camelo (South America, ECLAMC)

Introduction

For the year 2009, we received data from 7 programmes, for a total of 2,193 reported cases, among 424,889 births (Table 1). Of these, 567 were reported as syndromes and 872 had at least two major, unrelated congenital anomalies, which is our current case definition of multiple congenital anomaly (MCA). Coding, review of the cases, and comments were done by Monica Rittler, statistical analyses and report writing by Jorge López-Camelo.

Main findings and comments

This year, among the 47 defect groups, 34 were associated with an O/E ratio greater than 1. Five of them reached statistical significance at a $p < 0.001$ level, and are shown in Table 2.

A significant excess, at a $p < 0.001$ level, was found for 4 two-defect combinations (Table 3), while no three-defect combination was significantly increased.

For all comparisons, the data reported from 1992 through 2006, over 5,504,969 births were used as baseline.

Table 1: Cases of multiple congenital anomalies, by programme and number of defects (2009).

PROGRAMME	Births	Total cases Reported	Known etiology (syndromes)	< 2 major unrelated defects	2 Or + unrelatedr defects	Rate
Canada-British Columbia	44,580	272	40	153	79	17.72
Finland	60,635	345	179	39	127	20.94
Israel	42,875	45	3	2	40	9.33
Japan	92,256	709	215	303	191	20.70
Mexico	13,542	40	1	2	37	27.32
South America ECLAMC	128,118	822	129	380	313	24.43
Usa Atlanta	52,346	115	5	11	99	18.91
UK Wales	35,117	117	35	17	65	18.51
TOTAL	424,889	2,193	567	754	872	20.52

Note: Data from Canada British Columbia were not monitored due to lacking denominator (2009 total births)

Table 2: Association rates of defects, among cases with multiple congenital anomalies.

*** $p < 0.001$

Defect group	N	Exp	Rate ratio	Excess	Poisson
Congenital heart defects	363	238.6	1.5	124.4	***
Other kidney/urinary tract defects	136	81.9	1.7	54.1	***
Other Central Nervous System (CNS) defects	80	44.7	1.8	35.3	***
Esophageal atresia	67	52.1	1.3	14.9	
Anorectal atresia	98	83.2	1.2	14.8	
Other eye defects	32	18.0	1.8	14.0	
Hydrocephaly	71	57.3	1.2	13.7	
Club foot	103	89.9	1.1	13.1	
Polydactyly	75	62.2	1.2	12.8	
Situs inversus	20	7.6	2.6	12.4	***
Hypospadias	47	35.2	1.3	11.8	
Spleen anomalies	18	7.1	2.5	10.9	***
Cleft lip with or without cleft palate	87	76.5	1.1	10.5	
Cystic kidney	31	22.2	1.4	8.8	
Spina bifida	34	25.9	1.3	8.1	
Other ear anomalies	16	8.2	2.0	7.8	
Clefts, other types, and facial anomalies	22	14.8	1.5	7.3	
Other gut atresias	14	7.4	1.9	6.6	
Microcephaly	33	26.7	1.2	6.3	
Vessel anomalies	8	1.9	4.3	6.2	
Gastroschisis	17	11.5	1.5	5.5	
Diaphragmatic hernia	32	26.6	1.2	5.4	
Cystic hygroma	11	6.0	1.8	5.0	
Kidney agenesis	38	33.1	1.1	4.9	
Limb reduction defects, other types	26	21.1	1.2	4.9	
Broncho-pulmonary defects	27	22.3	1.2	4.7	
Ambiguous genitalia	38	34.5	1.1	3.5	
Preaxial limb reduction defects	25	22.0	1.1	3.0	
Omphalocele	39	36.1	1.1	2.9	
Malrotation of gut	9	7.0	1.3	2.0	
Craniosostenosis	7	5.1	1.4	1.9	
Duodenal atresia	14	12.2	1.1	1.8	
An-microphthalmia	25	23.4	1.1	1.6	
Sacrum anomalies	4	2.8	1.4	1.2	
Holoprosencephaly	11	10.6	1.0	0.4	
Other gut anomalies	21	20.8	1.0	0.2	
Encephalocele	14	14.6	1.0	-0.6	
Laryngeal/tracheal defects	3	3.6	0.8	-0.6	
Syndactyly	21	21.7	1.0	-0.7	
Other rare defects (sirenomelia, teratoma)	3	3.9	0.8	-0.9	
Exstrophy of cloaca/bladder	4	5.2	0.8	-1.2	
Choanal atresia/stenosis	4	5.5	0.7	-1.5	
Transverse limb reduction defects	14	15.8	0.9	-1.8	
Axial skeleton defects	56	58.2	1.0	-2.2	
Anencephaly	7	11.1	0.6	-4.1	
Cleft palate	47	53.0	0.9	-6.0	
Microtia/anotia	33	39.5	0.8	-6.5	

Table 3: Significant two-defect combinations.

Defect group	N	Exp	Rate ratio	Excess	Poisson
Congenital heart defects	363	238.6	1.5	124.4	***
Other CNS defects + Congenital heart defects	31	16.5	1.9	14.5	***
Congenital heart defects + Situs inversus	13	2.7	4.8	10.3	***
Other CNS defects + other kidney/ urinary tract defects	15	5.6	2.7	9.4	***
Microcephaly + other kidney/urinary tract defects	8	2.2	3.6	5.8	***

Comments:

Although cases from Canada British-Columbia were not included for analysis, they were considered for review and description of the cases. Therefore, some of the numbers given below might differ from those shown in Table 3.

In 2009, congenital heart defects (CHD), anomalies of kidney/urinary tract and of the central nervous system (CNS) (excluding neural tube defects and holoprosencephaly) remained among the most frequent defects, individually as well as in combination.

For the two combinations involving CNS anomalies, no specific CHD or kidney/urinary defect appeared as outstanding, and therefore, no pattern was observed. However, three CNS defects predominated: anomalies of the corpus callosum, of the cerebellum (Dandy Walker included), and of the lower spinal cord/canal (cases are listed below). The latter flagged in combination with kidney/urinary tract anomalies (5/16), and infants with this combination variably showed other caudal defects, such as anomalies of the anus, sacrum and genitalia.

The rate of CNS defects seems to be increased, regardless of other associated defects, and their significantly high association rates with CHD and urinary tract anomalies could simply depend on the overall high rates of these two groups of defects.

Although the observed excess of CNS anomalies could be real, it could at least partially depend on the presence of the other associated defects leading to the detection of less conspicuous anomalies, such as those of the corpus callosum. Furthermore, the increased use of prenatal ultrasound routinely focusing on brain anomalies could also contribute to their excess.

Anomaly of corpus callosum, cerebellum, or lower spinal cord + CHD: 23 cases

Canada British Columbia: cases # 800613,805467,806028,806182

Finland: cases # 5, 44, 68, 74, and 116

Israel: case # 5

Japan: cases # 2153, 3016, and 1104

South America ECLAMC: cases # 41309509, 41801309, 80316109, 80330709, A0504909, and A0517309

USA Atlanta: cases # 16, 18, and 22

Anomaly of corpus callosum or cerebellum + kidney urinary tract anomaly: 6 cases

Israel: cases # 5, and 11

Japan: case # 10132

USA Atlanta: case # 31

South America ECLAMC: cases # A0504909, and 20113909

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Anomaly of lower spinal cord/canal + kidney urinary tract anomaly: 5 cases

Finland: cases # 74, 106, and 116

USA Atlanta: cases # 21, and 62

None of the cases combining situs inversus and CHD showed any other defects, except spleen anomalies. Ten of the 13 cases were provided by Japan and it is not clear if the employed term "heterotaxia" in fact indicated the presence of situs inversus, or was applied as an interpretation based on the type of CHD, with or without spleen anomaly.

Microcephaly is coded as such only if no other brain defects are described, and the other kidney/urinary tract defects shown by these infants were highly variable. No pattern could be recognized among cases with this combination.

According to the definitions, the following cases potentially exposed to three monitored teratogens were detected:

Retinoic acid: 1 case

JAP 7071: Polydactyly of hallux, meatal atresia, hydrocephaly, esophageal and anal atresia, VSD.

Rubella: 5 cases

FIN 236: Left corneal opacity, cataract suspected, ASD secundum, VSD, unspecified anomaly of brain, preauricular tags.

FIN 258: AVSD, anomaly of optic papilla, right microphthalmia, bilateral vesicoureteral reflux, bilateral absence of lacrimal puncta. Micropenis, retention of left testis, laryngomalacia.

USA 55: Corneal opacities and cataracts, small palpebral fissures, ASD, PDA, pulmonary artery stenosis.

SAM A3303709: Microcephaly, anophthalmia, VSD.

SAM 22003109: Microphthalmia, ASD, talipes talovalgus.

Thalidomide: 2 cases

SAM 21709309: Atypical phocomelia of upper limb, complex heart defect.

SAM 21717109: Atypical phocomelia of lower limb, PDA.

Prenatal Diagnosis and Down Syndrome, 2009

Guido Cocchi (Italy: IMER)

Silvia Gualdi (Italy: IMER)

Introduction

Aim of the survey was to assess in time and in the Programme the variability in the use and the spread of prenatal diagnostic techniques and to analyse the impact of elective termination on prevalence rates at birth of Down Syndrome (DS), in Countries where elective abortions are legally performed.

Participation in the Clearinghouse programmes worldwide provides a unique opportunity to analyse international variations in the use of prenatal diagnosis techniques (Chorion Villus Sampling = CVS, Amniocentesis = AC, Cordocentesis = CC), and access to screening, as well as differences in advice and abortion legislation. In addition, repeating this study over time has made it possible to follow the evolution of these techniques and to evaluate the impact of each practice on the prevalence of DS.

2009 Data

In 2009, 23 programmes provided data (Table 1) on 3,193 DS cases, 1,437 of them (45%) terminated on the basis of prenatal diagnoses. The total number of births under surveillance in the 23 programmes was 1,626,707.

The percentage of terminations of pregnancy (ToP) (Table 2) ranged –as in the previous years– from the lowest values in USA: Texas (4%), Iran (8.7%), and Russia: Moscow Region (12.8%), to the highest in the registries of France: REMERA (87.6%) and Czech Republic (80.7%) The 3 French registries all together show the highest percentages of ToP that was in 2009 about 80%. Sweden and Hungary showed a similar value of percentages of termination respectively of 59.1% and 57.6%, while if we consider all together the 4 Italian registries the average percentage of terminations is quite similar i.e. 57.7%

In the European registries that provided a data set of 17 years (1993-2009), a regular increase in the percentage of ToP has been observed, passing from the lowest values of the first three years (1993,1994 and 1995) 41.5%, 45.9%, 48.5% respectively to the highest values of the last three years (2007, 2008 and 2009) respectively 67.6%, 73.3% and 68% (822/1209).

The comparison for 2009 of the percentages of ToPs registered among the 16 Registries of European Countries (61.2%, 1255/2052) versus the 7 Registries of the extra-European Countries (Canada: Alberta, Cuba, Iran, Israel, Russia: Moscow Region and the two USA registries:

Texas and Utah) (16.2%, 179/1102) is significantly different ($c^2 = 581.6$ $p < 0.0001$).

Terminations are directly related to the maternal age (Table 2): the lower the maternal age class (≤29 years) the lower the percentage of terminations; and the higher the maternal age classes (38-39 and ≥ 40) the higher the percentages.

The percentage of mothers aged over 35 years (Table 3), has increased year by year. In many registries in 2009 it is over 20% (Israel: IBDMS 21.9%, Sweden 22.3%, France: Paris 31.3% and all the three Italian Registries: IMER and Tuscany show the highest values: 31.7% and 34% respectively.

The higher percentage of ToPs are frequently detected in the registries that show the highest percentages of higher aged mothers. In fact the proportion of pregnancies terminated because of DS were observed among women at higher risk (≥35 years old): it was very high in the two French Registries (Paris:78.9.7% and REMERA:93.5%) and in three of the Italian (IMER: 75.7%, Tuscany: 78.6% and BRDCam: 78.9%) where we observe the higher percentage of mothers over 35 years old. There are however some exceptions to this consideration and this is observed in the Czech Registry where in spite of a very high percentage of ToPs (84.1%) in mothers aged ≥35 years we observe a low percentage (13.9%) of the aged mother group. The same consideration could be made for Cuba where the percentage of ToPs is very high (71.6%) despite the low percentage of mothers aged ≥35 years (11.9%). Percentages of ToPs of less than 10% were observed only in the two USA registries : Texas and Utah (5.7%, and 5.4% respectively) (Table 3).

In 2009 the most common technique, used for prenatal diagnosis, was AC (Table 4), with a mean value of 63.8%. CVS, with a mean value of 35.3%, showed a progressive significant increase in the years ($p < 0.0001$): 18.3% in 1995, 19.3% in 1997, 20.2% in 1999, 22.9% in 2001, 28.6% in 2003, 35% in 2005, 29.8% in 2007 and 35.3% in 2009.

In the Registries of France: Strasbourg and Hungary, CVS is the most used technique of prenatal detection with a rate of 70.8% and 68.4% respectively (Table 4).

The Registries, where CVS is most frequently used, show –as expected– the lowest mean gestational ages at pregnancy termination in the older maternal age group (≥35 years) as in Northern Netherland (16.3±3.9), in Canada: Alberta (16.3±2.3) and Czech Republic (16.5±3) (Table 5). The mean age (wks) of terminations after CVS

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diagnosis is heterogeneous and significantly different in the Registries in both maternal age groups. In the younger group (≤ 34 years) there is a lower limit of around 13 and 16 wks in many Registries, from the lowest in Hungary (13.3 ± 1.1) to the highest in France: Strasbourg (16.3 ± 0.8) (Table 5).

The prevalence at birth of DS has decreased in the majority of the 11 programmes that can provide the rates for all the 17 year period. A significant negative temporal trend was observed above all in the Registries that showed, as expected, an increase in the termination of pregnancies: the

Czech Republic (from 7.5 in 1993 to 4.1 per 10,000 in 2009), France: REMERA (from 10.98 in 1993 to 3.4 in 2009), in France: Strasbourg (from 16.7 in 1993 to 7.6 in 2009; Italy: Tuscany (from 11.9 in 1993 to 6.2 in 2009) and Italy: IMER (from 8.9 to 6.7) (Table 6). These are the same Registries that showed the highest rates of ToPs and an increase in the terminations year by year.

Otherwise in the Registries where the terminations are less reported, we can observe an increase in the prevalence at birth in the years as in Canada: Alberta (from 11.4 in 1993 to 14 in 2009) related to the general increase of the maternal age at conception.

Table 1. List of the programs participating in the Prenatal Diagnosis Study in the years.

	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Australia-Western	X	X	X	X	X	X				X	X	X	X	X		X	
Canada-Alberta: ACASS					X	X	X	X	X	X	X	X	X	X	X	X	X
Czech Republic	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Cuba: RECUMAC													X	X	X	X	X
England & Wales	X	X	X	X	X	X	X	X	X	X		X	X	X			
Finland	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
France: REMERA	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
France: Paris	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
France: Strasbourg	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		X
Germany: Saxony-Anhalt								X	X	X	X	X	X	X	X	X	X
Hungary																X	X
Iran: TRoCA																X	X
Israel: IBDSP	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Italy: Campania	X	X	X	X	X	X	X	X	X	X	X	X	X		X		X
Italy: Emilia Romagna	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Italy: Lombardy																X	
Italy: North-East	X	X	X	X	X	X	X	X	X	X		X	X	X	X		X
Italy: Tuscany	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Norway: MBRN															X	X	X
Northern Netherlands	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Russia: Moscow Region											X	X	X	X	X	X	X
Slovak Republic												X			X	X	X
Sweden								X	X	X	X	X	X		X	X	X
Usa: Atlanta	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Usa: Texas														X	X	X	X
Usa: Utah												X	X	X	X		X
UK Wales												X	X	X	X	X	X
UK Wessex															X		

Table 2. Percentage (%) of terminations among the total number of cases recorded in 2009

Monitoring Program	Maternal Age (years)					Total
	<= 29	30-34	35-37	38-39	>= 40	
Canada-Alberta: ACASS	30.8	16.1	45.0	55.6	35.0	32.1
Cuba: RECUMAC	15.0	14.3	57.5	80.0	81.1	50.3
Czech Republic	73.6	80.0	86.8	79.3	84.1	80.7
Finland	46.7	56.1	57.9	47.8	71.4	58.5
France: REMERA	78.3	85.4	92.1	93.3	95.0	87.6
France: Paris	58.8	68.0	71.4	73.7	87.1	72.8
France: Strasbourg	57.1	66.7	100.0	75.0	40.0	70.6
Germany: Saxony-Anhalt	20.0	80.0	44.4	66.7	75.0	53.9
Hungary	31.6	54.9	88.5	75.9	70.5	57.6
Iran: TRoCA	13.3	25.0	0.0	50.0	33.3	8.5
Israel: IBDSP	14.3	0.0	28.6	0.0	11.1	14.3
Italy: Campania	55.6	80.8	72.7	87.5	79.0	56.6
Italy: Emilia Romagna	50.0	57.1	55.6	100.0	80.0	70.1
Italy: North-East	50.0	64.3	80.0	100.0	57.1	33.7
Italy: Tuscany	50.0	83.3	73.3	85.7	77.8	75.0
Norway	11.1	25.0	36.2		59.1	32.3
Northern Netherlands	40.0	30.8	40.0	100.0	60.0	42.9
Russia: Moscow Region	11.1	0.0	14.3	11.1	30.8	12.8
Slovak Republic	21.1	29.4	25.0	0.0	40.0	24.5
Sweden	37.9	52.6	68.0	73.8	63.5	59.1
USA: Utah	0.0	23.8	22.2	25.0	21.1	17.0
USA: Texas	2.6	2.1	4.0	10.4	4.1	4.0
UK Wales	20.0	64.7	61.9	69.2	63.6	51.7

Table 3. Percentage of mothers aged 35 and over in the monitoring programs participating in the study and percentage of terminations (ToP) in the same group of mothers. Prevalence rate in live and stillbirths (per 10,000) and comparison with the rate after inclusion of ToP

Monitoring Program	% of mothers	% of ToP in mothers	Prevalence rate (per 10,000)	
	aged >=35	aged >=35	LB+SB	LS+SB+ToP
Canada-Alberta: ACASS	15.9	42.9	34.3	60.0
Cuba: RECUMAC	11.9	71.6	18.5	65.1
Czech Republic	13.9	84.1	12.2	76.7
Finland	17.9	68.6	40.5	129.0
France: REMERA	19.1	93.5	5.3	82.3
France: Paris	31.3	78.9	17.6	83.3
France: Strasbourg	18.6	76.2	20.4	85.8
Germany: Saxony-Anhalt	13.9	56.3	29.3	67.0
Hungary	15.0	69.7	22.6	74.8
Iran: TRoCA	8.8	28.6	24.6	34.4
Israel: IBDSP	21.9	16.7	15.9	19.1
Italy: Campania	22.3	78.9	12.0	60.0
Italy: Emilia Romagna	31.7	75.7	13.3	54.7
Italy: North-East	-	56.2	-	-
Italy: Tuscany	34.0	78.6	11.5	53.9
Norway: MBRN	19.6	43.5	31.4	55.7
Northern Netherlands	19.7	52.9	22.4	47.5
Russia: Moscow Region	9.1	18.6	60.2	74.0
Slovak Republic	11.7	23.5	18.2	23.7
Sweden	22.3	65.0	32.3	92.3
USA: Texas	12.1	5.7	50.8	53.9
USA: Utah	9.9	5.4	65.8	69.6
UK Wales	16.1	64.4	28.2	79.3

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Table 4. Down Syndrome techniques of prenatal diagnosis (number of cases) registered in 2009 grouped in maternal age classes

Monitoring Program	<35				35-39				>39				Total			
	CVS	AC	CC	UK	CVS	AC	CC	UK	CVS	AC	CC	UK	CVS	AC	CC	UK
Canada-Alberta: ACASS	6	4	-	3	6	5	-	3	1	4	-	2	13	13	-	8
Czech Republic	37	61	1	-	19	50	-	-	15	22	-	-	71	133	1	-
Finland	18	17	-	2	16	17	-	-	21	18	-	1	55	52	-	3
France: REMERA	24	37	-	1	15	25	-	-	12	27	-	-	51	89	-	1
France: Paris	10	17	-	-	15	14	-	-	13	14	-	-	38	45	-	-
France: Strasbourg	6	2	-	-	11	3	-	-	-	2	-	-	17	7	-	-
Germany: Saxony-Anhalt	1	4	-	-	1	4	-	1	-	3	-	-	2	11	-	1
Hungary	3	1	-	36	6	3	-	36	4	2	-	25	13	6	-	97
Iran: TRoCA	-	-	-	3	-	-	-	1	-	-	-	1	-	-	-	5
Italy: Campania	-	29	-	-	-	27	-	-	-	30	-	-	-	86	-	-
Italy: Emilia Romagna	6	4	-	1	18	14	-	-	12	11	-	1	37	29	-	2
Italy: North-East	7	6	-	-	3	5	-	2	5	3	-	-	15	14	-	4
Italy: Tuscany	5	6	-	1	6	14	1	-	6	14	-	-	17	34	1	1
Northern Netherlands	2	3	-	1	2	4	-	-	2	1	-	-	6	8	-	1
Russia: Moscow Region	-	2	4	-	-	2	2	-	-	3	1	-	-	7	7	-
Sweden	6	30	-	27	13	45	-	38	5	25	-	13	24	101	-	78
USA: Utah	-	5	-	-	-	6	-	-	-	3	1	-	-	14	1	-
Total	131	228	5	75	131	238	3	83	96	182	2	43	359	649	10	201

CVS = Chorion Villus sampling

CC = Chordocentesis

AC = Amniocentesis

UK = Unknown

Table 5. Mean gestational age (wks) and Standard Deviation of induced abortions by maternal age group and by technique used by prenatal diagnosis

Monitoring Program	≤34			≥35		
	CVS	AC	Total	CVS	AC	Total
Canada-Alberta: ACASS	14.33±1.03	18.50±0.58	16.00±2.31	14.43±1.51	17.78±1.56	16.31±2.27
Czech Republic	13.43±1.39	18.48±2.64	16.57±3.32	13.26±0.83	18.15±2.31	16.58±3.01
France: REMERA	14.54±1.14	20.97±4.10	18.44±4.54	14.35±1.70	20.52±3.78	18.36±4.40
France: Paris	14.10±1.10	20.88±6.23	18.37±5.96	14.50±2.08	19.86±3.35	17.18±3.86
France: Strasbourg	16.33±0.82	24.00±4.24	18.25±3.96	15.55±2.54	22.00±3.08	17.56±4.05
Germany: Saxony-Anhalt	16.00±0.00	18.75±1.50	18.20±1.79	13.00±0.00	18.43±1.62	17.75±2.43
Hungary	13.33±1.15	20.00±0.00	15.00±3.46	16.10±2.18	20.20±1.64	17.47±2.80
Italy: Campania	-	19.97±2.57	19.97±2.57	-	19.82±1.85	19.85±1.85
Italy: Emilia Romagna	14.50±1.52	19.50±1.29	16.50±2.92	13.70±0.99	18.88±1.27	16.05±2.83
Italy: North-East	14.71±2.63	18.00±1.10	16.23±2.62	14.86±0.90	18.83±0.75	16.69±2.21
Italy: Tuscany	13.40±1.14	18.33±1.51	16.09±2.88	13.25±2.05	18.64±1.66	16.89±3.11
Northern Netherlands	14.50±2.12	19.67±3.06	18.00±4.16	13.25±1.50	18.80±2.39	16.33±3.90
Russia: Moscow Region	-	16.50±0.71	16.50±0.71	-	17.40±0.89	17.40±0.89
USA: Utah	-	16.80±2.49	16.80±2.49	13.00±0.00	15.43±3.60	15.13±3.44

Table 6. Prevalence at birth (per 10,000) in the years of DS in the programs participating in the survey

Programme	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	
Australia-Western										9.98	8.49	11.03	10.85	11.45		12.57		
Canada-Alberta: ACASS	11.45	11.07	13.15	8.49	11.14	14.02	11.56	14.65	15.20	12.71	19.20	16.52	20.54	13.43	16.42	13.46	14.00	
Czech Republic	7.52	7.67	7.26	5.51	5.06	6.72	6.57	5.37	5.51	5.37	6.38	5.51	5.26	3.48	5.08	3.67	4.12	
Cuba: RECUMAC													8.31	8.72		7.33	6.16	
England & Wales	4.59	4.73	4.91	5.50	6.39	7.18	6.71	6.60	6.27	5.90		7.06	6.94	10.27				
Finland	13.21	12.83	12.94	10.33	10.07	11.33	10.04	11.76	14.18	14.16	12.32	12.25	11.73	14.22	14.08	13.73	12.86	
France: REMERA	10.98	10.43	8.91	9.47	9.01	6.83	4.86	5.83	5.85	5.51	4.86	5.86	4.76	6.89	5.19	5.94	3.38	
France: Paris	10.61	9.19	7.05	9.67	7.78	10.48	5.24	7.87	7.79	6.20	4.69	5.31	9.15	7.10	8.73	9.41	11.40	
France: Strasbourg	16.75	17.87	24.04	17.44	27.95	2.20	4.34	5.62	2.23	2.96	5.18	8.20	5.81	7.17	8.54		7.61	
Germany: Saxony-Anhalt	5.79	6.33	7.43	7.86	8.33	13.65	6.09	6.38	8.26	9.08	5.30	9.18	2.90	10.00	8.01	6.19	6.97	
Hungary																	10.24	8.86
Iran: TRoCA																	11.52	14.22
Israel: IBDSP	5.06	5.03	6.32	4.87	9.13	3.28	6.01	4.74	6.15	4.75	6.45	6.66	6.22	0.26	4.38	8.09	5.59	
Italy: Campania	10.94	7.63	10.01	9.22	6.74	8.73	6.33	2.99	6.83	5.42	5.17	4.76	2.85		4.28		11.05	
Italy: Emilia Romagna	8.97	9.27	10.24	7.97	7.27	9.36	9.58	6.47	6.33	6.15	8.11	5.72	8.24	5.01	6.14	5.66	6.78	
Italy: Lombardy																	12.14	
Italy: North-East	12.87	10.31	11.46	9.14	7.15	7.23	7.17	6.90	7.83	9.04		6.93	6.41	10.35	9.87		14.26	
Italy: Tuscany	11.83	9.80	11.42	6.91	7.34	6.28	6.14	4.90	5.70	3.76	4.00	4.14	4.08	4.64	4.84	6.42	6.21	
Norway: MBRN															12.41	10.98	13.26	
Northern Netherlands	9.86	5.74	9.38	13.74	11.91	10.03	8.43	6.35	9.32	13.31	5.99	9.40	11.87	8.80	11.31	7.25	11.02	
Russia: Moscow Region												10.66	13.64	12.11	10.97	14.84	14.84	
Slovak Republic															5.67	7.46	6.53	
Sweden							14.01	11.01	14.59	13.31	15.47	10.56	12.69		11.89	12.73	13.39	
USA: Atlanta	12.02	13.81	10.93	11.98	10.49	11.46	12.00	11.08	13.25	5.66	13.01	12.98	12.86	10.86	13.11	14.75		
USA: Texas														11.96	13.50	12.72	6.14	
USA: Utah												14.01	13.19	11.91	12.83		13.55	
Wales												11.69	13.12	10.05	10.40	10.88	11.96	
Wessex															15.86			

Alessandra Lisi Memorial Prize

Alessandra Lisi was a researcher statistician at the ICBDSP Centre in the years 2002 – 2006. Over the years Alessandra's working skill, ethic, grace and kindness made her an increasingly central part of the ICBDSP Centre. Nothing was done at the Centre without her valid help.

She was the only victim of an underground accident that occurred in Rome on October 17, 2006.

We mourn her loss, miss her beyond words and we want remember her with a Prize for a young researcher involved in the field of birth defects and working in one of the ICBDSP Member Registries.

Aim

To recognise a high quality recently published, original peer-reviewed article written in English by a junior researcher and based on research conducted using data from a Clearinghouse Program.

Eligibility

Prize is open to all junior researchers who are no more than two-years post-doctoral level, including those without post-graduate qualifications and will be based on research using data from a Clearinghouse Program.

The prize

One prize of \$500, a plaque/ certificate and the summary published in the Annual Report. The winner will be invited to give a presentation at the Annual and Scientific Meeting of the Clearinghouse, in order to present the work on which the Award was based and also to present the work they are doing at present.

Further information about the Prize application (award criteria, application process, deadline) can be requested to centre@icbdsr.org

Winners of 2011 Award

The Award of the 2010 "Alessandra Lisi Memorial Prize", given by the International Clearinghouse for Birth Defects Monitoring Systems (ICBDSR) to a junior researcher from a Monitoring Program of the ICBDSR, goes to **Narayan P. Iyer** as Author of the high quality, original peer-reviewed article "Outcome of fetuses with Turner syndrome: a 10-year congenital anomaly register based study", published in the Journal of Maternal-Fetal and Neonatal Medicine.

Outcome of fetuses with Turner syndrome: a 10-year congenital anomaly register based study.

Iyer NP, Tucker DF, Roberts SH, Moselhi M, Morgan M, Matthes JW.
Department of Pediatrics, Singleton Hospital, Swansea, UK. niyer@metrohealth.org

J Matern Fetal Neonatal Med. 2012 Jan;25(1):68-73.

Abstract

Objective: To describe the characteristics and outcome of fetuses with Turner syndrome reported to a national congenital anomalies register.

Methods: All cases with a diagnosis of Turner syndrome reported to Congenital Anomaly Register and Information Service for Wales (CARIS) between 1 January 1998 and 31 December 2007 were included. The cases were grouped in five categories based on their outcomes: fetal loss (FL), termination of pregnancy (TOP), live birth (LB), and postnatal (PN) detection and comparison was undertaken between the groups.

Results: One hundred twenty-four cases were reported during the study period. The prevalence of Turner syndrome was 1 in 4901 live female births. Seventy-four percent had 45 X karyotype while the rest had some form of Mosaic Turner karyotype. Pregnancy was terminated in 66% of antenatally diagnosed cases. FL and TOP groups had 92% and 87%, respectively, of 45 X karyotype - far greater than in the LB and PN groups. Increased nuchal thickness was the commonest anomaly noted in antenatal ultrasound and was a predictor for 45 X karyotype, FL, and termination.

Conclusion: Termination was the most common outcome of fetuses diagnosed antenatally with Turner syndrome. This has modified the natural history of Turner syndrome particularly in cases with Mosaic karyotype.

Synopsis of Contributing Monitoring Systems

Monitoring Program	Coverage	Year Joined ICBDSR	Maximum age at diagnosis	Criteria defining stillbirths	Termination of Pregnancy (ToP)
Australia:VBDR	Population-based Statewide	2002	Up to 18 years	20 weeks or 400 grams	Permitted, Reported
Australia: WARDA	Population-based, Statewide	2002	Up to 6 years	20 weeks or 400 grams	Permitted, Reported
Canada: Alberta-ACASS	Population-based Provincial	1996	1 year	20 weeks or 500 grams	Permitted, Reported
Canada British Columbia	Population-based Provincial	2001	No limit	At least 20 weeks or 500 grams	Permitted, Not reported
Canada: CCASS	Population-based National	1996	30 days	20 weeks or 500 grams	Permitted, Not reported
Chile-Maule: RRMCC-SSM	Hospital-based Regional	2003	Hospital discharge	500 grams	Not permitted, Not reported
Colombia: BCMSP	Hospital-based Regional	2011	Hospital discharge	500 grams	Permitted only for a few selected cases, Not reported
Costa Rica: CREC	Population-based National	2003	3 days	20 weeks or 500 grams	Not permitted
Cuba: RECUMAC	Hospital-based, National	2003	Hospital discharge	500 grams	Permitted, Reported
Czech Republic	Population-based National	1974	Up to 15 years	Non-viable fetuses, 28 weeks or >1000 grams	Permitted, Reported
Finland	Population-based National	1974	1 year	22 weeks or 500 grams	Permitted, Reported
France-Rhône Alpes: REMERA	Population-based Regional	1974	1 year	22 weeks (*)	Permitted, Reported
France: Paris	Population-based Regional	1982	Hospital discharge	22 weeks	Permitted, Reported
France: Strasbourg	Population-based Regional	1982	2 years	22 weeks or 500 grams	Permitted, Reported
Germany: Saxony-Anhalt	Population-based (Federal State)	2001	Hospital discharge (almost first week of life) – up to 1 year	>= 500 grams	Permitted, Reported
Hungary	Population-based National	1974	1 year	24 weeks or 500 grams (**)	Permitted, Reported
India: BDRI	Hospital-based, Regional	2010	1 year	24 weeks	Permitted, Reported
Iran: TROCA	Hospital-based Regional	2006	5 year	20 weeks or 400 grams	Permitted, Reported only for a few selected malformations
Ireland: Dublin	Population-based Regional	1997	5 years	24 weeks or 500 grams	Not permitted
Israel: IBDSP	Hospital-based Regional	1974	Hospital discharge 2-5 days	20weeks or 500 grams	Permitted, Reported
Italy: BDRCam	Population-based Regional	1996	7 days	180 days (25 weeks + 5 days)	Permitted, Reported
Italy: IMER	Population-based Regional	1985	7 days	180 days (25 weeks + 5 days)	Permitted, Reported
Italy: North East	Population-based Regional	1997	7 days	180 days (25 weeks + 5 days)	Permitted, Reported
Italy: Lombardy-RMCL	Population-based Regional	2007	1 year	180 days (25 weeks + 5 days)	Permitted, Reported
Italy-Tuscany: RTDC	Population-based Regional	1998	1 year	180 days (25 weeks + 5 days)	Permitted, Reported

Synopsis of Contributing Monitoring Systems

Monitoring Program	Coverage	Year Joined ICBDSR	Maximum age at diagnosis	Criteria defining stillbirths	Termination of Pregnancy (ToP)
Japan: JAOG	Hospital-based , National	1988	7 days	22 weeks	Permitted, Not reported
Malta: MCAR	Population-based National	2000	1 year	20 weeks	Not permitted, Not reported
Mexico: RYVEMCE	Hospital-based National	1980	72 hours	20 weeks or 500 grams	Not permitted
New Zealand	Population-based National	1979	No limit	20 weeks or 400 grams	Permitted, Reported
Northern Netherlands	Population-based Regional	1993	10 years	24 weeks	Permitted, Reported
Norway: MBRN	Population-based National	1974	Hospital discharge Lifelong for mortality (from 2002 1 year)	20 weeks or 300 grams	Permitted, Reported
Russia-Moscow Region: MRRCM	Population-based Regional	2001	1 year	28 weeks	Permitted, Reported
Slovak Republic	Population-based Regional	2003	1 year	28 weeks or 1000 grams	Permitted, Reported
South America: ECLAMC	Hospital-based Multinational	1977	3 days	500 grams	Not permitted
Spain: ECEMC	Hospital-based National	1979	3 days (**)	24 weeks or 500 grams	Permitted, Not reported
Sweden	Population-based National	1974	28 days	22 weeks	Permitted, Reported
Ukraine: OMNI-Net UBDP	Population-based Regional	2001	1 year	>= 500 grams	Permitted, Reported only for selected malformations
UK-Wales: CARIS	Population-based Regional	2005	1 year	24 weeks	Permitted, Reported
UK-Wessex: WANDA	Population-based Regional	2009	No limit but most < 28 days	24 weeks	Permitted, Reported
USA-Atlanta: MACDP	Population-based Regional	1974	6 years	20 weeks	Permitted, Reported
USA-California	Population-based Regional	1992	1 year	20 weeks	Permitted, Reported
USA-Texas: BDES	Population-based Regional	2004	1 year	20 weeks (****)	Permitted, Reported
USA-Utah: UBDN	Population-based Regional	2005	No limit	20 weeks	Permitted, Reported

(*) Before 1993: 22 weeks; since 1993: 20 weeks

(**) Before 1998: 28 weeks; since 1998: 24 weeks

(***) For some cases a longer follow-up is performed

(****) Before 2001: 20 weeks. Since 2001: all stillbirths with documented birth defects included

ICBDSR Definitions of the Reported Malformations

The following definitions have been adopted by all monitoring systems except when indicated in the Table "Deviations from ICBDSR Definitions"

1. Anencephaly: a congenital malformation characterized by the total or partial absence of the cranial vault, the covering skin, and the brain missing or reduced to small mass. Includes: craniorachischisis and infants with iniencephaly and other neural tube defects as encephalocele or open spina bifida, when associated with anencephaly. Excludes: acephaly, that is, absence of head observed in amorphous acardiac twins.

2. Spina bifida: a family of congenital malformation defects in the closure of the spinal column characterized by herniation or exposure of the spinal cord and/or meninges through an incompletely closed spine. Includes: meningocele, meningomyelocele, myelocele, myelomeningocele, rachischisis. Spina bifida is not counted when present with anencephaly. Excludes: spina bifida occulta, sacrococcygeal teratoma without dysraphism .

3. Encephalocele: a congenital malformation characterized by herniation of the brain and/or meninges through a defect in the skull. Encephalocele is not counted when present with spina bifida.

4. Microcephaly: a congenitally small cranium, defined by an occipito-frontal circumference (OFC) 3 standard deviation below the age- and sex-appropriate distribution curves. [If using a different definition or cut-off point (e.g., 2 standard deviations), report but specify criteria]. Excludes: microcephaly associated with anencephaly or encephalocele.

5. Holoprosencephaly: a congenital malformation of the brain, characterized by various degrees of incompletelobation of the brain hemispheres. Olfactory nerve tract may be absent. Holoprosencephaly includes cyclopia, ethmocephaly, cebocephaly, and premaxillary agenesis.

6. Hydrocephaly: a congenital malformation characterized by dilatation of the cerebral ventricles, not associated with a primary brain atrophy, with or without enlargement of the head, and diagnosed at birth. Not counted when present with encephalocele or spina bifida. Excludes: macrocephaly without dilatation of ventricular system, skull of macerated fetus, hydranencephaly, holoprosencephaly, and postnatally acquired hydrocephalus.

7. Anophthalmos/micropthalmos: apparently absent or small eyes. Some normal adnexal elements and eyelids are usually present. In micropthalmia,

the corneal diameter is usually less than 10 mm. and the antero-posterior diameter of the globe is less than 20 mm.

8. Anotia/microtia: a congenital malformation characterized by absent parts of the pinna (with or without atresia of the ear canal) commonly expressed in grades (I-IV) of which the extreme form (grade IV) is anotia, absence of pinna. Excludes: small, normally shaped ears, imperforate auditory meatus with a normal pinna, dysplastic and low set ears.

9. Transposition of great vessels: a cardiac defect where the aorta exits from the right ventricle and the pulmonary artery from the left ventricle, with or without other cardiac defects. Includes: double outlet ventricle so-called corrected transposition.

10. Tetralogy of Fallot: a condition characterized by ventricular septal defect, overriding aorta, infundibular pulmonary stenosis, and often right ventricular hypertrophy.

11. Hypoplastic left heart syndrome: a cardiac defect with a hypoplastic left ventricle, associated with aortic and/or mitral valve atresia, with or without other cardiac defect.

12. Coarctation of the aorta: an obstruction in the descending aorta, almost invariably at the insertion of the ductus arteriosus

13. Choanal atresia, bilateral: congenital obstruction (membraneous or osseous) of the posterior choana or choanae. Excludes: choanal stenosis and congestion of nasal mucosa.

14. Cleft palate without cleft lip: a congenital malformation characterized by a closure defect of the hard and/or soft palate behind the foramen incisivum without cleft lip. Includes: submucous cleft palate. Excludes: cleft palate with cleft lip, cleft uvula, functional short palate, and high narrow palate.

15. Cleft lip with or without cleft palate: a congenital malformation characterized by partial or complete clefting of the upper lip, with or without clefting of the alveolar ridge or the hard palate. Excludes: midline cleft of upper or lower lip and oblique facial fissure (going towards the eye).

16. Oesophageal atresia/stenosis: a congenital malformation characterized by absence of continuity or narrowing of the esophagus, with or without tracheal fistula. Includes: tracheoesophageal fistula with or without mention of atresia or stenosis of oesophagus.

17. Small intestine atresia/stenosis: complete or partial occlusion of the lumen of a segment of the small intestine. It can involve a single area or multiple areas of the jejunum or ileum. Excludes: duodenal atresia.

18. Anorectal atresia/stenosis: a congenital malformation characterized by absence of continuity of the anorectal canal or of communication between rectum and anus, or narrowing of anal canal, with or without fistula to neighboring organs. Excludes: mild stenosis which does not need correction, and ectopic anus.

19. Undescended testis: bilateral undescended testes in at term newborn or at least unilateral undescended testis in males more than 1 year of age. Excludes: retractile testis.

20. Hypospadias: a congenital malformation characterized by the opening of the urethra on the ventral side of the penis, distally to the sulcus. Includes: penile, scrotal, and perineal hypospadias. Excludes: glandular or first-degree hypospadias and ambiguous genitalia (intersex or pseudohermaphroditism).

21. Epispadias: a congenital malformation characterized by the opening of the urethra on the dorsal surface of the penis. Not counted when part of exstrophy of the bladder.

22. Indeterminate sex: genital ambiguity at birth that does not readily allow for phenotypic sex determination. Includes: male or female, true or pseudohermaphroditism.

23. Renal agenesis: a congenital malformation characterized by complete absence of kidneys bilaterally or severely dysplastic kidneys.

24. Cystic kidney: a congenital malformation characterized by multiple cysts in the kidney. Includes: infantile polycystic kidney, multicystic kidney, other forms of cystic kidney and unspecified cystic kidney. Excludes: single kidney cyst.

25. Bladder exstrophy: complex malformation characterized by a defect in the closure of the lower abdominal wall and bladder. Bladder opens in the ventral wall of the abdomen between the umbilicus and the symphysis pubis. It is often associated with epispadias and structural anomalies of the pubic bones.

26. Polydactyly, preaxial: extra digit(s) on the radial side of the upper limb or the tibial side of the lower limb. It can affect the hand, the foot, or both.

27. Limb reduction defects: a congenital malformation

characterized by total or partial absence or severe hypoplasia of skeletal structures of the limbs. Includes: femoral hypoplasia. Excludes: mild hypoplasia with normal shape of skeletal parts, brachydactyly, finger or toe reduction directly associated with syndactyly, general skeletal dysplasia and sirenomelia.

28. Diaphragmatic hernia: a congenital malformation characterized by herniation into the thorax of abdominal contents through a defect of the diaphragm. Includes: total absence of the diaphragm. Excludes: hiatus hernia, eventration and phrenic palsy.

29. Abdominal wall defects: cases specified as omphalocele and/or gastroschisis plus unspecified cases.

30. Omphalocele: a congenital malformation characterized by herniation of abdominal contents through the umbilical insertion and covered by a membrane which may or may not be intact. Excludes: gastroschisis (para-umbilical hernia), a - or hypoplasia of abdominal muscles, skin-covered umbilical hernia.

31. Gastroschisis: a congenital malformation characterized by visceral herniation usually through a right side abdominal wall defect to an intact umbilical cord and not covered by a membrane. Excludes: a- or hypoplasia of abdominal muscles, skin-covered umbilical hernia, omphalocele.

32. Prune belly sequence: a complex congenital malformation characterized by deficient abdominal muscle and urinary obstruction/distension. It can be caused by urethral obstruction secondary to posterior urethral valves or urethral atresia. In the affected fetus the deficiency of the abdominal muscle may not be evident. It can be associated with undescended testes, clubfoot, and limb deficiencies.

33. Trisomy 13: a congenital chromosomal malformation syndrome associated with extra chromosome 13 material. Includes: translocation and mosaic trisomy 13.

34. Trisomy 18: a congenital chromosomal malformation syndrome associated with extra chromosome 18 material. Includes: translocation and mosaic trisomy 18

35. Down syndrome: a congenital chromosomal malformation syndrome characterized by a well known pattern of minor and major anomalies and associated with excess chromosomal 21 material. Includes: trisomy mosaicism and translocations of chromosome 21

ICBDSR Definitions of the Reported Malformations

Deviations from the ICBDSR Definitions by Registry

	Encephalocele	Microcephaly	Arhinencephaly / Holoprosencephaly	Hydrocephaly	Anophthalmos / Microphthalmos	Anofia	Transposition of great vessels	Tetralogy of Fallot	Choanal atresia, bilateral	Cleft palate without cleft lip	Cleft lip with or without cleft palate	Oesophageal atresia / stenosis	Small intestine atresia / stenosis	Anorectal atresia / stenosis	Undescended testis	Hypospadias	Epispadias	Indeterminate sex	Renal agenesis	Cystic kidney	Polydactyly, preaxial	Limb reduction defects	Prune belly sequence	Trisomy 13	Trisomy 18	Down syndrome
Australia: VBDR								11	14						25					35						
Australia: WARDA								11							25			28		35						
Canada: Alberta		2			2	7	8	11,12							25					35						2
Canada: British Columbia	1	2	4	6	2	7	8	10	11,12	13	15	18,19		25	25,26	27	28		30	35	37		2	2	2	
Canada: National	1	2		6	2				11,12	14		18	21	23	25	26		28	31	35			40	2	2	2
Chile-Maule: RRMCC-SSM	1	2		24					11		15, 16												2	2	2	
Colombia: BCMSP															25											
Costa Rica: CREC				6			9	11,12								26	27	28	31	35			2	2	2	
Cuba: RECUMAC	1	2		6	2	7		11	14	15		18		25	26	27	28		32	35	37		2	2	2	
Czech Republic															25					35						
Finland		2			2	42	8	11,12							25		27			32			2	2	2	
France: Central East															25											2
France: Paris															25											
France: Strasbourg		2			2		9					18					28,29		30							
Germany: Saxony-Anhalt		2,3					9	11				19			25				32	36	38		2	2	2	
Hungary	1	2			2		9								25	26				35	38,39		2	2	2	
Iran: TRoCA	1		4	6			9					18	21							35	38		2	2	2	
Ireland: Dublin		2			2			11				18,19		24	25	26				35			2	2	2	
Israel: IBDMS							8								25					33						
Italy: BDRCAM																							2	2	2	
Italy: IMER															25						35					
Italy: North East			5		2				13	15	17	18,20	22					29		35					2	
Italy-Tuscany: RTDC							8																			
Italy-Lombardy: CMLR		3						11				18			25				28		35					
Japan: JAOG		2			2															31						
Malta		2			2		9	11									27		31	35	37		2	2	2	
Mexico: RYVEMCE		2			2			11,12				18						27	28	30	35			2	2	2
New Zealand					2										25	26							2	2	2	
Northern Netherlands														24	25						35					
Norway																										
Russia: Moscow region		2			2		9					18			25		27	28	31	35			2	2	2	
Slovak Republic										15					25						35					2
South America: ECLAMC															25											
Spain: ECEMC		3			2													27				37				2
Sweden		2			2			11							25			28		32						2
Ukraine		41		6			9			16								27					2	2	2	
United Arab Emirates		2			2	7	8	10	11			18						28,29		31						
UK-Wales: CARIS	1	2			2	7	8							24	25								2	2	2	
UK-Wessex: WANDA		2			2		8		11		17	20			25											
USA: Atlanta								12		16																
USA: California								11	13	16																
USA: Texas					7			11,12		15,16								27								
USA-Utah: UBDN		43												24				24			24		2	2	2	

ICBDSR Definitions of the Reported Malformations

- 1 = when present with spina bifida counted
- 2 = clinical diagnosis included
- 3 = OCF below 3rd percentile
- 4 = there may be other defects with the same code
- 5 = only cyclopia included
- 6 = hydranencephaly included
- 7 = absence of auricle
- 8 = double outlet right ventricle excluded
- 9 = all kind of transposition included
- 10 = Trilogy of Fallot included
- 11 = unilateral cases included
- 12 = stenosis included
- 13 = submucous cleft palate excluded
- 14 = cleft uvula included
- 15 = midline and oblique facial clefts included
- 16 = clefts of the alveolar ridge without cleft lip included
- 17 = stenosis excluded
- 18 = duodenal atresia included
- 19 = duodenal stenosis excluded
- 20 = intestinal stenosis excluded
- 21 = large intestine atresia/stenosis included
- 22 = stenosis excluded
- 23 = no gestational age information (cases at all gestational age collected)
- 24 = registered when it is combined with other defects
- 25 = all types included
- 26 = epispadias counted with hypospadias
- 27 = genital ambiguity and absent genitalia included
- 28 = unilateral defects included
- 29 = severely dysplastic kidneys excluded
- 30 = single cyst included
- 31 = all kind of cystic kidney included
- 32 = all cystic kidneys are included except for single renal cysts
- 33 = AR polycystic kidney excluded
- 34 = some autosomalrecessive polycystic kidneys are not excluded
- 35 = any type of polydactyly included
- 36 = polysyndactyly preaxial excluded
- 37 = any hypoplasia of skeletal limb structures included except brachydactyly and hypoplasia as part of skeletal dysplasia
- 38 = any hypoplasia of skeletal structures included
- 39 = sirenomelia included
- 40 = Prune belly sequence counted with Total abdominal wall defects
- 41 = includes congenital and postnatally diagnosed microcephaly (up to 1 year of age)
- 42 = anotia and microtia are reported without specification
- 43 = Isolated cases not reported (from January 1, 2011)

Australia: WARDA

Western Australian Register of Developmental Anomalies

History:

The Register is located in a teaching obstetric hospital. In January, 2011, notification to the Register became statutory and the Western Australian Cerebral Palsy Register was combined with the Western Australian Birth Defects Registry, to become the Western Australian Register of Developmental Anomalies (WARDA). The objectives of the Register remain the same: to establish how often birth defects and cerebral palsy occur, to conduct research into their causes and prevention, to provide health professionals and the public with information about birth defects and cerebral palsy, and to monitor and evaluate screening, treatment and prevention programs.

Size and coverage:

Population-based in the state of Western Australia. 30,000 birth a year, ~6% reported with a birth defect; 2.5 per 1000 with cerebral palsy. Birth defects diagnosed prenatally and up to the age of 6 years, in stillbirths, terminations of pregnancy and livebirths are included. Cerebral palsy of all types and severity, including postnatal causes and diagnosed up to 5 years of age is now also included. The Register covers births from 1980 for birth defects and from 1956 for cerebral palsy.

Legislation and funding:

Following a period of short term funding from both Federal and State sources, the Register is now wholly funded by the Western Australian Department of Health. Notification to the Register by medical practitioners was made statutory in January 2011.

Sources of ascertainment:

Statutory sources: Midwives' Notification of Birth Forms (all births over 20 weeks gestation), Death Certificates (perinatal, infant and childhood);

Hospital Morbidity (all hospital discharges in Western Australia); medical practitioners and hospitals. The latter two sources include notifications from maternity and paediatric hospitals, obstetricians, paediatricians, orthopaedic surgeons, cytogenetic laboratories, pathology services (including prenatal screening services), child development services, ultrasound practices and genetic services.

Exposure information:

No exposure information is routinely collected.

Background information:

The data on WARDA are routinely linked to the linked dataset of all births, deaths and hospital admissions for Western Australia. This linkage provides information on variables such as maternal and paternal age, labour and delivery data, and maternal illnesses, for both cases of developmental anomalies (numerators) and all births in Western Australia (denominators). Data from the Register are provided to the National Perinatal Statistics and Epidemiology Unit and the Australia Cerebral Palsy Register. Further information is available on the WARDA website: http://kemh.health.wa.gov.au/services/register_developmental_anomalies/

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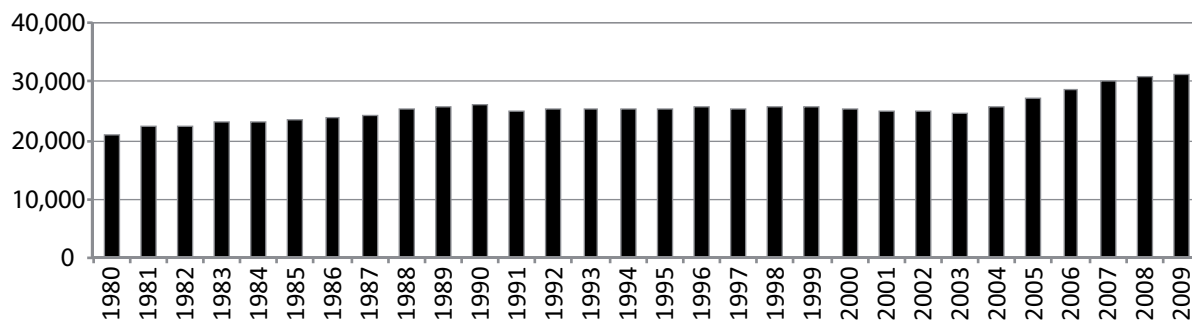
E-mail: caroline.bower@health.wa.gov.au

Website: http://kemh.health.wa.gov.au/services/register_developmental_anomalies/

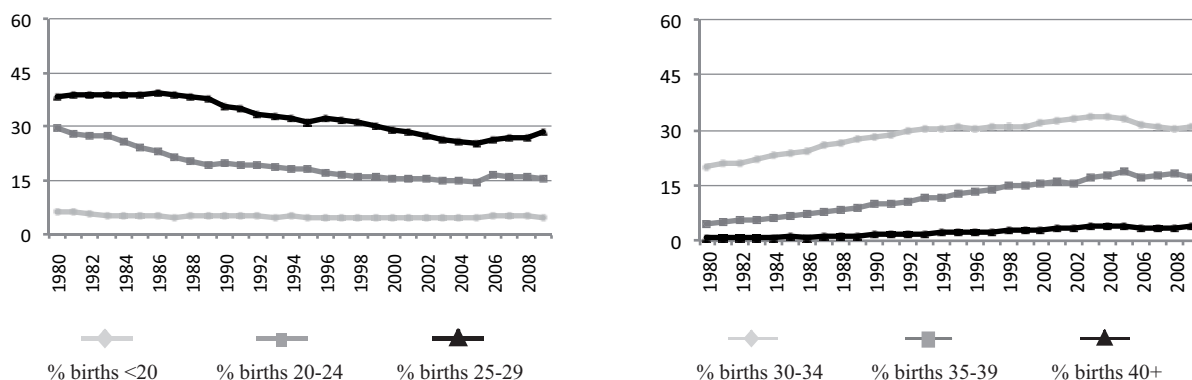
Monitoring Systems

Australia: WARDA

Total births by year



Percentage of births by year and maternal age



Terminations of pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	50	92.6	Cystic kidney	21	30.0
Spina bifida	27	58.7	Limb reduction defects	22	40.7
Encephalocele	14	77.8	Diaphragmatic hernia	7	28.0
Holoprosencephaly	12	66.7	Omphalocele	32	88.9
Hydrocephaly	40	61.5	Gastroschisis	0	0.0
Hypoplastic left heart syndrome	14	66.7	Trisomy 13	29	96.7
Cleft palate without cleft lip	14	16.7	Trisomy 18	56	83.6
Cleft lip with or without cleft palate	25	22.5	Down syndrome	162	63.3
Renal agenesis	17	43.6			

Total ToPs with births defects = 606 (Ratio ToPs/Births: 6.59 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Australia: WARDA, 2009

Live births (LB)	30,985
Stillbirths (SB)	234
Total births	31,219
Number of terminations of pregnancy (ToP) for birth defects	231

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	1	0	15	5.13
Spina bifida	6	1	10	5.45
Encephalocele	1	0	6	2.24
Microcephaly	7	0	1	2.56
Holoprosencephaly	1	1	4	1.92
Hydrocephaly	7	0	11	5.77
Anophthalmos	0	0	1	0.32
Microphthalmos	3	0	0	0.96
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	2	0	0	0.64
Microtia	4	0	0	1.28
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	10	1	1	3.84
Tetralogy of Fallot	2	0	3	1.60
Hypoplastic left heart syndrome	3	0	4	2.24
Coarctation of aorta	12	0	1	4.16
Choanal atresia, bilateral	2	0	0	0.64
Cleft palate without cleft lip	31	0	5	11.53
Cleft lip with or without cleft palate	27	0	11	12.17
Oesophageal atresia/stenosis with or without fistula	8	3	4	4.80
Small intestine atresia/stenosis	6	0	0	1.92
Anorectal atresia/stenosis	8	1	8	5.45
Undescended testis (36 weeks of gestation or later)	69	0	1	22.42
Hypospadias	85	0	0	27.23
Epispadias	0	0	0	0.00
Indeterminate sex	0	0	0	0.00
Renal agenesis	8	0	7	4.80
Cystic kidney	18	0	11	9.29
Bladder exstrophy	0	0	0	0.00
Polydactyly, preaxial	24	0	4	8.97
Total Limb reduction defects (include unspecified)	7	0	8	4.80
Transverse	0	0	0	0.00
Preaxial	0	0	0	0.00
Postaxial	0	0	0	0.00
Intercalary	0	0	0	0.00
Mixed	0	0	0	0.00
Unspecified	0	0	0	0.00
Diaphragmatic hernia	6	1	5	3.84
Omphalocele	0	0	17	5.45
Gastroschisis	12	0	0	3.84
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	1	0	0.32
Trisomy 13	1	0	11	3.84
Trisomy 18	3	2	21	8.33
Down syndrome, all ages (include age unknown)	31	3	63	31.07
<20	1	0	1	14.86
20-24	4	0	3	14.73
25-29	6	1	3	11.37
30-34	3	1	10	14.75
35-39	12	1	27	74.89
40-44	5	0	19	216.41
45+	0	0	0	0.00
unknown	0	0	0	---

Australia: WARDA, Previous years rates 1980 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		111,462	122,151	127,111	127,738	125,161	147,624
Anencephaly		8.34	9.09	8.65	7.05	6.31	5.55
Spina bifida		8.61	8.60	8.97	7.52	7.03	6.03
Encephalocele		1.79	1.72	2.12	1.25	1.20	1.76
Microcephaly		5.83	4.83	5.74	5.71	5.59	3.45
Holoprosencephaly		0.99	1.96	2.12	2.11	1.92	1.96
Hydrocephaly		6.91	6.47	8.65	9.55	6.87	7.79
Anophthalmos		0.54	0.57	0.31	0.78	0.48	0.34
Microphthalmos		1.44	1.96	1.89	2.43	1.68	0.88
Unspecified Anophthalmos/Microphthalmos		0.00	0.00	0.00	0.00	0.00	0.00
Anotia		1.35	2.05	2.12	2.51	1.92	1.15
Microtia		0.81	0.65	1.18	1.64	1.20	1.02
Unspecified Anotia/Microtia		0.00	0.00	0.00	0.00	0.00	0.00
Transposition of great vessels		3.32	4.91	3.93	4.93	5.11	4.47
Tetralogy of Fallot		3.23	3.03	4.56	3.13	3.04	2.64
Hypoplastic left heart syndrome		1.97	1.72	2.52	1.72	1.52	2.17
Coarctation of aorta		4.58	5.65	5.98	5.01	6.47	4.81
Choanal atresia, bilateral		1.35	1.31	0.87	0.63	0.80	0.27
Cleft palate without cleft lip		8.16	8.60	10.31	11.82	11.98	9.21
Cleft lip with or without cleft palate		12.11	14.49	10.07	12.37	13.50	11.65
Oesophageal atresia/stenosis with or without fistula		2.96	3.52	2.67	3.21	3.99	4.61
Small intestine atresia/stenosis		3.05	2.37	2.60	2.74	3.12	2.37
Anorectal atresia/stenosis		5.74	4.91	6.77	5.87	7.03	5.15
Undescended testis (36 weeks of gestation or later)		64.78	67.13	66.63	57.70	49.38	27.43
Hypospadias		26.92	29.80	34.93	35.85	37.15	29.47
Epispadias		0.27	0.41	0.24	0.23	0.16	0.20
Indeterminate sex		0.18	0.25	0.24	0.16	0.32	0.00
Renal agenesis		3.68	3.19	4.41	4.85	4.95	4.47
Cystic kidney		2.51	4.34	7.08	7.36	9.99	7.65
Bladder exstrophy		0.18	0.16	0.31	0.39	0.24	0.14
Polydactyly, preaxial		9.33	10.89	10.62	12.37	11.35	9.69
Total Limb reduction defects (include unspecified)		4.49	5.49	6.61	9.39	8.39	6.84
Transverse		nr	nr	nr	nr	nr	0.00*
Preaxial		nr	nr	nr	nr	nr	0.00*
Postaxial		nr	nr	nr	nr	nr	0.00*
Intercalary		nr	nr	nr	nr	nr	0.00*
Mixed		nr	nr	nr	nr	nr	0.00*
Unspecified		nr	nr	nr	nr	nr	0.00*
Diaphragmatic hernia		3.32	2.70	3.07	4.31	2.96	3.12
Omphalocele		1.88	3.03	3.70	2.97	4.71	4.00
Gastroschisis		1.35	1.80	2.52	4.07	3.04	4.13
Unspecified Omphalocele/Gastroschisis		0.00	0.00	0.00	0.00	0.00	0.00
Prune belly sequence		0.54	0.74	0.55	0.23	0.00	0.07
Trisomy 13		0.72	1.23	1.42	1.72	3.20	3.25
Trisomy 18		1.61	1.80	3.78	5.01	7.27	8.13
Down syndrome, all ages (include age unknown)		11.57	15.23	17.23	19.65	26.45	27.71
<20		4.59	6.47	6.29	6.61	14.10	11.18
20-24		5.23	5.69	7.83	6.55	6.83	9.53
25-29		9.01	7.87	8.38	9.24	13.39	8.86
30-34		11.72	14.35	18.93	16.07	19.61	18.24
35-39		47.15	47.27	38.06	43.67	51.86	61.57
40-44		104.82	257.51	146.54	173.83	156.63	180.47
45+		615.38	461.54	512.82	136.99	582.52	410.26
unknown		---	---	---	---	---	---

nr = not reported

* data include less than 5 years

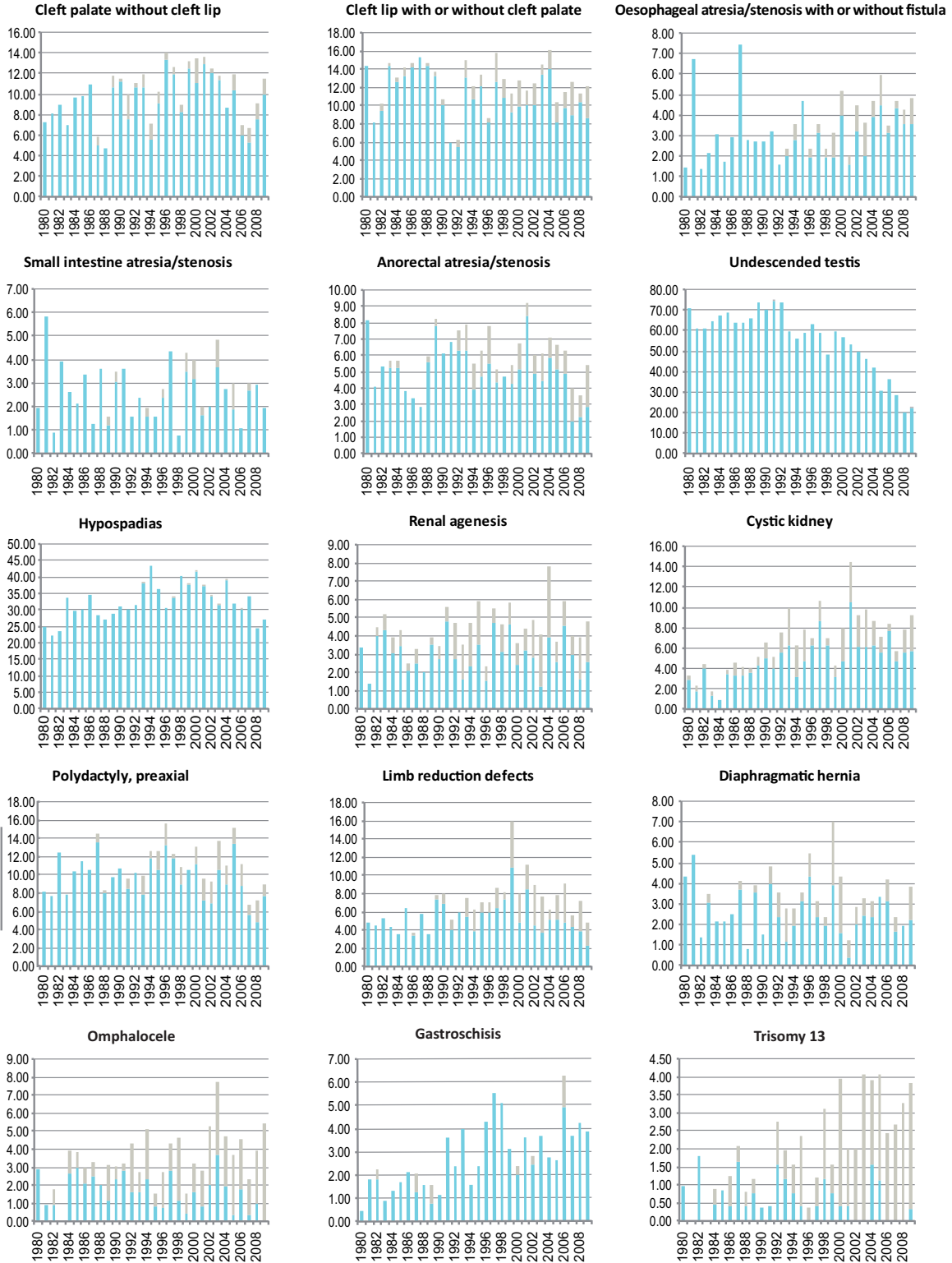
Australia: WARDA

Time trends 1980-2009 (Birth prevalence rates per 10,000)



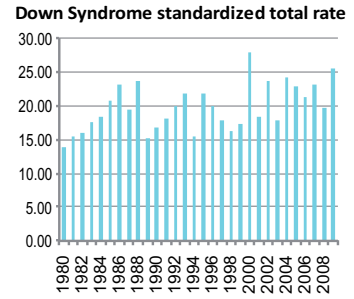
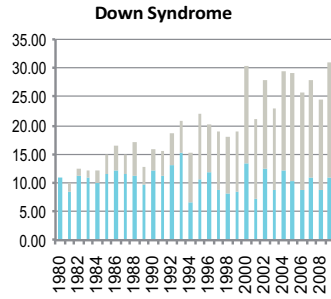
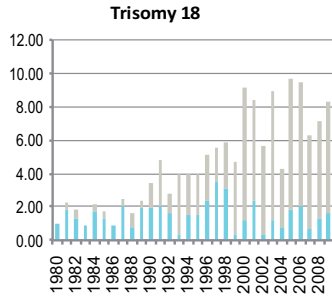
Note: ■ L+S rates, ■ ToP rates

Australia: WARDA



Note: ■ L+S rates, ■ ToP rates

Australia: WARDA



Note: ■ L+S rates, ■ ToP rates

Canada-Alberta: ACASS Alberta Congenital Anomalies Surveillance System

History:

The Programme began in 1966 as a general Registry for Handicapped Children. This was disbanded in 1980 and continued as a surveillance Programme for live and stillborn infants with congenital anomalies who were born in the Province of Alberta.

Size and coverage:

All live and stillbirths in the province are covered which at present comprises about 40,000 births per year. The definition of stillbirth is 20 weeks or more or 500 grams or more. The vast majority of births occur in hospital (approximately 97%). In 1997 a special fetal congenital anomalies surveillance system was started to include those fetuses with congenital anomalies who were either spontaneously lost prior to 20 weeks or where there was termination as a result of prenatal diagnosis.

Legislation and funding:

Reporting is voluntary. The system is run by members of the Department of Medical Genetics, Alberta Children's Hospital/University of Calgary reporting to Alberta Vital Statistics and Alberta Health. Funding is from Alberta Ministry of Health.

Sources of ascertainment:

Reports are obtained from physician's notice of birth, live birth and stillbirth registrations, death registrations and a special congenital anomalies reporting form (CARF) from hospitals. This is based on discharge diagnosis, including readmissions for any reason up to one year of age. Additional sources are speciality clinics, such as medical genetics and cytogenetics laboratories.

Exposure information:

None is routine.

Background information:

Linkage studies are possible with other statistical data from Alberta Health.

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Calgary, AB, Canada. T3B 6A8

Phone: 403-955-7370

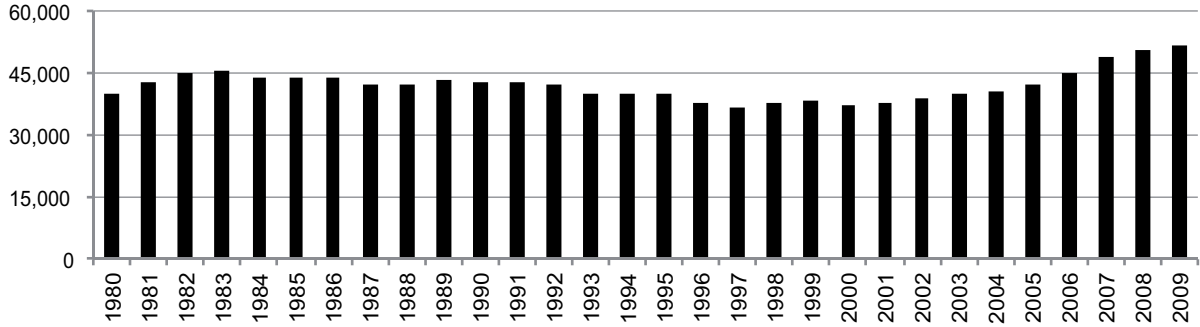
Fax: 403-955-2870

E-mail: brian.lowry@calgaryhealthregion.ca
Barbara Sibbald – RN, MSc, Manager

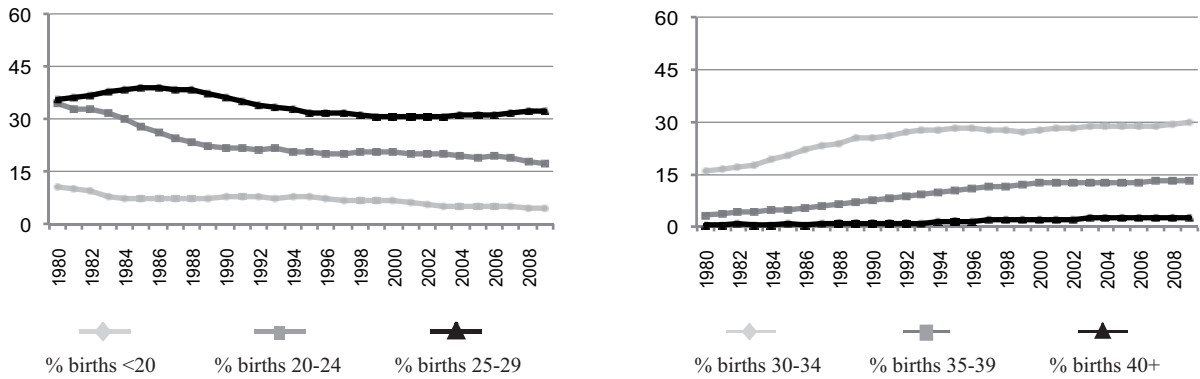
E-mail: barbara.sibbald@calgaryhealthregion.ca

Canada-Alberta: ACASS

Total births by year



Percentage of births by year and maternal age



Terminations of pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	16	43.2	Cystic kidney	8	7.9
Spina bifida	11	18.0	Limb reduction defects	34	18.3
Encephalocele	3	15.8	Diaphragmatic hernia	4	7.0
Holoprosencephaly	11	28.2	Omphalocele	17	31.5
Hydrocephaly	8	9.0	Gastroschisis	1	1.4
Hypoplastic left heart syndrome	1	2.0	Trisomy 13	26	47.3
Cleft palate without cleft lip	6	6.2	Trisomy 18	36	43.9
Cleft lip with or without cleft palate	9	4.2	Down syndrome	100	31.3
Renal agenesis	2	9.1			

Total ToPs with births defects = 320 (Ratio ToPs/Births: 2.12 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Canada-Alberta: ACASS, 2009

Live births (LB)	51,077
Stillbirths (SB)	343
Total births	51,420
Number of terminations of pregnancy (ToP) for birth defects	137

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	4	5	9	3.50
Spina bifida	8	11	3	4.28
Encephalocele	5	1	1	1.36
Microcephaly	18	2	2	4.28
Holoprosencephaly	7	2	5	2.72
Hydrocephaly	20	4	4	5.45
Anophthalmos	1	0	0	0.19
Microphthalmos	2	0	1	0.58
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	2	0	0	0.39
Microtia	13	1	0	2.72
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	11	1	0	2.33
Tetralogy of Fallot	12	1	0	2.53
Hypoplastic left heart syndrome	14	4	1	3.70
Coarctation of aorta	17	3	1	4.08
Choanal atresia, bilateral (§)	7	1	1	1.75
Cleft palate without cleft lip	26	2	3	6.03
Cleft lip with or without cleft palate	61	7	2	13.61
Oesophageal atresia/stenosis with or without fistula	10	1	1	2.33
Small intestine atresia/stenosis	10	1	0	2.14
Anorectal atresia/stenosis	19	5	1	4.86
Undescended testis (36 weeks of gestation or later)	162	1	0	31.70
Hypospadias (*)	110	0	0	21.39
Epispadias	3	0	0	0.58
Indeterminate sex	4	3	1	1.56
Renal agenesis	1	6	0	1.36
Cystic kidney	26	4	5	6.81
Bladder exstrophy	1	1	0	0.39
Polydactyly, preaxial (#)	78	6	13	18.86
Total Limb reduction defects (include unspecified)	33	19	21	14.20
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	15	2	3	3.89
Omphalocele	7	8	8	4.47
Gastroschisis	24	1	1	5.06
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	3	6	11	3.89
Trisomy 18	7	9	15	6.03
Down syndrome, all ages (include age unknown)	60	13	33	20.61
<20	2	0	0	8.40
20-24	3	1	3	7.89
25-29	12	0	5	10.21
30-34	22	5	4	20.31
35-39	12	3	14	42.62
40-44	8	4	7	149.72
45+	1	0	0	116.28
unknown	0	0	0	---

nr = not reported

(§) Choanal atresia, unilateral and bilateral are included

(*) All hypospadias included

(#) All polydactyly included

Canada-Alberta: ACASS, Previous years rates 1980 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		216,362	214,261	207,381	190,045	193,544	237,486
Anencephaly		3.65	3.13	2.17	2.58	2.48	2.32
Spina bifida		4.44	5.79	4.68	5.21	2.95	4.17
Encephalocele		1.11	0.84	1.06	1.00	1.45	1.26
Microcephaly		3.19	3.92	3.13	2.89	3.77	4.08
Holoprosencephaly		0.37	1.03	1.01	1.58	1.91	2.23
Hydrocephaly		6.33	4.76	5.40	4.63	5.74	6.27
Anophthalmos		0.37	0.23	0.48	0.26	0.36	0.34
Microphthalmos		0.92	1.03	1.21	1.42	1.19	1.35
Unspecified Anophthalmos/Microphthalmos		0.00	0.00	0.00	0.00	0.00	0.00
Anotia		0.05	0.23	0.24	0.42	0.57	0.38
Microtia		0.18	0.75	1.16	1.16	1.50	2.15
Unspecified Anotia/Microtia		0.00	0.00	0.00	0.00	0.00	0.00
Transposition of great vessels		2.82	3.17	3.18	3.26	4.03	3.12
Tetralogy of Fallot		1.71	2.99	3.13	1.89	2.02	2.65
Hypoplastic left heart syndrome		2.13	2.29	1.98	2.68	2.74	3.41
Coarctation of aorta		3.47	4.39	5.30	3.58	3.10	4.13
Choanal atresia, bilateral		0.92	1.73	1.78	1.26	2.12	1.47
Cleft palate without cleft lip		6.42	7.05	8.05	8.73	8.11	6.48
Cleft lip with or without cleft palate		10.21	11.99	11.52	11.94	12.56	13.01
Oesophageal atresia/stenosis with or without fistula		2.77	3.17	2.17	2.63	2.07	2.23
Small intestine atresia/stenosis		0.79	1.03	1.40	1.79	1.65	1.52
Anorectal atresia/stenosis		3.24	5.18	5.11	5.16	6.92	4.00
Undescended testis (36 weeks of gestation or later)		26.44	28.24	28.50	21.99	25.78	26.28
Hypospadias		17.15	24.27	24.30	17.89	20.77	21.35
Epispadias		0.55	0.19	0.53	0.32	0.72	0.80
Indeterminate sex		0.37	0.65	1.16	0.95	1.60	1.35
Renal agenesis		2.22	2.85	1.88	1.42	1.65	1.35
Cystic kidney		2.31	3.78	4.82	5.53	8.06	7.03
Bladder exstrophy		0.37	0.19	0.39	0.16	0.52	0.34
Polydactyly, preaxial		9.80	13.95	16.49	11.31	15.76	18.78
Total Limb reduction defects (include unspecified)		6.33	9.01	10.51	10.58	12.14	11.24
Transverse		nr	nr	nr	nr	nr	nr
Preaxial		nr	nr	nr	nr	nr	nr
Postaxial		nr	nr	nr	nr	nr	nr
Intercalary		nr	nr	nr	nr	nr	nr
Mixed		nr	nr	nr	nr	nr	nr
Unspecified		nr	nr	nr	nr	nr	nr
Diaphragmatic hernia		3.37	3.31	2.60	2.74	4.13	3.62
Omphalocele		1.62	2.29	1.88	2.21	2.69	3.12
Gastroschisis		1.34	1.49	1.69	2.47	3.26	5.22
Unspecified Omphalocele/Gastroschisis		0.65	0.42	0.43	0.00	0.00	0.00
Prune belly sequence		0.51	0.28	0.14	0.42	0.36	0.29
Trisomy 13		0.83	0.65	1.21	1.47	1.86	3.20
Trisomy 18		1.66	1.68	2.03	3.74	4.39	5.56
Down syndrome, all ages (include age unknown)		8.92	9.80	11.19	14.47	19.53	21.81
<20		nr	5.59*	4.33	7.35	7.98	7.61
20-24		nr	4.36*	8.05	4.65	6.16	7.30
25-29		nr	6.44*	7.61	6.89	10.69	10.72
30-34		nr	12.20*	13.33	13.52	16.57	16.93
35-39		nr	33.96*	22.44	41.48	47.84	53.52
40-44		nr	106.48*	86.25	134.96	171.65	175.25
45+		nr	0.00*	416.67	396.04	61.73	501.67
unknown		---	---	---	---	---	---

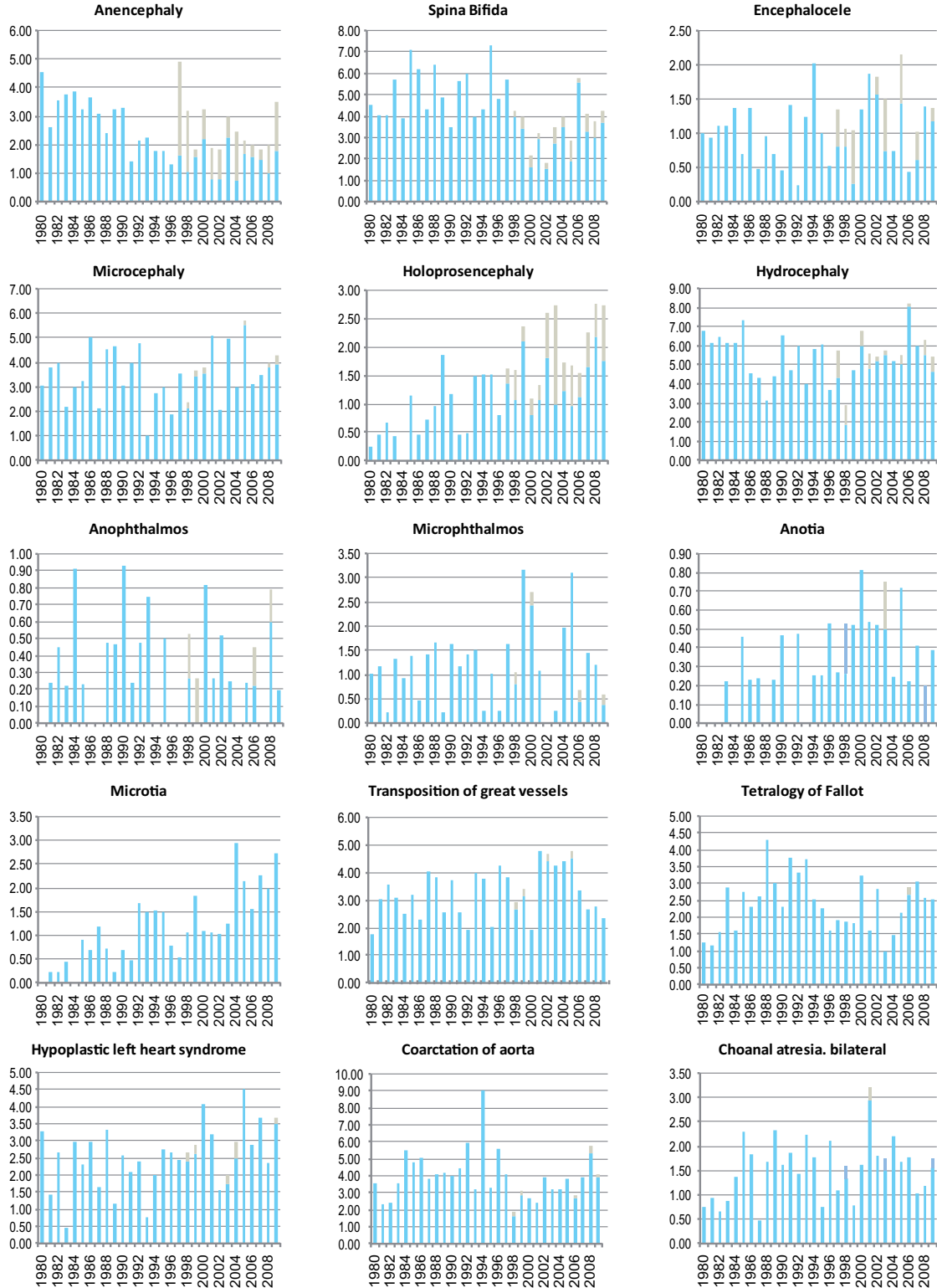
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* data include less than 5 years

Monitoring Systems

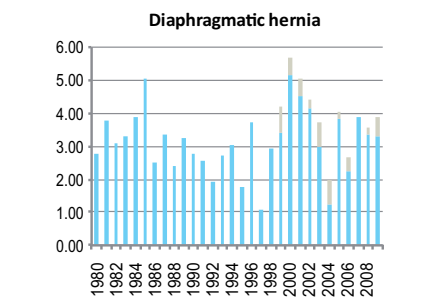
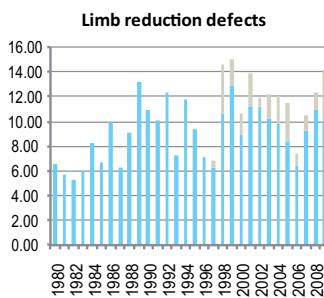
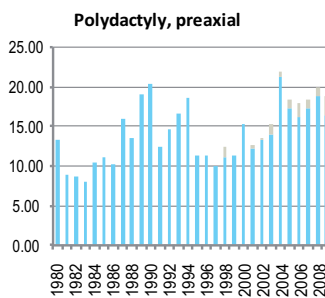
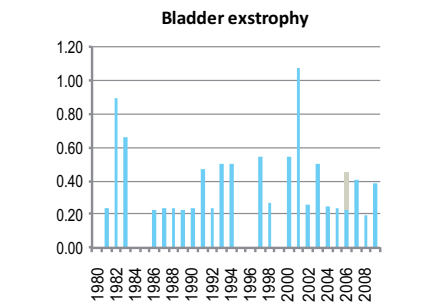
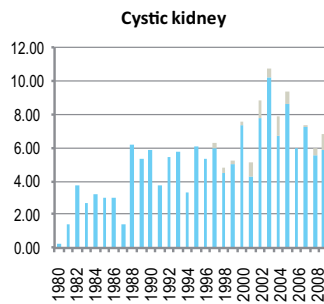
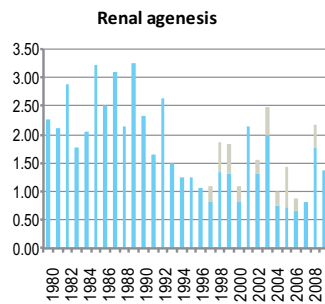
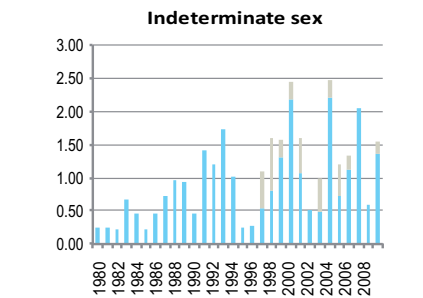
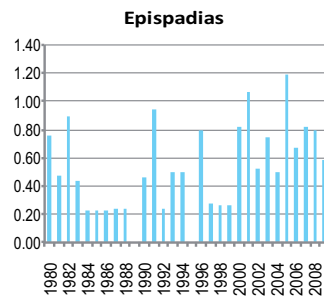
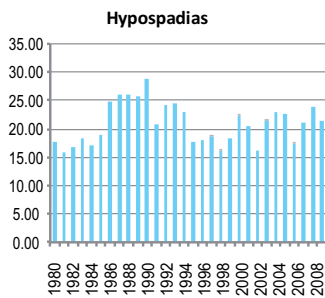
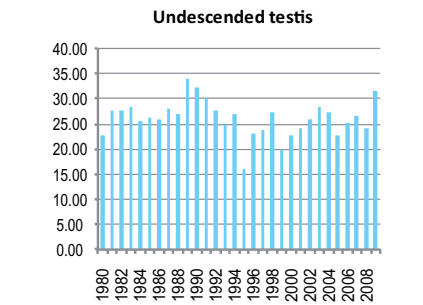
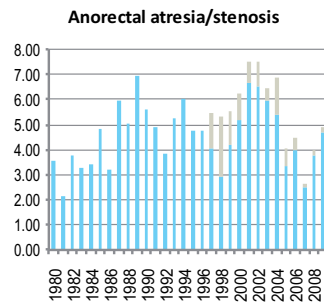
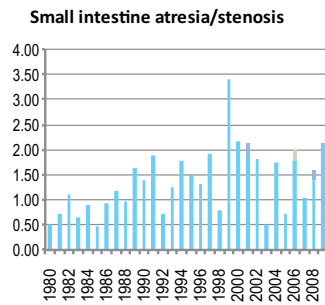
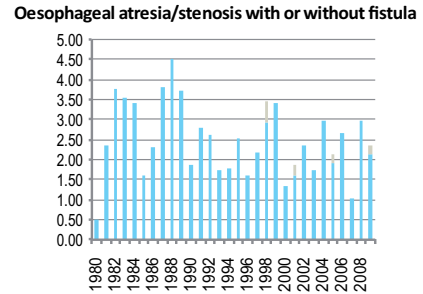
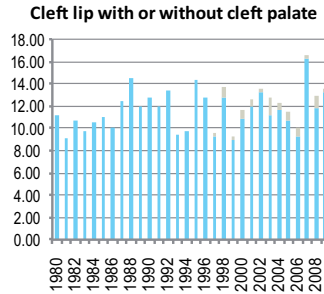
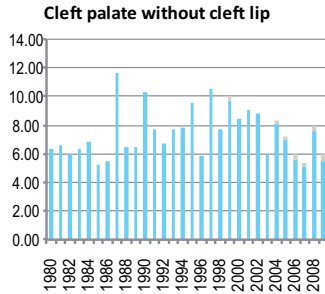
Canada-Alberta: ACASS

Time trends 1980-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates, ■ ToP rates

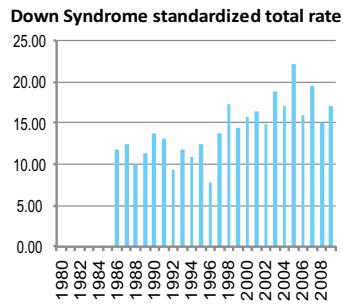
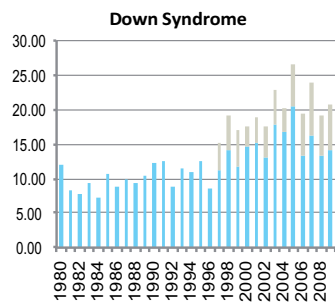
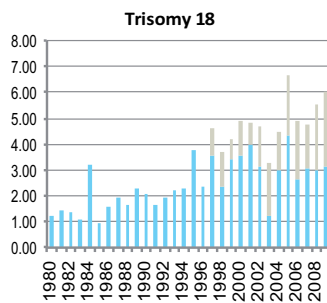
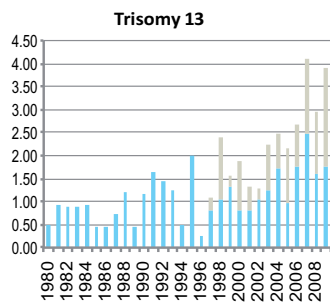
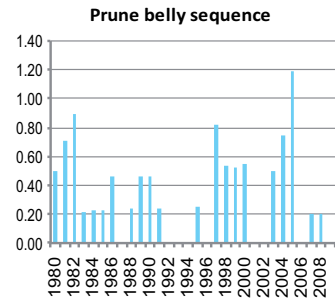
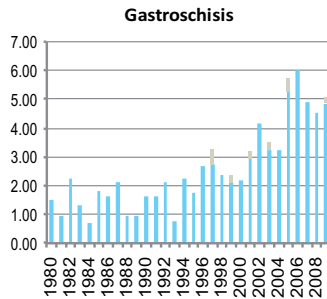
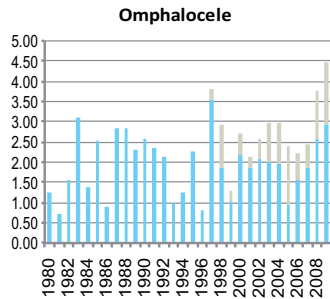
Canada-Alberta: ACASS



Note: ■ L+S rates, ■ ToP rates

Monitoring Systems

Canada-Alberta: ACASS



Note: ■ L+S rates, ■ ToP rates

Canada National: CCASS

Canadian Congenital Anomalies Surveillance System

History:

The Programme was started in 1966. The Programme was a full member until 1987, when it became an associate member. The Programme was discontinued as an associate member of the ICBDSP in the early 1990s, and reinstated its member status in 1996.

Size and coverage:

This system presently monitors about 330,000 births annually, which captures virtually all live births and registered stillbirths (a birth weight of greater or equal to 500 grams, or greater than or equal to 20 weeks in pregnancy) in the 10 provinces and 3 territories of Canada.

Legislation and funding:

Reporting is done by the Public Health Agency of Canada (PHAC) as part of its national surveillance mandate. For congenital anomalies reporting, PHAC uses hospitalization data obtained through the Canadian Institute for Health Information (CIHI). Med-Echo (Système de maintenance et d'exploitation des données pour l'étude de la clientèle hospitalière) for the province of Québec provides their data separately up to 2007.

Sources of ascertainment:

Cases from most provinces and territories are ascertained from hospital admission/separation summary records collected by CIHI and Med-Echo. The Alberta Congenital Anomalies Surveillance System provides its own separate provincial data. All data sources had a one year follow-up period until 2000. Since 2001, all data provided by CIHI only include a 30-day followup period.

Exposure information:

Currently no exposure information is routinely collected.

Background information:

Background information is based on hospital admission/separation summary records from CIHI and Med-Echo. Alberta Congenital Anomalies Surveillance provides its own background information. Interpretation of trends should be done cautiously, since 2001 an increasing percentage of records are being coded using ICD-10 CA and may cause discrepancies from previously used ICD-9 coding. Also, as mentioned previously the variation in the follow-up period is another factor which may alter reporting of trends.

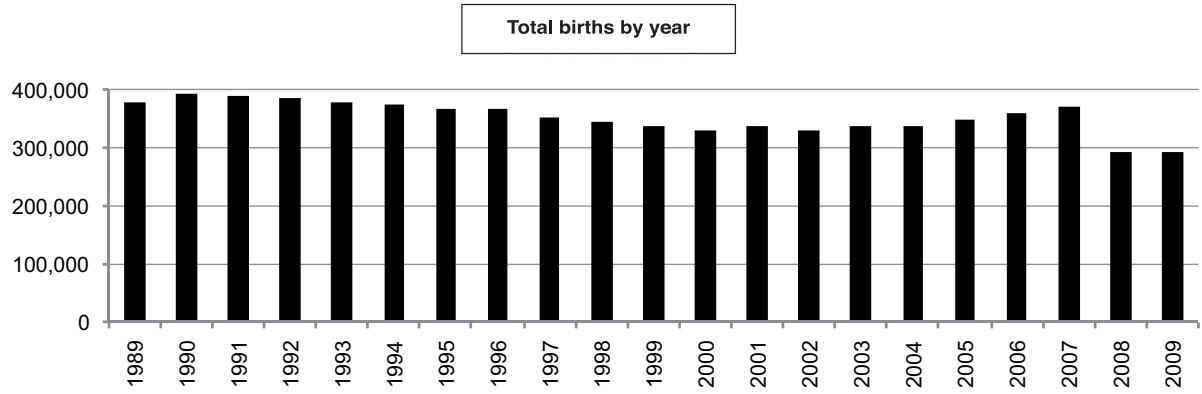
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Canada National: CCASS



Canada National: CCASS, 2009

Live births (LB)	290,067
Stillbirths (SB)	2,245
Total births	292,312
Number of terminations of pregnancy (ToP) for birth defects	nr

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	15	22	nr	1.27
Spina bifida	76	23	nr	3.39
Encephalocele	12	4	nr	0.55
Microcephaly	98	3	nr	3.46
Holoprosencephaly	17	10	nr	0.92
Hydrocephaly	122	29	nr	5.17
Anophthalmos	3	2	nr	0.17
Microphthalmos	20	0	nr	0.68
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	2	0	nr	0.07
Microtia	32	1	nr	1.13
Unspecified Anotia/Microtia	nr	nr	nr	nr
Transposition of great vessels	141	8	nr	5.10
Tetralogy of Fallot	88	5	nr	3.18
Hypoplastic left heart syndrome	63	7	nr	2.39
Coarctation of aorta	123	3	nr	4.31
Choanal atresia, bilateral	67	0	nr	2.29
Cleft palate without cleft lip	162	2	nr	5.61
Cleft lip with or without cleft palate	293	10	nr	10.37
Oesophageal atresia/stenosis with or without fistula	63	0	nr	2.16
Small intestine atresia/stenosis	110	2	nr	3.83
Anorectal atresia/stenosis	108	5	nr	3.87
Undescended testis (36 weeks of gestation or later) (*)	1,007	1	nr	34.48
Hypospadias	789	1	nr	27.03
Epispadias	24	0	nr	0.82
Indeterminate sex	37	1	nr	1.30
Renal agenesis	118	25	nr	4.89
Cystic kidney	185	14	nr	6.81
Bladder exstrophy	4	1	nr	0.17
Polydactyly, preaxial	374	5	nr	12.97
Total Limb reduction defects (include unspecified)	108	6	nr	3.90
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	76	7	nr	2.84
Omphalocele	60	15	nr	2.57
Gastroschisis	123	8	nr	4.48
Unspecified Omphalocele/Gastroschisis	nr	nr	nr	nr
Prune belly sequence	nr	nr	nr	nr
Trisomy 13	21	19	nr	1.37
Trisomy 18	33	35	nr	2.33
Down syndrome, all ages (include age unknown)	350	71	nr	14.40
<20	nr	nr	nr	nr
20-24	nr	nr	nr	nr
25-29	nr	nr	nr	nr
30-34	nr	nr	nr	nr
35-39	nr	nr	nr	nr
40-44	nr	nr	nr	nr
45+	nr	nr	nr	nr
unknown	nr	nr	nr	nr

nr = not reported

(*) No information on gestational age

Canada National: CCASS, Previous years rates 1989 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

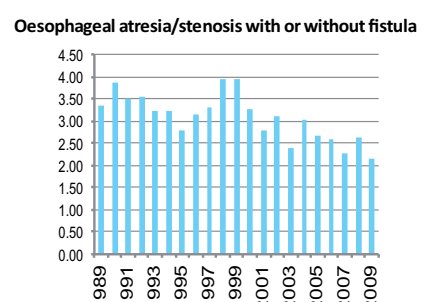
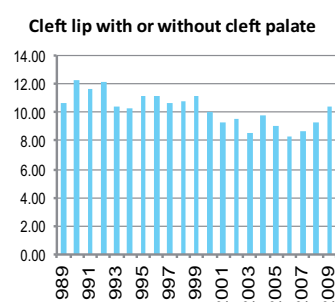
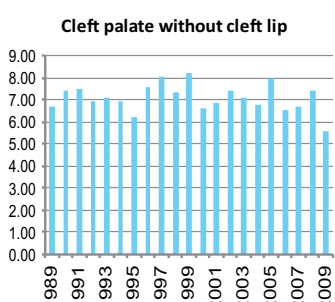
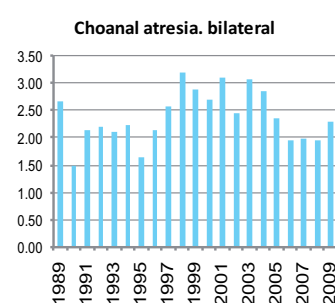
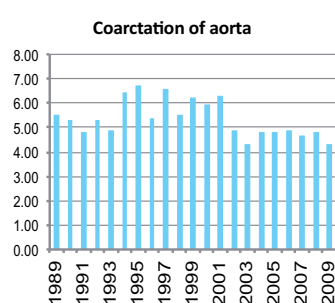
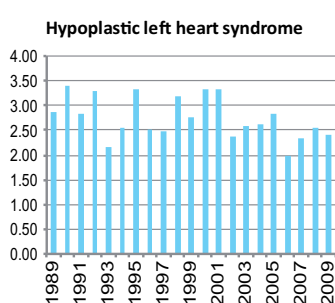
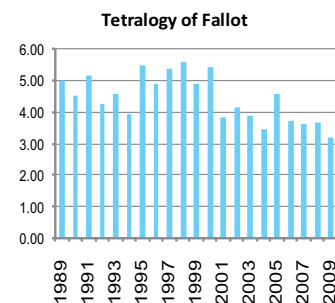
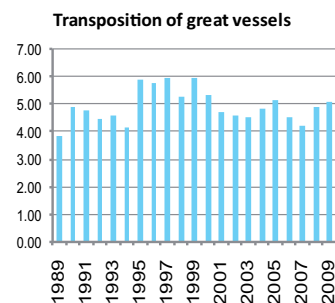
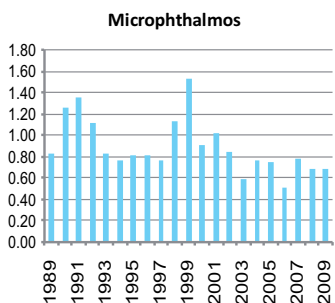
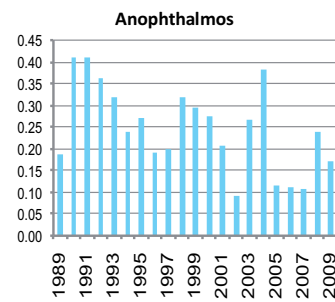
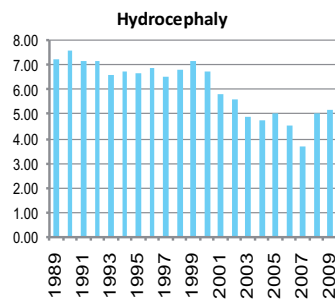
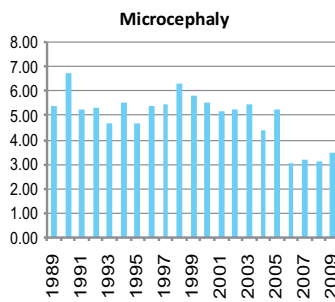
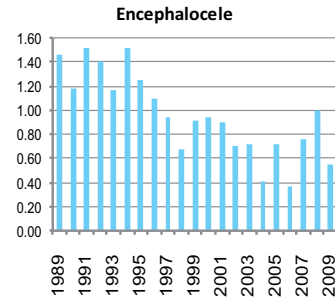
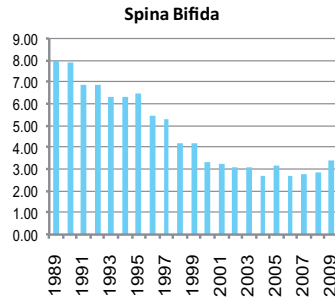
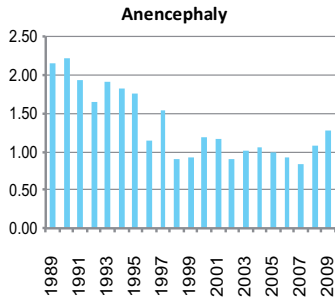
	1974-1979	1980-1984	1985-1989*	1990-1994	1995-1999	2000-2004	2005-2009
Total births			375,840	1,918,123	1,768,280	1,670,796	1,658,158
Anencephaly			2.16	1.90	1.26	1.07	1.00
Spina bifida			7.96	6.88	5.16	3.08	2.96
Encephalocele			1.46	1.36	0.98	0.73	0.67
Microcephaly			5.40	5.49	5.51	5.16	3.62
Holoprosencephaly			nr	nr	nr	nr	0.78*
Hydrocephaly			7.21	7.05	6.80	5.55	4.64
Anophthalmos			0.19	0.35	0.25	0.25	0.14
Microphthalmos			0.82	1.07	1.01	0.83	0.68
Unspecified Anophthalmos/Microphthalmos			nr	nr	nr	nr	nr
Anotia			nr	nr	nr	nr	0.06*
Microtia			nr	nr	nr	nr	0.92*
Unspecified Anotia/Microtia			nr	nr	nr	nr	nr
Transposition of great vessels			3.86	4.57	5.76	4.79	4.76
Tetralogy of Fallot			4.98	4.48	5.24	4.13	3.76
Hypoplastic left heart syndrome			2.87	2.86	2.86	2.84	2.41
Coarctation of aorta			5.51	5.34	6.10	5.25	4.72
Choanal atresia, bilateral			2.66	2.03	2.46	2.83	2.10
Cleft palate without cleft lip			6.70	7.17	7.46	6.94	6.85
Cleft lip with or without cleft palate			10.70	11.37	10.98	9.43	9.09
Oesophageal atresia/stenosis with or without fistula			3.35	3.47	3.40	2.91	2.47
Small intestine atresia/stenosis			3.49	3.47	3.60	3.91	3.82
Anorectal atresia/stenosis			5.75	5.13	5.03	4.35	3.69
Undescended testis (36 weeks of gestation or later)			36.03	34.29	32.65	38.32	36.16
Hypospadias			27.11	26.78	27.20	nr	26.45*
Epispadias			nr	nr	nr	nr	0.64*
Indeterminate sex			0.88	0.67	0.69	0.98	1.30
Renal agenesis			5.27	4.97	5.05	5.06	5.00
Cystic kidney			4.47	4.96	6.10	7.07	6.97
Bladder exstrophy			0.35	0.45	0.37	0.35	0.31
Polydactyly, preaxial			12.21	11.88	11.92	13.96	13.79
Total Limb reduction defects (include unspecified)			4.76	4.65	4.18	3.82	3.45
Transverse			nr	nr	nr	nr	nr
Preaxial			nr	nr	nr	nr	nr
Postaxial			nr	nr	nr	nr	nr
Intercalary			nr	nr	nr	nr	nr
Mixed			nr	nr	nr	nr	nr
Unspecified			nr	nr	nr	nr	nr
Diaphragmatic hernia			3.59	3.77	3.63	3.31	3.20
Omphalocele			3.72	5.67	6.14*	nr	2.19*
Gastroschisis			nr	nr	nr	nr	4.06*
Unspecified Omphalocele/Gastroschisis			nr	nr	nr	nr	nr
Prune belly sequence			nr	nr	nr	nr	nr
Trisomy 13			1.41	1.13	1.11	1.20	1.18
Trisomy 18			2.02	2.18	2.39	2.21	2.48
Down syndrome, all ages (include age unknown)			12.13	13.21	13.62	14.49	14.41
<20			nr	nr	nr	nr	nr
20-24			nr	nr	nr	nr	nr
25-29			nr	nr	nr	nr	nr
30-34			nr	nr	nr	nr	nr
35-39			nr	nr	nr	nr	nr
40-44			nr	nr	nr	nr	nr
45+			nr	nr	nr	nr	nr
unknown			---	---	---	---	---

nr = not reported

* data include less than 5 years

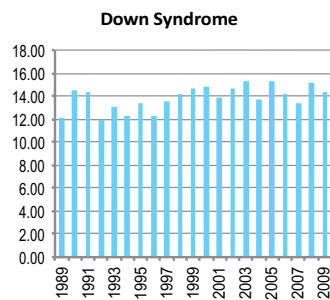
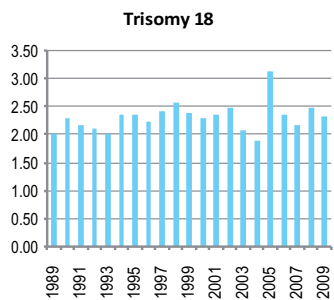
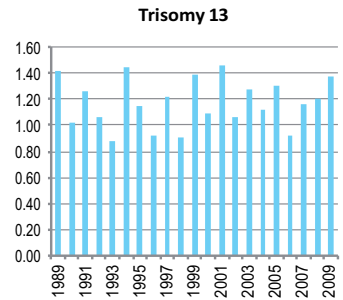
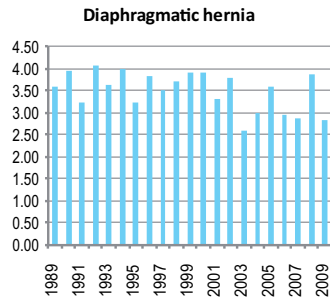
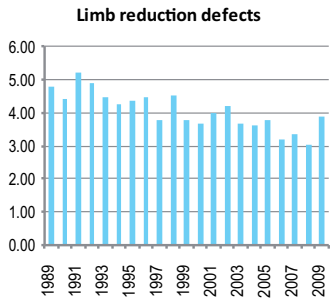
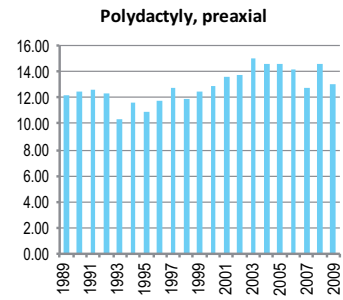
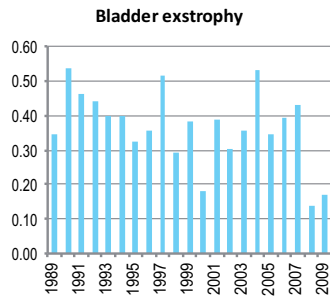
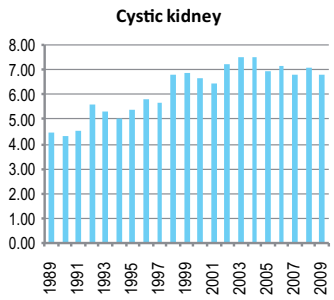
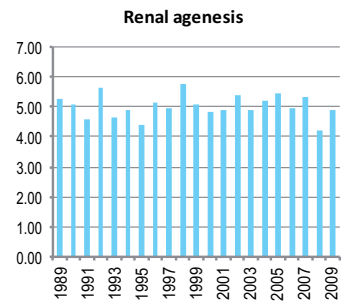
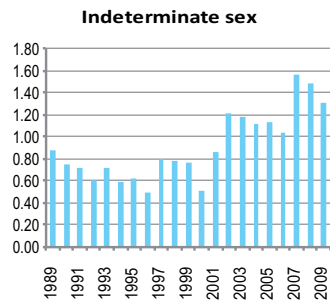
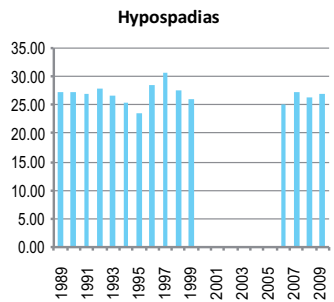
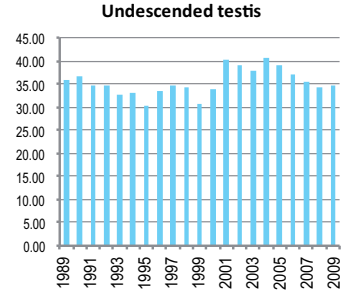
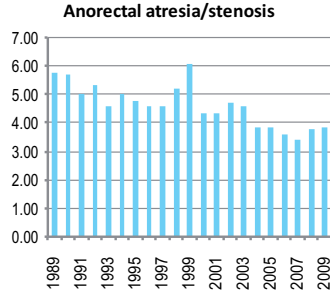
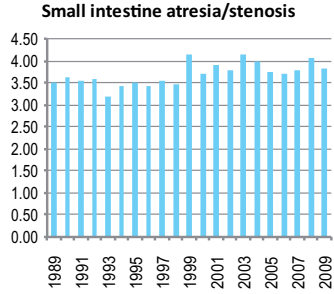
Canada National: CCASS

Time trends 1989-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates

Canada National: CCASS



Note: ■ L+S rates

Chile-Maule: RRM-C-SSM

Regional Register Congenital Malformational Maule Health Service

History:

The register started in 2001 defined by order of Director Maule Health Service and assessed for South America.ECLAMC (Latin American Collaborative Study of Congenital Malformations) RRM-C-SSM became a member of ICBDSR in 2003.

Size and coverage:

RRM-C-SSM is located in a Region in the center of Chile, in Talca Maule Region.

Maule Region is situated between 34° 41' & 36° 33' S and 70° 20' & 72° 44' W. The surface is 30,535 kms² (4 % of Chile). 930,306 habitants. 37,4% rurality.

Cellulosa producer and agricultural products.

The number of participating are 13 public hospitals from 2001 and since 2004 will included the unique private maternity of the region. There are around 13.500 births annually (2002).

The information about livebirths and stillbirths are collected from 13 maternity hospitals in the region for pediatricians and midwives. Stillbirths of at least 500g birthweight have been included since 2001.

Legislation and funding:

The registry is based on the information of births and notification of congenital malformation ECLAMC from 2001 and funded by the Maule Health Service.

Sources of ascertainment:

Reporting is made by collaborating pediatricians and midwives at the delivery units of participating hospitals.

Exposure information:

Detailed information on various risk factor exposures, maternal and paternal occupation, diseases and other information available.

Background information:

Epidemiological information on all births is available from participating hospitals and statistical units.

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Maule Region
Av. Brazil 753, Linares, Chile.

Phone: 56-73-566645

E-mail: macaness@yahoo.it
rrmc@ssmaule.cl

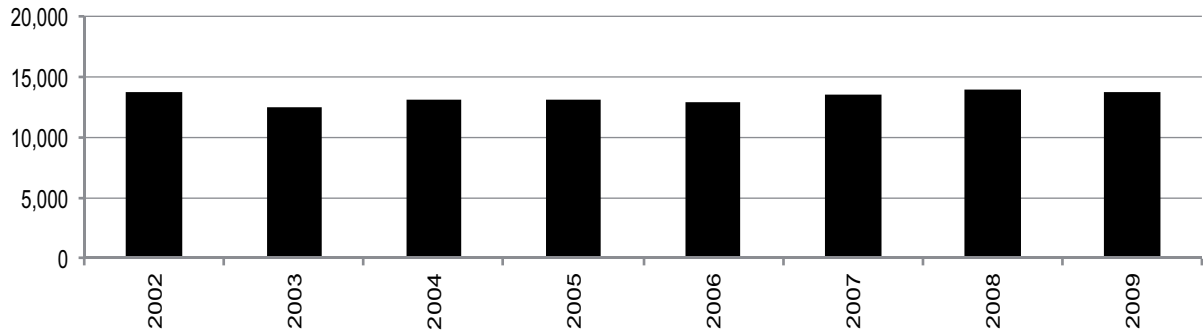
Rosa GajardoAbarza
Dirección Servicio de Salud del Maule
Maule Region

Phone: 56-71-411698

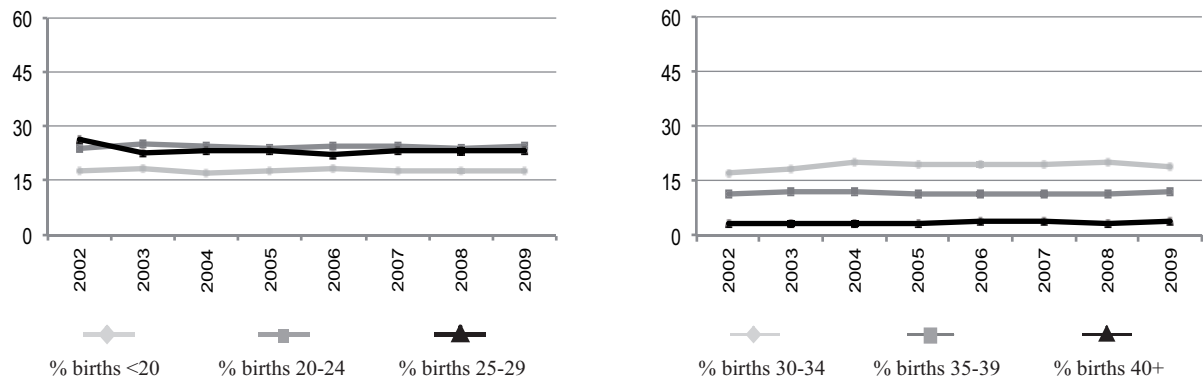
E-mail: rgajardo@ssmaule.cl

Chile-Maule: RRM-C-SSM

Total births by year



Percentage of births by year and maternal age



Chile-Maule: RMMC-SSM, 2009

Live births (LB)	13,568
Stillbirths (SB)	82
Total births	13,650
Number of terminations of pregnancy (ToP) for birth defects	not permitted

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0		0.00
Spina bifida	0	0		0.00
Encephalocele	0	0		0.00
Microcephaly	1	0		0.73
Holoprosencephaly	0	0		0.00
Hydrocephaly	5	1		4.40
Anophthalmos	0	0		0.00
Microphthalmos	0	0		0.00
Unspecified Anophthalmos/Microphthalmos	0	0		0.00
Anotia	0	0		0.00
Microtia	5	0		3.66
Unspecified Anotia/Microtia	0	0		0.00
Transposition of great vessels	0	0		0.00
Tetralogy of Fallot	0	1		0.73
Hypoplastic left heart syndrome	0	0		0.00
Coarctation of aorta	0	0		0.00
Choanal atresia, bilateral	0	0		0.00
Cleft palate without cleft lip	4	0		2.93
Cleft lip with or without cleft palate	10	0		7.33
Oesophageal atresia/stenosis with or without fistula	1	0		0.73
Small intestine atresia/stenosis	4	0		2.93
Anorectal atresia/stenosis	2	0		1.47
Undescended testis (36 weeks of gestation or later)	15	0		10.99
Hypospadias	11	0		8.06
Epispadias	0	0		0.00
Indeterminate sex	0	0		0.00
Renal agenesis	2	0		1.47
Cystic kidney	2	0		1.47
Bladder exstrophy	0	0		0.00
Polydactyly, preaxial	20	1		15.38
Total Limb reduction defects (include unspecified)	5	0		3.66
Transverse	0	0		0.00
Preaxial	0	0		0.00
Postaxial	0	0		0.00
Intercalary	0	0		0.00
Mixed	0	0		0.00
Unspecified	5	0		3.66
Diaphragmatic hernia	2	0		1.47
Omphalocele	0	0		0.00
Gastroschisis	4	0		2.93
Unspecified Omphalocele/Gastroschisis	0	0		0.00
Prune belly sequence	0	0		0.00
Trisomy 13	1	0		0.73
Trisomy 18	2	0		1.47
Down syndrome, all ages (include age unknown)	27	2		21.25
<20	2	0		8.39
20-24	3	0		8.98
25-29	0	0		0.00
30-34	8	0		30.78
35-39	8	1		55.18
40-44	6	1		135.92
45+	0	0		0.00
unknown	0	0		---

Chile-Maule: RRM-C-SSM, Previous years rates 2002 - 2009

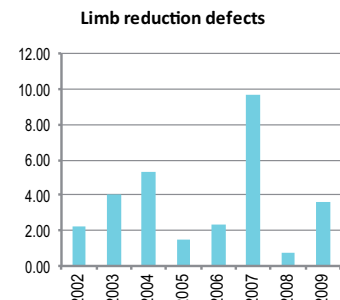
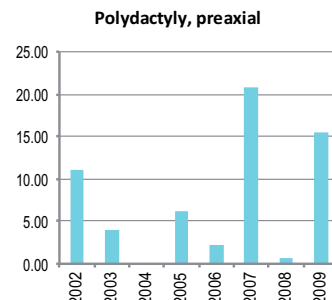
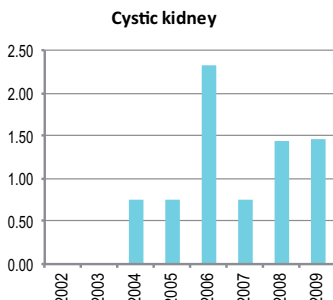
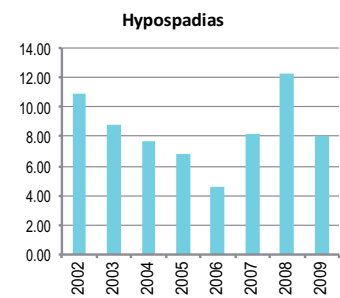
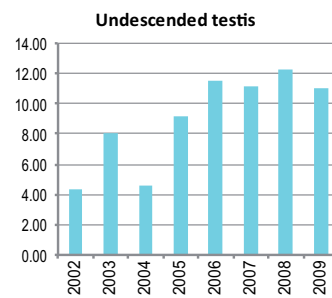
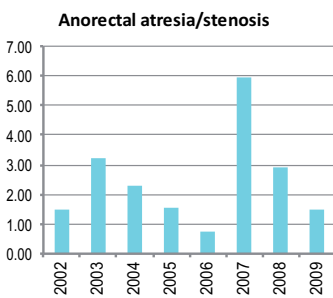
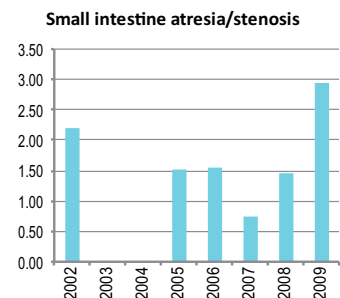
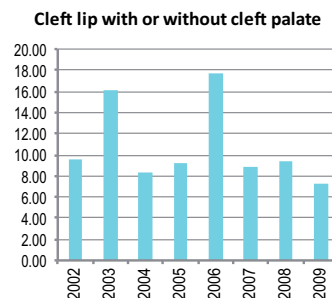
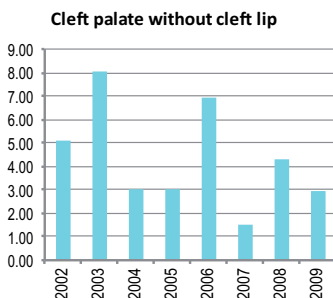
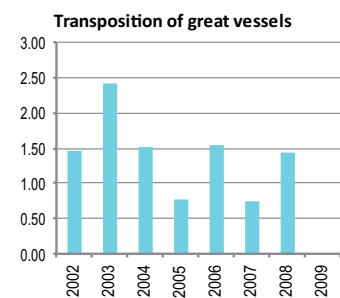
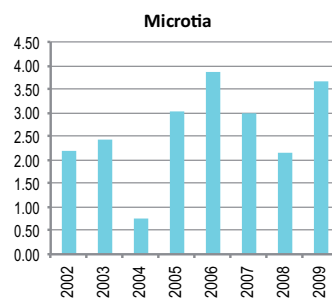
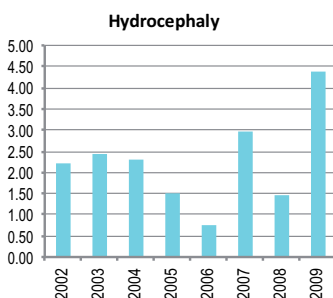
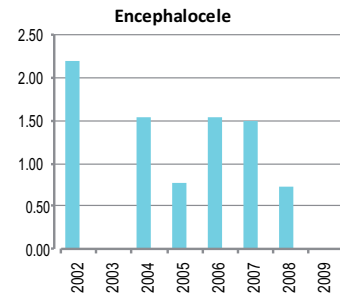
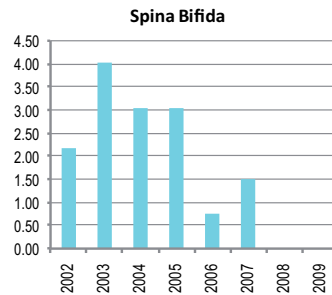
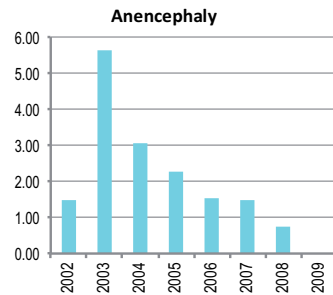
Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004*	2005-2009
Total births						39,229	67,026
Anencephaly						3.31	1.19
Spina bifida						3.06	1.04
Encephalocele						1.27	0.90
Microcephaly						1.78	1.04
Holoprosencephaly						0.51	0.00
Hydrocephaly						2.29	2.24
Anophthalmos						0.25	0.00
Microphthalmos						1.02	0.30
Unspecified Anophthalmos/Microphthalmos						0.00	0.00
Anotia						0.51	0.00
Microtia						1.78	3.13
Unspecified Anotia/Microtia						0.00	0.00
Transposition of great vessels						1.78	0.90
Tetralogy of Fallot						1.27	0.90
Hypoplastic left heart syndrome						0.25	0.45
Coarctation of aorta						0.00	0.30
Choanal atresia, bilateral						1.02	0.00
Cleft palate without cleft lip						5.35	3.73
Cleft lip with or without cleft palate						11.22	10.44
Oesophageal atresia/stenosis with or without fistula						0.51	1.49
Small intestine atresia/stenosis						0.76	1.64
Anorectal atresia/stenosis						2.29	2.54
Undescended testis (36 weeks of gestation or later)						5.61	11.04
Hypospadias						9.18	8.06
Epispadias						0.00	0.15
Indeterminate sex						0.76	0.60
Renal agenesis						0.76	1.34
Cystic kidney						0.25	1.34
Bladder exstrophy						0.25	0.00
Polydactyly, preaxial						5.10	9.10
Total Limb reduction defects (include unspecified)						3.82	3.58
Transverse						2.55	1.64
Preaxial						0.00	0.30
Postaxial						0.00	0.00
Intercalary						0.00	0.15
Mixed						0.00	0.00
Unspecified						0.00	1.49
Diaphragmatic hernia						0.76	1.34
Omphalocele						1.27	1.49
Gastroschisis						1.53	2.24
Unspecified Omphalocele/Gastroschisis						0.00	0.45
Prune belly sequence						0.25	0.30
Trisomy 13						1.78	0.75
Trisomy 18						0.51	2.09
Down syndrome, all ages (include age unknown)						22.18	21.04
<20						1.44	11.70
20-24						4.17	7.99
25-29						10.46	3.87
30-34						17.87	15.32
35-39						63.46	59.32
40-44						227.27	167.67
45+						444.44	245.90
unknown						---	---

* data include less than 5 years

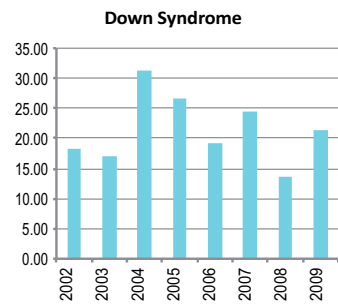
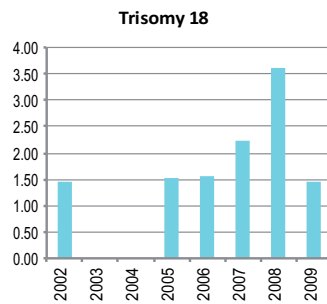
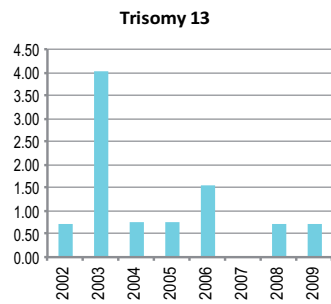
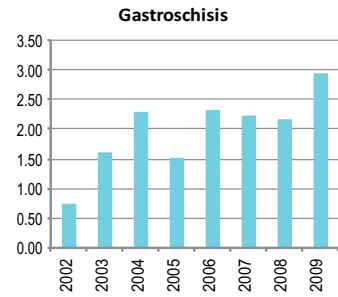
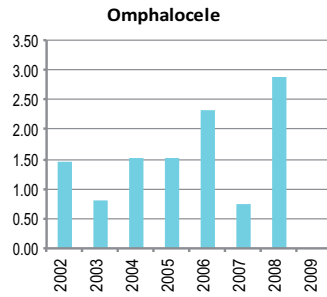
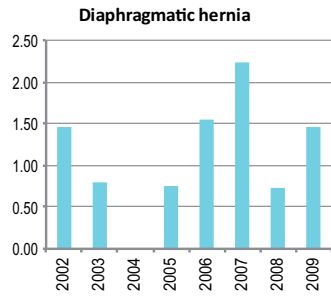
Chile-Maule: RRMCS-SM

Time trends 2002-2009 (Birth prevalence rates per 10,000)

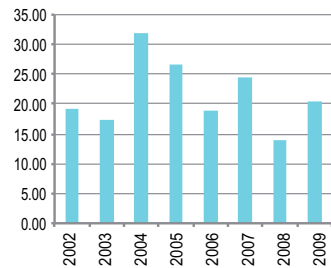


Note: ■ L+S rates

Chile-Maule: RRMCSM



Down Syndrome standardized total rate



Note: ■ L+S rates

Colombia-Bogota: BCMSP

Bogota Congenital Malformations Surveillance Program

History:

The Bogota Congenital Malformations Surveillance Program was initiated by the Institute of Human Genetics of the Pontificia Universidad Javeriana in the year 2001 and was developed based on the Latin American Collaborative Study of Congenital Malformations (ECLAMC). In 2006 the health authorities of the city of Bogotá (District Health Secretary of Bogotá) joined the program and since then have become a key ally for its adequate functioning.

Size and Coverage:

The program is hospital based register. In 2001 surveillance began in one hospital of Bogotá D.C. and coverage has been expanded up to a total of 45 hospitals in 2011. In the past year approximately 104,700 births were monitored.

Legislation and funding:

The program is based on the Latin American Collaborative Study of Congenital Malformations, ECLAMC, and is financed by the health authorities of the city of Bogota (District Health Secretary of Bogotá) together with the Pontificia Universidad Javeriana. In 2007 the Ministry of Social Protection issued a decree which enforced the implementation of birth defects surveillance systems.

Sources of ascertainment:

There are two modalities for surveillance: monitor and case-control. The first one depends on the staff of each hospital (nurses, gynecologists, neonatologists), and the latter is held by physicians who are previously trained to actively search for congenital anomalies through a systematic physical exam. Both modalities include a format

that obliges health care providers to realize a textual and thorough description of the anomalies according to the ECLAMC manual.

Exposure Information:

The format that is filled out by physicians that participate in the case-control modality includes many variables such as immunizations, acute diseases during pregnancy, chronic diseases, physical factors (x-rays, surgery, radiotherapy etc.), drugs, smoking, recreational drugs, alcohol, level of education of parents and place where they lived during the periconceptional period.

Background information:

Epidemiological information may be accessed at www.anomaliascongenitas.org

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Website: www.anomaliascongenitas.org

Colombia-Bogota: BCMSP, 2009

Live births (LB)	30,385
Stillbirths (SB)	101
Total births	30,486
Number of terminations of pregnancy (ToP) for birth defects	not permitted

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	4	1		1.64
Spina bifida	5	1		1.97
Encephalocele	0	0		0.00
Microcephaly	5	0		1.64
Holoprosencephaly	1	1		0.66
Hydrocephaly	11	1		3.94
Anophthalmos	1	0		0.33
Microphthalmos	2	0		0.66
Unspecified Anophthalmos/Microphthalmos	0	0		0.00
Anotia	0	0		0.00
Microtia	22	0		7.22
Unspecified Anotia/Microtia	1	0		0.33
Transposition of great vessels	1	0		0.33
Tetralogy of Fallot	2	0		0.66
Hypoplastic left heart syndrome	2	1		0.98
Coarctation of aorta	1	0		0.33
Choanal atresia, bilateral	3	0		0.98
Cleft palate without cleft lip	16	1		5.58
Cleft lip with or without cleft palate	26	0		8.53
Oesophageal atresia/stenosis with or without fistula	10	0		3.28
Small intestine atresia/stenosis	4	1		1.64
Anorectal atresia/stenosis	9	1		3.28
Undescended testis (36 weeks of gestation or later)	11	0		3.61
Hypospadias	12	0		3.94
Epispadias	2	0		0.66
Indeterminate sex	7	0		2.30
Renal agenesis	3	1		1.31
Cystic kidney	4	0		1.31
Bladder exstrophy	0	0		0.00
Polydactyly, preaxial	51	0		16.73
Total Limb reduction defects (include unspecified)	10	0		3.28
Transverse	0	0		0.00
Preaxial	0	0		0.00
Postaxial	0	0		0.00
Intercalary	0	0		0.00
Mixed	0	0		0.00
Unspecified	9	0		5.90
Diaphragmatic hernia	3	0		0.98
Omphalocele	0	0		0.00
Gastroschisis	5	0		1.64
Unspecified Omphalocele/Gastroschisis	0	0		0.00
Prune belly sequence	0	0		0.00
Trisomy 13	0	0		0.00
Trisomy 18	1	2		0.98
Down syndrome, all ages (include age unknown)	33	0		10.82
<20	3	0		5.81
20-24	2	0		2.61
25-29	4	0		5.49
30-34	1	0		1.90
35-39	14	0		48.88
40-44	6	0		73.71
45+	3	0		361.45
unknown	0	0		---

Costa Rica: CREC

Costa Rican Birth Defects Register Centre

History:

The registry was created in 1986, based in a government decret by which birth defects became subject of obligatory notification. The program became an ICBD SR member in September 2003.

Size and coverage:

The program is population based. Includes all births from the National Security System (CCSS) which covers about 98% of all births occurred in the country, and births of private hospitals. There are approximately 75000 annual births in Costa Rica.

Legislation and funding:

The Registry is financed by the government as a program of the Costa Rican Institute of Research and Training in Nutrition and Health (INCIENSA), Institute that depends from the Ministry of Health.

Sources of ascertainment:

Until 2008 reporting was made only by neonatologists, pediatricians and general physicians before newborns discharge from maternity services, with biostatistics personal collaboration. In 2009 the age of obligatory notification was extended to children under one year of age

Exposure information:

In 2009 began rubella vaccine exposure information collect in order to support the performance of Congenital Rubella Syndrome surveillance

Background information:

Linkage studies are possible with other statistical data from the National Statistics Center and the National Security System Statistical Center

Addresses and Staff:

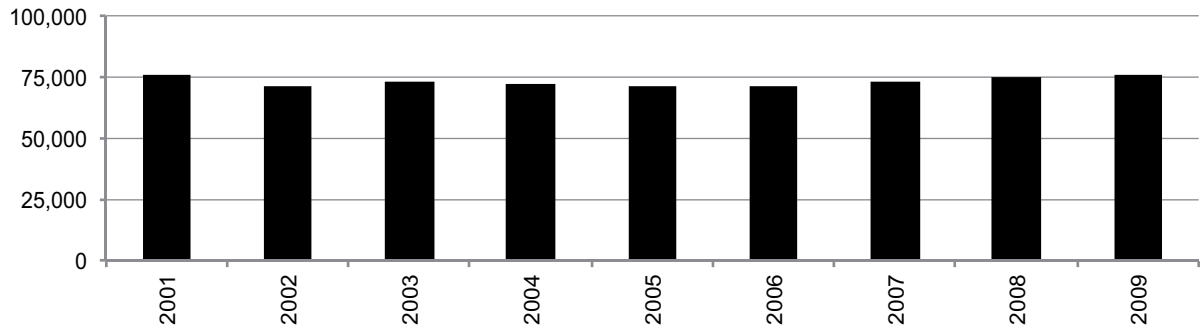
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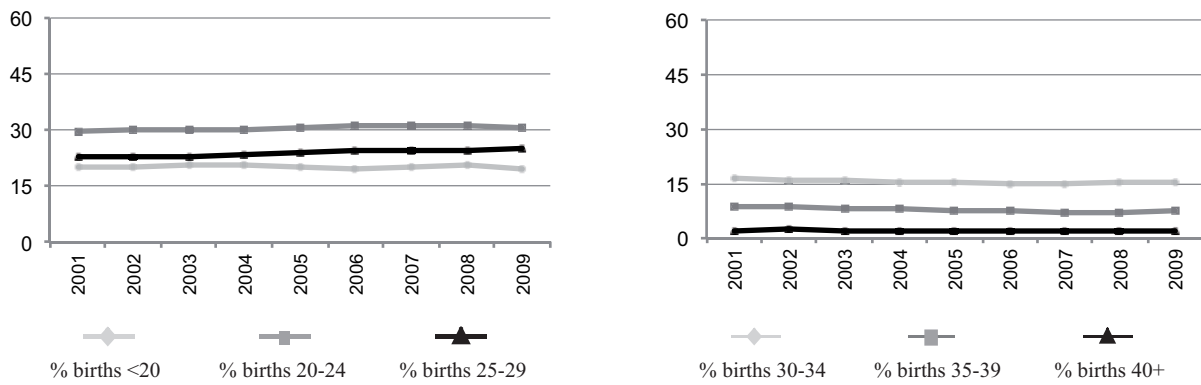
Monitoring Systems

Costa Rica: CREC

Total births by year



Percentage of births by year and maternal age



Costa Rica: CREC, 2009

Live births (LB)	75,000
Stillbirths (SB)	493
Total births	75,493
Number of terminations of pregnancy (ToP) for birth defects	not permitted

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	7	1		1.06
Spina bifida	22	0		2.91
Encephalocele	8	0		1.06
Microcephaly	19	0		2.52
Holoprosencephaly	1	0		0.13
Hydrocephaly	14	1		1.99
Anophthalmos	1	0		0.13
Microphthalmos	3	0		0.40
Unspecified Anophthalmos/Microphthalmos	0	0		0.00
Anotia	6	1		0.93
Microtia	18	0		2.38
Unspecified Anotia/Microtia	2	0		0.26
Transposition of great vessels	4	0		0.53
Tetralogy of Fallot	8	0		1.06
Hypoplastic left heart syndrome	7	0		0.93
Coarctation of aorta	8	0		1.06
Choanal atresia, bilateral	1	0		0.13
Cleft palate without cleft lip	19	0		2.52
Cleft lip with or without cleft palate	49	0		6.49
Oesophageal atresia/stenosis with or without fistula	17	0		2.25
Small intestine atresia/stenosis	3	0		0.40
Anorectal atresia/stenosis	17	0		2.25
Undescended testis (36 weeks of gestation or later)	104	1		13.91
Hypospadias	48	1		6.49
Epispadias	1	0		0.13
Indeterminate sex	9	0		1.19
Renal agenesis	6	0		0.79
Cystic kidney	9	1		1.32
Bladder exstrophy	0	0		0.00
Polydactyly, preaxial (*)	89	0		11.79
Total Limb reduction defects (include unspecified)	32	1		4.37
Transverse	nr	nr		nr
Preaxial	nr	nr		nr
Postaxial	nr	nr		nr
Intercalary	nr	nr		nr
Mixed	nr	nr		nr
Unspecified	nr	nr		nr
Diaphragmatic hernia	11	1		1.59
Omphalocele	12	0		1.59
Gastroschisis	17	1		2.38
Unspecified Omphalocele/Gastroschisis	nr	nr		nr
Prune belly sequence	3	0		0.40
Trisomy 13	2	0		0.26
Trisomy 18	8	0		1.06
Down syndrome, all ages (include age unknown)	75	1		10.07
<20	7	1		5.45
20-24	9	0		3.94
25-29	7	0		3.74
30-34	13	0		11.32
35-39	22	0		39.42
40-44	14	0		98.31
45+	0	0		0.00
unknown	3	0		---

nr = not reported

(*) All polydactyly included.

Costa Rica: CREC, Previous years rates 2001 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

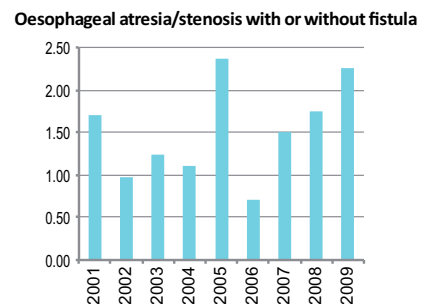
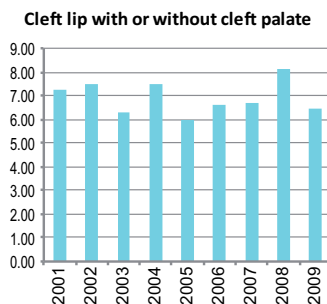
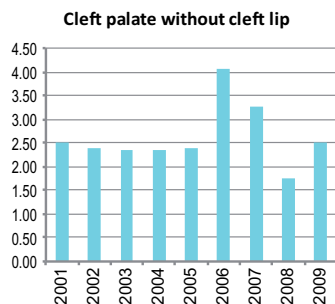
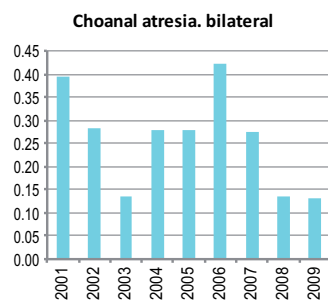
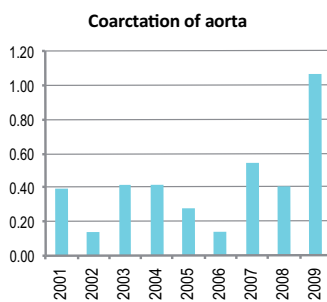
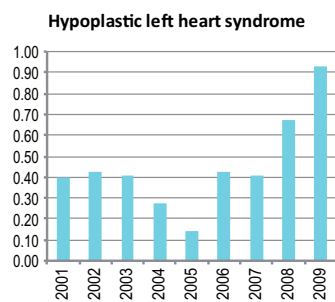
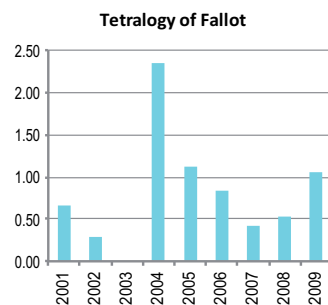
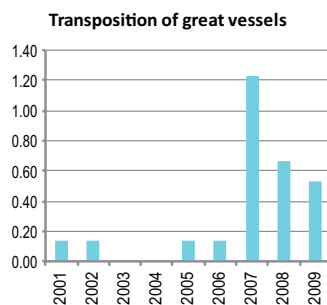
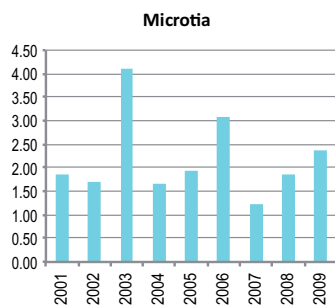
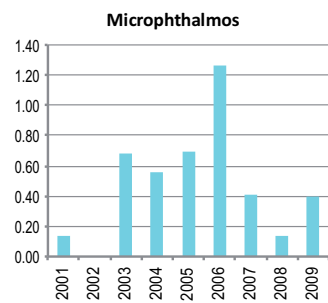
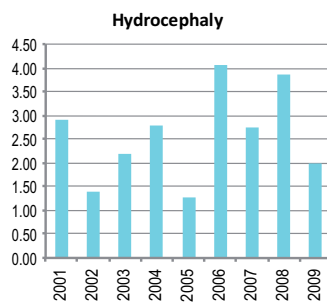
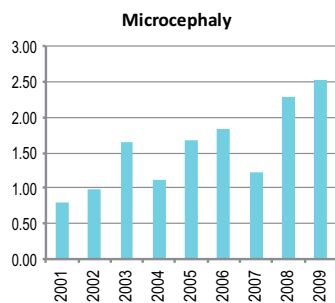
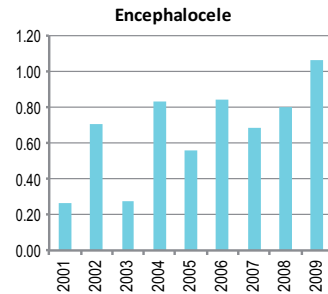
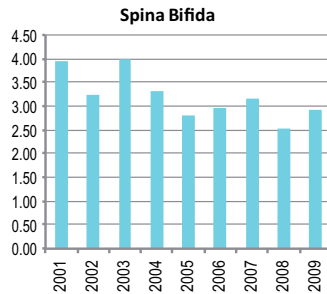
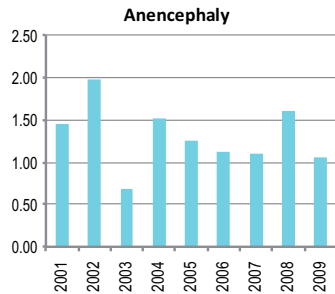
	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004*	2005-2009
Total births						292,320	366,261
Anencephaly						1.40	1.23
Spina bifida						3.63	2.87
Encephalocele						0.51	0.79
Microcephaly						1.13	1.91
Holoprosencephaly						0.38	0.55
Hydrocephaly						2.33	2.78
Anophthalmos						0.21	0.25
Microphthalmos						0.34	0.57
Unspecified Anophthalmos/Microphthalmos						0.00	0.00
Anotia						0.24	0.79
Microtia						2.33	2.10
Unspecified Anotia/Microtia						0.00	0.05
Transposition of great vessels						0.07	0.55
Tetralogy of Fallot						0.82	0.79
Hypoplastic left heart syndrome						0.38	0.52
Coarctation of aorta						0.34	0.49
Choanal atresia, bilateral						0.27	0.25
Cleft palate without cleft lip						2.39	2.78
Cleft lip with or without cleft palate						7.12	6.80
Oesophageal atresia/stenosis with or without fistula						1.27	1.72
Small intestine atresia/stenosis						0.55	0.55
Anorectal atresia/stenosis						2.46	2.87
Undescended testis (36 weeks of gestation or later)						10.02	10.46
Hypospadias						6.09	6.77
Epispadias						0.03	0.11
Indeterminate sex						1.54	1.69
Renal agenesis						0.58	0.90
Cystic kidney						0.34	1.04
Bladder exstrophy						0.07	0.03
Polydactyly, preaxial						6.88	10.95
Total Limb reduction defects (include unspecified)						4.96	4.45
Transverse						nr	nr
Preaxial						nr	nr
Postaxial						nr	nr
Intercalary						nr	nr
Mixed						nr	nr
Unspecified						nr	nr
Diaphragmatic hernia						1.51	1.58
Omphalocele						0.41	1.37
Gastroschisis						1.54	2.02
Unspecified Omphalocele/Gastroschisis						0.21	0.00
Prune belly sequence						0.24	0.41
Trisomy 13						1.30	0.52
Trisomy 18						0.89	1.04
Down syndrome, all ages (include age unknown)						8.45	8.71
<20						5.88	4.13
20-24						5.13	3.91
25-29						4.02	4.03
30-34						5.82	6.70
35-39						25.29	31.33
40-44						67.88	94.69
45+						113.90	208.82
unknown						---	---

nr = not reported

* data include less than 5 years

Costa Rica: CREC

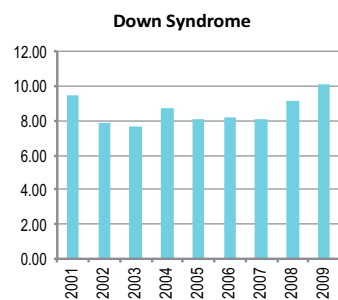
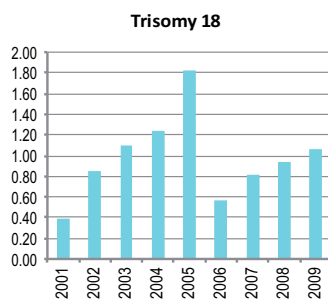
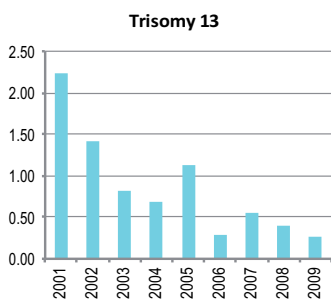
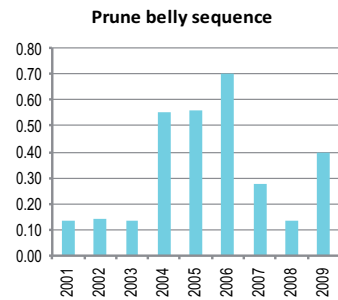
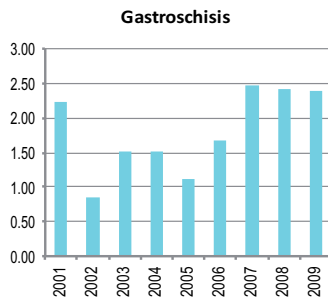
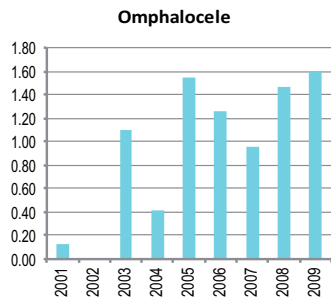
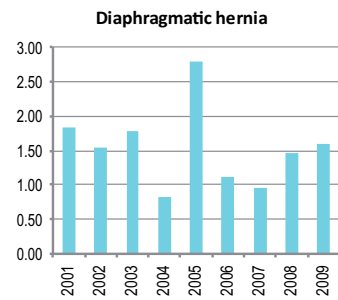
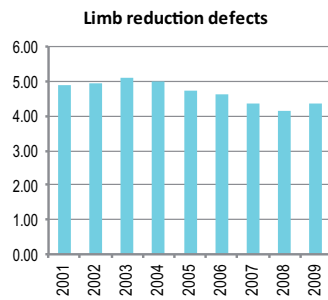
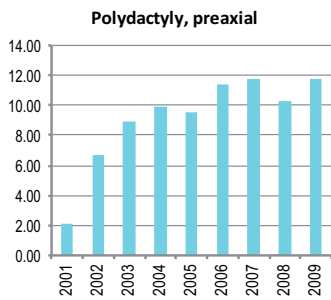
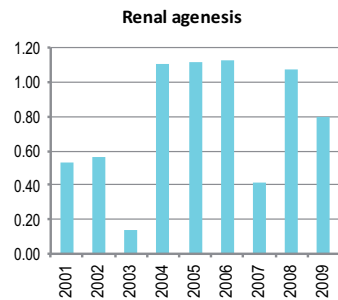
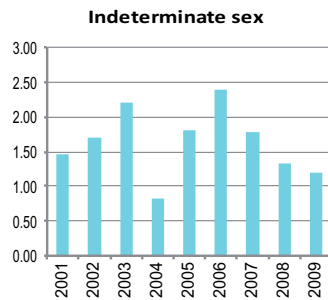
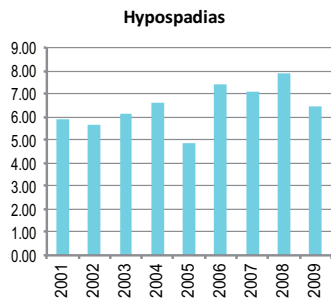
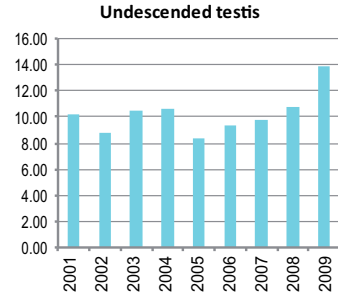
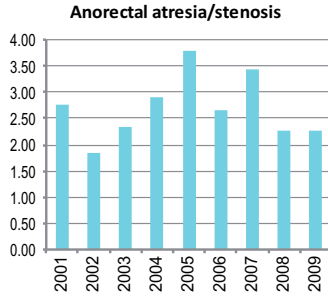
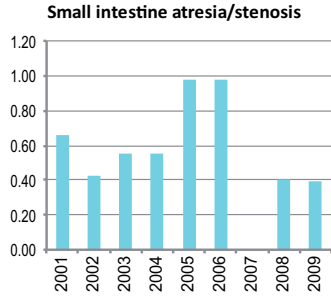
Time trends 2001-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates

Monitoring Systems

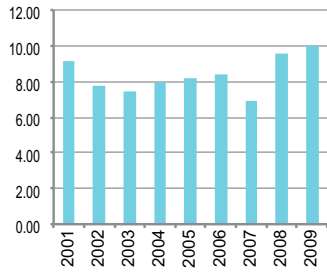
Costa Rica: CREC



Note: ■ L+S rates

Costa Rica: CREC

Down Syndrome standardized total rate



Note: ■ L+S rates

Cuba: RECUMAC

Cuban Register of Congenital Malformation

History:

The program started in 1985 and has grown in size and coverage. The registry became a member of ICBDSR in 2003.

Size and coverage:

Reports are obtained from hospitals distributed all over Cuba. The number of participating hospitals has grown in 1986 to 60 at the present time. The annual number of birth is approximately 121,000 representing almost 96% of all births.

Legislation and funding:

RIt is a research programme with voluntary participation of hospitals. The registry is associated with the National Centre of Medical Genetics, and is financed by Health Public Ministry of Cuba.

Sources of ascertainment:

Reports are obtained from delivery units paediatric departments of the participating hospitals. Mothers are also interviewed directly to gather information and fill in the RECUMAC standard protocols.

Exposure information:

The mother of each reported infant and the mother of a control infant, the next non malformed infant born at the hospital with the same sex as the proband are interviewed on various exposures, including drug usage and parental occupation.

Background information:

Total number of birth by sex and number of twin pairs in each participating hospital are known. Other background information is obtained partly from summarizing tables of births in each participating hospital, partly from the control material.

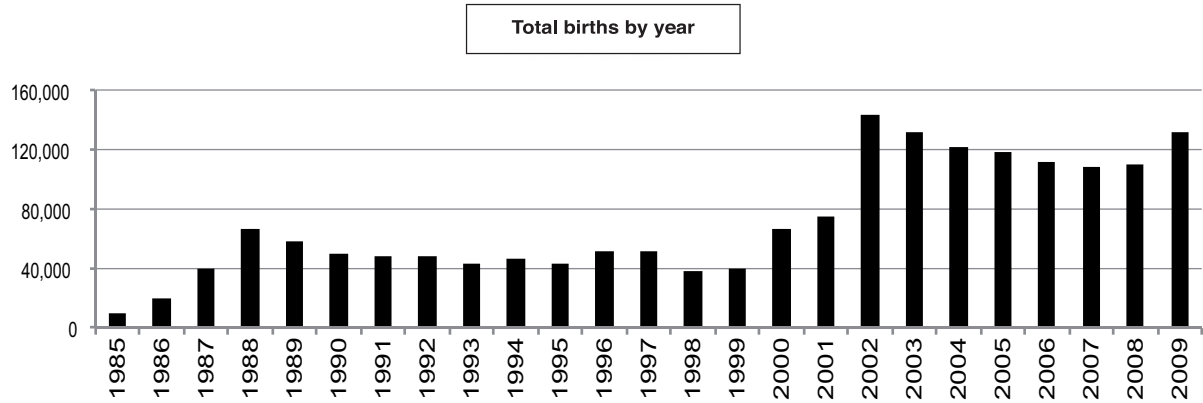
Addresses and Staff:

Dr. Yudelkis Benítez Cordero
Centro Nacional de Genética Medica ISCM-
Habana

Victoria de Giròn, C.P. 16000
Ciudad de la Habana, Cuba.

E-mail: yudelkisbc@cngen.sld.cu

Cuba: RECUMAC



Terminations of pregnancy (ToPs) in selected malformations (2007-2009)
 (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	120	98.4	Cystic kidney	121	86.4
Spina bifida	160	87.9	Limb reduction defects	22	28.9
Encephalocele	57	91.9	Diaphragmatic hernia	74	75.5
Holoprosencephaly	35	87.5	Omphalocele	80	95.2
Hydrocephaly	274	88.7	Gastroschisis	231	95.5
Hypoplastic left heart syndrome	73	91.3	Trisomy 13	32	76.2
Cleft palate without cleft lip	8	12.3	Trisomy 18	58	81.7
Cleft lip with or without cleft palate	47	28.1	Down syndrome	208	45.5
Renal agenesis	42	77.8			

Total ToPs with births defects = 3,795 (Ratio ToPs/Births: 10.86 per 1,000)
 (*) % of ToPs = ToPs/(ToPs+Births)

Cuba: RECUMAC, 2009

Live births (LB)	130,037
Stillbirths (SB)	1,460
Total births	131,497
Number of terminations of pregnancy (ToP) for birth defects	1,414

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	1	71	5.48
Spina bifida	10	0	30	3.04
Encephalocele	2	0	25	2.05
Microcephaly	2	0	4	0.46
Holoprosencephaly	1	0	16	1.29
Hydrocephaly	13	2	84	7.53
Anophthalmos	0	0	0	0.00
Microphthalmos	1	0	0	0.08
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	3	0	0	0.23
Microtia	9	0	0	0.68
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	6	0	14	1.52
Tetralogy of Fallot	5	0	21	1.98
Hypoplastic left heart syndrome	4	0	31	2.66
Coarctation of aorta	3	0	0	0.23
Choanal atresia, bilateral	0	0	0	0.00
Cleft palate without cleft lip	21	0	8	2.21
Cleft lip with or without cleft palate	42	0	19	4.64
Oesophageal atresia/stenosis with or without fistula	20	2	16	2.89
Small intestine atresia/stenosis	10	1	32	3.27
Anorectal atresia/stenosis	1	0	2	0.23
Undescended testis (36 weeks of gestation or later)	29	0	0	2.21
Hypospadias	103	0	0	7.83
Epispadias	2	0	0	0.15
Indeterminate sex	6	0	0	0.46
Renal agenesis	5	0	15	1.52
Cystic kidney	6	0	43	3.73
Bladder exstrophy	0	0	0	0.00
Polydactyly, preaxial	17	0	0	1.29
Total Limb reduction defects (include unspecified)	13	0	3	1.22
Transverse	5	0	0	0.38
Preaxial	0	0	0	0.00
Postaxial	0	0	0	0.00
Intercalary	1	0	0	0.08
Mixed	0	0	0	0.00
Unspecified	7	0	0	0.53
Diaphragmatic hernia	11	0	22	2.51
Omphalocele	0	0	30	2.28
Gastroschisis	1	0	89	6.84
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	0	0	8	0.61
Trisomy 18	4	0	24	2.13
Down syndrome, all ages (include age unknown)	81	3	85	12.85
<20	7	0	1	3.96
20-24	15	1	3	4.43
25-29	10	1	2	4.14
30-34	17	1	3	9.82
35-39	22	0	43	49.51
40-44	6	0	29	145.71
45+	1	0	1	136.99
unknown	3	0	3	---

Cuba: RECUMAC, Previous years rates 1985 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births			191,491	234,691	223,546	536,617	578,401
Anencephaly			0.78	0.64	0.04	3.80	3.82
Spina bifida			4.86	2.81	2.51	4.08	4.44
Encephalocele			0.52	0.17	0.18	0.60	1.73
Microcephaly			0.63	0.43	0.31	0.37	0.54
Holoprosencephaly			0.26	0.04	0.04	0.15	0.90
Hydrocephaly			2.98	3.03	1.48	5.48	9.18
Anophthalmos			0.00	0.09	0.00	0.13	0.07
Microphthalmos			0.10	0.00	0.04	0.20	0.17
Unspecified Anophthalmos/Microphthalmos			0.00	0.00	0.00	0.02	0.05
Anotia			0.00	0.00	0.04	0.11	0.14
Microtia			0.78	0.77	0.76	0.61	0.47
Unspecified Anotia/Microtia			0.00	0.00	0.00	0.02	0.05
Transposition of great vessels			0.47	0.38	0.85	1.68	1.49
Tetralogy of Fallot			0.05	0.47	0.45	1.64	1.73
Hypoplastic left heart syndrome			0.63	0.94	0.49	0.75	2.14
Coarctation of aorta			0.05	0.09	0.13	0.35	0.47
Choanal atresia, bilateral			0.26	0.00	0.18	0.20	0.05
Cleft palate without cleft lip			1.46	1.41	1.48	1.53	1.85
Cleft lip with or without cleft palate			4.80	5.37	6.26	4.92	4.75
Oesophageal atresia/stenosis with or without fistula			1.10	1.53	1.92	2.42	2.59
Small intestine atresia/stenosis			0.84	0.77	0.63	1.32	2.58
Anorectal atresia/stenosis			1.31	1.53	1.07	1.29	1.12
Undescended testis (36 weeks of gestation or later)			4.86	3.71	2.95	2.68	2.52
Hypospadias			13.58	15.13	10.33	7.70	9.32
Epispadias			0.21	0.30	0.13	0.09	0.26
Indeterminate sex			0.21	0.17	0.18	0.39	0.40
Renal agenesis			0.63	0.21	0.36	0.69	1.26
Cystic kidney			1.20	1.11	0.40	1.90	3.68
Bladder exstrophy			0.21	0.13	0.18	0.13	0.07
Polydactyly, preaxial			0.10	0.21	0.40	0.76	0.85
Total Limb reduction defects (include unspecified)			2.77	2.77	2.24	2.40	2.09
Transverse			1.15	0.89	0.67	0.60	0.74
Preaxial			0.00	0.00	0.00	0.04	0.03
Postaxial			0.00	0.00	0.00	0.00	0.03
Intercalary			0.00	0.00	0.00	0.11	0.14
Mixed			0.00	0.00	0.00	0.24	0.36
Unspecified			0.00	0.94	0.49	1.08	0.86
Diaphragmatic hernia			1.57	1.41	1.30	1.60	2.66
Omphalocele			0.68	0.81	0.31	1.43	2.21
Gastroschisis			0.31	0.43	0.40	2.16	6.09
Unspecified Omphalocele/Gastroschisis			0.16	0.00	0.00	0.22	0.07
Prune belly sequence			0.10	0.13	0.00	0.02	0.07
Trisomy 13			0.37	0.60	0.31	0.80	1.30
Trisomy 18			0.10	0.26	0.45	0.52	1.88
Down syndrome, all ages (include age unknown)			8.15	7.71	7.38	9.22	12.53
<20			nr	nr	nr	nr	3.96*
20-24			nr	nr	nr	nr	4.43*
25-29			nr	nr	nr	nr	4.14*
30-34			nr	nr	nr	nr	9.82*
35-39			nr	nr	nr	nr	49.51*
40-44			nr	nr	nr	nr	145.71*
45+			nr	nr	nr	nr	136.99*
unknown			---	---	---	---	---

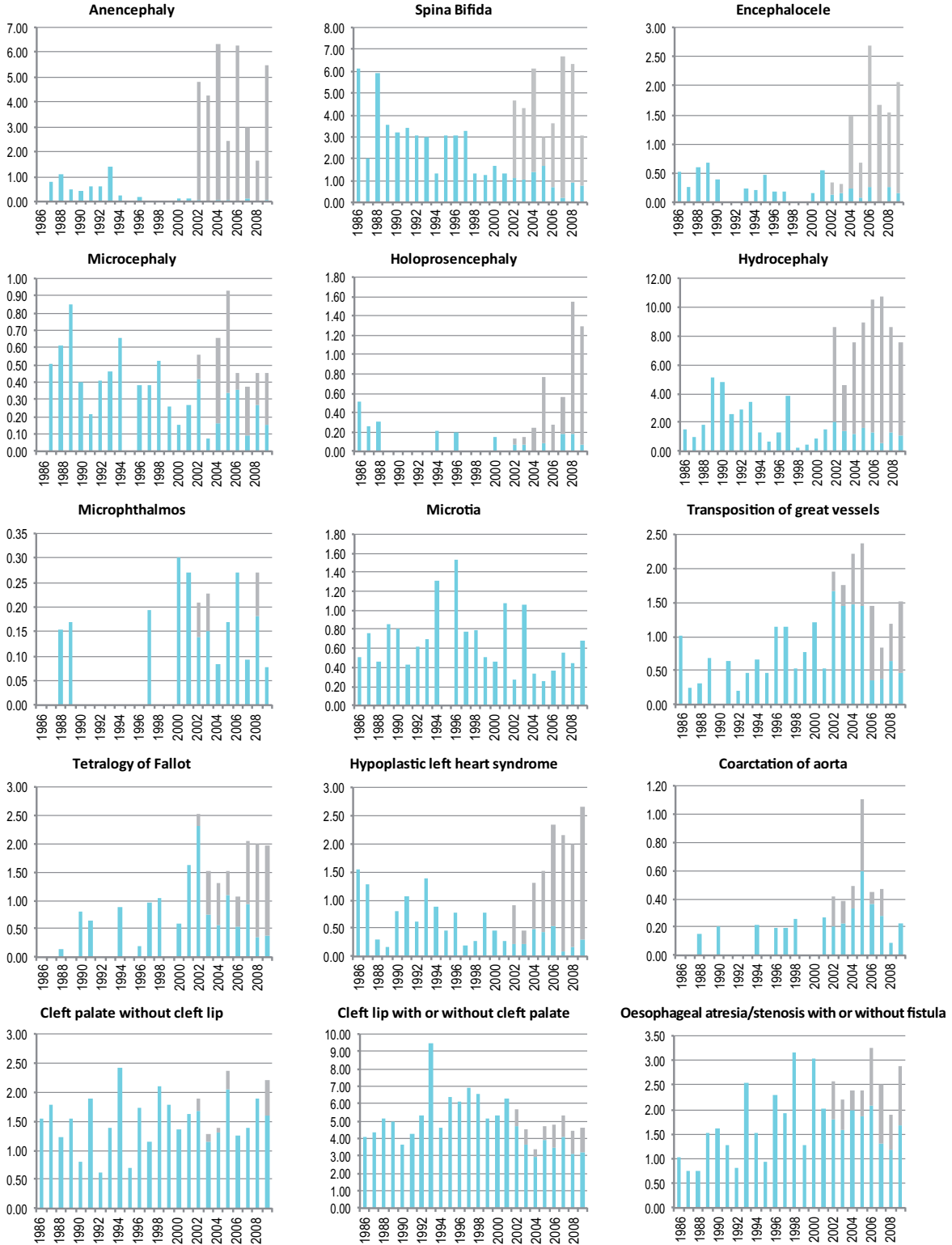
nr = not reported

* data include less than 5 years

Monitoring Systems

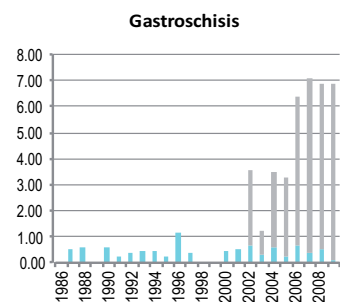
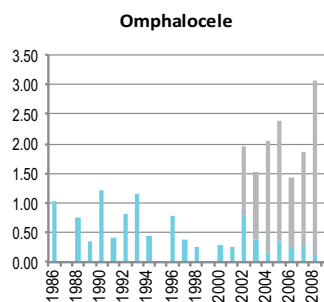
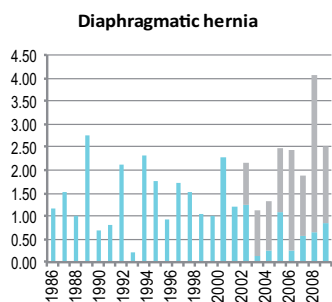
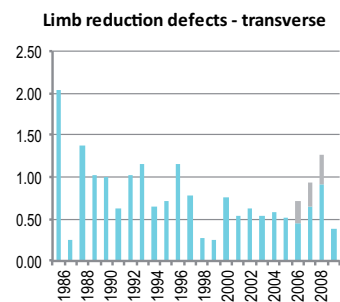
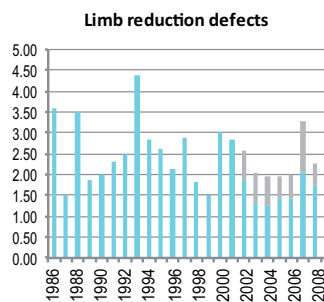
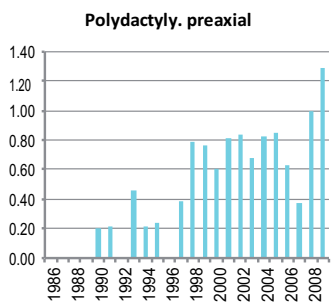
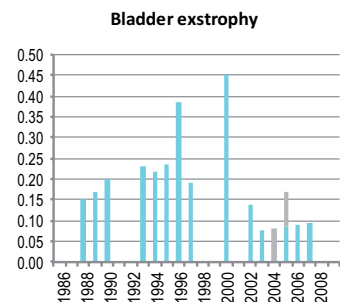
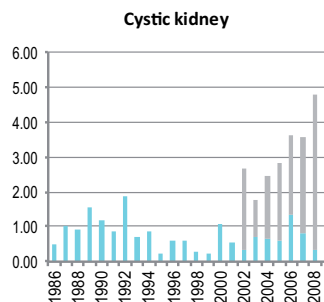
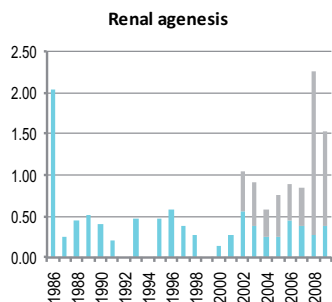
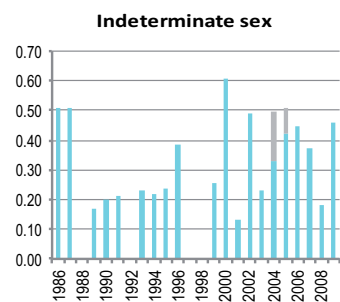
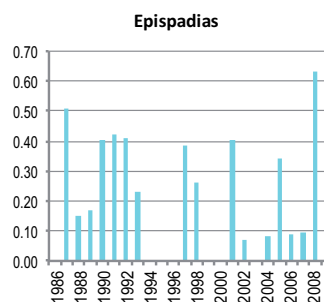
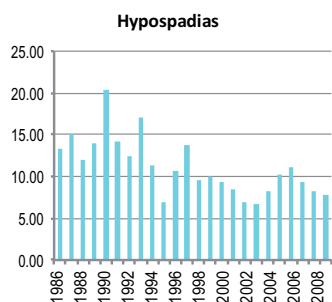
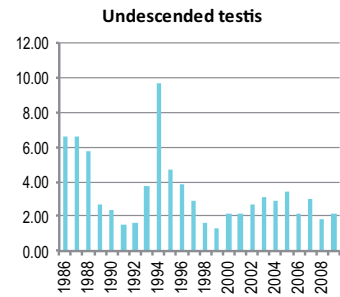
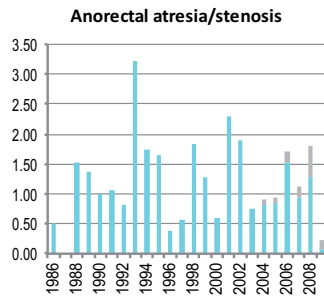
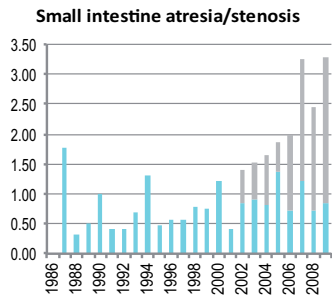
Cuba: RECUMAC

Time trends 1986-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates, ■ ToP rates

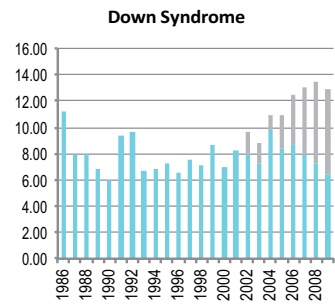
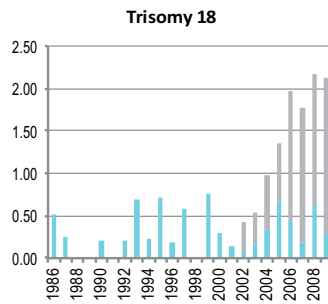
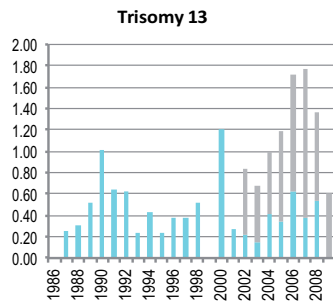
Cuba: RECUMAC



Note: ■ L+S rates, ■ ToP rates

Monitoring Systems

Cuba: RECUMAC



Note: ■ L+S rates, ■ ToP rates

Czech Republic

National Registry of Congenital Anomalies of the Czech Republic

History:

A registration of congenital malformation began in 1961 and regular monitoring started in 1964. The programme was a founding member of the Clearinghouse and is a full member.

Size and coverage:

All births in the Czech Republic (Bohemia, Moravia and Silesia regions) are covered, at present comprising approximately 110,000 annual births. Stillbirths weighting at least 1,000g are included. The information about prenatally diagnosed cases is available from 1994.

Legislation and funding:

Reporting is compulsory. The registration is financed and run by the government in the Institute of Health Information and Statistics of the Czech Republic. Analysis of data is supported by Grant projects (currently none available).

Sources of ascertainment:

Reports are obtained from delivery units, neonatal, paediatric, child surgery, pathology departments and cytogenetic laboratories. Reporting to the central registry occurs via Regional Department of Institute of Health Information and Statistics.

Exposure information:

Some exposure information is available on malformed infants, at present none on controls.

Background information:

Information's on all births are available in the Institute of Health Information and Statistics of the Czech Republic.

Addresses and Staff:

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National Register of Congenital Anomalies in the Czech Republic
Institute of Health Information and Statistics of the Czech Republic

Corresponding address:

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Thomayer 's Hospital
Videnska 800140 59, Praha 4, CZECH REPUBLIC

Phone: 420-26-1083636

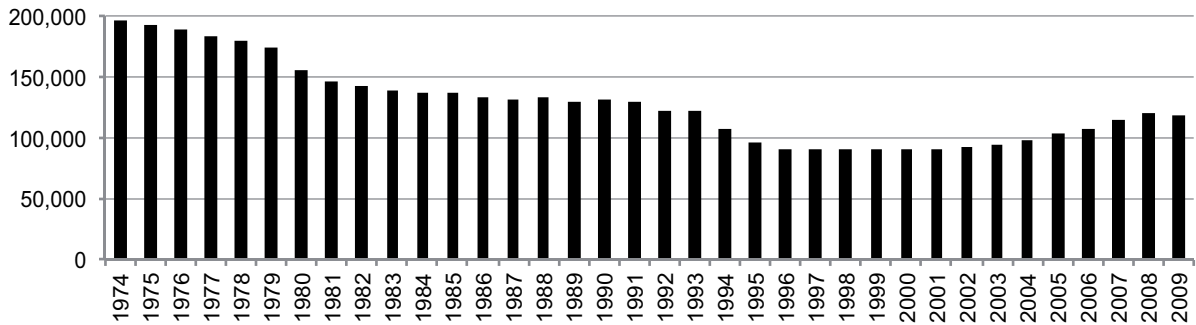
Fax: 420-26-1083636

E-mail: registrvvv@seznam.cz

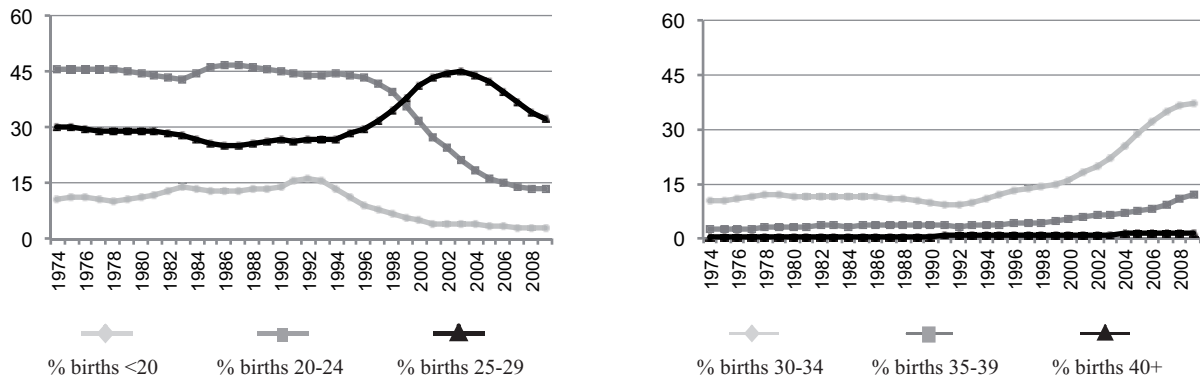
Websites: www.vrozene-vady.cz
<http://www.uzis.cz/>

Czech Republic

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)

(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	89	96.7	Cystic kidney	42	16.1
Spina bifida	110	71.9	Limb reduction defects	47	17.9
Encephalocele	51	82.3	Diaphragmatic hernia	29	28.2
Holoprosencephaly	16	69.6	Omphalocele	68	63.0
Hydrocephaly	104	61.2	Gastroschisis	78	71.6
Hypoplastic left heart syndrome	72	64.3	Trisomy 13	57	86.4
Cleft palate without cleft lip	20	6.7	Trisomy 18	164	94.8
Cleft lip with or without cleft palate	55	12.9	Down syndrome	621	80.4
Renal agenesis	63	21.8			

Total ToPs with births defects = 2,615 (Ratio ToPs/Births: 7.40 per 1,000)

(*) % of ToPs = ToPs/(ToPs+Births)

Czech Republic, 2009

Live births (LB)	118,348
Stillbirths (SB)	319
Total births	118,667
Number of terminations of pregnancy (ToP) for birth defects	911

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	29	2.44
Spina bifida	18	0	31	4.13
Encephalocele	5	0	14	1.60
Microcephaly	13	0	1	1.18
Holoprosencephaly	5	0	9	1.18
Hydrocephaly	17	1	29	3.96
Anophthalmos	2	0	nr	0.17
Microphthalmos	5	0	nr	0.42
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	3	0	nr	0.25
Microtia	6	0	nr	0.51
Unspecified Anotia/Microtia	0	0	nr	0.00
Transposition of great vessels	31	0	1	2.70
Tetralogy of Fallot	34	1	3	3.20
Hypoplastic left heart syndrome	9	0	19	2.36
Coarctation of aorta	42	0	5	3.96
Choanal atresia, bilateral	6	0	nr	0.51
Cleft palate without cleft lip	97	0	nr	8.17
Cleft lip with or without cleft palate	134	0	29	13.74
Oesophageal atresia/stenosis with or without fistula	45	0	nr	3.79
Small intestine atresia/stenosis	36	0	nr	3.03
Anorectal atresia/stenosis	68	0	nr	5.73
Undescended testis (36 weeks of gestation or later)	372	0	nr	31.35
Hypospadias	352	0	nr	29.66
Epispadias	4	0	nr	0.34
Indeterminate sex	7	1	nr	0.67
Renal agenesis	91	0	18	9.19
Cystic kidney	78	1	12	7.67
Bladder exstrophy	1	0	nr	0.08
Polydactyly, preaxial	193	1	nr	16.35
Total Limb reduction defects (include unspecified)	75	0	18	7.84
Transverse	26	0	nr	2.19
Preaxial	3	0	nr	0.25
Postaxial	4	0	nr	0.34
Intercalary	1	0	nr	0.08
Mixed	0	0	nr	0.00
Unspecified	41	0	nr	3.46
Diaphragmatic hernia	21	0	7	2.36
Omphalocele	10	0	18	2.36
Gastroschisis	13	0	25	3.20
Unspecified Omphalocele/Gastroschisis	4	0	nr	0.34
Prune belly sequence	nr	nr	nr	nr
Trisomy 13	3	1	15	1.60
Trisomy 18	0	0	71	5.98
Down syndrome, all ages (include age unknown)	49	0	205	21.40
<20	0	0	0	0.00
20-24	4	0	15	11.87
25-29	10	0	24	8.89
30-34	15	0	60	17.06
35-39	13	0	69	57.33
40-44	7	0	34	215.34
45+	0	0	3	375.00
unknown	0	0	0	---

nr = not reported

Czech Republic, Previous years rates 1974 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

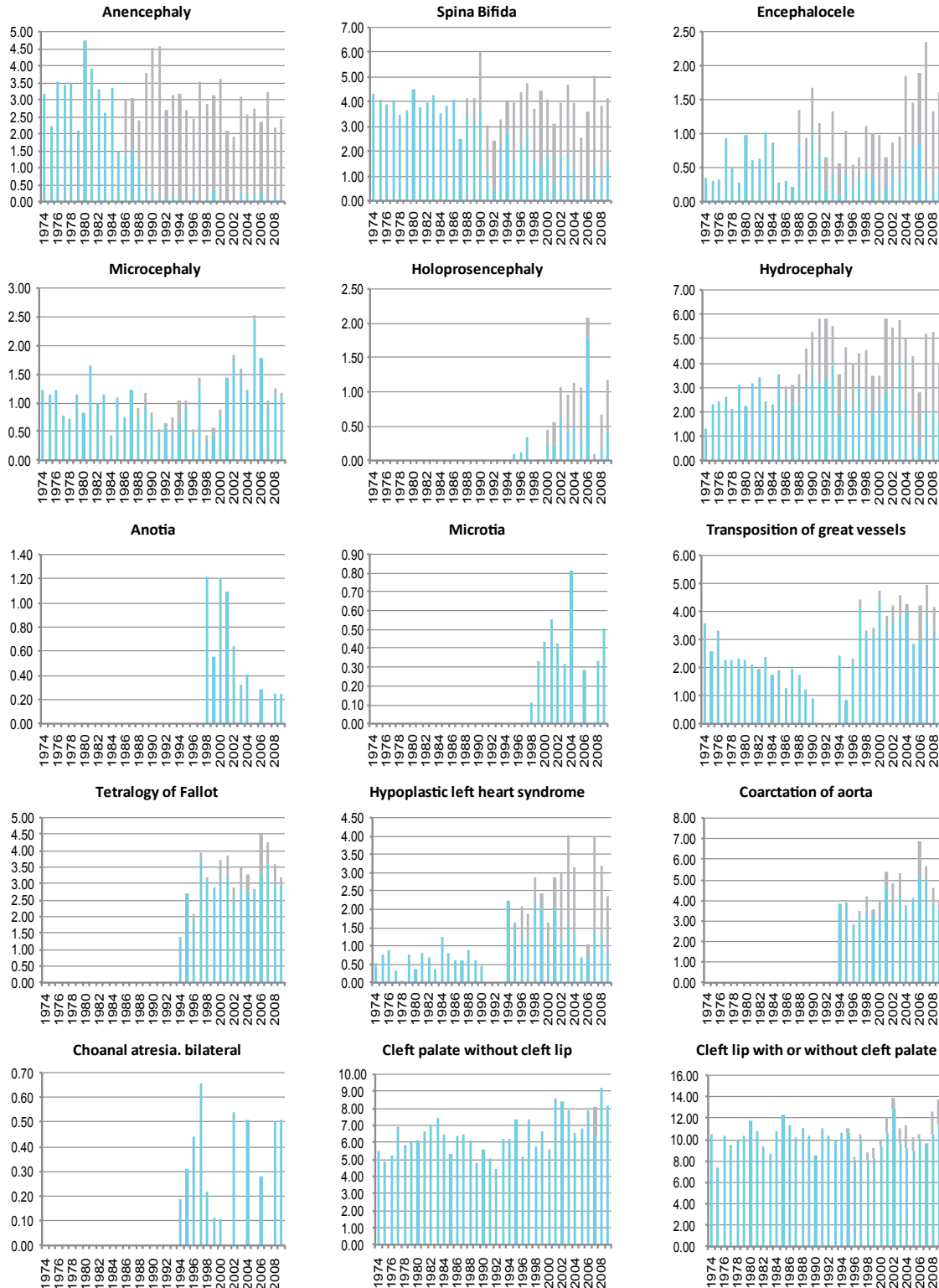
	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	1,112,785	718,080	664,018	610,039	458,693	467,116	562,138
Anencephaly	2.99	3.61	2.73	3.66	2.92	2.65	2.58
Spina bifida	3.91	4.02	3.73	3.79	4.25	3.96	3.86
Encephalocele	0.45	0.82	0.62	1.10	0.87	1.07	1.73
Microcephaly	1.04	1.02	1.02	0.75	0.81	1.39	1.53
Holoprosencephaly	nr	nr	nr	nr	0.11	0.83	1.00
Hydrocephaly	2.31	2.73	3.55	5.25	4.21	5.12	4.34
Anophthalmos	nr	nr	nr	nr	0.05*	0.04	0.41*
Microphthalmos	nr	nr	nr	nr	0.17*	0.30	0.43*
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr	0.00*	0.00	0.20*
Anotia	nr	nr	nr	nr	0.89*	0.73	0.26*
Microtia	nr	nr	nr	nr	0.22*	0.51	0.38*
Unspecified Anotia/Microtia	nr	nr	nr	nr	4.76*	3.62	0.16
Transposition of great vessels	2.75	2.10	1.63	1.60*	2.83	4.32	3.79
Tetralogy of Fallot	nr	nr	nr	1.40*	2.96	3.45	3.68
Hypoplastic left heart syndrome	0.56	0.70	0.71	1.26*	2.18	2.95	2.31
Coarctation of aorta	nr	nr	nr	3.84*	3.62	4.65	5.02
Choanal atresia, bilateral	nr	nr	nr	0.19*	0.35	0.24	0.43*
Cleft palate without cleft lip	5.70	6.71	5.81	5.48	6.47	7.39	8.08
Cleft lip with or without cleft palate	9.66	10.29	11.05	10.06	9.61	11.65	11.42
Oesophageal atresia/stenosis with or without fistula	1.15	1.24	1.22	1.31	2.31	2.83	3.33
Small intestine atresia/stenosis	nr	nr	nr	1.78*	2.14	3.06	3.31
Anorectal atresia/stenosis	1.35	1.31	0.63	1.69	2.77	3.72	4.39
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	2.81*	10.03	23.55	30.23*
Hypospadias	18.30	19.89	22.73	23.44	25.94	31.28	31.47
Epispadias	nr	nr	nr	0.28*	0.50	0.39	0.35*
Indeterminate sex	nr	nr	nr	0.37*	0.44	0.49	0.41*
Renal agenesis	1.62	1.50	1.25	1.84	2.75	6.08	7.83
Cystic kidney	2.57	2.41	2.67	2.52	3.64	6.12	6.67
Bladder exstrophy	0.16	0.11	0.03	0.00*	0.17	0.21	0.06*
Polydactyly, preaxial	nr	nr	13.09*	12.21	13.06	14.19	14.93
Total Limb reduction defects (include unspecified)	4.34	5.07	4.61	5.66	4.82	6.14	6.80
Transverse	nr	nr	nr	nr	nr	nr	1.89*
Preaxial	nr	nr	nr	nr	nr	nr	0.25*
Postaxial	nr	nr	nr	nr	nr	nr	0.17*
Intercalary	nr	nr	nr	nr	nr	nr	0.08*
Mixed	nr	nr	nr	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr	nr	nr	3.40*
Diaphragmatic hernia	2.62	2.52	2.27	1.57	2.53	2.83	2.65
Omphalocele	2.32	2.14	2.56	2.03	2.55	2.74	2.69
Gastroschisis	1.02	1.38	1.17	0.62	3.14	2.85	3.10
Unspecified Omphalocele/Gastroschisis	0.00	0.00	0.00	0.00	0.02	0.00	0.09*
Prune belly sequence	nr	nr	nr	nr	nr	0.16*	0.04*
Trisomy 13	nr	nr	nr	0.33	0.92	1.80	1.97
Trisomy 18	nr	nr	0.42*	1.13	3.03	4.13	5.12
Down syndrome, all ages (include age unknown)	8.35	8.15	8.25	10.74	14.32	16.78	21.03
<20	4.84	4.49	4.68	4.69	7.79	6.11	3.83
20-24	5.46	4.83	3.85	4.21	8.44	7.67	9.69
25-29	8.38	7.50	6.95	7.06	10.16	10.65	9.81
30-34	11.81	9.67	7.91	12.08	17.76	19.93	18.59
35-39	32.61	31.38	27.37	40.58	58.39	61.66	63.37
40-44	123.51	99.30	68.99	195.32	204.38	185.31	211.51
45+	207.47	360.36	404.04	608.70	454.55	635.84	529.80
unknown	---	---	---	---	---	---	---

nr = not reported

* data include less than 5 years

Czech Republic

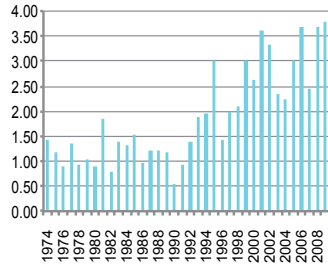
Time trends 1974-2009 (Birth prevalence rates per 10,000)



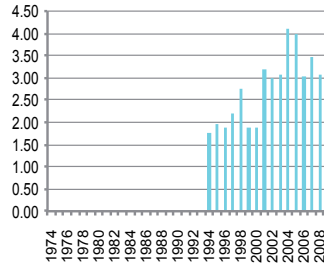
Note: ■ L+S rates, ■ ToP rates

Czech Republic

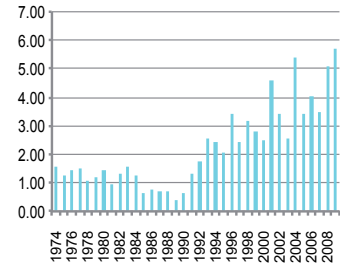
Oesophageal atresia/stenosis with or without fistula



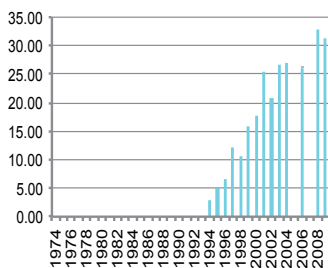
Small intestine atresia/stenosis



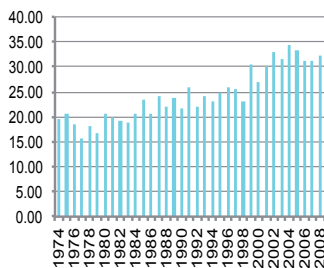
Anorectal atresia/stenosis



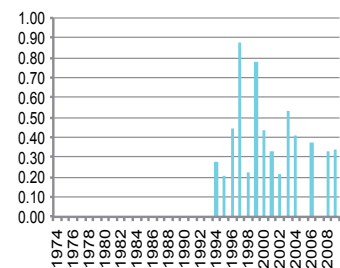
Undescended testis



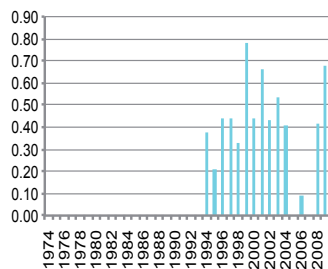
Hypospadias



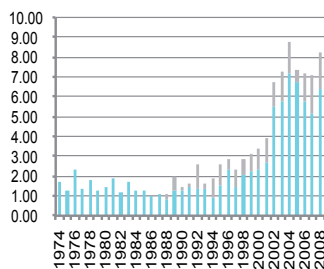
Epispadias



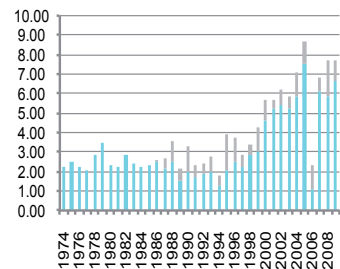
Indeterminate sex



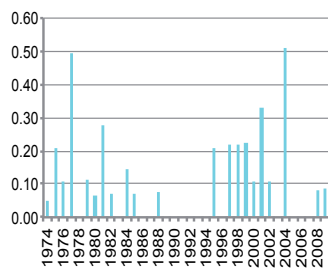
Renal agenesis



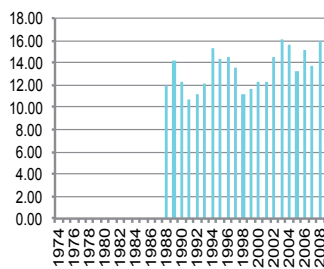
Cystic kidney



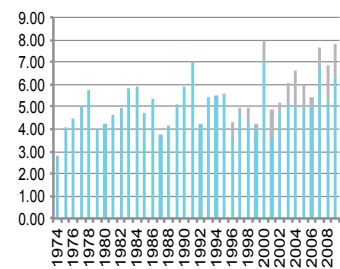
Bladder exstrophy



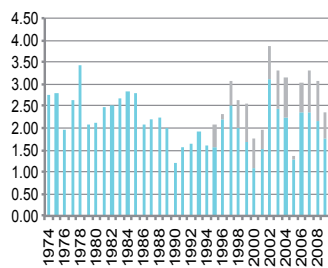
Polydactyly, preaxial



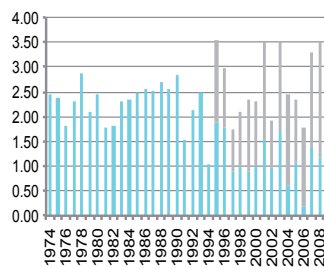
Limb reduction defects



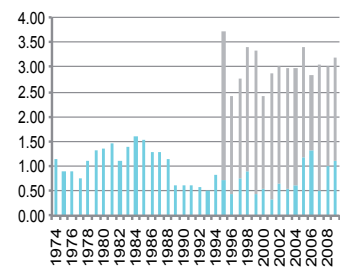
Diaphragmatic hernia



Omphalocele

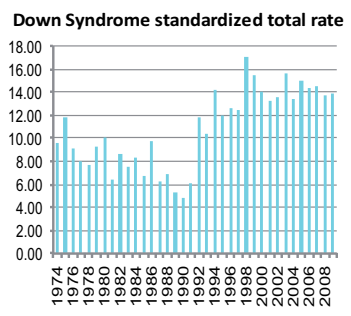
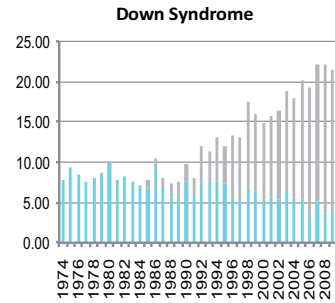
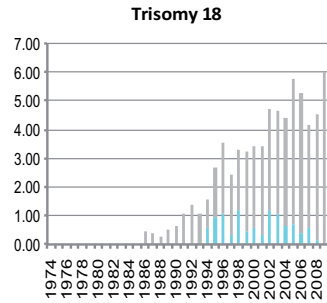
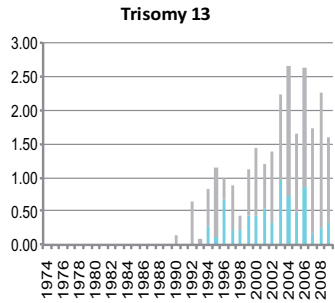


Gastroschisis



Note: ■ L+S rates, ■ ToP rates

Czech Republic



Note: ■ L+S rates, ■ ToP rates

Finland

The Finnish Register of Congenital Malformations

History:

The registry was established in 1963 and regular monitoring started in 1977. It was a founding member of the ICBD/SR. In 1998 the registry became an associate member of EUROCAT. The data content and the data collection practices of the registry have been revised in 1985, 1993 and 2005.

Size and coverage:

The registry is national and population based. All births in Finland are covered, at present approximately 60,000 annually. Stillbirths of 22 weeks / 500 grams or more are registered. Information on congenital anomalies is principally collected up to the age of 1 year, but later information is also included. Elective terminations of pregnancy for fetal anomalies and spontaneous abortions with congenital anomalies have been included since 1987.

Legislation and funding:

Reporting is compulsory. The registry is regulated by the act and statute on the national health care registers with personal data. The registry is run and financed by THL, National Institute for Health and Welfare (under the Ministry of Social Affairs and Health).

Sources and ascertainment:

Reports are obtained from delivery units, neonatal, paediatric and pathology departments, death certificates and cytogenetic laboratories. Case information is also received from the national Medical Birth Register, the Care Register for Health Care (including Information on Outpatient Services in Specialised Health Care), the Register

on Induced Abortions and the Register of Visual Impairment, all maintained by THL, from the National Supervisory Authority for Welfare and Health (Valvira) as well as from the Cause of Death Statistics, maintained by Statistics Finland. The diagnoses of the cases with congenital anomalies received from these other sources are confirmed from the hospitals.

Exposure information:

Until 1986, extensive exposure information was obtained from maternity health centres and by personal interviews for cases with selected congenital anomalies and their controls. In 1987–1992 only parental occupation was reported. Exposure information, like maternal occupation, medication, X-rays and diseases, etc., has been obtained since 1993. Some exposure information on all births is also available in the Medical Birth Register since 1987.

Background information:

Epidemiological background data are available on all births in the Medical Birth Register and in the Statistics Finland.

Address and Staff:

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The Finnish Register of Congenital Malformations
THL, National Institute for Health and Welfare
Lintulahdenkuja 4, P.O. Box 30, FIN- 00531 Helsinki,
Finland

Phone: +358 29 52 47376

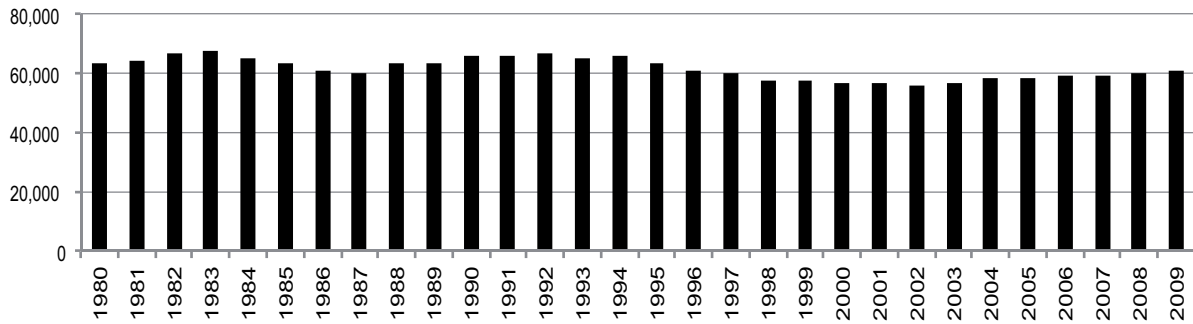
Fax: +358 29 53 47459

E-mail: annukka.ritvanen(at)thl.fi

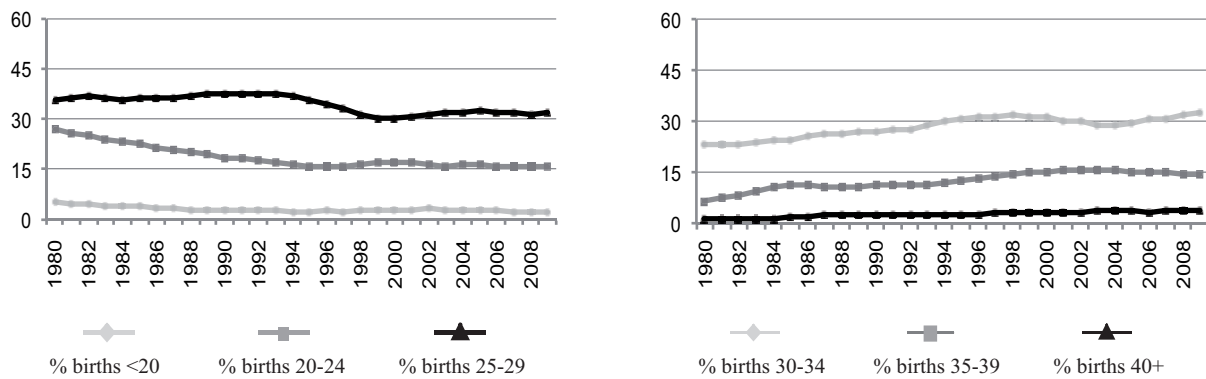
Website: <http://www.thl.fi> or <http://www.thl.fi/statistics/congenitalmalformations>

Finland

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)

(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	55	88.7	Cystic kidney	44	25.4
Spina bifida	46	54.1	Limb reduction defects	31	23.1
Encephalocele	30	83.3	Diaphragmatic hernia	23	38.3
Holoprosencephaly	29	78.4	Omphalocele	61	70.9
Hydrocephaly	40	47.6	Gastroschisis	12	23.1
Hypoplastic left heart syndrome	34	48.6	Trisomy 13	43	81.1
Cleft palate without cleft lip	18	7.3	Trisomy 18	94	79.7
Cleft lip with or without cleft palate	36	17.2	Down syndrome	308	55.9
Renal agenesis	9	42.9			

Total ToPs with births defects = 967 (Ratio ToPs/Births: 5.39 per 1,000)

(*) % of ToPs = ToPs/(ToPs+Births)

Finland, 2009

Live births (LB)	60,430
Stillbirths (SB)	205
Total births	60,635
Number of terminations of pregnancy (ToP) for birth defects	353

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	1	2	18	3.46
Spina bifida	14	0	14	4.62
Encephalocele	1	0	6	1.15
Microcephaly	15	0	4	3.13
Holoprosencephaly	2	1	8	1.81
Hydrocephaly	12	0	16	4.62
Anophthalmos	0	0	1	0.16
Microphthalmos	4	0	2	0.99
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	nr	nr	nr	nr
Microtia	nr	nr	nr	nr
Unspecified Anotia/Microtia	20	0	0	3.30
Transposition of great vessels	18	1	7	4.29
Tetralogy of Fallot	16	0	4	3.30
Hypoplastic left heart syndrome	18	0	22	6.60
Coarctation of aorta	56	0	2	9.57
Choanal atresia, bilateral	2	1	1	0.66
Cleft palate without cleft lip	86	2	7	15.67
Cleft lip with or without cleft palate	54	1	11	10.88
Oesophageal atresia/stenosis with or without fistula	25	3	1	4.78
Small intestine atresia/stenosis	2	0	0	0.33
Anorectal atresia/stenosis	19	0	2	3.46
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	31	0	0	5.11
Epispadias	0	0	0	0.00
Indeterminate sex	7	0	2	1.48
Renal agenesis	4	1	5	1.65
Cystic kidney	42	0	19	10.06
Bladder exstrophy	2	0	1	0.49
Polydactyly, preaxial	34	0	1	5.77
Total Limb reduction defects (include unspecified)	33	1	15	8.08
Transverse	21	1	7	4.78
Preaxial	6	0	5	1.81
Postaxial	0	0	0	0.00
Intercalary	2	0	1	0.49
Mixed	1	0	0	0.16
Unspecified	3	0	2	0.82
Diaphragmatic hernia	10	0	5	2.47
Omphalocele	7	0	20	4.45
Gastroschisis	14	1	3	2.97
Unspecified Omphalocele/Gastroschisis	0	0	2	0.33
Prune belly sequence	1	0	1	0.33
Trisomy 13	4	1	16	3.46
Trisomy 18	8	1	34	7.09
Down syndrome, all ages (include age unknown)	75	3	110	31.01
<20	0	0	1	7.15
20-24	8	0	1	9.52
25-29	8	0	12	10.34
30-34	17	1	23	20.93
35-39	28	0	33	70.75
40-44	11	2	37	232.67
45+	3	0	3	722.89
unknown	0	0	0	---

nr = not reported

Finland, Previous years rates 1993 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994*	1995-1999	2000-2004	2005-2009
Total births				130,578	299,029	283,887	296,247
Anencephaly				2.14	3.21	2.96	3.24
Spina bifida				4.06	4.88	4.33	4.73
Encephalocele				1.30	1.27	1.97	1.79
Microcephaly				2.53	2.31	1.73	2.70
Holoprosencephaly				1.30	1.40	1.41	1.92
Hydrocephaly				8.73	6.52	5.57	4.79
Anophthalmos				0.54	0.43	0.63	0.41
Microphthalmos				1.99	1.64	1.62	0.78
Unspecified Anophthalmos/Microphthalmos				0.00	0.00	0.00	0.00
Anotia				nr	nr	nr	nr
Microtia				nr	nr	nr	nr
Unspecified Anotia/Microtia				5.21	4.68	4.09	4.15
Transposition of great vessels				4.06	4.15	3.91	3.92
Tetralogy of Fallot				2.07	3.61	3.84	3.98
Hypoplastic left heart syndrome				3.14	3.68	4.19	3.88
Coarctation of aorta				7.73	9.93	10.39	9.18
Choanal atresia, bilateral				0.77	0.94	0.95	0.81
Cleft palate without cleft lip				17.69	13.38	13.67	14.14
Cleft lip with or without cleft palate				10.64	10.87	11.27	11.51
Oesophageal atresia/stenosis with or without fistula				3.06	3.75	3.87	4.05
Small intestine atresia/stenosis				1.23	1.04	1.16	0.98
Anorectal atresia/stenosis				5.90	4.98	5.00	5.20
Undescended testis (36 weeks of gestation or later)				nr	nr	nr	nr
Hypospadias				3.60	3.31	3.42	4.22
Epispadias				0.23	0.23	0.39	0.34
Indeterminate sex				0.84	1.04	1.90	1.55
Renal agenesis				1.99	1.74	1.44	1.32
Cystic kidney				6.51	6.05	7.82	9.28
Bladder exstrophy				0.54	0.47	0.70	0.71
Polydactyly, preaxial				4.82	4.28	4.19	5.20
Total Limb reduction defects (include unspecified)				7.73	6.86	7.75	7.02
Transverse				4.67	3.81	3.84	4.12
Preaxial				1.76	1.74	2.61	1.32
Postaxial				0.31	0.37	0.46	0.47
Intercalary				0.31	0.50	0.28	0.37
Mixed				0.54	0.37	0.18	0.27
Unspecified				0.08	0.07	0.00	0.47
Diaphragmatic hernia				2.53	2.61	2.75	3.44
Omphalocele				3.98	4.01	5.00	5.33
Gastroschisis				1.76	2.31	3.31	3.17
Unspecified Omphalocele/Gastroschisis				0.23	0.23	0.35	0.54
Prune belly sequence				0.31	0.27	0.25	0.24
Trisomy 13				2.14	2.14	2.11	2.60
Trisomy 18				4.98	5.79	6.73	6.78
Down syndrome, all ages (include age unknown)				23.20	22.61	25.89	29.94
<20				21.35	9.14	7.10	9.46
20-24				6.46	7.04	7.43	9.93
25-29				11.50	10.09	11.24	12.25
30-34				19.03	17.48	15.91	22.51
35-39				61.46	52.43	58.17	62.33
40-44				163.30	170.83	188.20	204.71
45+				459.77	209.64	401.53	466.53
unknown				---	---	---	---

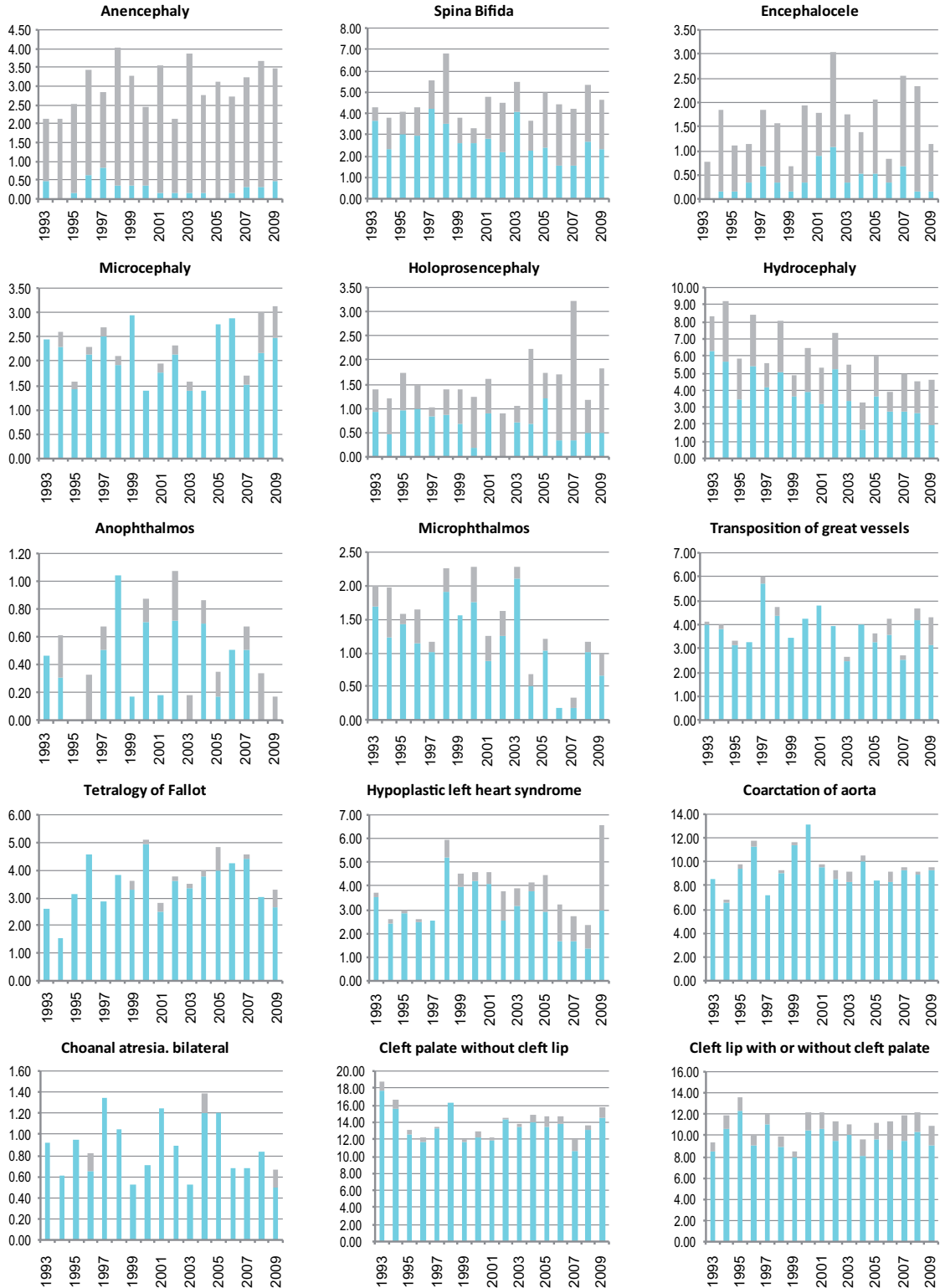
nr = not reported

* data include less than 5 years

Monitoring Systems

Finland

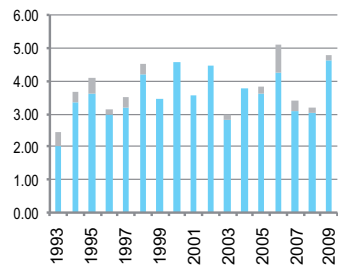
Time trends 1993-2009 (Birth prevalence rates per 10,000)



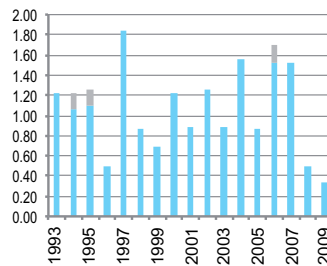
Note: ■ L+S rates, ■ ToP rates

Finland

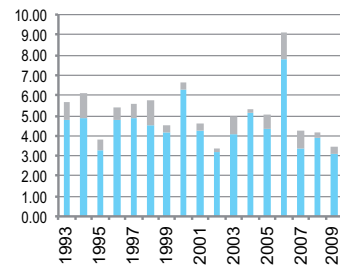
Oesophageal atresia/stenosis with or without fistula



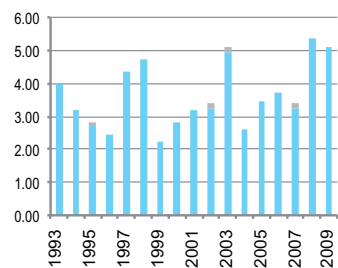
Small intestine atresia/stenosis



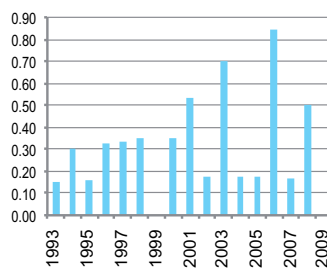
Anorectal atresia/stenosis



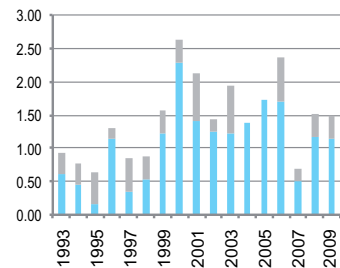
Hypospadias



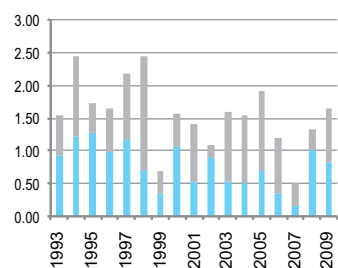
Epispadias



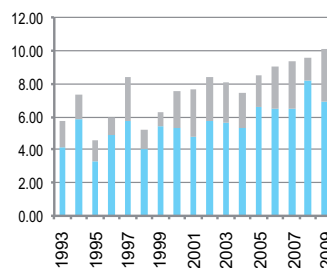
Indeterminate sex



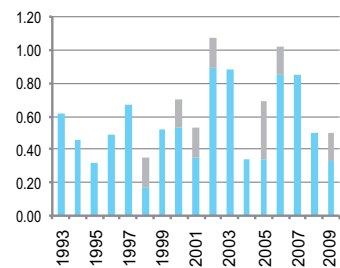
Renal agenesis



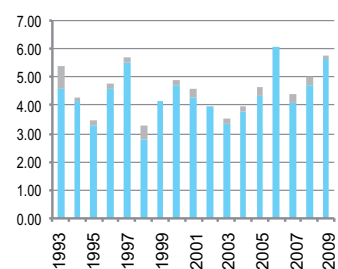
Cystic kidney



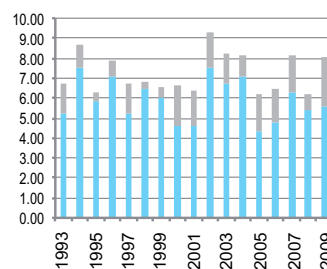
Bladder exstrophy



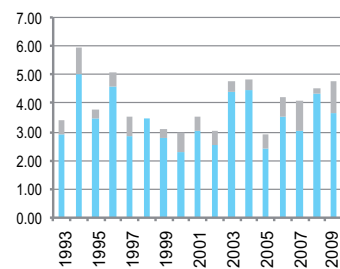
Polydactyly, preaxial



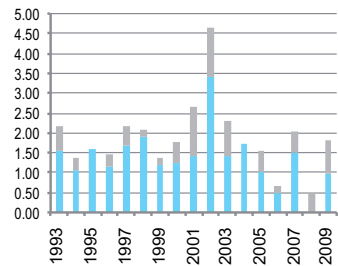
Limb reduction defects



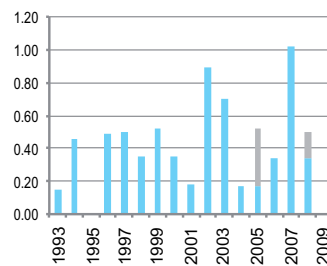
Limb reduction defects - transverse



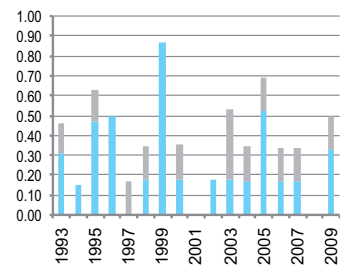
Limb reduction defects - preaxial



Limb reduction defects - postaxial

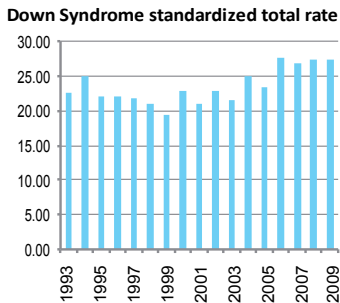
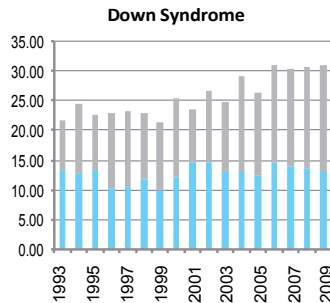
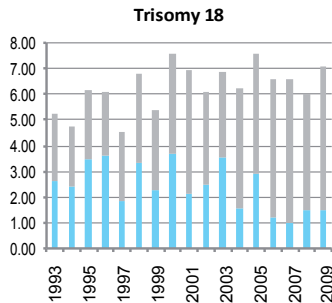
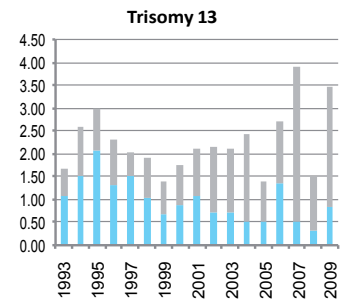
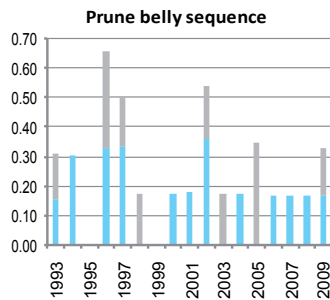
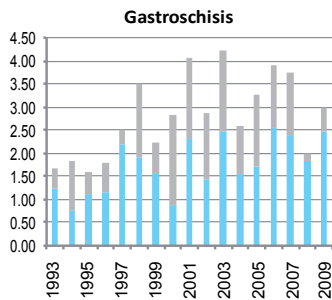
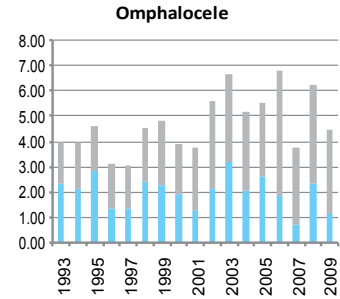
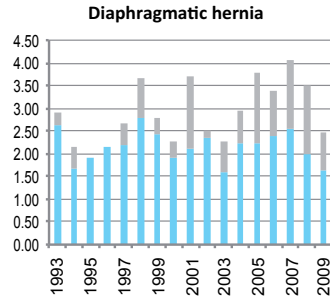
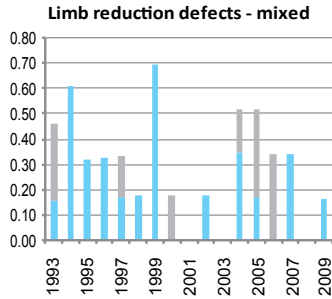


Limb reduction defects - intercalary



Note: ■ L+S rates, ■ ToP rates

Finland



Note: L+S rates, ToP rates

France: Paris

History:

The Programme was initiated in 1975, but the registry really started in 1981. It became an associate member of the Clearinghouse in 1982. It is also a member of EUROCAT.

Size and coverage:

The registry covers 38,000 annual births (about 5% of all births in France), that is all births (live and still births of 22 weeks or more) and terminations of pregnancy in the population of Greater Paris delivering in Paris maternity units. The estimation of the coverage of the registry is around 95%.

Legislation and funding:

The registry has been officially recognised by the French National Committee of Registries, and regularly renewed, most recently in 2008 for four years (2009-2012). The activities of the Registry are partially supported by an annual grant from INSERM and Institut de la Veille Sanitaire (Institute for Health Surveillance).

Sources of ascertainment:

Reports are actively collected from maternity units, pediatric departments, cytogenetic laboratories, pathology departments. Terminations of pregnancy are included. Case information is

also received from the health certificates of the first week.

Exposure information:

Information on maternal drug use, maternal and paternal diseases and occupations, outcome of previous pregnancies, is available for the malformed cases. Data about techniques of prenatal screening (ultrasound, serum markers) and prenatal diagnosis are systematically collected.

Background information:

Background data on births are available from the National Institute of Statistics (INSEE).

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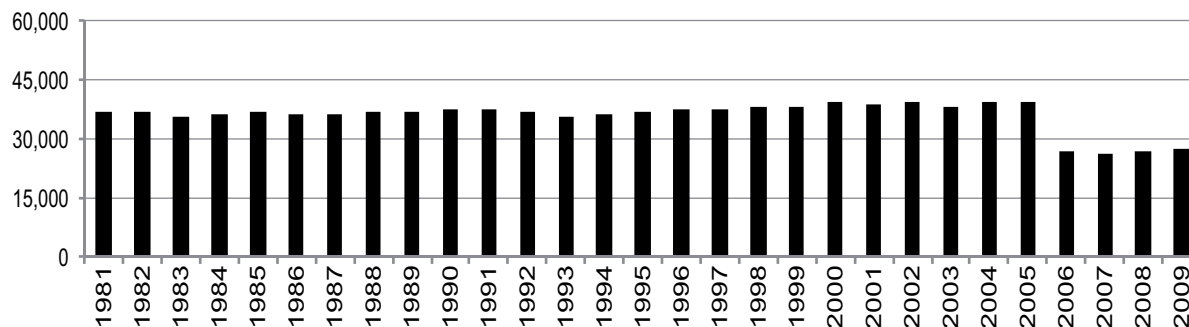
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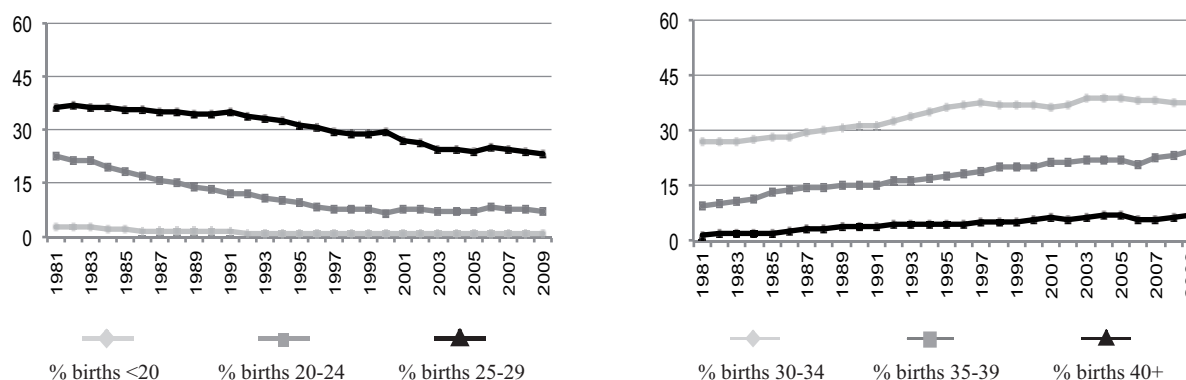
Monitoring Systems

France: Paris

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009) (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	40	97.6	Cystic kidney	18	21.7
Spina bifida	42	91.3	Limb reduction defects	22	43.1
Encephalocele	12	66.7	Diaphragmatic hernia	6	28.6
Holoprosencephaly	21	91.3	Omphalocele	39	78.0
Hydrocephaly	48	35.0	Gastroschisis	2	15.4
Hypoplastic left heart syndrome	15	55.6	Trisomy 13	38	95.0
Cleft palate without cleft lip	8	14.5	Trisomy 18	113	91.1
Cleft lip with or without cleft palate	22	30.6	Down syndrome	257	76.5
Renal agenesis	10	100.0			

Total ToPs with births defects = 831 (Ratio ToPs/Births: 10.38 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

France: Paris, 2009

Live births (LB)	26,754
Stillbirths (SB)	426
Total births	27,180
Number of terminations of pregnancy (ToP) for birth defects	273

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	15	5.52
Spina bifida	1	0	17	6.62
Encephalocele	1	0	1	0.74
Microcephaly	3	0	4	2.58
Holoprosencephaly	1	0	5	2.21
Hydrocephaly	30	0	13	15.82
Anophthalmos	0	0	0	0.00
Microphthalmos	1	0	1	0.74
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	4	0	0	1.47
Microtia	0	0	1	0.37
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	9	0	1	3.68
Tetralogy of Fallot	5	0	1	2.21
Hypoplastic left heart syndrome	3	0	6	3.31
Coarctation of aorta	10	0	3	4.78
Choanal atresia, bilateral	0	0	0	0.00
Cleft palate without cleft lip	13	0	2	5.52
Cleft lip with or without cleft palate	19	0	6	9.20
Oesophageal atresia/stenosis with or without fistula	6	0	1	2.58
Small intestine atresia/stenosis	4	0	0	1.47
Anorectal atresia/stenosis	5	0	5	3.68
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	44	0	0	16.19
Epispadias	2	0	0	0.74
Indeterminate sex	3	0	0	1.10
Renal agenesis	0	0	0	0.00
Cystic kidney	26	0	4	11.04
Bladder exstrophy	4	0	3	2.58
Polydactyly, preaxial	2	0	0	0.74
Total Limb reduction defects (include unspecified)	9	0	7	5.89
Transverse	6	0	5	4.05
Preaxial	1	0	0	0.37
Postaxial	1	0	0	0.37
Intercalary	1	0	0	0.37
Mixed	0	0	0	0.00
Unspecified	0	0	2	0.74
Diaphragmatic hernia	7	0	1	2.94
Omphalocele	3	0	15	6.62
Gastroschisis	5	0	2	2.58
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	0	0	13	4.78
Trisomy 18	2	2	38	15.45
Down syndrome, all ages (include age unknown)	30	1	83	41.94
<20	0	0	0	0.00
20-24	2	0	1	15.89
25-29	5	0	9	22.22
30-34	8	0	17	24.51
35-39	11	0	29	60.05
40-44	2	1	25	165.39
45+	1	0	2	181.82
unknown	1	0	0	---

nr = not reported

France: Paris, Previous years rates 1981 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

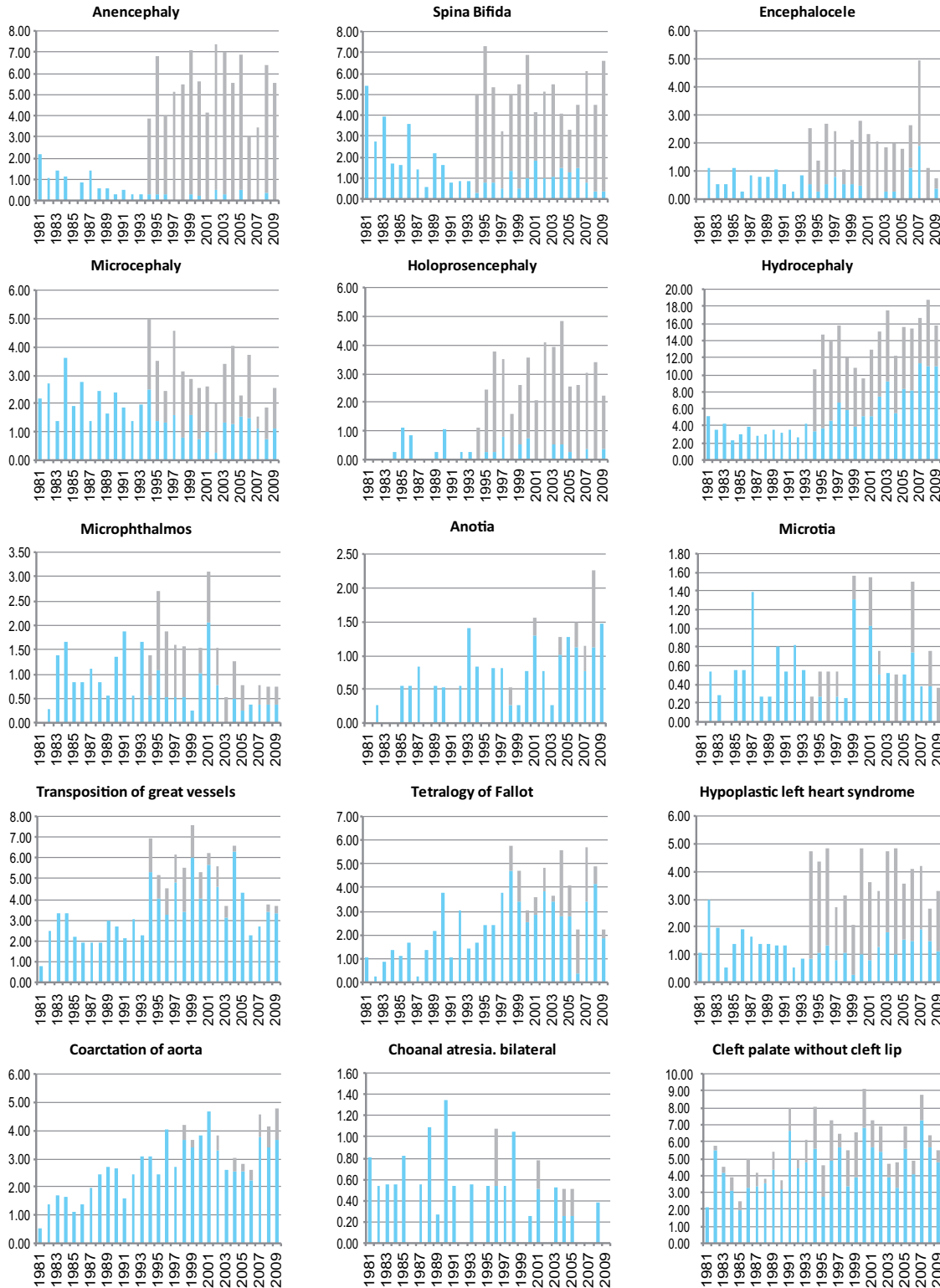
	1974-1979	1980-1984*	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		145,343	182,538	183,049	187,753	195,150	146,147
Anencephaly		1.44	0.66	1.04	5.70	5.94	5.20
Spina bifida		3.44	1.86	1.80	5.27	5.12	4.86
Encephalocele		0.55	0.77	1.04	1.92	2.20	2.19
Microcephaly		2.48	2.03	2.51	3.30	2.92	2.39
Holoprosencephaly		0.07	0.44	0.55	2.77	3.69	2.74
Hydrocephaly		3.78	3.23	4.81	13.42	13.43	16.35
Anophthalmos		0.34	0.00	0.55	0.16	0.31	0.21
Microphthalmos		0.83	0.82	1.37	1.60	1.59	0.68
Unspecified Anophthalmos/Microphthalmos		0.00	0.00	0.00	0.00	0.00	0.00
Anotia		0.07	0.49	0.66	0.48	0.92	1.51
Microtia		0.21	0.60	0.60	0.69	0.67	0.68
Unspecified Anotia/Microtia		0.00	0.00	0.00	0.00	0.00	0.00
Transposition of great vessels		2.48	2.19	3.39	5.81	5.48	3.42
Tetralogy of Fallot		0.89	1.31	2.19	3.83	4.15	3.83
Hypoplastic left heart syndrome		1.65	1.53	1.75	3.41	4.25	3.56
Coarctation of aorta		1.31	1.92	2.57	3.41	3.59	3.69
Choanal atresia, bilateral		0.62	0.55	0.49	0.64	0.41	0.21
Cleft palate without cleft lip		4.06	4.16	6.17	6.07	6.56	6.50
Cleft lip with or without cleft palate		6.67	7.29	9.67	9.11	7.89	9.17
Oesophageal atresia/stenosis with or without fistula		2.27	2.79	3.33	3.94	4.36	3.28
Small intestine atresia/stenosis		0.41	0.99	1.69	2.29	3.48	2.94
Anorectal atresia/stenosis		3.51	1.75	3.39	3.25	4.05	2.87
Undescended testis (36 weeks of gestation or later)		8.53	13.37	11.09	6.50	6.39*	nr
Hypospadias		10.46	10.52	15.46	10.28	14.86	14.92
Epispadias		0.07	0.60	0.55	0.37	0.31	0.75
Indeterminate sex		1.58	1.15	1.42	1.23	1.23	1.37
Renal agenesis		1.03	1.04	1.20	3.41	2.36	2.39
Cystic kidney		1.58	3.07	5.30	9.05	10.86	10.06
Bladder exstrophy		0.21	0.33	0.60	0.69	0.36	0.96
Polydactyly, preaxial		0.62	0.82	1.69	2.45	1.43	1.57
Total Limb reduction defects (include unspecified)		nr	nr	nr	6.60	8.51	5.82
Transverse		nr	nr	nr	2.93	4.56	3.56
Preaxial		nr	nr	nr	0.85	1.43	1.16
Postaxial		nr	nr	nr	0.27	0.97	0.27
Intercalary		nr	nr	nr	0.48	0.46	0.34
Mixed		nr	nr	nr	0.27	0.77	0.21
Unspecified		nr	nr	nr	0.05	0.31	0.27
Diaphragmatic hernia		2.00	3.18	3.11	5.59	5.38	3.56
Omphalocele		1.58	1.81	2.08	5.01	6.35	5.75
Gastroschisis		0.48	0.82	1.97	2.56	3.69	1.71
Unspecified Omphalocele/Gastroschisis		0.28	0.49	0.38	0.80	1.08	0.75
Prune belly sequence		0.07	0.16	0.00	0.16	0.15	0.14
Trisomy 13		0.41	0.55	0.87	3.52	4.56	4.52
Trisomy 18		1.65	0.93	2.51	8.10	12.55	14.23
Down syndrome, all ages (include age unknown)		11.49	12.65	17.48	34.46	38.79	43.93
<20		10.09	15.83	4.51	5.95	24.05	0.00
20-24		6.80	5.79	9.76	14.61	11.10	9.05
25-29		6.79	6.36	8.68	14.20	13.55	17.57
30-34		11.19	12.99	13.52	21.40	21.55	24.92
35-39		24.04	30.13	31.42	56.98	60.55	64.83
40-44		57.41	25.54	83.26	199.31	188.13	219.89
45+		220.99	158.10	161.73	334.93	400.57	283.29
unknown		---	---	---	---	---	---

nr = not reported

* data include less than 5 years

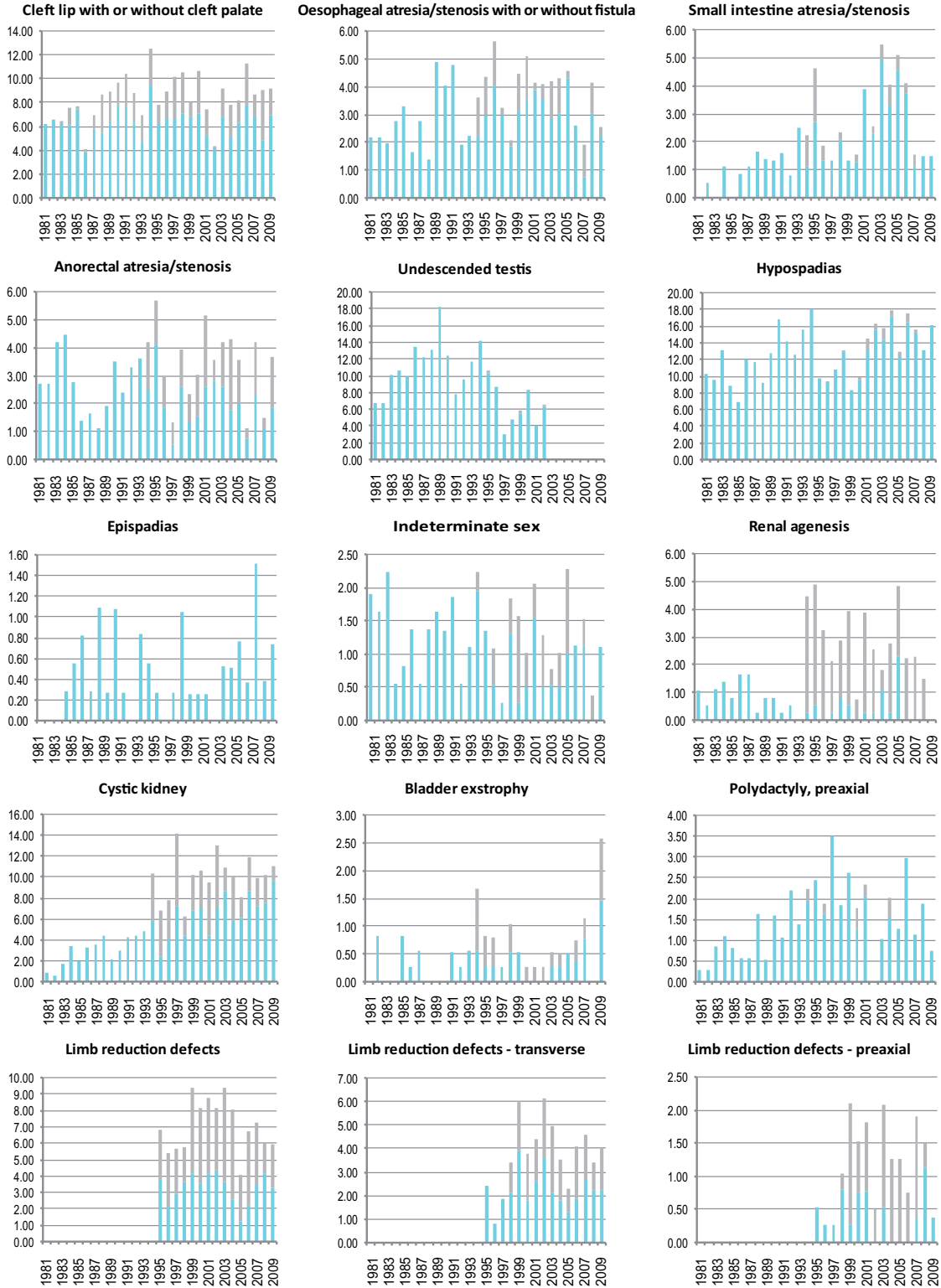
France: Paris

Time trends 1981-2009 (Birth prevalence rates per 10,000)



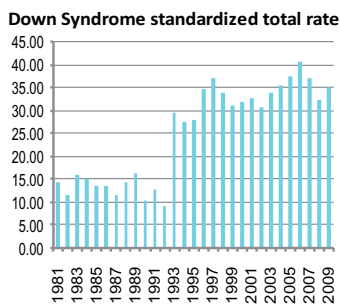
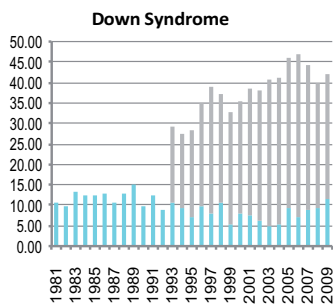
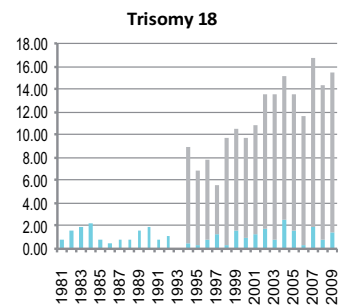
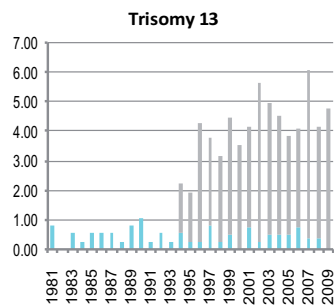
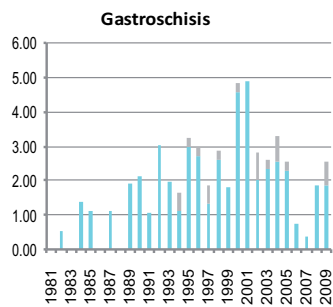
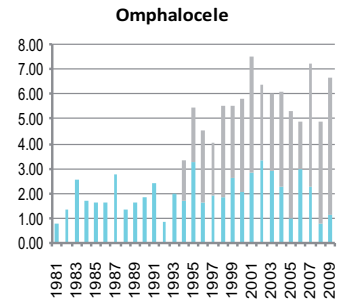
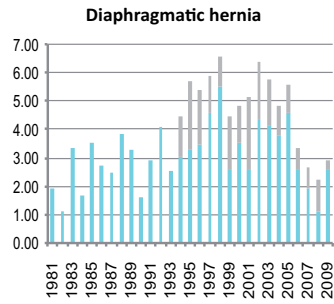
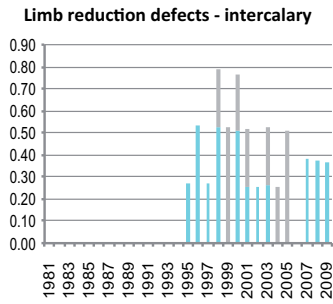
Note: ■ L+S rates, ■ ToP rates

France: Paris



Note: ■ L+S rates, ■ ToP rates

France: Paris



Note: ■ L+S rates, ■ ToP rates

France: REMERA

Central-East France Register of Congenital Malformation (until 2006)

Registre des Malformations en Rhône Alpes

History:

The registry began in 1973 within the Rhone-Alps area -the Auvergne region was added in 1983, the Jura area in 1985, the Côte d'Or & Nièvre in 1989 and Saône-et-Loire in 1990. The Programme was a founding member of the ICBDSP and is a full member. In 1998 the registry was split up and the Auvergne region, became financially independent, under the responsibility of Christine Francannet. The collaboration between Auvergne and the rest of the FCE-registry is maintained and common results are published. In December 2006, France Central-East Register was closed. A new register (REMER) was created, covering part of the previous one.

Size and coverage:

The registry covers all births in the area approximately 56,000 births annually, which represents about 7% of all births in France. Stillbirths of 22 weeks or more gestation are included.

Legislation and funding:

REMER received agreement from the French Comité National des Registres It has only public sources of funding: Ministry of Health, Region, Health authorities.

Sources of ascertainment:

The registry is population based and covers 4 French departments of Rhône-Alpes region : Rhône, Loire, Isère, Savoie. Data collection is actively performed in private and public maternity wards and pediatric units. Other sources of information include cytogenetic laboratories, pathology laboratories, departments of medical genetics, birth certificates and data set called "Résumé Standardisé de Sortie" (similar to a "Standardized Discharge Summary"). Data is

registered on a dedicated and secured server. The maximum age at postnatal diagnosis is 1 year. For children born in year x, notifications are taken into account until March x+2. We have no followup procedure. Are excluded from registration: balanced chromosomal anomalies, pyloric stenosis, metabolic disorders, minor malformations (small angiomas or naevi, hip subdislocation, small foot deformities, ill-defined facial anomalies, inguinal and umbilical hernias). Our official stillbirth definition is 22 w (28 w before 1997), which is our lower gestational age limit to include early fetal deaths/spontaneous abortions. Terminations are registered since 1985 (TOP can be performed up to full term in case of lethal or severe foetal abnormalities).

Exposure information:

Our exposure data includes drug intake in 1 st trimester of pregnancy, biological, physical and chemical hazards, medically assisted procreation, occupation. Denominators information is obtained from National institute of Statistics. We collect no controls.

Background information:

Some background information is available from the general population statistics.

Addresses and Staff:

Emmanuelle Amar, Programme Director
Registre Des Malformations en Rhone Alpes
Faculté Laennec
7-9 rue Guillaume Paradin
69372 LYON - FRANCE

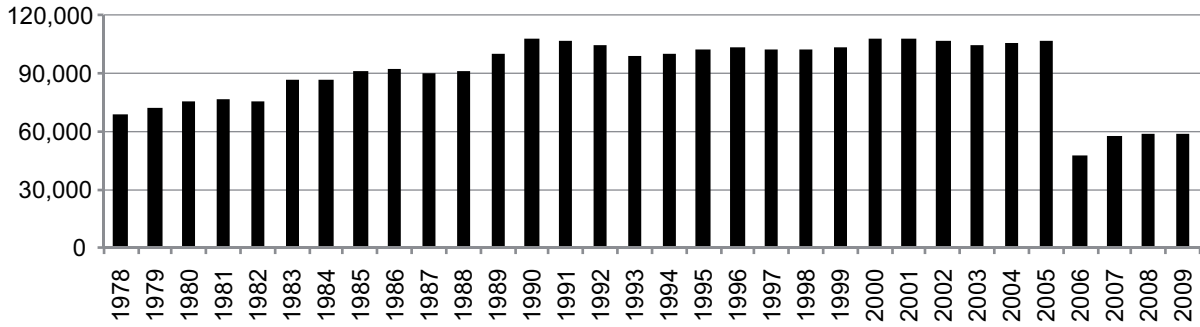
Phone: 33-4-78771058

Fax: 33-4-78771088

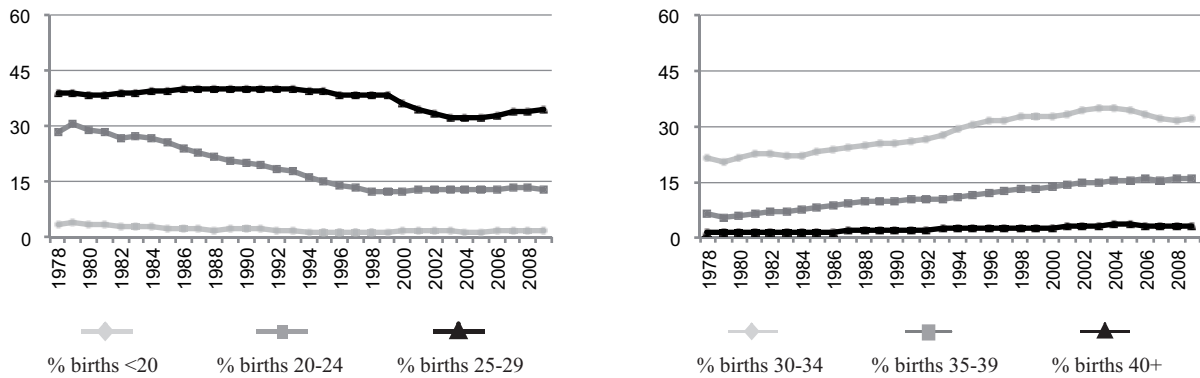
E-mail: emmanuelle.amar@orange.fr

France: REMERA

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	70	94.6	Cystic kidney	63	42.3
Spina bifida	87	85.3	Limb reduction defects	46	46.5
Encephalocele	22	84.6	Diaphragmatic hernia	17	28.8
Holoprosencephaly	36	92.3	Omphalocele	46	68.7
Hydrocephaly	92	63.9	Gastroschisis	6	14.0
Hypoplastic left heart syndrome	51	58.6	Trisomy 13	43	91.5
Cleft palate without cleft lip	22	23.7	Trisomy 18	120	95.2
Cleft lip with or without cleft palate	49	27.5	Down syndrome	384	81.9
Renal agenesis	29	32.6			

Total ToPs with births defects = 1,348 (Ratio ToPs/Births: 7,67 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

France: REMERA, 2009

Live births (LB)	58,368
Stillbirths (SB)	701
Total births	59,069
Number of terminations of pregnancy (ToP) for birth defects	487

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	27	4.57
Spina bifida	2	0	34	6.09
Encephalocele	0	1	10	1.86
Microcephaly	2	1	6	1.52
Holoprosencephaly	1	0	11	2.03
Hydrocephaly	9	5	30	7.45
Anophthalmos	0	0	2	0.34
Microphthalmos	1	1	2	0.68
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	1	2	1	0.68
Microtia	0	2	2	0.68
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	21	1	9	5.25
Tetralogy of Fallot	15	0	4	3.22
Hypoplastic left heart syndrome	7	2	14	3.89
Coarctation of aorta	11	1	2	2.37
Choanal atresia, bilateral	2	0	0	0.34
Cleft palate without cleft lip	24	0	8	5.42
Cleft lip with or without cleft palate	48	3	17	11.51
Oesophageal atresia/stenosis with or without fistula	23	1	3	4.57
Small intestine atresia/stenosis	10	0	1	1.86
Anorectal atresia/stenosis	1	0	0	0.17
Undescended testis (36 weeks of gestation or later)	7	0	1	1.35
Hypospadias	53	0	5	9.82
Epispadias	0	0	0	0.00
Indeterminate sex	1	0	2	0.51
Renal agenesis	20	0	11	5.25
Cystic kidney	31	4	22	9.65
Bladder exstrophy	1	0	2	0.51
Polydactyly, preaxial	51	0	8	9.99
Total Limb reduction defects (include unspecified)	13	1	18	5.42
Transverse	6	0	9	2.54
Preaxial	5	0	6	1.86
Postaxial	2	0	2	0.68
Intercalary	0	1	0	0.17
Mixed	0	0	1	0.17
Unspecified	0	0	0	0.00
Diaphragmatic hernia	12	2	6	3.39
Omphalocele	7	2	19	4.74
Gastroschisis	18	0	2	3.39
Unspecified Omphalocele/Gastroschisis	1	0	5	1.02
Prune belly sequence	1	0	0	0.17
Trisomy 13	2	0	9	1.86
Trisomy 18	0	0	38	6.43
Down syndrome, all ages (include age unknown)	19	1	141	27.26
<20	0	0	0	0.00
20-24	0	0	5	6.53
25-29	4	1	13	8.85
30-34	6	0	35	21.75
35-39	4	0	49	57.11
40-44	2	0	34	191.90
45+	0	0	4	408.16
unknown	3	0	1	---

France: REMERA, Previous years rates 1978 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

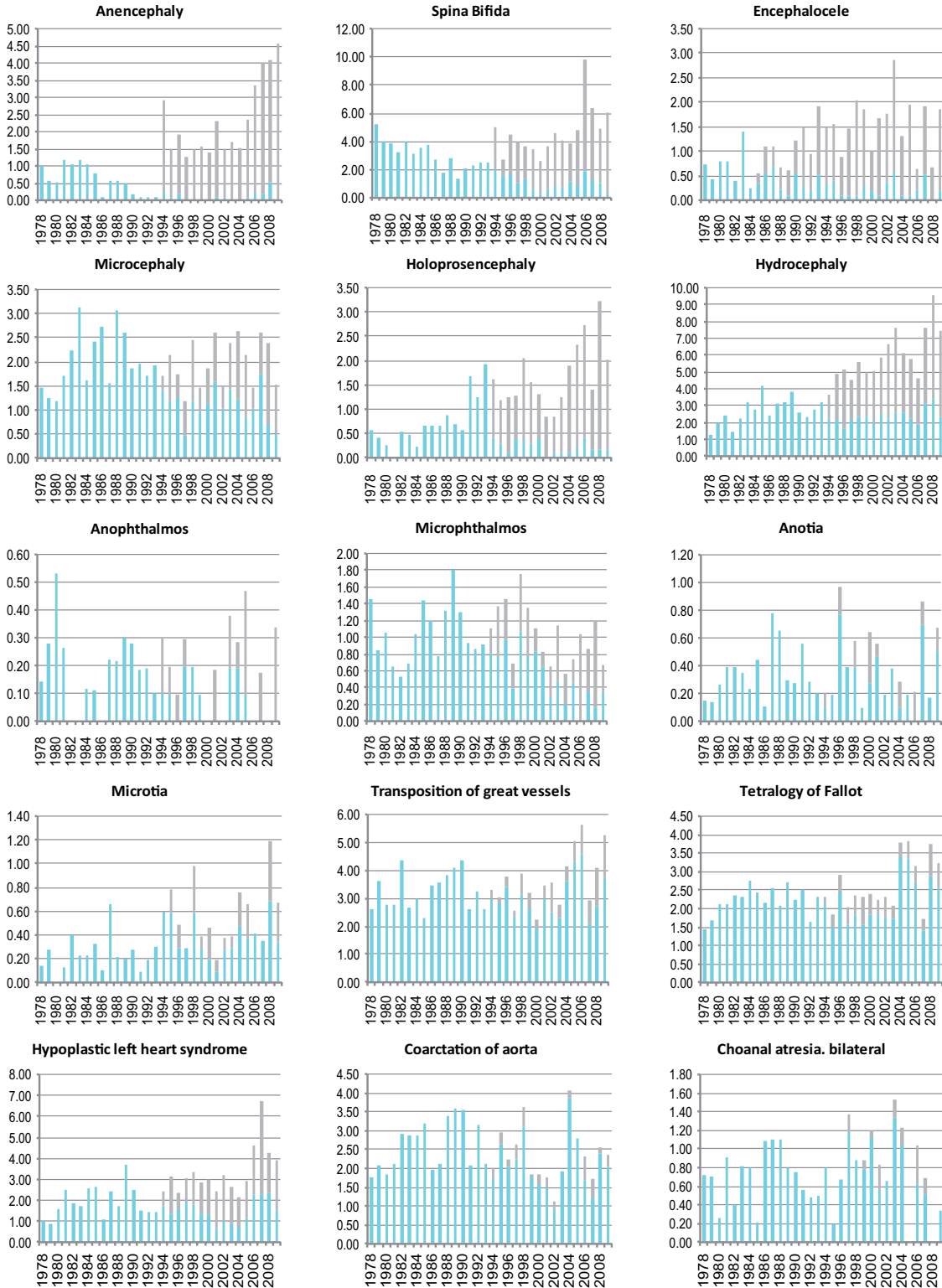
	1974-1979*	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	140,274	400,702	464,127	517,380	513,148	533,361	330,525
Anencephaly	0.78	1.00	0.50	0.66	1.54	1.69	3.48
Spina bifida	4.56	3.54	2.48	2.84	3.66	3.75	6.05
Encephalocele	0.57	0.72	0.80	1.41	1.56	1.72	1.51
Microcephaly	1.35	2.00	2.48	1.84	1.79	2.19	2.06
Holoprosencephaly	0.50	0.30	0.71	1.39	1.46	1.22	2.33
Hydrocephaly	1.64	2.45	3.34	2.90	5.01	6.26	6.90
Anophthalmos	0.21	0.17	0.17	0.21	0.18	0.17	0.24
Microphthalmos	1.14	0.80	1.31	1.02	1.33	0.86	0.88
Unspecified Anophthalmos/Microphthalmos	0.00	0.00	0.00	0.00	0.00	0.00	0.21
Anotia	0.14	0.32	0.45	0.31	0.45	0.41	0.39
Microtia	0.21	0.20	0.30	0.29	0.58	0.43	0.67
Unspecified Anotia/Microtia	0.36	0.52	0.75	0.44	1.03	0.49	0.21
Transposition of great vessels	3.14	3.09	3.47	3.25	3.29	3.22	4.63
Tetralogy of Fallot	1.57	2.35	2.39	2.20	2.30	2.57	3.24
Hypoplastic left heart syndrome	0.93	2.05	2.35	1.86	2.92	2.68	4.24
Coarctation of aorta	1.92	2.55	2.87	2.59	2.65	2.14	2.42
Choanal atresia, bilateral	0.71	0.65	0.86	0.62	0.80	1.09	0.33
Cleft palate without cleft lip	4.35	4.77	4.80	5.76	6.90	5.06	5.11
Cleft lip with or without cleft palate	7.06	6.86	5.69	7.29	8.54	6.71	9.35
Oesophageal atresia/stenosis with or without fistula	2.00	2.47	2.59	2.96	3.33	2.55	3.36
Small intestine atresia/stenosis	1.78	1.17	2.09	1.89	2.47	2.85	2.00
Anorectal atresia/stenosis	2.42	2.57	3.21	3.23	4.11	3.56	1.09
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr	nr	nr	0.67*
Hypospadias	5.87	6.11	9.22	9.55	12.02	12.04	10.74
Epispadias	0.29	0.12	0.26	0.21	0.23	0.19	0.15
Indeterminate sex	0.71	0.67	0.80	0.75	0.60	0.56	0.82
Renal agenesis	0.43	0.70	0.67	0.64	1.48	1.41	3.87
Cystic kidney	0.29	1.22	2.28	3.40	4.54	4.52	7.26
Bladder exstrophy	0.29	0.07	0.45	0.35	0.35	0.28	0.39
Polydactyly, preaxial	0.78	0.85	1.29	1.74	2.40	1.52	7.35
Total Limb reduction defects (include unspecified)	3.78	4.64	4.27	4.29	5.34	4.61	5.90
Transverse	2.21	2.15	2.48	2.30	2.63	2.31	2.84
Preaxial	0.43	0.77	0.71	0.52	0.78	1.09	1.33
Postaxial	0.36	0.30	0.37	0.39	0.33	0.49	0.64
Intercalary	0.29	0.65	0.32	0.52	0.43	0.34	0.51
Mixed	0.36	0.65	0.37	0.25	0.35	0.32	0.42
Unspecified	0.14	0.12	0.02	0.00	0.08	0.07	0.22
Diaphragmatic hernia	1.92	2.75	2.54	2.55	3.10	2.70	3.45
Omphalocele	0.93	1.20	1.16	1.24	2.34	2.51	3.57
Gastroschisis	0.36	0.77	0.88	1.18	1.29	1.39	2.21
Unspecified Omphalocele/Gastroschisis	0.00	0.00	0.00	0.04	0.08	0.00	2.46
Prune belly sequence	0.29	0.15	0.28	0.48	0.57	0.15	0.21
Trisomy 13	0.29	0.57	0.88	1.18	1.58	1.97	2.81
Trisomy 18	0.86	0.97	1.96	2.47	4.11	4.37	6.44
Down syndrome, all ages (include age unknown)	11.26	11.40	11.16	12.93	19.62	21.94	26.44
<20	7.76	4.72	5.68	6.10	10.98	4.78	8.93
20-24	6.52	7.48	4.93	6.49	7.54	7.56	7.63
25-29	4.78	5.27	7.47	5.79	7.83	8.43	8.89
30-34	11.61	11.08	9.49	8.91	14.12	13.10	19.48
35-39	23.14	31.35	24.18	27.94	45.30	46.50	55.81
40-44	131.11	67.64	55.20	76.75	151.21	143.79	169.20
45+	119.05	94.34	158.37	243.90	248.06	229.11	337.30
unknown	---	---	---	---	---	---	---

nr = not reported

* data include less than 6 years

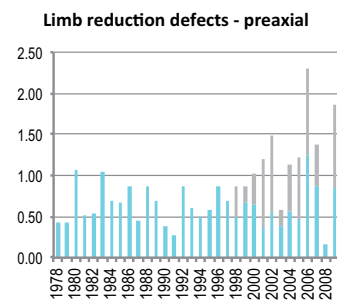
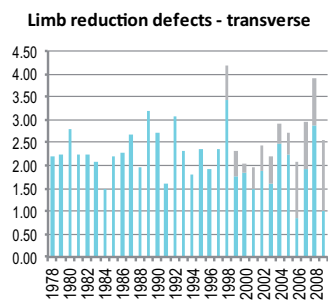
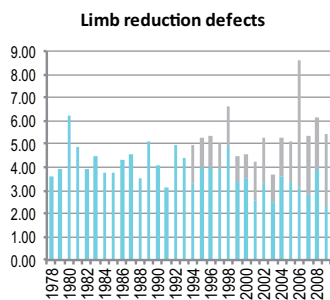
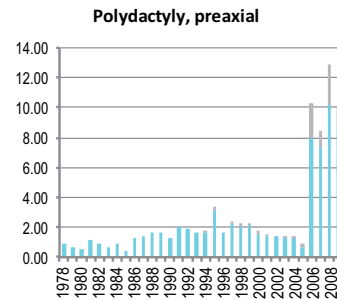
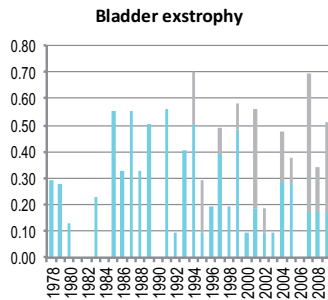
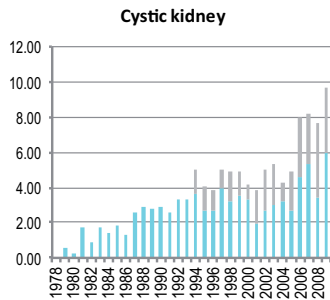
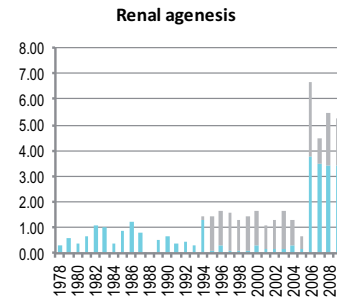
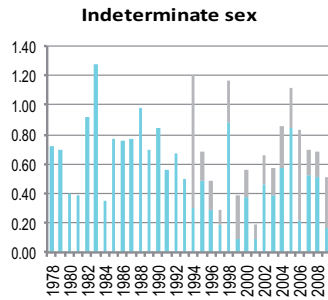
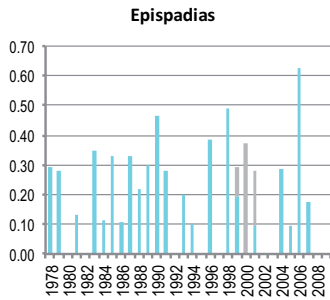
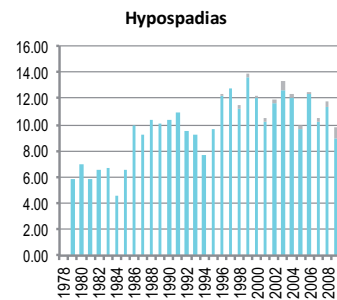
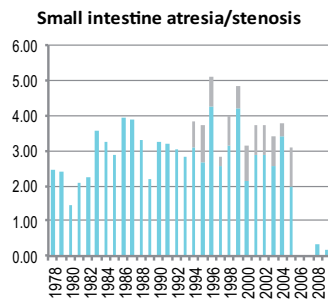
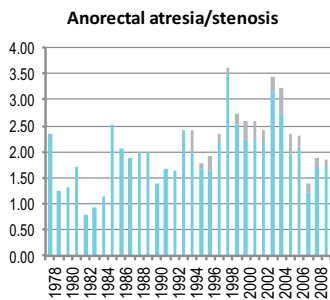
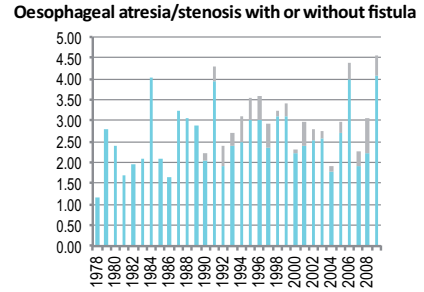
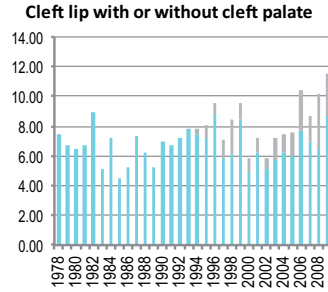
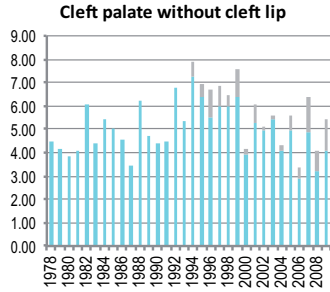
France: REMERA

Time trends 1978-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates, ■ ToP rates

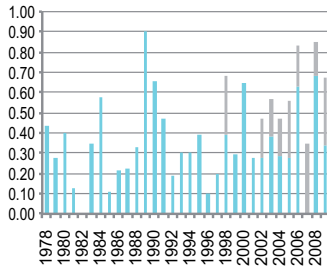
France: REMERA



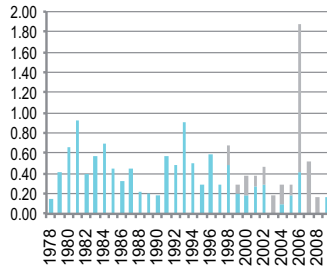
Note: ■ L+S rates, ■ ToP rates

France: REMERA

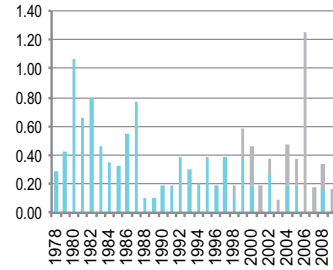
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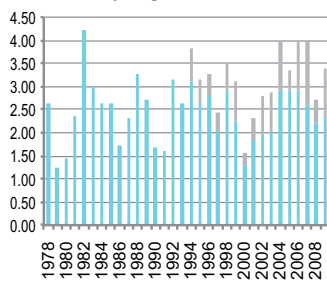
Limb reduction defects - intercalary



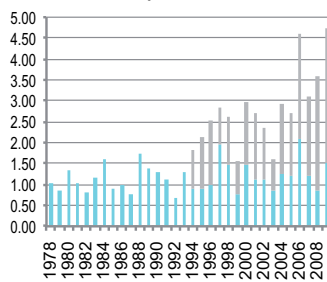
Limb reduction defects - mixed



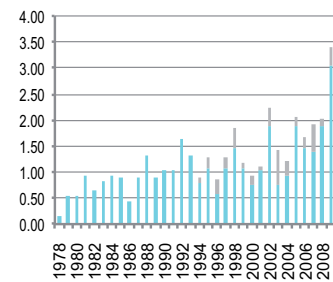
Diaphragmatic hernia



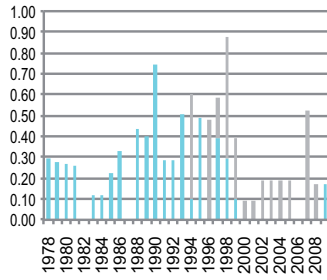
Omphalocele



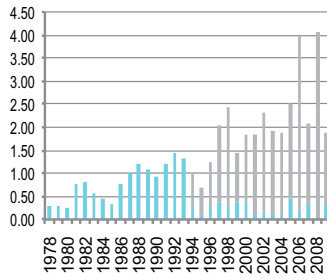
Gastroschisis



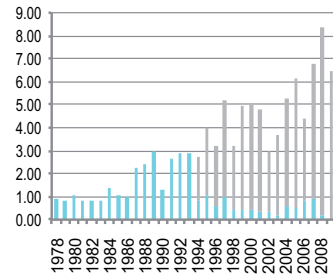
Prune belly sequence



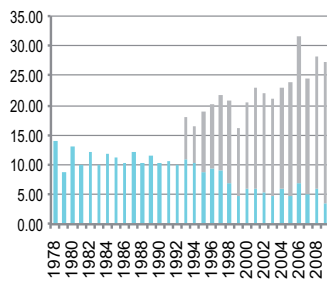
Trisomy 13



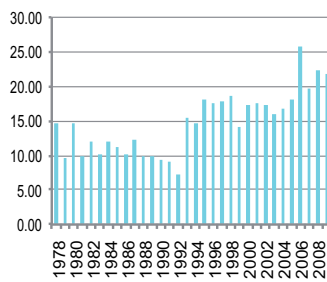
Trisomy 18



Down Syndrome



Down Syndrome standardized total rate



Note: ■ L+S rates, ■ ToP rates

France: Strasbourg Registry of Congenital Malformations

History:

The registry was started in 1979. The Programme became member of the Clearinghouse in 1982.

Size and coverage:

All births in an area including and around Strasbourg and the Bas-Rhin are covered -13,000 to 13,500 annually, or 1,8% of all births in France.

Legislation and funding:

The Programme is a research Programme, recognised by the local health authorities and funded by Institut National de Veille Sanitaire and INSERM.

Sources of ascertainment:

Reports are obtained from paediatricians, gynecologists, pathologists, surgeons and geneticists.

Exposure information:

Detailed information on various exposures is obtained from medical records. The children are followed to the age of two years.

Background information:

General demographic information is obtained from the National Institute of Statistics (INSEE). Further information is obtained from Social Security Records and Health Sheets.

Addresses and Staff:

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Avenue Molière
67098 Strasbourg Cedex, France

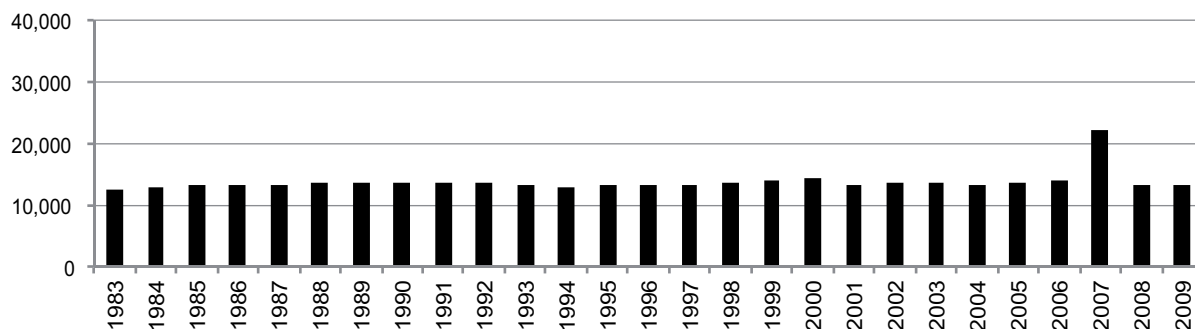
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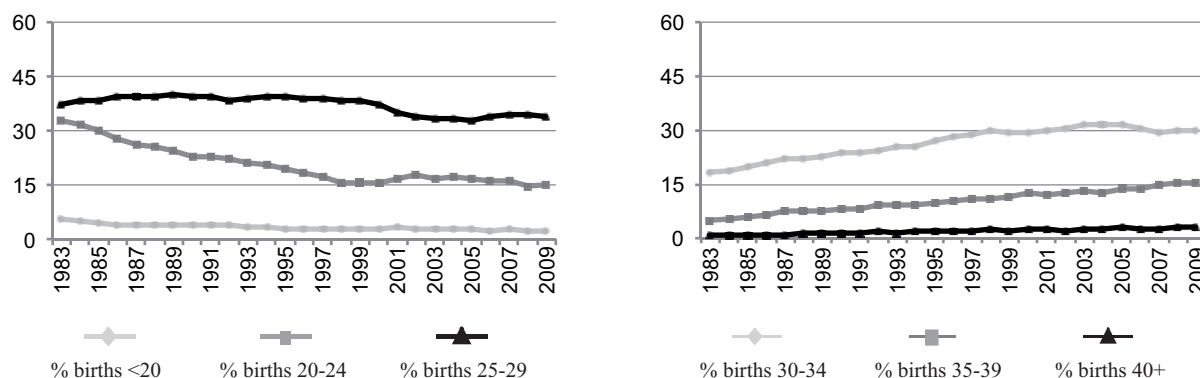
Monitoring Systems

France: Strasbourg

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)

(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	24	100.0	Cystic kidney	15	39.5
Spina bifida	25	73.5	Limb reduction defects	13	31.0
Encephalocele	4	80.0	Diaphragmatic hernia	4	19.0
Holoprosencephaly	10	90.9	Omphalocele	6	54.5
Hydrocephaly	27	69.2	Gastroschisis	0	0.0
Hypoplastic left heart syndrome	8	57.1	Trisomy 13	9	69.2
Cleft palate without cleft lip	4	11.1	Trisomy 18	25	92.6
Cleft lip with or without cleft palate	11	19.6	Down syndrome	97	71.9
Renal agenesis	7	58.3			

Total ToPs with births defects = 317 (Ratio ToPs/Births: 6.54 per 1,000)
 (*) % of ToPs = ToPs/(ToPs+Births)

France: Strasbourg, 2009

Live births (LB)	13,009
Stillbirths (SB)	115
Total births	13,124
Number of terminations of pregnancy (ToP) for birth defects	87

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	4	3.05
Spina bifida	4	0	7	8.38
Encephalocele	0	0	2	1.52
Microcephaly	3	0	1	3.05
Holoprosencephaly	0	0	4	3.05
Hydrocephaly	4	1	7	9.14
Anophthalmos	0	0	1	0.76
Microphthalmos	2	0	0	1.52
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	0	0	0	0.00
Microtia	2	0	0	1.52
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	4	0	0	3.05
Tetralogy of Fallot	3	0	2	3.81
Hypoplastic left heart syndrome	0	0	6	4.57
Coarctation of aorta	4	0	0	3.05
Choanal atresia, bilateral	3	0	0	2.29
Cleft palate without cleft lip	11	0	1	9.14
Cleft lip with or without cleft palate	17	0	3	15.24
Oesophageal atresia/stenosis with or without fistula	3	0	0	2.29
Small intestine atresia/stenosis	4	0	0	3.05
Anorectal atresia/stenosis	1	0	1	1.52
Undescended testis (36 weeks of gestation or later)	3	0	1	3.05
Hypospadias	26	0	1	20.57
Epispadias	1	0	0	0.76
Indeterminate sex	0	0	0	0.00
Renal agenesis	1	0	4	3.81
Cystic kidney	7	1	2	7.62
Bladder exstrophy	0	0	1	0.76
Polydactyly, preaxial	4	0	0	3.05
Total Limb reduction defects (include unspecified)	9	0	3	9.14
Transverse	2	0	1	2.29
Preaxial	4	0	2	4.57
Postaxial	0	0	0	0.00
Intercalary	1	0	0	0.76
Mixed	2	0	0	1.52
Unspecified	0	0	0	0.00
Diaphragmatic hernia	6	0	0	4.57
Omphalocele	4	0	5	6.86
Gastroschisis	3	0	0	2.29
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	3	0	3	4.57
Trisomy 18	0	0	8	6.10
Down syndrome, all ages (include age unknown)	10	0	24	25.91
<20	0	0	0	0.00
20-24	1	0	4	25.13
25-29	2	0	0	4.48
30-34	2	0	4	15.34
35-39	2	0	14	78.82
40-44	3	0	2	125.31
45+	0	0	0	0.00
unknown	0	0	0	---

nr = not reported

France: Strasbourg, Previous years rates 1983 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

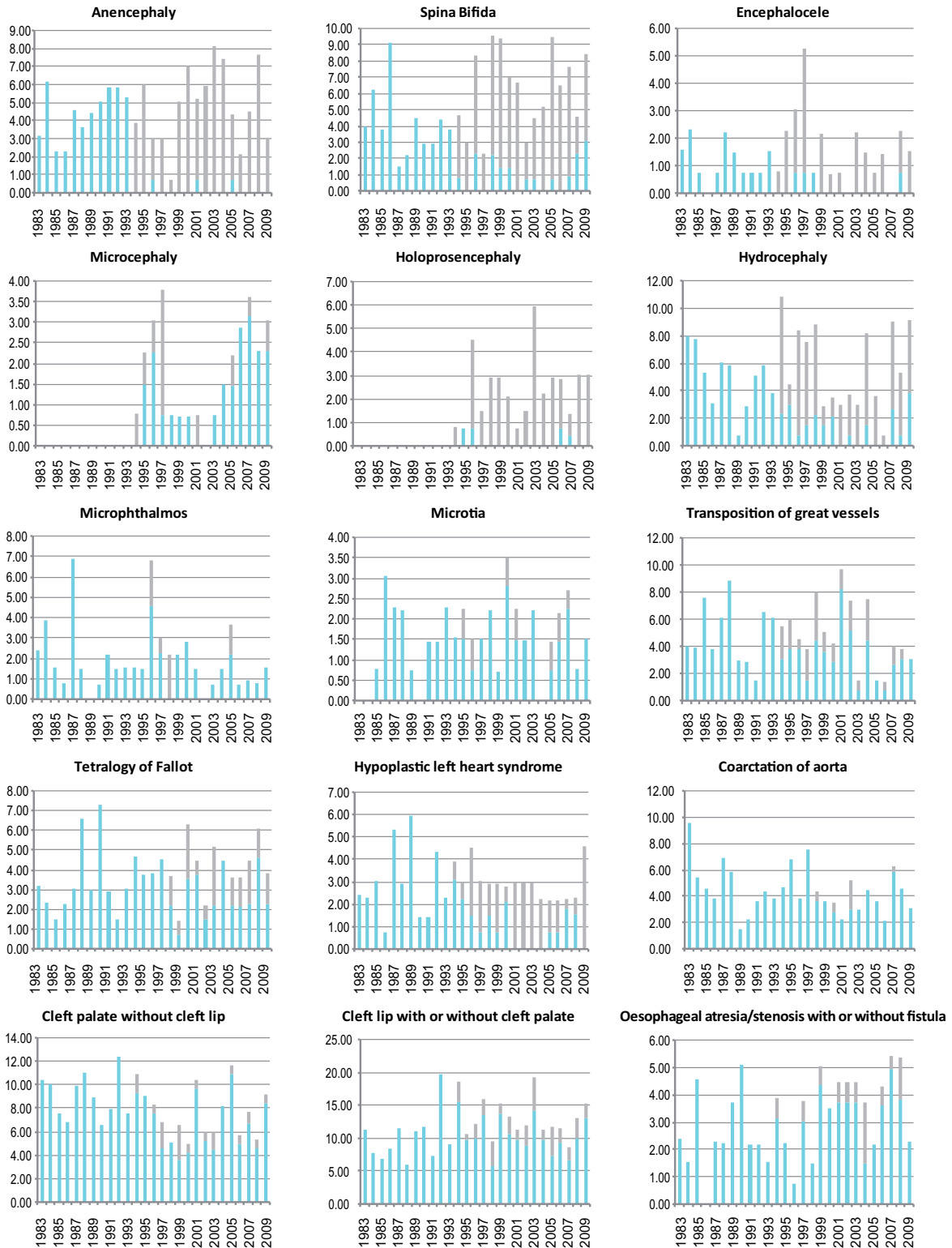
	1974-1979	1980-1984*	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		25,449	66,504	67,271	67,218	68,028	76,162
Anencephaly		4.72	3.46	5.20	3.57	6.76	4.33
Spina bifida		5.11	4.21	3.72	6.55	5.29	7.35
Encephalocele		1.96	1.05	0.89	2.68	1.03	1.05
Microcephaly		nr	nr	0.78*	2.08	0.73	2.89
Holoprosencephaly		nr	nr	0.78*	2.53	2.50	2.49
Hydrocephaly		7.86	4.21	5.65	6.40	4.26	5.91
Anophthalmos		0.79	0.15	0.15	0.89	0.15	0.26
Microphthalmos		3.14	2.11	1.49	3.12	1.32	1.44
Unspecified Anophthalmos/Microphthalmos		0.00	0.00	0.00	0.00	0.00	0.00
Anotia		0.39	0.15	0.45	0.45	0.44	0.26
Microtia		0.00	1.80	1.34	1.64	1.91	1.84
Unspecified Anotia/Microtia		0.00	0.00	0.00	0.00	0.00	0.00
Transposition of great vessels		3.93	5.86	4.46	5.50	6.03	2.89
Tetralogy of Fallot		2.75	3.31	3.86	3.42	4.56	4.33
Hypoplastic left heart syndrome		2.36	3.61	2.68	3.27	2.79	2.63
Coarctation of aorta		7.47	4.51	3.72	5.21	3.67	4.20
Choanal atresia, bilateral		nr	nr	nr	0.15	0.44	0.66
Cleft palate without cleft lip		10.22	8.87	9.07	7.14	7.06	7.88
Cleft lip with or without cleft palate		9.43	8.72	13.23	12.65	13.38	11.55
Oesophageal atresia/stenosis with or without fistula		1.96	2.56	2.97	2.68	4.12	4.07
Small intestine atresia/stenosis		nr	nr	nr	2.23	2.06	2.63
Anorectal atresia/stenosis		4.72	4.81	5.20	6.55	5.00	3.94
Undescended testis (36 weeks of gestation or later)		nr	nr	nr	nr	nr	3.71*
Hypospadias		13.36	24.06	26.46	22.02	22.78	19.43
Epispadias		nr	nr	nr	0.30	0.15	0.39
Indeterminate sex		nr	nr	0.78*	0.15	1.03	0.53
Renal agenesis		nr	nr	2.33*	4.31	8.82	3.55
Cystic kidney		nr	nr	2.33*	8.93	7.20	8.01
Bladder exstrophy		nr	nr	nr	0.60	0.29	0.26
Polydactyly, preaxial		nr	nr	nr	3.72	4.26	3.41
Total Limb reduction defects (include unspecified)		6.29	6.77	6.99	12.05	8.08	8.93
Transverse		4.32	4.36	3.86	5.80	3.97	2.89
Preaxial		1.96	1.50	1.49	1.64	0.73	2.36
Postaxial		0.00	0.45	0.45	0.45	0.44	0.92
Intercalary		0.00	0.00	0.45	0.89	0.29	1.05
Mixed		0.00	0.45	0.30	0.74	1.76	1.71
Unspecified		0.00	0.00	0.00	0.00	0.59	0.00
Diaphragmatic hernia		3.14	4.06	5.35	4.46	4.56	4.20
Omphalocele		2.75	3.16	4.01	4.61	2.79	2.49
Gastroschisis		0.79	2.41	2.08	2.83	1.47	1.58
Unspecified Omphalocele/Gastroschisis		0.00	0.30	1.49	0.89	1.32	0.26
Prune belly sequence		nr	nr	nr	0.45	0.88	0.26
Trisomy 13		nr	nr	3.11*	1.79	2.65	2.63
Trisomy 18		nr	nr	3.88*	3.57	6.91	5.91
Down syndrome, all ages (include age unknown)		9.43	15.79	22.15	30.05	24.55	25.73
<20		0.00	18.21	15.49	15.58	4.76	5.00
20-24		7.31	8.37	10.79	11.22	11.33	9.88
25-29		4.16	7.64	14.02	10.39	5.51	8.89
30-34		10.57	16.78	13.90	26.11	15.45	17.91
35-39		53.07	47.42	77.08	101.90	77.49	66.92
40-44		109.89	269.46	221.37	282.80	150.94	189.30
45+		0.00	232.56	243.90	0.00	0.00	340.91
unknown		---	---	---	---	---	---

nr = not reported

* data include less than 5 years

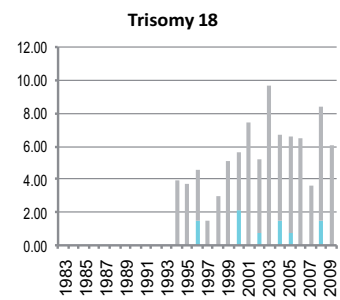
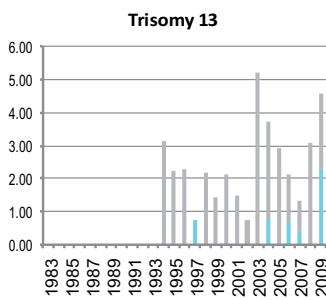
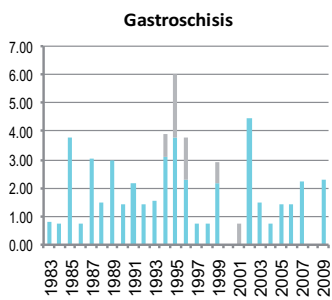
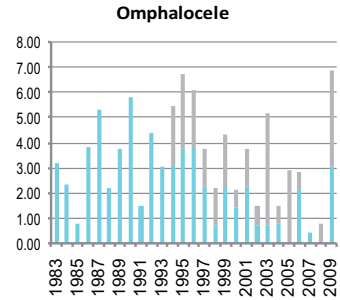
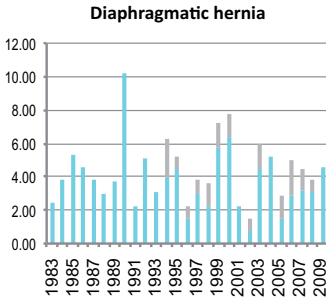
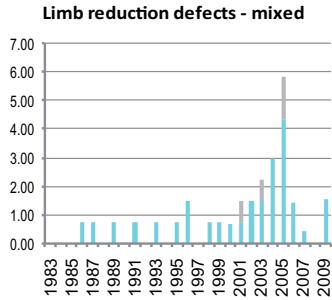
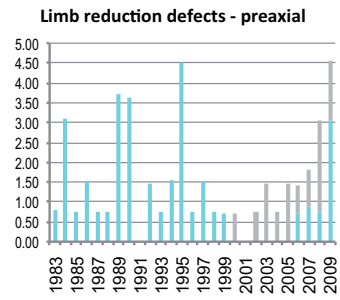
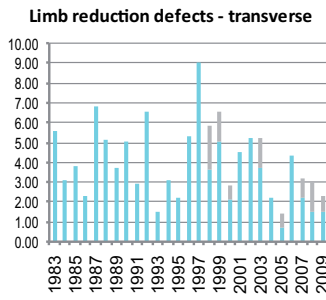
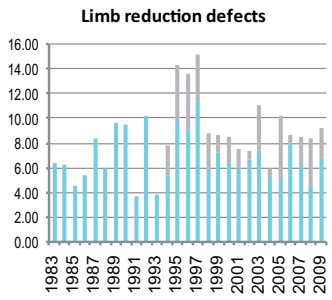
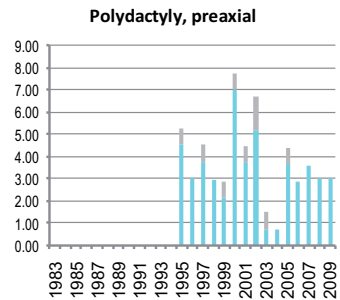
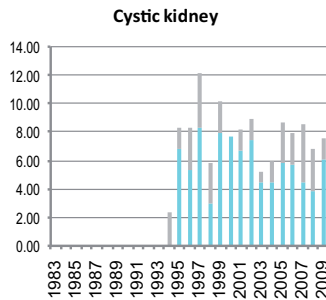
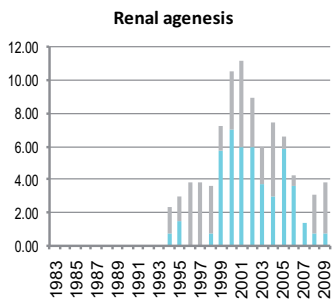
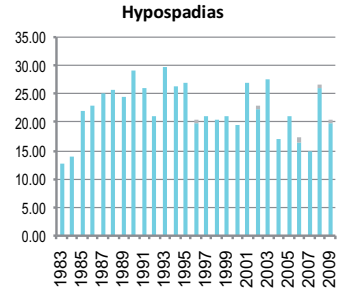
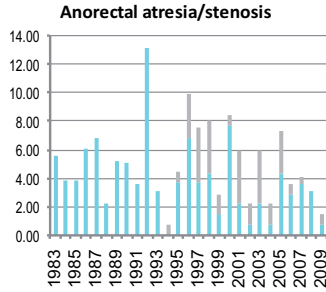
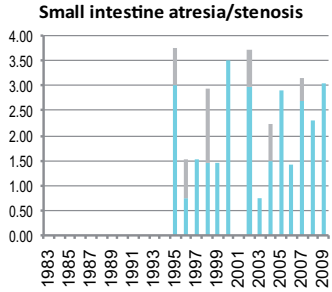
France: Strasbourg

Time trends 1983-2009 (Birth prevalence rates per 10,000)



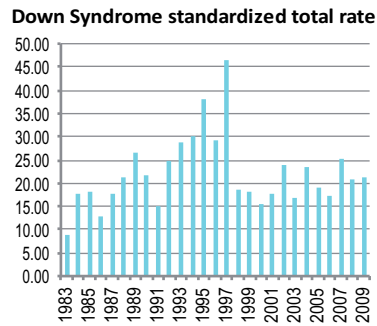
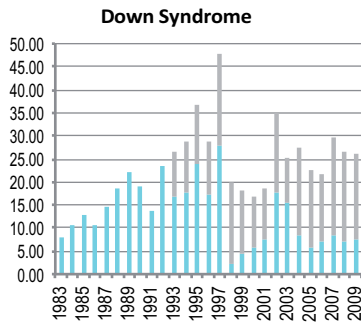
Note: ■ L+S rates, ■ ToP rates

France: Strasbourg



Note: ■ L+S rates, ■ ToP rates

France: Strasbourg



Note: ■ L+S rates, ■ ToP rates

Germany: Saxony-Anhalt Malformation Monitoring Centre Saxony-Anhalt

History:

The birth defect registry started in 1980 in the city of Magdeburg with 4000 Births per year. After that, there was a successive enlargement of the registry from 1981-1987. Until 1987 we registered the whole area of the former "District of Magdeburg" (about 17.000 births per year). In 1990 there was a dramatic political change, the reunification of Germany. There has been a two-third decrease in the number of births in the registry region. So a similar process of successive territorial enlargement of the surveillance system took place. Since 2000 the system included the whole Federal State of Saxony-Anhalt (up to date 11 districts and 3 major cities). Saxony-Anhalt has currently 2.3 million inhabitants (whole Germany 81.7 million) and a birth rate 17.144 live births in 2009 (2.6% of all live born children in Germany 2009).

Additional work: since 2006 the Malformation Monitoring Centre Saxony-Anhalt is collecting and tracking the results of the newborn hearing screening in Saxony-Anhalt. The test is regular performed in the delivery units.

Legislation and funding:

1980 to 1989: Ministry of Health of the former GDR
1990 to 1992: Medical Faculty, Otto-von-Guericke University, Magdeburg

1993 to 1995: Ministry of Health, Germany

since 1995: Ministry of Labor and Social Affairs of the Federal State of Saxony-Anhalt, Germany. In addition since 2009 a new act concerning the birth defect surveillance and the primary and secondary prevention was adopted by the parliament of Saxony-Anhalt (§ 7).

Population Coverage:

The survey system is multi-centric and population-based, including all mothers resident in Saxony-Anhalt. We exclude non-residents and it is estimated that only a few percent of resident mothers would give birth outside the registry area. Saxony-Anhalt has 2.331 million inhabitants

(28.03.2011) and annual births at a rate of 17.300 children (2010).

Sources of Ascertainment:

Children and fetuses with congenital anomalies diagnosed before or after birth up to one year of live are eligible for registration at the registry if the mother was resident at time of birth in Saxony-Anhalt. Notification comes from 27 maternity units, 24 paediatric departments, 10 prenatal diagnostic centres, 8 pathology services, and 3 genetic units.

Exposure information:

Maternal and paternal occupation (in groups); occupation risk; drugs in pregnancy (ATC-code); alcohol, nicotine, drug abuse.

Background information:

Population based registry (region: Federal State Saxony-Anhalt); written informed consent of the parents are necessary. Two healthy "controls" per one malformed child are registered. Termination of pregnancy after prenatal diagnosis is legal and their are registered. Also registered are spontaneous abortions after 16th week of gestation, live and stillborn babies. Definition of stillbirth: ≥ 500 grams. The maximum of age of diagnosis is 1 year of live. We do announce an annual report (see www.angeborene-fehlbildungen.com)

Addresses and Staff:

Simone Poetzsch, Program Director, until March 31, 2010

Anke Reißmann, Program Director, from April 1, 2010

Nephrology/ Neonatology

Head of Malformation Monitoring Center Saxony-Anhalt

Otto-von-Guericke University

Leipziger Strasse 44

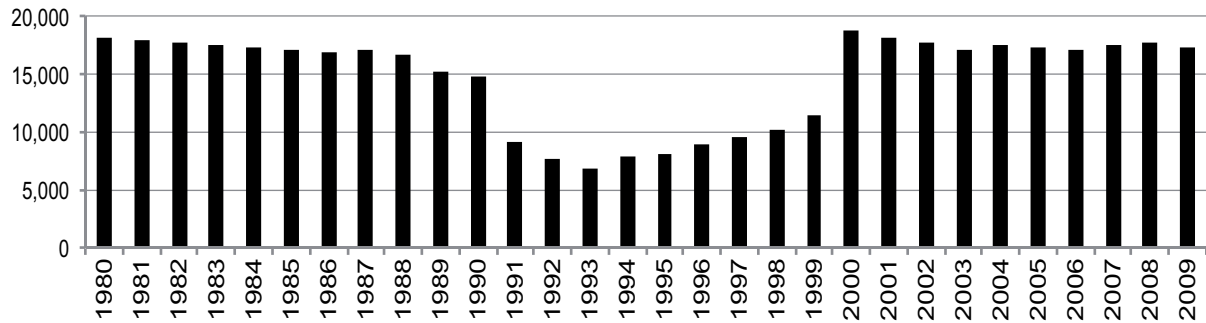
D-39120 Magdeburg, Germany

E-mail: Anke.Rissmann@med.ovgu.de

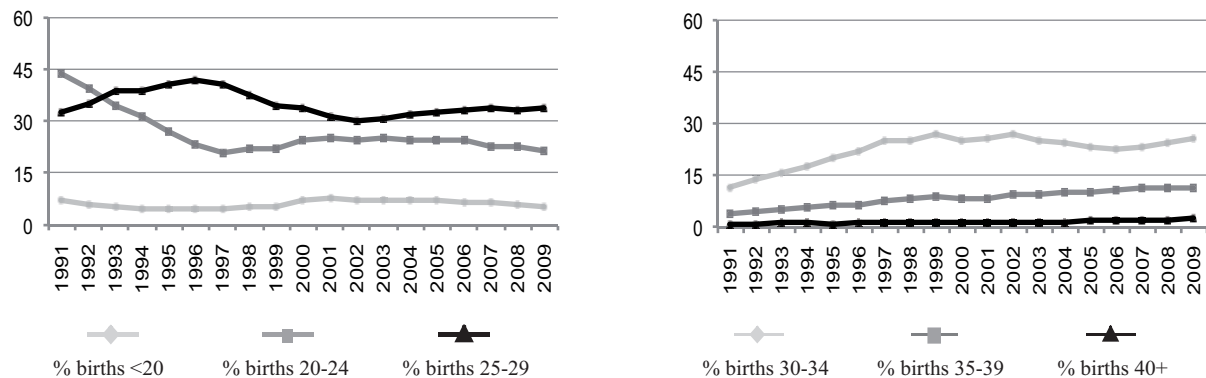
Website: www.angeborene-fehlbildungen.com

Germany: Saxony Anhalt

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	13	92.9	Cystic kidney	3	7.5
Spina bifida	25	69.4	Limb reduction defects	16	36.4
Encephalocele	4	57.1	Diaphragmatic hernia	3	16.7
Holoprosencephaly	3	75.0	Omphalocele	7	58.3
Hydrocephaly	8	40.0	Gastroschisis	1	6.7
Hypoplastic left heart syndrome	3	16.7	Trisomy 13	4	80.0
Cleft palate without cleft lip	2	5.9	Trisomy 18	19	86.4
Cleft lip with or without cleft palate	5	8.3	Down syndrome	48	56.5
Renal agenesis	5	33.3			

Total ToPs with births defects = 289 (Ratio ToPs/Births: 5.51 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Germany: Saxony Anhalt, 2009

Live births (LB)	17,144
Stillbirths (SB)	69
Total births	17,213
Number of terminations of pregnancy (ToP) for birth defects	92

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	2	1.16
Spina bifida	3	0	10	7.55
Encephalocele	1	0	0	0.58
Microcephaly	18	10	1	16.85
Holoprosencephaly	0	0	3	1.74
Hydrocephaly	3	0	3	3.49
Anophthalmos	0	0	0	0.00
Microphthalmos	0	0	0	0.00
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	0	0	0	0.00
Microtia	2	0	0	1.16
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	7	0	1	4.65
Tetralogy of Fallot	6	0	0	3.49
Hypoplastic left heart syndrome	5	0	0	2.90
Coarctation of aorta	7	0	0	4.07
Choanal atresia, bilateral	0	0	0	0.00
Cleft palate without cleft lip	8	0	1	5.23
Cleft lip with or without cleft palate	15	0	0	8.71
Oesophageal atresia/stenosis with or without fistula	4	0	0	2.32
Small intestine atresia/stenosis	2	0	0	1.16
Anorectal atresia/stenosis	11	1	1	7.55
Undescended testis (36 weeks of gestation or later)	8	0	0	4.65
Hypospadias	8	0	0	4.65
Epispadias	1	0	0	0.58
Indeterminate sex	0	0	0	0.00
Renal agenesis	8	0	1	5.23
Cystic kidney	13	1	1	8.71
Bladder exstrophy	1	0	0	0.58
Polydactyly, preaxial	9	0	0	5.23
Total Limb reduction defects (include unspecified)	4	1	5	5.81
Transverse	0	0	0	0.00
Preaxial	2	0	1	1.74
Postaxial	0	0	0	0.00
Intercalary	0	0	0	0.00
Mixed	1	0	1	1.16
Unspecified	1	1	3	2.90
Diaphragmatic hernia	3	1	2	3.49
Omphalocele	0	1	2	1.74
Gastroschisis	3	0	1	2.32
Unspecified Omphalocele/Gastroschisis	0	1	1	1.16
Prune belly sequence	0	1	1	1.16
Trisomy 13	0	0	2	1.16
Trisomy 18	0	1	7	4.65
Down syndrome, all ages (include age unknown)	12	0	14	15.10
<20	0	0	0	0.00
20-24	1	0	1	5.47
25-29	3	0	0	5.18
30-34	1	0	4	11.39
35-39	6	0	6	61.13
40-44	1	0	3	97.80
45+	0	0	0	0.00
unknown	12	0	14	---

Germany: Saxony Anhalt, Previous years rates 1980 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984*	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		88,477	83,005	46,342	48,335	89,025	86,662
Anencephaly		1.70	3.86	1.73	2.90	2.70	2.19
Spina bifida		4.18	10.24	6.47	5.38	7.30	6.00
Encephalocele		0.57	1.20	0.86	2.69	1.57	0.81
Microcephaly		nr	1.84*	3.24	8.07	11.79	19.62
Holoprosencephaly		nr	2.04*	0.22	1.24	1.46	1.04
Hydrocephaly		nr	4.69*	7.55	9.72	7.53	4.38
Anophthalmos		nr	0.00*	0.86	0.00	0.11	0.23
Microphthalmos		nr	0.82*	1.51	1.24	0.34	0.58
Unspecified Anophthalmos/Microphthalmos		nr	0.00*	0.00	0.00	0.00	0.00
Anotia		nr	0.00*	0.22	0.00	0.22	0.35
Microtia		nr	0.00*	0.22	0.21	1.35	0.58
Unspecified Anotia/Microtia		nr	0.00*	0.00	0.00	0.00	0.00
Transposition of great vessels		nr	2.86*	3.24	5.79	5.17	4.04
Tetralogy of Fallot		nr	1.02*	0.86	3.31	2.58	3.81
Hypoplastic left heart syndrome		nr	4.49*	2.59	4.76	3.48	3.12
Coarctation of aorta		nr	1.22*	2.16	2.69	3.59	4.73
Choanal atresia, bilateral		nr	1.02*	1.29	0.83	0.67	0.12
Cleft palate without cleft lip		nr	5.71*	4.53	8.07	9.77	8.54
Cleft lip with or without cleft palate		nr	14.08*	13.16	18.21	15.50	12.46
Oesophageal atresia/stenosis with or without fistula		nr	2.45*	2.37	2.90	2.92	2.42
Small intestine atresia/stenosis		nr	0.82*	3.24	1.24	2.58	1.50
Anorectal atresia/stenosis		nr	3.47*	3.45	2.69	2.92	6.35
Undescended testis (36 weeks of gestation or later)		nr	11.84*	18.77	12.21	9.44	7.62
Hypospadias		nr	14.49*	17.05	17.79	8.87	7.15
Epispadias		nr	0.20*	0.43	0.62	0.34	0.46
Indeterminate sex		nr	0.61*	0.00	0.83	0.90	0.23
Renal agenesis		nr	1.84*	1.08	3.10	2.25	2.08
Cystic kidney		nr	2.04*	3.67	4.14	5.17	8.54
Bladder exstrophy		nr	0.82*	0.22	0.62	0.00	0.35
Polydactyly, preaxial		nr	0.00*	1.94	4.34	3.59	4.73
Total Limb reduction defects (include unspecified)		nr	4.29*	7.34	8.28	7.86	6.92
Transverse		nr	nr	nr	nr	3.37	1.50
Preaxial		nr	nr	nr	nr	0.56	0.58
Postaxial		nr	nr	nr	nr	0.00	0.58
Intercalary		nr	nr	nr	nr	1.68	0.35
Mixed		nr	nr	nr	nr	1.80	2.88
Unspecified		nr	nr	nr	nr	0.45	1.04
Diaphragmatic hernia		nr	1.43*	1.51	1.24	2.70	3.00
Omphalocele		nr	5.72*	2.37	2.90	3.15	3.12
Gastroschisis		nr	1.02*	2.37	3.72	3.71	3.81
Unspecified Omphalocele/Gastroschisis		nr	nr	nr	nr	0.11	0.23
Prune belly sequence		nr	0.00*	0.86	1.24	0.79	0.46
Trisomy 13		0.23	0.36	0.65	2.48	0.79	1.15
Trisomy 18		0.90	0.84	0.86	1.66	3.37	3.81
Down syndrome, all ages (include age unknown)		8.59	8.19	10.36	16.96	16.40	15.92
<20		nr	nr	nr	nr	6.15	0.00
20-24		nr	nr	nr	nr	6.36	9.95
25-29		nr	nr	nr	nr	9.60	6.59
30-34		nr	nr	nr	nr	12.83	14.57
35-39		nr	nr	nr	nr	53.03	47.75
40-44		nr	nr	nr	nr	174.19	119.05
45+		nr	nr	nr	nr	392.16	273.97
unknown		---	---	---	---	---	---

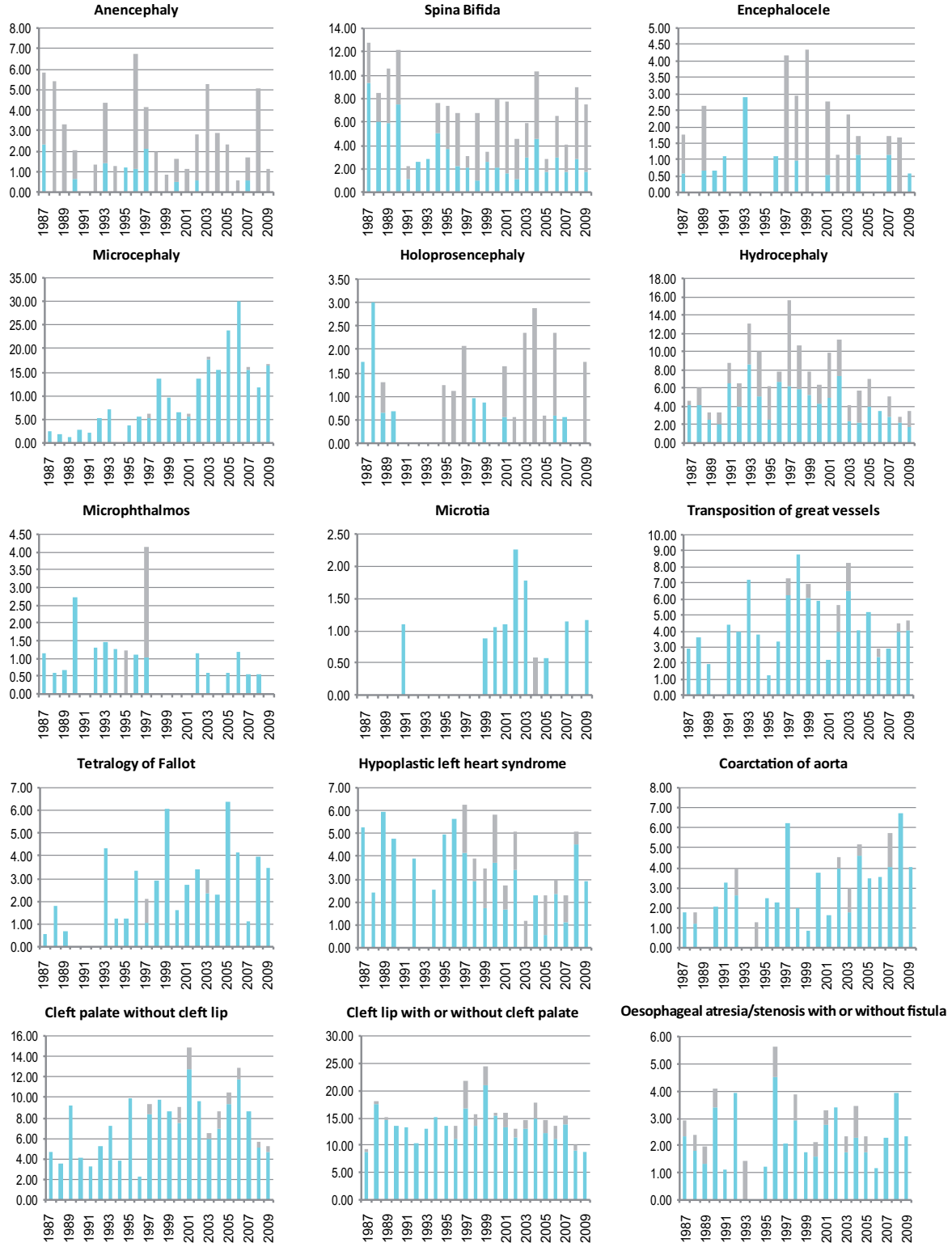
nr = not reported

* data include less than 5 years

Monitoring Systems

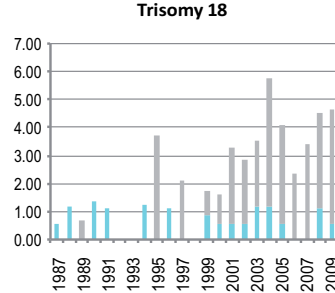
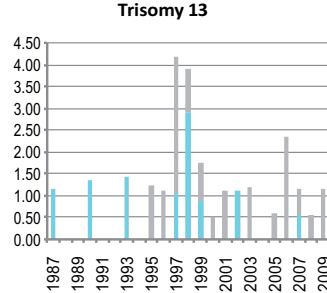
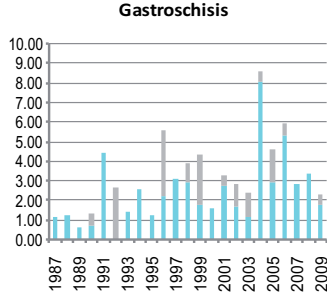
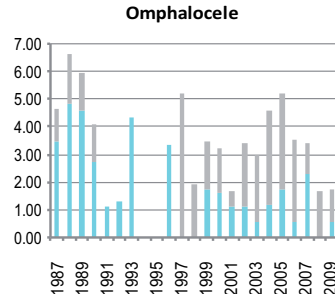
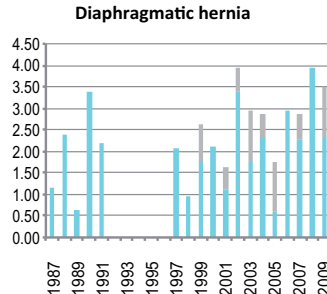
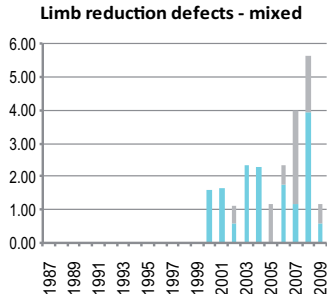
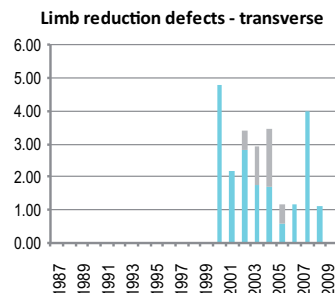
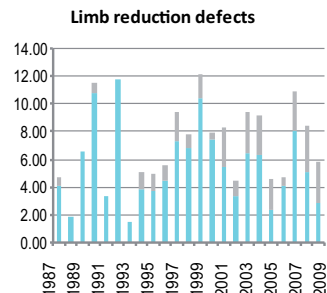
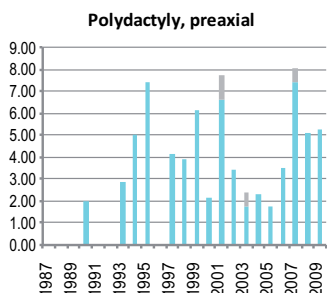
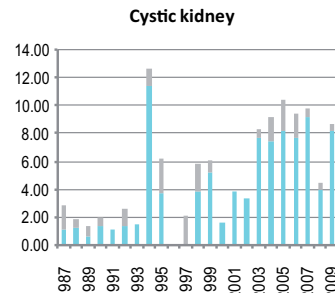
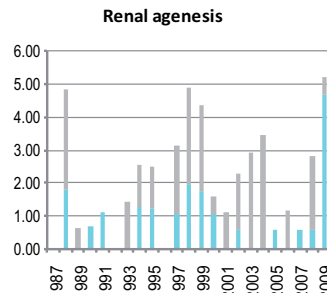
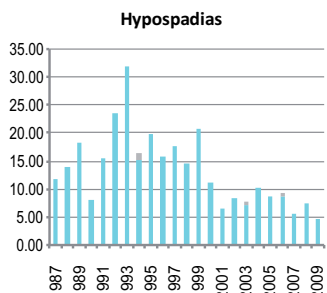
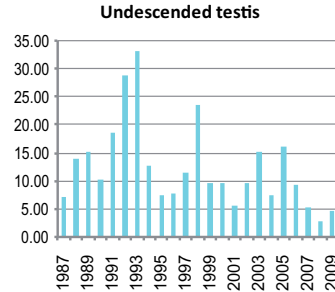
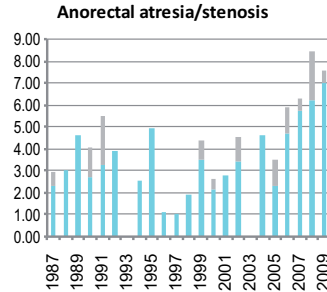
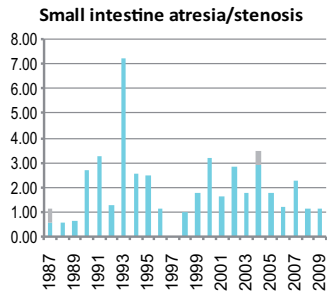
Germany: Saxony Anhalt

Time trends 1987-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates, ■ ToP rates

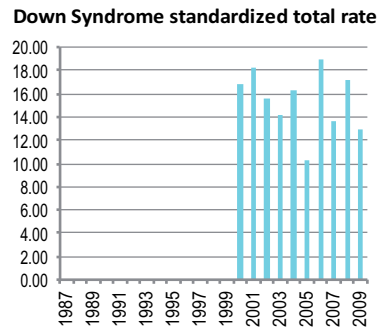
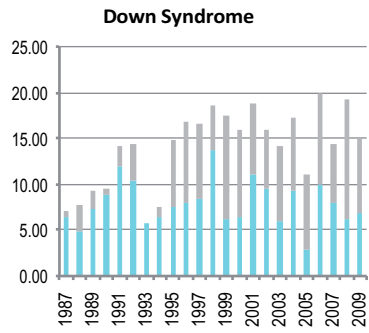
Germany: Saxony Anhalt



Note: ■ L+S rates, ■ ToP rates

Monitoring Systems

Germany: Saxony Anhalt



Note: ■ L+S rates, ■ ToP rates

Hungary

Hungarian Congenital Abnormality Registry

History:

Centralized registration of congenital abnormalities began in Hungary in 1962, and came under our co-ordination in 1970. Monitoring began in 1973. The Programme was a founding member of the International Clearinghouse.

Size and coverage:

The registry covers all births in Hungary, approximately 100,000 annually. Criteria to define stillbirth was changed in 1998. At present, stillbirths of at least 24 weeks gestation or 500 grams are registered. Prenatally diagnosed and terminated fetuses are also registered.

Legislation and funding:

Reporting is compulsory. The registry is currently run and financed by the National Center for Healthcare Audit and Improvement; formerly by the National Center for Epidemiology, and the National Institute of Public Health.

Sources of ascertainment:

Reports are obtained from multiple sources, such as delivery units, neonatal and pediatric surgery, pathology, and prenatal diagnostic centers. Abnormalities detected before the age of one are reported. Variations in figures (especially in the 1990s) may reflect incomplete notification.

Exposure information:

Exposure information has been available since 1980, when a case-control system was initiated. Mothers of selected malformed infants and controls are interviewed by community nurses to collect information.

Background information:

General background information on all births is available from central statistics. The online notification (instead of paper-based) has started since 15th of October 2009.

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Inactive Staff (Maternity leave)

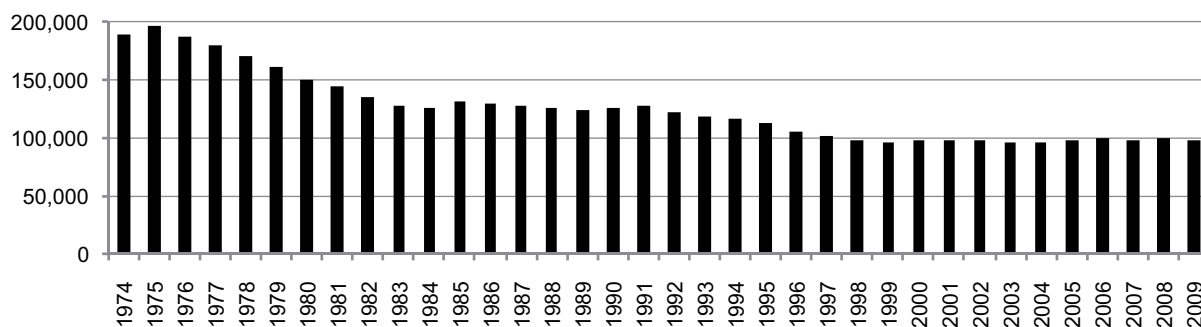
Erzsebet Horvath-Puho, PhD

Melinda Csaky-Szunyogh, MSc

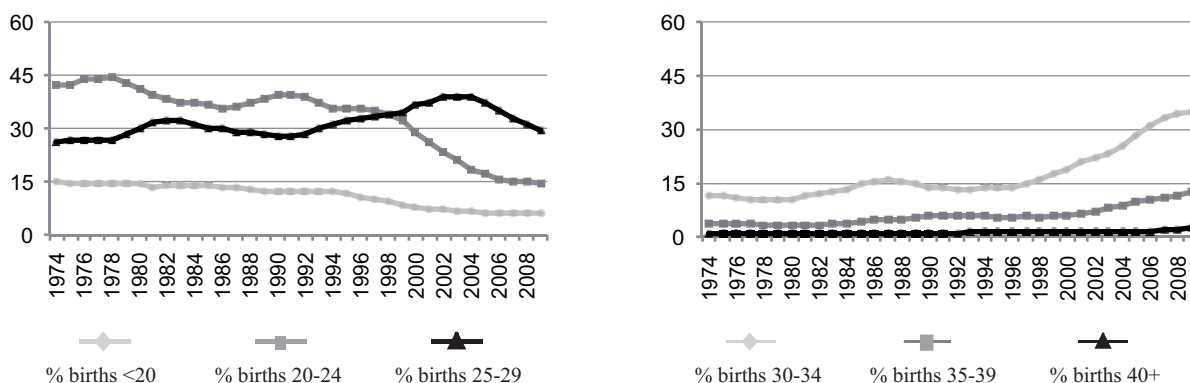
Monitoring Systems

Hungary

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009) (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	55	91.7	Cystic kidney	47	30.9
Spina bifida	89	65.9	Limb reduction defects	20	18.3
Encephalocele	16	66.7	Diaphragmatic hernia	11	14.7
Holoprosencephaly	18	60.0	Omphalocele	26	50.0
Hydrocephaly	78	42.2	Gastroschisis	27	79.4
Hypoplastic left heart syndrome	20	24.1	Trisomy 13	31	77.5
Cleft palate without cleft lip	0	0.0	Trisomy 18	71	76.3
Cleft lip with or without cleft palate	21	9.0	Down syndrome	282	51.7
Renal agenesis	20	40.0			

Total ToPs with births defects = 1,264 (Ratio ToPs/Births: 4.29 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Hungary, 2009

Live births (LB)	96,442
Stillbirths (SB)	519
Total births	96,961
Number of terminations of pregnancy (ToP) for birth defects	457

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	1	0	19	2.06
Spina bifida	14	1	28	4.43
Encephalocele	3	0	8	1.13
Microcephaly	17	0	1	1.86
Holoprosencephaly	7	1	10	1.86
Hydrocephaly	41	1	27	7.12
Anophthalmos	3	0	0	0.31
Microphthalmos	12	0	1	1.34
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	7	0	0	0.72
Microtia	0	0	0	0.00
Unspecified Anotia/Microtia	nr	nr	nr	nr
Transposition of great vessels	28	0	3	3.20
Tetralogy of Fallot	32	0	0	3.30
Hypoplastic left heart syndrome	15	0	5	2.06
Coarctation of aorta	40	0	0	4.13
Choanal atresia, bilateral (*)	7	0	0	0.72
Cleft palate without cleft lip	47	1	0	4.95
Cleft lip with or without cleft palate	79	0	12	9.39
Oesophageal atresia/stenosis with or without fistula	33	0	0	3.40
Small intestine atresia/stenosis	23	0	0	2.37
Anorectal atresia/stenosis	29	0	1	3.09
Undescended testis (36 weeks of gestation or later)	215	0	0	22.17
Hypospadias	287	0	0	29.60
Epispadias	2	0	0	0.21
Indeterminate sex	4	0	0	0.41
Renal agenesis	2	0	2	0.41
Cystic kidney	33	1	18	5.36
Bladder exstrophy	2	0	0	0.21
Polydactyly, preaxial (§)	94	0	4	10.11
Total Limb reduction defects (include unspecified)	35	0	8	4.43
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	24	0	5	2.99
Omphalocele	10	0	12	2.27
Gastroschisis	5	0	7	1.24
Unspecified Omphalocele/Gastroschisis	nr	nr	nr	nr
Prune belly sequence	0	0	0	0.00
Trisomy 13	5	0	10	1.55
Trisomy 18	9	0	30	4.02
Down syndrome, all ages (include age unknown)	83	3	117	20.94
<20	5	1	0	10.12
20-24	8	0	2	7.04
25-29	12	0	10	7.71
30-34	22	0	28	14.82
35-39	19	1	45	52.58
40-44	12	1	30	201.69
45+	0	0	0	0.00
unknown	5	0	2	---

nr = not reported

(*) Choanal atresia, unilateral and bilateral are included.

(§) Polydactyly no specified without syndactyly. Number of syndactyly is 11 (live births).

Hungary, Previous years rates 1974 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

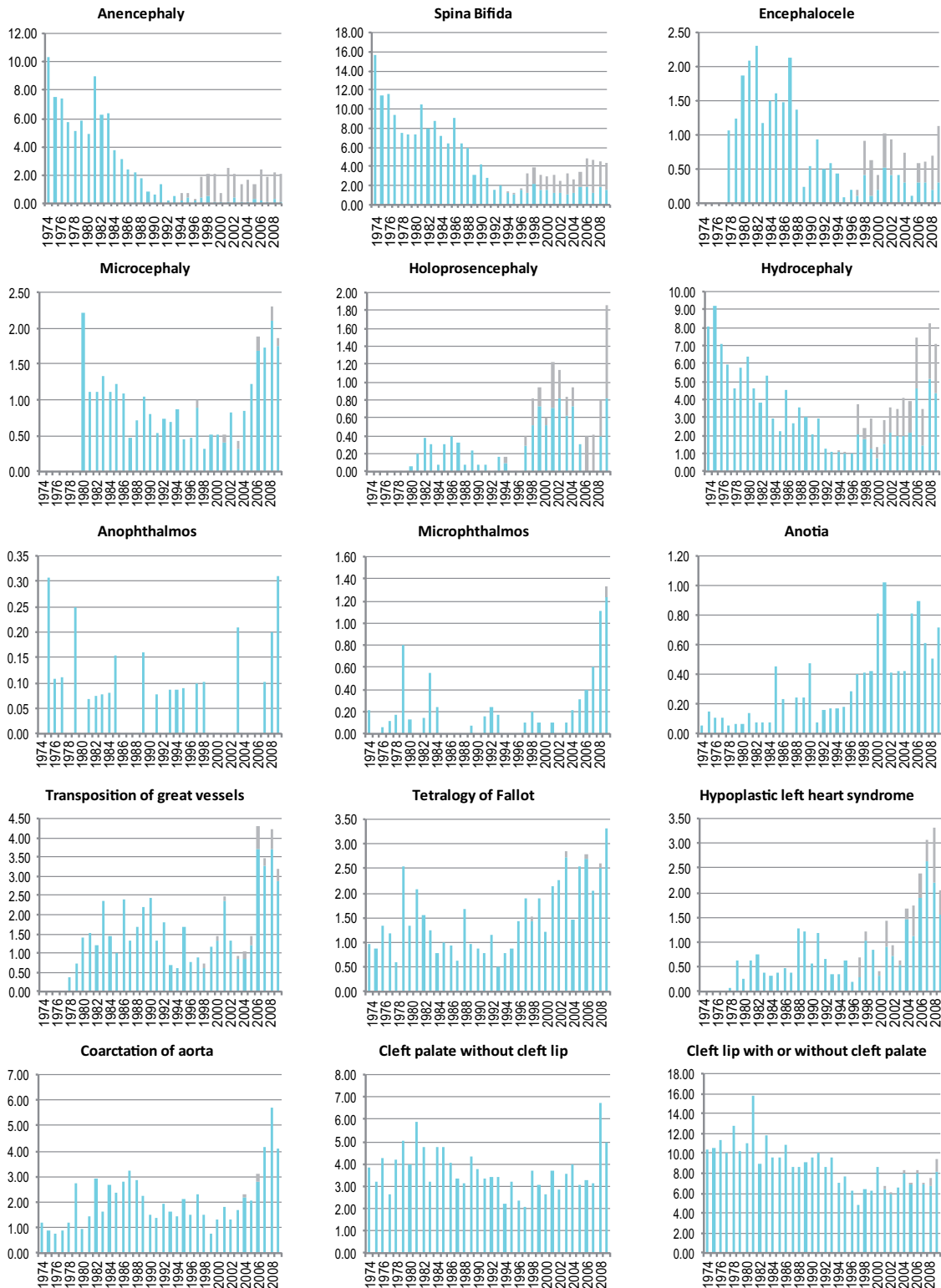
	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	1,081,073	682,788	635,779	609,857	511,919	483,849	493,001
Anencephaly	7.08	6.12	2.08	0.69	1.37	1.65	1.97
Spina bifida	10.63	8.38	6.23	2.44	2.60	2.93	4.40
Encephalocele	1.15*	1.80	1.37	0.61	0.39	0.70	0.63
Microcephaly	nr	1.39	0.91	0.72	0.55	0.62	1.81
Holoprosencephaly	nr	0.21	0.27	0.10	0.41	0.95	0.75
Hydrocephaly	6.86	4.66	3.21	1.74	2.21	3.06	6.04
Anophthalmos	0.13	0.06	0.06	0.05	0.06	0.04	0.12
Microphthalmos	0.21	0.21	0.02	0.11	0.08	0.08	0.75
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr	nr	nr	nr
Anotia	0.09	0.09	0.24	0.21	0.33	0.62	0.71
Microtia	0.05	0.03	0.02	0.02	0.02	0.10	0.14
Unspecified Anotia/Microtia	nr	nr	nr	nr	nr	nr	nr
Transposition of great vessels	0.54*	1.57	1.71	1.39	1.05	1.45	3.33
Tetralogy of Fallot	1.22	1.42	1.04	0.82	1.50	1.98	2.66
Hypoplastic left heart syndrome	0.33*	0.47	0.74	0.62	0.70	1.01	2.52
Coarctation of aorta	1.23	1.89	2.71	1.59	1.66	1.69	3.83
Choanal atresia, bilateral	nr	0.15	0.14	0.16	0.02	0.06	0.67
Cleft palate without cleft lip	3.83	4.54	3.92	3.26	2.87	3.35	4.24
Cleft lip with or without cleft palate	10.84	11.50	9.39	9.02	6.27	7.27	7.85
Oesophageal atresia/stenosis with or without fistula	2.06*	1.74	1.71	1.41	0.92	0.93	2.23
Small intestine atresia/stenosis	nr	1.51	1.18	1.07	0.51	0.95	2.09
Anorectal atresia/stenosis	2.20*	2.28	1.84	1.57	0.90	0.95	2.39
Undescended testis (36 weeks of gestation or later)	nr	17.81	16.28	15.05	10.67	12.83	20.93
Hypospadias	15.60	20.93	21.17	21.37	19.42	22.07	27.85
Epispadias	nr	nr	nr	nr	nr	nr	0.30*
Indeterminate sex	nr	0.29	0.36	0.18	0.16	0.41	0.39
Renal agenesis	1.27*	1.04	1.04	0.89	0.20	0.35	1.28
Cystic kidney	nr	0.00	0.19	0.49	1.35	2.46	4.75
Bladder exstrophy	nr	0.34	0.44	0.07	0.06	0.10	0.28
Polydactyly, preaxial	nr	0.94	1.90	1.31	4.98	8.18	7.14
Total Limb reduction defects (include unspecified)	nr	4.01*	4.29	2.77	3.05	3.27	3.65
Transverse	nr	nr	nr	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr	nr	nr	nr
Mixed	nr	nr	nr	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr	nr	nr	nr
Diaphragmatic hernia	1.81	2.62	2.00	1.75	0.92	0.43	2.35
Omphalocele	nr	2.13*	1.27	0.85	0.74	1.12	1.52
Gastroschisis	nr	0.49*	0.50	0.61	0.61	0.70	1.20
Unspecified Omphalocele/Gastroschisis	nr	nr	nr	nr	nr	nr	nr
Prune belly sequence	nr	nr		0.00*	0.10	0.00	0.06
Trisomy 13	nr	0.15*	0.25	0.20	0.20	0.72	1.12
Trisomy 18	nr	0.23*	0.30	0.25	0.47	1.65	2.74
Down syndrome, all ages (include age unknown)	8.93	8.17	8.26	8.53	6.82	14.14	17.40
<20	nr	1.85*	1.91	1.45	1.92	6.24	9.47
20-24	nr	1.50*	3.03	2.31	2.89	6.71	7.71
25-29	nr	3.15*	4.50	3.06	2.76	8.82	7.58
30-34	nr	4.53*	5.41	4.50	5.33	13.87	14.10
35-39	nr	9.71*	14.43	22.94	13.58	39.32	46.93
40+	nr	74.36*	48.29	86.88	79.82	167.65	148.98
unknown	---	---	---	---	---	---	---

nr = not reported

* data include less than 5 years or 6 years

Hungary

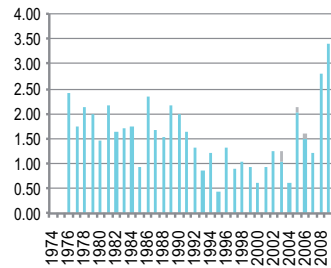
Time trends 1974-2009 (Birth prevalence rates per 10,000)



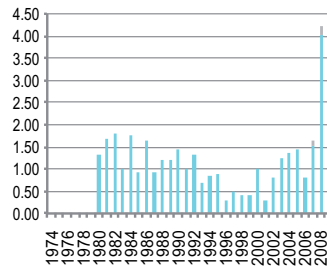
Note: ■ L+S rates, ■ ToP rates

Hungary

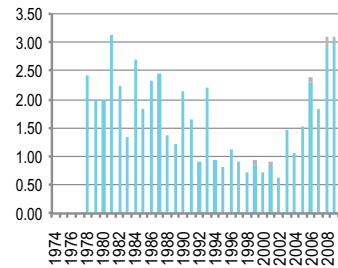
Oesophageal atresia/stenosis with or without fistula



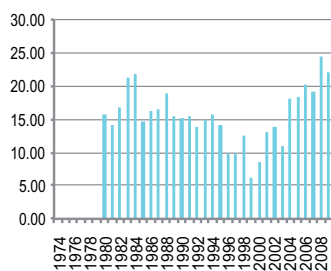
Small intestine atresia/stenosis



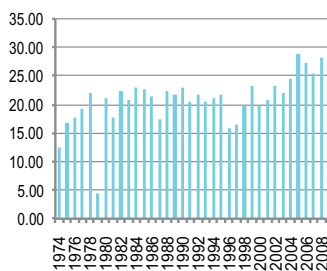
Anorectal atresia/stenosis



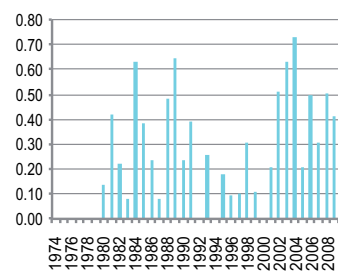
Undescended testis



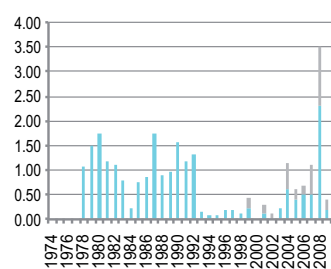
Hypospadias



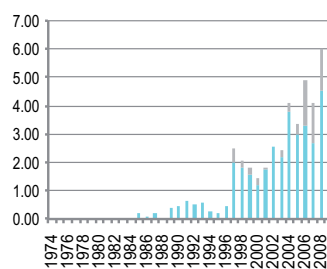
Indeterminate sex



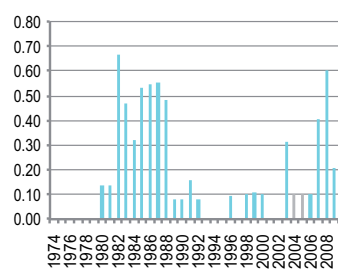
Renal agenesis



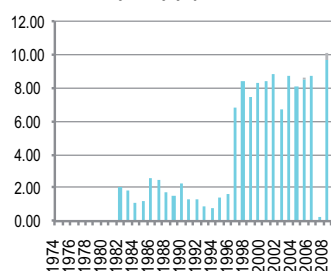
Cystic kidney



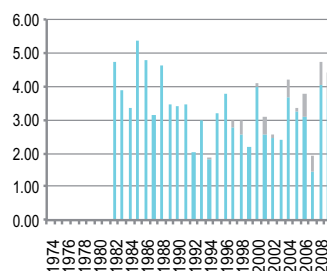
Bladder exstrophy



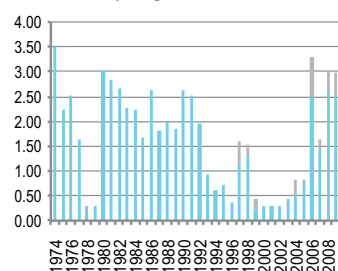
Polydactyly, preaxial



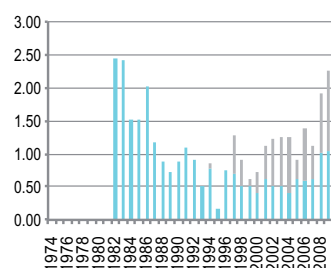
Limb reduction defects



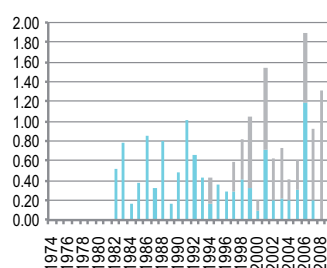
Diaphragmatic hernia



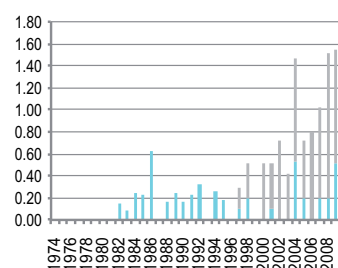
Omphalocele



Gastroschisis

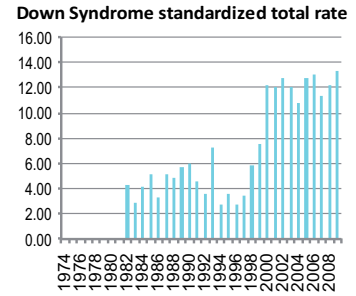
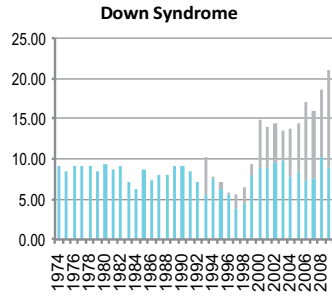
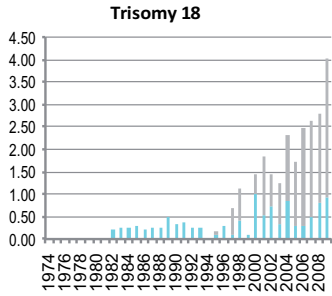


Trisomy 13



Note: ■ L+S rates, ■ ToP rates

Hungary



Note: ■ L+S rates, ■ ToP rates

India: BDRI

Birth Defects Registry of India

History:

BDRI is a part of Fetal Care Research Association a not for profit organisation that is dedicated to Preventive Curative and Supportive care of Birth Defects. With a population of 1.21 billion India is second only to China in population. Every year, India adds more people than any other nation in the world, and in fact the individual population of some of its states is equal to the total population of many countries. Founded in 2001, BDRI started with a few chennai hospitals and reported 15000 births. Initially BDRI encouraged each district to have a nodal leader which in turn would collect data from participant hospitals and submit it to the Central Registry. The data was sent as hard copy files by post. But in time it was found that there was more reception to the idea of individual reporting and therefore we now have around 750 hospitals reporting data from all over India across 28 states and three union territories. The Registry now has the facility of online reporting which has made it user friendly. BDRI has so far analysed almost 10 lakh births . As a result of these studies important conclusions have been made on birth defects in general and neural tube defects in particular. In return to the member hospitals who contribute data, BDRI shares its study in the form of quarterly meetings and quarterly newsletters, thereby helping in evolving strategies on handling birth defects. Out of a total of birth of 25 million a year BDRI represents only an annual birth of 2 lakhs a year as it is a voluntary hospital based passive Registry. Statistical Report is published annually.

Legislation and funding:

The funding is by Fetal Care Research Foundation and we do not have any external funding. But however as a fallout of this program the Government collaborated with us for Project on NTD.

Sources of ascertainment:

All our contributing hospitals are Obstetrics hospitals and the idea of Paediatricians and neonatologists contributing is just picking up.

Exposure information:

We do not have any exposure information.

Background information:

BDRI is a hospital based passive registry. The inclusion criteria is for both major and minor anomalies diagnosed in the antenatal period up to children of one year of age. The exclusion criteria is for Functional problems without any obvious structural anomaly; e.g. murmur with no structural abnormalities in the heart & Hydrops due to Rh iso immunisation or unknown etiology, IUGR due to placental causes & Preterm births

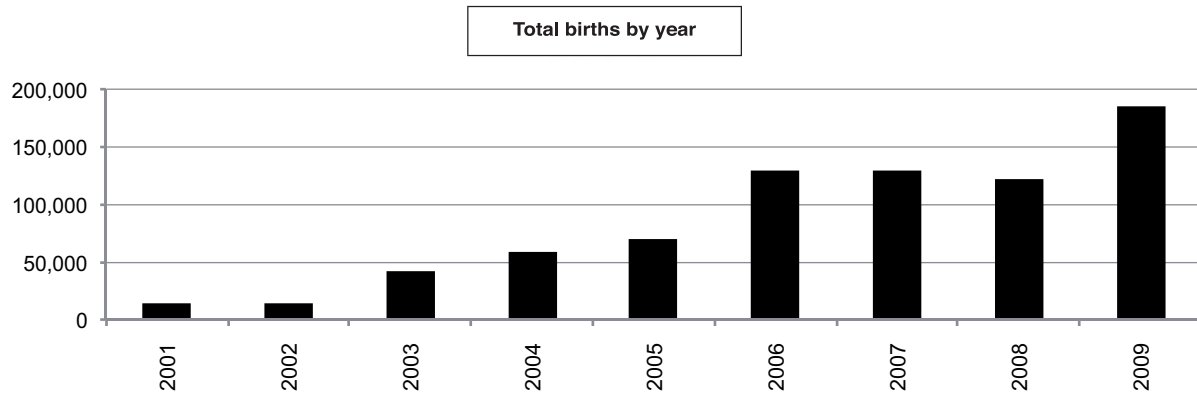
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India: BDRI



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
 (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	275	51.3	Cystic kidney	49	35.0
Spina bifida	190	35.9	Limb reduction defects	14	13.7
Encephalocele	64	51.2	Diaphragmatic hernia	29	25.7
Holoprosencephaly	19	52.8	Omphalocele	46	41.8
Hydrocephaly	104	25.7	Gastroschisis	19	51.4
Hypoplastic left heart syndrome	22	45.8	Trisomy 13	2	100.0
Cleft palate without cleft lip	7	10.4	Trisomy 18	7	53.8
Cleft lip with or without cleft palate	39	16.3	Down syndrome	16	32.7
Renal agenesis	35	49.3			

Total ToPs with births defects = 1,076 (Ratio ToPs/Births: 2.46 per 1,000)
 (*) % of ToPs = ToPs/(ToPs+Births)

India: BDRI, 2009

Live births (LB)	180,379
Stillbirths (SB)	5,019
Total births	185,398
Number of terminations of pregnancy (ToP) for birth defects	451

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	16	94	104	11.54
Spina bifida	91	64	82	12.78
Encephalocele	5	20	26	2.75
Microcephaly	22	7	5	1.83
Holoprosencephaly	2	8	6	0.86
Hydrocephaly	52	75	46	9.33
Anophthalmos	2	0	2	0.22
Microphthalmos	6	1	0	0.38
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	2	0	0	0.11
Microtia	3	0	0	0.16
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	6	2	5	0.70
Tetralogy of Fallot	6	0	2	0.43
Hypoplastic left heart syndrome	4	5	8	0.92
Coarctation of aorta	1	0	0	0.05
Choanal atresia, bilateral	0	0	0	0.00
Cleft palate without cleft lip	21	5	2	1.51
Cleft lip with or without cleft palate	57	9	24	4.85
Oesophageal atresia/stenosis with or without fistula	34	4	4	2.27
Small intestine atresia/stenosis	16	2	2	1.08
Anorectal atresia/stenosis	15	5	4	1.29
Undescended testis (36 weeks of gestation or later)	22	0	0	1.19
Hypospadias	40	1	1	2.27
Epispadias	1	0	0	0.05
Indeterminate sex	22	14	1	2.00
Renal agenesis	8	12	9	1.56
Cystic kidney	32	8	15	2.97
Bladder exstrophy	3	0	0	0.16
Polydactyly, preaxial	54	4	4	3.34
Total Limb reduction defects (include unspecified)	31	12	9	2.80
Transverse	0	0	0	0.00
Preaxial	0	0	0	0.00
Postaxial	0	0	0	0.00
Intercalary	0	0	0	0.00
Mixed	0	0	0	0.00
Unspecified	0	0	0	0.00
Diaphragmatic hernia	30	7	12	2.64
Omphalocele	12	16	24	2.80
Gastroschisis	7	3	12	1.19
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	3	0	1	0.22
Trisomy 13	0	0	2	0.11
Trisomy 18	2	2	2	0.32
Down syndrome, all ages (include age unknown)	11	3	7	1.13
<20	nr	nr	nr	nr
20-24	nr	nr	nr	nr
25-29	nr	nr	nr	nr
30-34	nr	nr	nr	nr
35-39	nr	nr	nr	nr
40-44	nr	nr	nr	nr
45+	nr	nr	nr	nr
unknown	nr	nr	nr	---

nr = not reported

India: BDRI, Previous years rates 2001 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004*	2005-2009
Total births						129,083	634,838
Anencephaly						16.04	12.26
Spina bifida						18.83	11.01
Encephalocele						4.03	3.56
Microcephaly						1.86	1.39
Holoprosencephaly						1.86	1.01
Hydrocephaly						9.14	9.25
Anophthalmos						0.46	0.24
Microphthalmos						0.62	0.36
Unspecified Anophthalmos/Microphthalmos						0.00	0.02
Anotia						0.00	0.06
Microtia						0.08	0.06
Unspecified Anotia/Microtia						0.00	0.00
Transposition of great vessels						0.46	0.88
Tetralogy of Fallot						0.93	0.44
Hypoplastic left heart syndrome						1.94	1.15
Coarctation of aorta						1.08	0.11
Choanal atresia, bilateral						0.08	0.08
Cleft palate without cleft lip						3.18	1.58
Cleft lip with or without cleft palate						7.20	5.32
Oesophageal atresia/stenosis with or without fistula						2.63	1.89
Small intestine atresia/stenosis						0.39	0.83
Anorectal atresia/stenosis						0.54	1.91
Undescended testis (36 weeks of gestation or later)						1.16	1.09
Hypospadias						2.17	2.00
Epispadias						0.00	0.02
Indeterminate sex						2.87	1.69
Renal agenesis						3.80	1.70
Cystic kidney						5.27	3.10
Bladder exstrophy						0.62	0.47
Polydactyly, preaxial						3.18	3.37
Total Limb reduction defects (include unspecified)						5.58	5.56
Transverse						nr	nr
Preaxial						nr	nr
Postaxial						nr	nr
Intercalary						nr	nr
Mixed						nr	nr
Unspecified						nr	nr
Diaphragmatic hernia						4.42	2.52
Omphalocele						3.56	2.47
Gastroschisis						0.46	0.83
Unspecified Omphalocele/Gastroschisis						0.00	0.11
Prune belly sequence						0.23	0.20
Trisomy 13						0.31	0.05
Trisomy 18						0.46	0.39
Down syndrome, all ages (include age unknown)						0.85	1.10
<20						nr	nr
20-24						nr	nr
25-29						nr	nr
30-34						nr	nr
35-39						nr	nr
40-44						nr	nr
45+						nr	nr
unknown						---	---

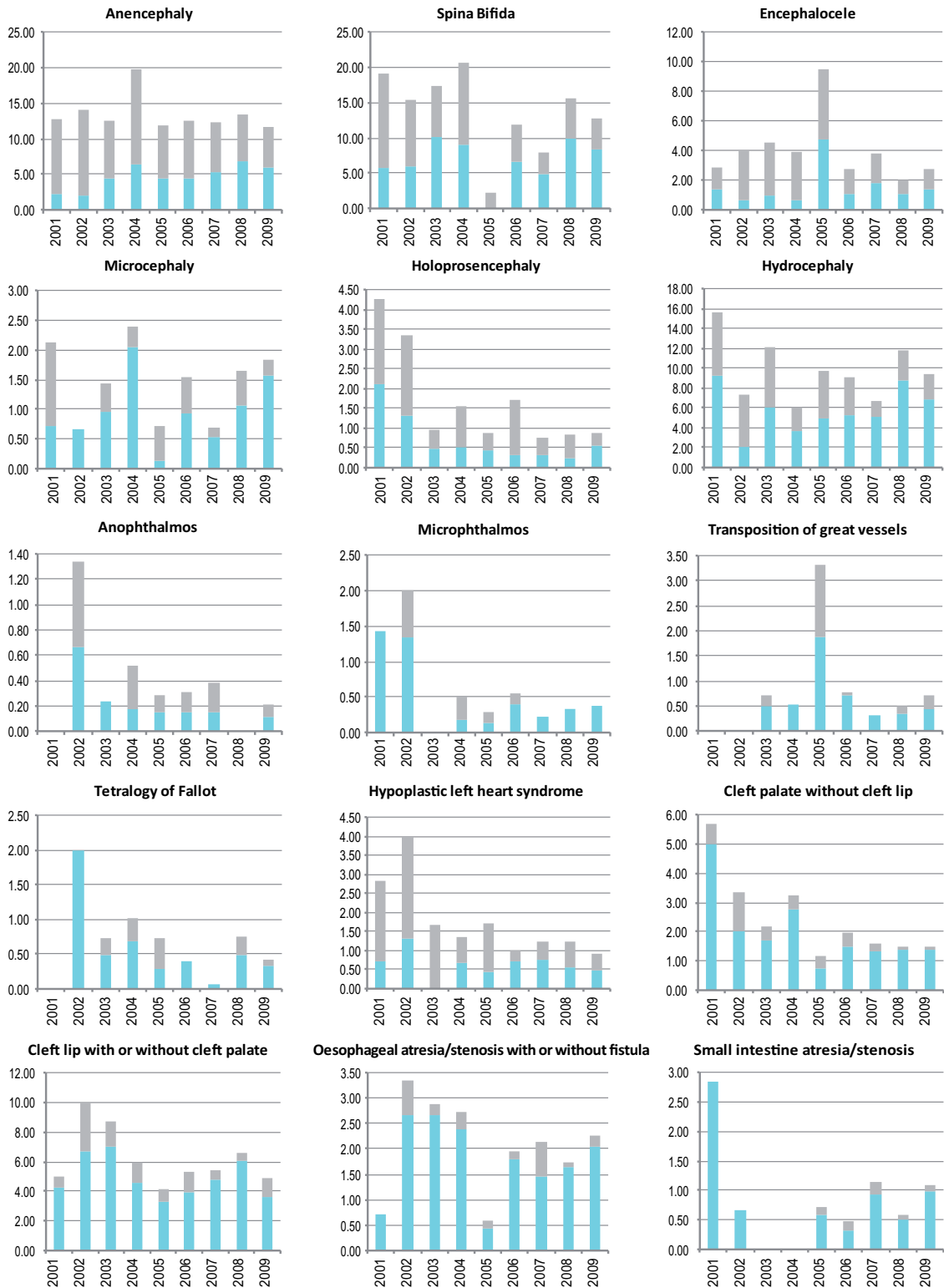
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* data include less than 5 years

Monitoring Systems

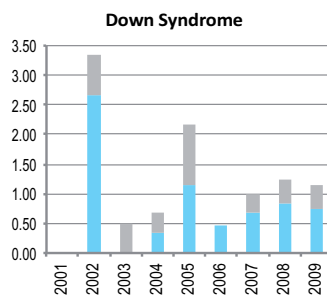
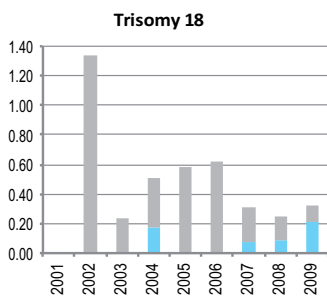
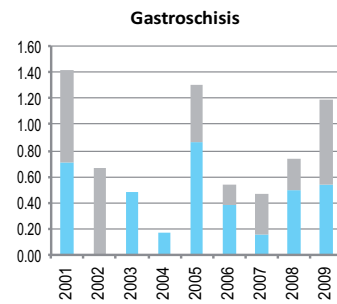
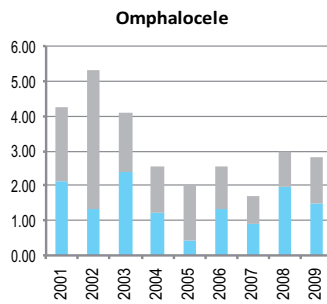
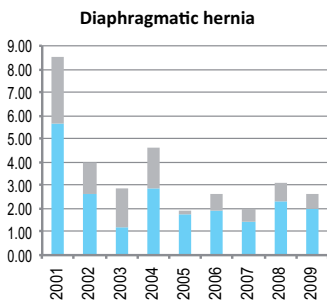
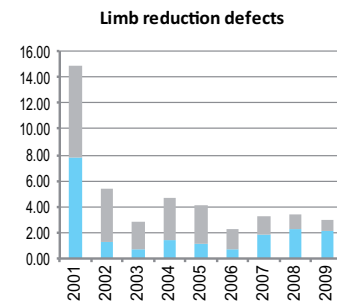
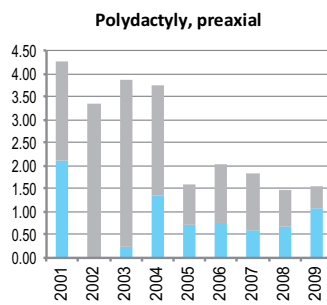
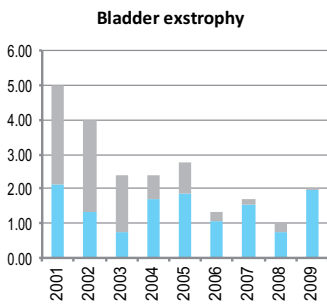
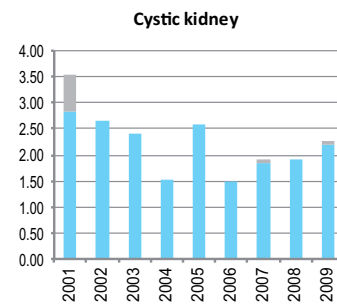
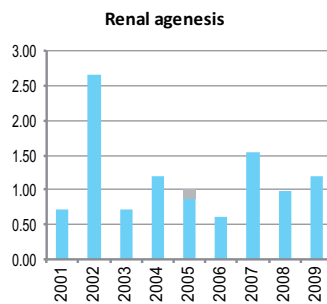
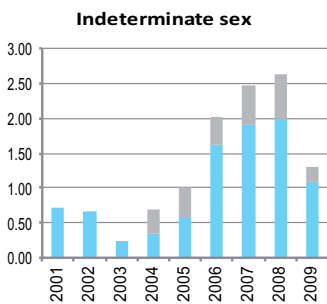
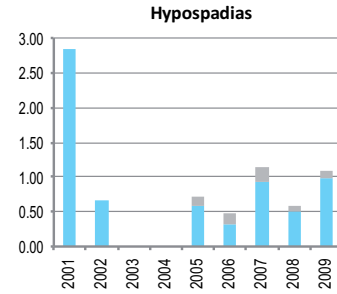
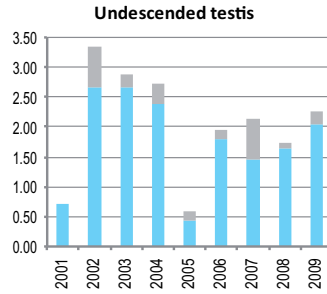
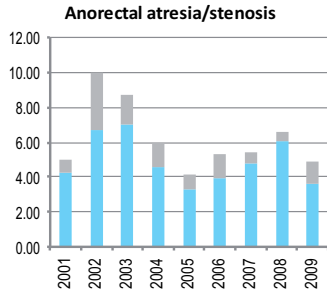
India: BDR1

Time trends 2001-2009 (Birth prevalence rates per 10,000)



Note: L+S rates, ToP rates

India: BDRI



Note: L+S rates, ToP rates

Iran: TRoCA

Tabriz Registry of Congenital Anomalies

History:

The programme was initiated in 2000, but the registry started in 2003. It was then accepted as a member of the ICBDSR in the 2006 annual meeting in Uppsala, Sweden.

Size and coverage:

TROCA is a hospital-based registry and situated in the North-West of Iran covering all births and children in three university hospitals in the city of Tabriz. This city is one of the three major cities in the country. The programme is based on approximately 60-70% of all births (15000 births per year) in the area.

Legislation and funding:

The programme has been financially supported by the National Public Health Management Centre (NPMC) as a research grant. TROCA is located in the Alzahra University hospital of Tabriz University of Medical Sciences.

Exposure information:

Some exposure information are currently available of mothers of all malformed infants. Other women giving births in all university hospitals with normal newborns routinely complete a similar form. They might be considered as matched control group.

Background information:

General epidemiological data and basic characteristic information are available for all births.

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Website: <http://troca.tbzmed.ac.ir>

Iran:TRoCA, 2009

Live births (LB)	22,993
Stillbirths (SB)	203
Total births	23,196
Number of terminations of pregnancy (ToP) for birth defects	27

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	3	4	4	4.74
Spina bifida	1	nr	1	0.86
Encephalocele	nr	1	1	0.86
Microcephaly	4	nr	2	2.59
Holoprosencephaly	2	nr	nr	0.86
Hydrocephaly	22	1	4	11.64
Anophthalmos	nr	nr	nr	nr
Microphthalmos	5	nr	nr	2.16
Unspecified Anophthalmos/Microphthalmos	2	nr	nr	0.86
Anotia	nr	nr	nr	nr
Microtia	nr	nr	nr	nr
Unspecified Anotia/Microtia	2	nr	nr	0.86
Transposition of great vessels	22	nr	nr	9.48
Tetralogy of Fallot	2	nr	nr	0.86
Hypoplastic left heart syndrome	nr	nr	nr	nr
Coarctation of aorta	12	nr	nr	5.17
Choanal atresia, bilateral	nr	nr	nr	nr
Cleft palate without cleft lip	12	1	1	6.04
Cleft lip with or without cleft palate	15	1	nr	6.90
Oesophageal atresia/stenosis with or without fistula	24	nr	nr	10.35
Small intestine atresia/stenosis	22	nr	nr	9.48
Anorectal atresia/stenosis	41	nr	nr	17.68
Undescended testis (36 weeks of gestation or later)	18	1	nr	8.19
Hypospadias	34	nr	nr	14.66
Epispadias	nr	nr	nr	nr
Indeterminate sex	7	nr	nr	3.02
Renal agenesis	nr	nr	nr	nr
Cystic kidney	10	3	nr	5.60
Bladder exstrophy	nr	nr	nr	nr
Polydactyly, preaxial	16	2	nr	7.76
Total Limb reduction defects (include unspecified)	107	2	3	48.28
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	23	nr	nr	9.92
Omphalocele	12	nr	1	5.60
Gastroschisis	nr	nr	nr	nr
Unspecified Omphalocele/Gastroschisis	13	nr	1	6.04
Prune belly sequence	nr	nr	nr	nr
Trisomy 13	nr	nr	nr	nr
Trisomy 18	nr	nr	nr	nr
Down syndrome, all ages (include age unknown)	33	nr	5	16.38
<20	nr	nr	1	2.54
20-24	2	nr	1	4.27
25-29	11	nr	nr	17.28
30-34	3	nr	1	10.43
35-39	3	nr	1	25.58
40-44	2	nr	1	75.57
45+	nr	nr	nr	nr
unknown	12	nr	nr	---

nr = not reported

Ireland

Dublin EUROCAT Registry

History:

Register began in September 1979 and joined EUROCAT at the same time. Joined International Clearinghouse in 1997.

Size and coverage:

The Registry is population-based and situated in the East of Ireland covering the counties of Dublin, Wicklow and Kildare. About one third (25,000 births) of all births in Ireland occur in this region.

Legislation and funding:

The Registry is located within Health Intelligence in the Health Service Executive in Dublin. Staffing includes a full time nurse/researcher and a part-time public health specialist. Funding is provided by the Department of Health through the Health Service Executive. The registry is one of three congenital anomaly registers in Ireland. There is a National Steering Committee for the three registries, it is comprised of specialists from maternity and paediatric Hospitals, the Department of Health & Children and the National Perinatal Epidemiological Centre.

Exposure information:

For each malformed infant reported, limited information is given on certain exposures. No information is available on controls.

Sources of ascertainment:

All live and still births included. Termination of pregnancy is not legal in Ireland.

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Virginia Delany, Registry Co-ordinator/Research nurse

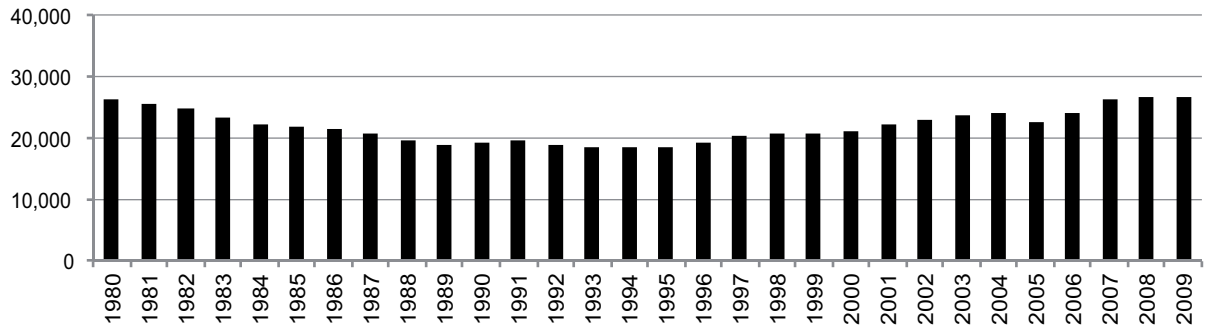
Phone: 353-1-6352751

Fax: 353-1-6353745

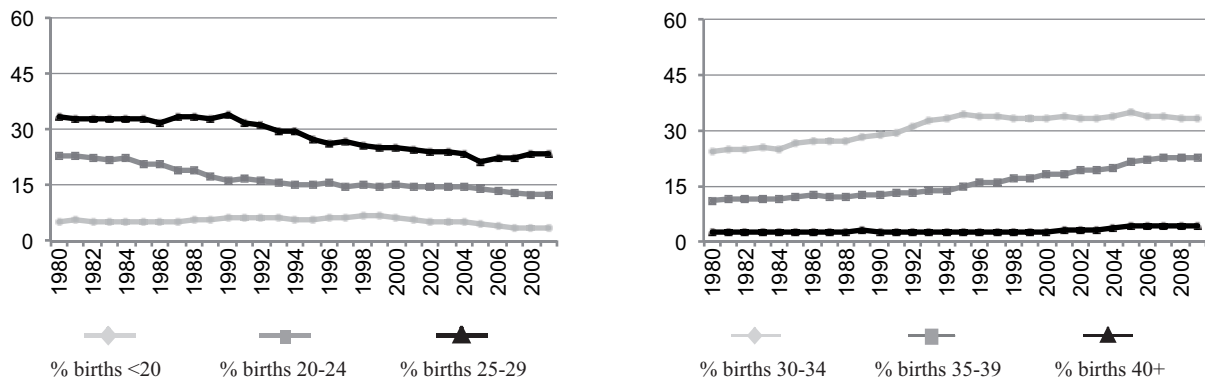
E-mail: virginia.delaney@hse.ie

Ireland: Dublin

Total births by year



Percentage of births by year and maternal age



Ireland: Dublin, 2009

Live births (LB) (*)	26,502
Stillbirths (SB) (*)	120
Total births (*)	26,622
Number of terminations of pregnancy (ToP) for birth defects	not permitted

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	6	1		2.63
Spina bifida	10	0		3.76
Encephalocele	1	0		0.38
Microcephaly	3	0		1.13
Holoprosencephaly	0	1		0.38
Hydrocephaly	4	0		1.50
Anophthalmos	1	0		0.38
Microphthalmos	4	0		1.50
Unspecified Anophthalmos/Microphthalmos	0	0		0.00
Anotia	0	0		0.00
Microtia	0	0		0.00
Unspecified Anotia/Microtia	0	0		0.00
Transposition of great vessels	10	10		7.51
Tetralogy of Fallot	9	1		3.76
Hypoplastic left heart syndrome	8	1		3.38
Coarctation of aorta	17	1		6.76
Choanal atresia, bilateral	1	0		0.38
Cleft palate without cleft lip	17	1		6.76
Cleft lip with or without cleft palate	16	0		6.01
Oesophageal atresia/stenosis with or without fistula	9	1		3.76
Small intestine atresia/stenosis	1	0		0.38
Anorectal atresia/stenosis	12	0		4.51
Undescended testis (36 weeks of gestation or later)	nr	nr		nr
Hypospadias	15	0		5.63
Epispadias	nr	nr		nr
Indeterminate sex	3	2		1.88
Renal agenesis	3	1		1.50
Cystic kidney	9	2		4.13
Bladder exstrophy	1	0		0.38
Polydactyly, preaxial	25	1		9.77
Total Limb reduction defects (include unspecified)	8	0		3.01
Transverse	nr	nr		nr
Preaxial	nr	nr		nr
Postaxial	nr	nr		nr
Intercalary	nr	nr		nr
Mixed	nr	nr		nr
Unspecified	nr	nr		nr
Diaphragmatic hernia	5	1		2.25
Omphalocele	5	1		2.25
Gastroschisis	4	1		1.88
Unspecified Omphalocele/Gastroschisis	0	0		0.00
Prune belly sequence	1	0		0.38
Trisomy 13	5	0		1.88
Trisomy 18	8	5		4.88
Down syndrome, all ages (include age unknown)	55	4		22.16
<20	0	0		0.00
20-24	2	0		6.02
25-29	4	0		6.43
30-34	13	2		17.00
35-39	29	2		51.15
40-44	7	0		64.75
45+	0	0		0.00
unknown	0	0		---

nr = not reported

(*) = estimate based on 2008 data

Ireland: Dublin, Previous years rates 1980 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		121,428	102,584	94,474	99,207	113,437	126,245
Anencephaly		14.99	8.48	5.61	3.12	3.09	2.53
Spina bifida		14.08	11.41	6.35	5.44	4.50	2.53
Encephalocele		2.72	1.46	2.43	1.71	1.15	0.79
Microcephaly		3.79	3.51	3.49	4.54	3.70	3.41
Holoprosencephaly		0.33	0.39	0.42	0.91	1.41	1.35
Hydrocephaly		nr	nr	nr	2.10*	2.38	1.98
Anophthalmos		0.25	0.10	0.32	0.71	0.18	0.32
Microphthalmos		0.58	1.46	1.06	2.72	0.97	1.19
Unspecified Anophthalmos/Microphthalmos		0.00	0.00	0.00	0.00	0.18	0.00
Anotia		nr	nr	nr	nr	0.14*	0.24
Microtia		nr	nr	nr	nr	0.00*	0.16
Unspecified Anotia/Microtia		nr	nr	nr	nr	0.00*	0.00
Transposition of great vessels		nr	nr	nr	5.32*	3.88	4.52
Tetralogy of Fallot		2.72	2.73	3.07	3.93	2.38	3.49
Hypoplastic left heart syndrome		2.31	1.66	2.65	1.92	2.12	3.56
Coarctation of aorta		4.45	6.63	5.29	7.16	6.61	5.70
Choanal atresia, bilateral		0.41	0.58	0.74	1.92	1.15	1.11
Cleft palate without cleft lip		7.16	6.92	7.94	7.96	8.64	7.21
Cleft lip with or without cleft palate		10.29	7.31	8.68	9.17	7.14	7.92
Oesophageal atresia/stenosis with or without fistula		3.71	4.00	2.96	3.53	2.20	2.53
Small intestine atresia/stenosis		2.55	3.02	2.12	2.12	1.23	1.11
Anorectal atresia/stenosis		3.46	3.80	3.07	2.42	2.38	3.88
Undescended testis (36 weeks of gestation or later)		nr	nr	nr	nr	nr	nr
Hypospadias		15.24	10.04	12.70	18.35	14.02	10.54
Epispadias		nr	nr	nr	nr	nr	nr
Indeterminate sex		0.16	0.19	0.21	0.40	0.26	0.48
Renal agenesis		4.86	4.58	4.34	4.23	2.12	1.98
Cystic kidney		3.71	1.85	4.23	3.63	2.91	4.83
Bladder exstrophy		nr	nr	nr	0.62*	0.71	0.79
Polydactyly, preaxial		6.75	5.26	6.03	6.45	9.52	9.51
Total Limb reduction defects (include unspecified)		4.28	3.41	4.45	4.64	4.32	3.72
Transverse		nr	nr	nr	nr	nr	nr
Preaxial		nr	nr	nr	nr	nr	nr
Postaxial		nr	nr	nr	nr	nr	nr
Intercalary		nr	nr	nr	nr	nr	nr
Mixed		nr	nr	nr	nr	nr	nr
Unspecified		nr	nr	nr	nr	4.98*	3.41*
Diaphragmatic hernia		2.96	4.09	5.08	3.83	4.23	3.25
Omphalocele		2.72	2.63	1.69	2.52	3.79	2.38
Gastroschisis		0.16	0.58	0.85	2.02	3.17	2.61
Unspecified Omphalocele/Gastroschisis		0.00	0.00	0.00	0.00	0.00	0.00
Prune belly sequence		0.08	0.39	0.32	0.60	0.79	0.32
Trisomy 13		1.07	1.27	0.42	2.52	2.64	2.22
Trisomy 18		2.39	1.56	3.39	3.83	3.97	4.59
Down syndrome, all ages (include age unknown)		18.20	19.11	20.75	21.67	21.42	24.71
<20		nr	nr	17.58*	11.07	4.77	8.42
20-24		nr	nr	10.38*	7.41	6.59	9.15
25-29		nr	nr	10.23*	8.45	8.43	9.11
30-34		nr	nr	15.74*	19.50	13.26	20.30
35-39		nr	nr	44.06*	46.40	48.40	45.68
40-44		nr	nr	192.73*	128.88	141.70	94.12
45+		nr	nr	1153.85*	400.00	285.71	40.49
unknown		---	---	---	---	---	---

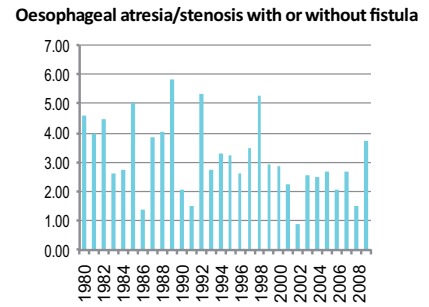
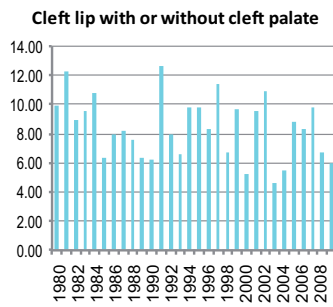
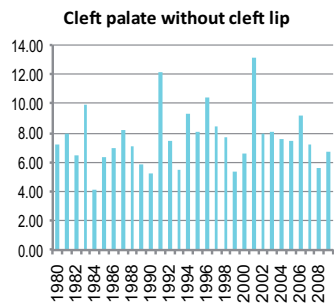
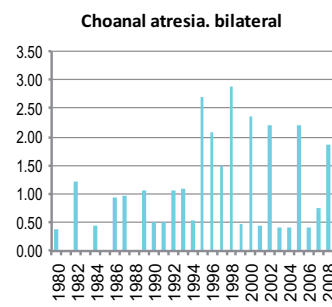
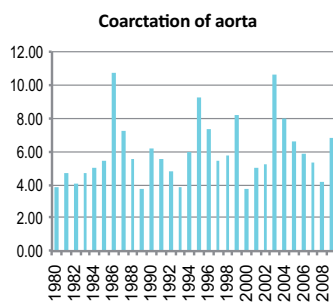
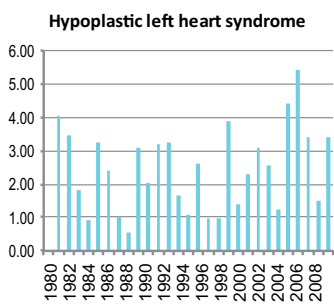
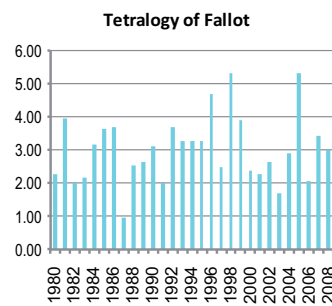
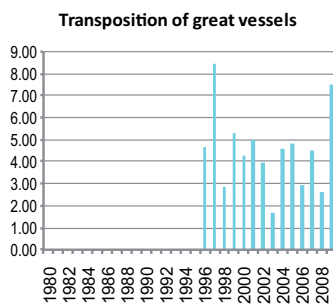
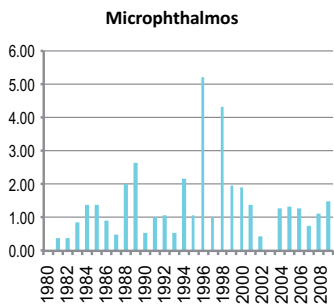
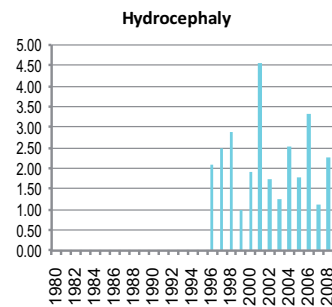
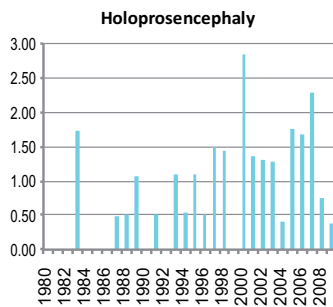
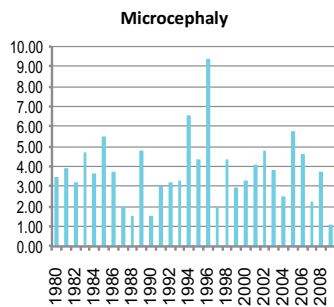
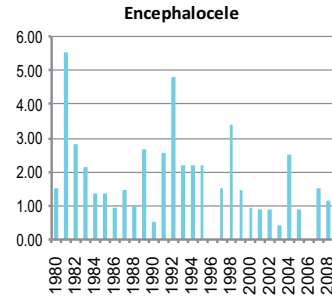
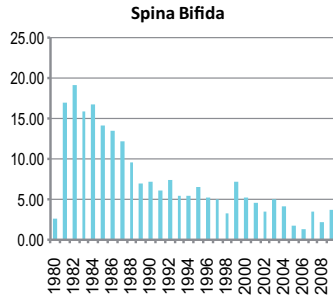
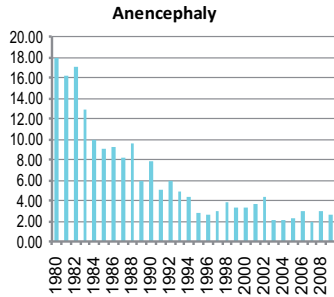
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* data include less than 5 years

Monitoring Systems

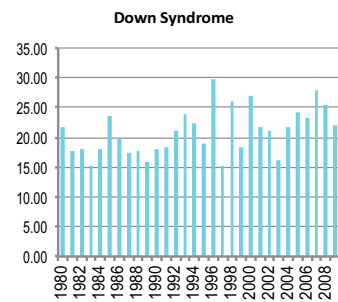
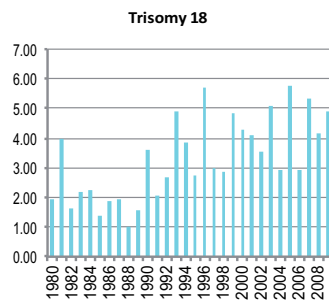
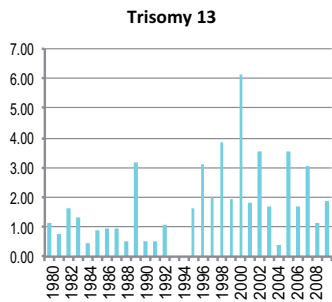
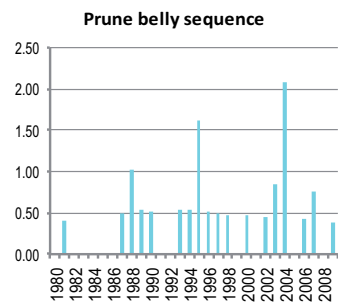
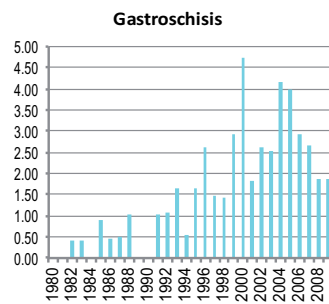
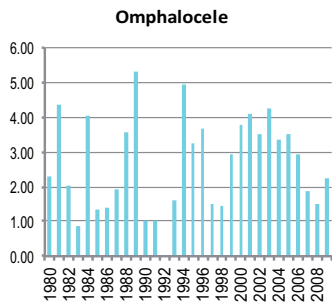
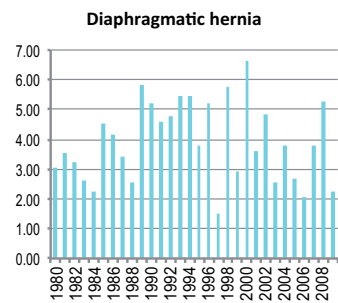
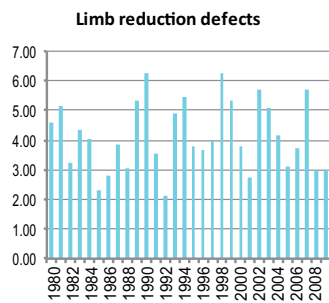
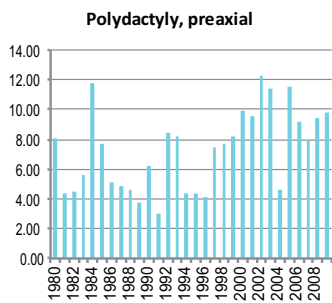
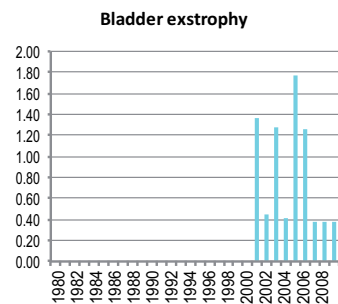
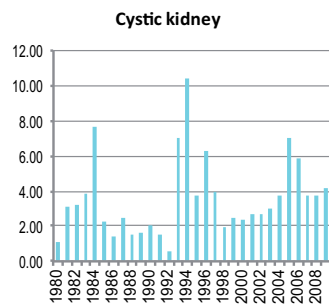
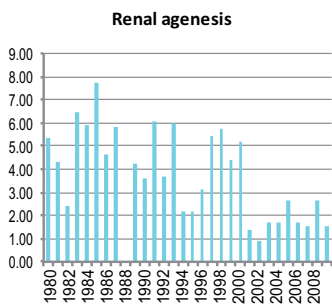
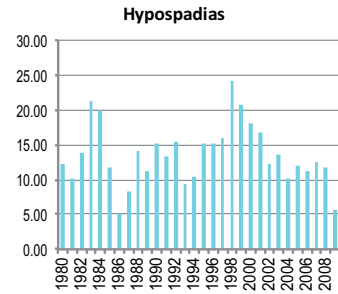
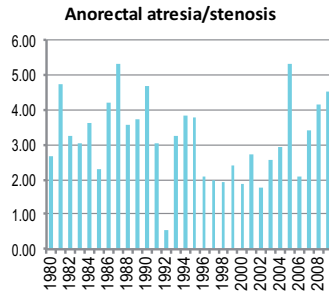
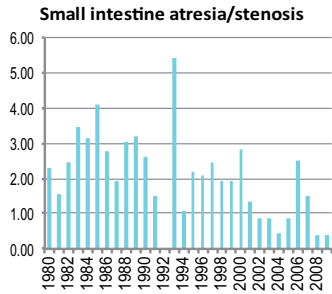
Ireland: Dublin

Time trends 1980-2009 (Birth prevalence rates per 10,000)



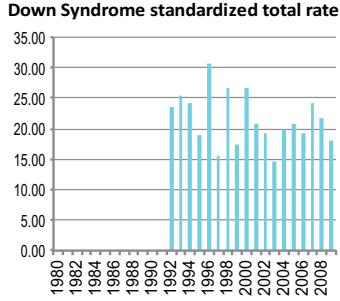
Note: ■ L+S rates

Ireland: Dublin



Note: ■ L+S rates

Ireland: Dublin



Note: ■ L+S rates

Israel: IBDSP**Israel Birth Defects Surveillance Program****History :**

the Programme started in one hospital in 1966 and was a founding member of Clearinghouse.

Size and coverage:

Reports are now obtained from five hospitals located in all regions of the country, with more than 40,000 births per year (about 25% of all annual births in Israel). Stillbirths of 20 weeks gestation or more and 500g or more are included. The registry of termination of pregnancy began in 1995.

Legislation and funding :

The Programme is a research and surveillance one supported by the Directors of the Departments of Neonatology and by research grants without any governmental support.

Sources of ascertainment :

Reporting is voluntary. Reports are obtained from Delivery units and Departments of Neonatology in the participating hospitals. The five included hospitals are:

Rabin Medical Center, Beilinson and Schneider Hospitals, Petah Tikva (Prof L.Sirota , Prof N. Linder); Kaplan Hospital, Rehovot (Prof E. Shinwell); Lis Medical Center, Tel-Aviv (Prof Dohlberg). These hospitals are affiliated to Sackler School of Medicine, Tel-Aviv University.

Soroka Medical Center, Beer-Sheva (Prof E. Zmora, Dr D. Landau) affiliated to Ben-Gurion University of Negev; Bnai-Zion Medical Center, Haifa (Prof. D. Bader, Dr M Grun) affiliated to the Technion University, Haifa.

Exposure information :

Completeness is obtained by interviews of mothers of all malformed infants. All the other women with normal newborns complete a similar form at birth.

Background information:

Epidemiological information on all births occurring in the participating hospitals is available.

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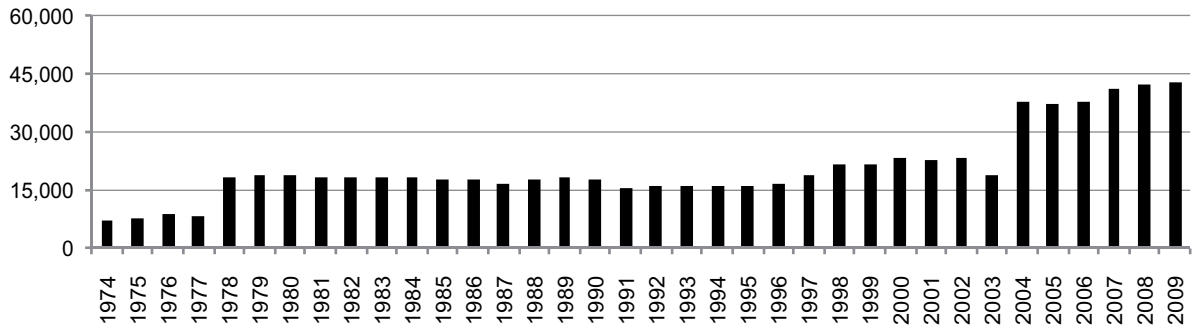
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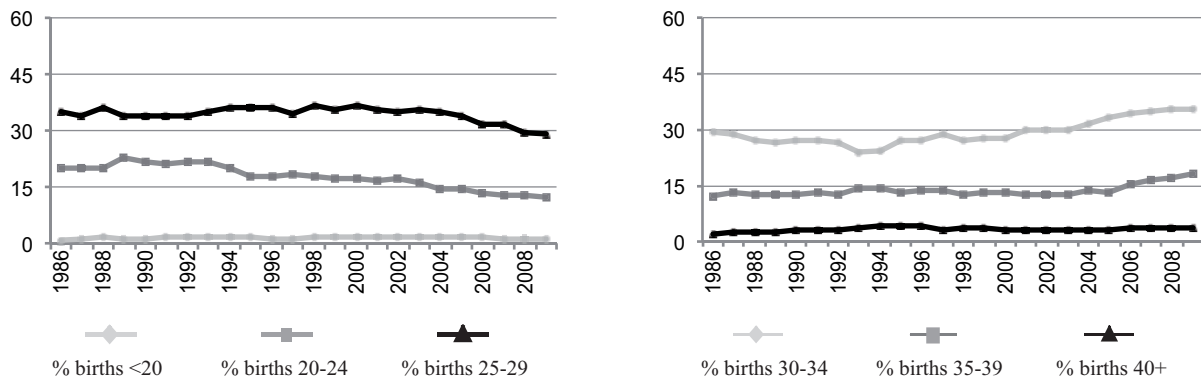
Monitoring Systems

Israel: IBDSP

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009) (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	1	7.1	Cystic kidney	0	0.0
Spina bifida	8	21.6	Limb reduction defects	2	11.1
Encephalocele	1	14.3	Diaphragmatic hernia	0	0.0
Holoprosencephaly	2	50.0	Omphalocele	0	0.0
Hydrocephaly	12	22.6	Gastroschisis	0	0.0
Hypoplastic left heart syndrome	1	4.8	Trisomy 13	0	0.0
Cleft palate without cleft lip	0	0.0	Trisomy 18	1	14.3
Cleft lip with or without cleft palate	5	10.9	Down syndrome	15	16.5
Renal agenesis	1	20.0			

Total ToPs with births defects = 50 (Ratio ToPs/Births: 0.40 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Israel: IBDSP, 2009

Live births (LB)	42,608
Stillbirths (SB)	267
Total births	42,875
Number of terminations of pregnancy (ToP) for birth defects	nr

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	3	4	0	1.63
Spina bifida	12	0	1	3.03
Encephalocele	0	1	0	0.23
Microcephaly	13	1	0	3.27
Holoprosencephaly	2	0	0	0.47
Hydrocephaly	16	2	3	4.90
Anophthalmos	2	0	0	0.47
Microphthalmos	7	1	0	1.87
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	1	0	0	0.23
Microtia	7	0	0	1.63
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	9	0	0	2.10
Tetralogy of Fallot	11	0	0	2.57
Hypoplastic left heart syndrome	6	0	0	1.40
Coarctation of aorta	11	0	0	2.57
Choanal atresia, bilateral	1	0	0	0.23
Cleft palate without cleft lip	21	0	0	4.90
Cleft lip with or without cleft palate	12	0	1	3.03
Oesophageal atresia/stenosis with or without fistula	14	0	0	3.27
Small intestine atresia/stenosis	0	0	0	0.00
Anorectal atresia/stenosis	4	0	0	0.93
Undescended testis (36 weeks of gestation or later)	67	0	0	15.63
Hypospadias	150	0	0	34.99
Epispadias	0	0	0	0.00
Indeterminate sex	1	0	0	0.23
Renal agenesis	2	0	0	0.47
Cystic kidney	9	0	0	2.10
Bladder exstrophy	2	0	0	0.47
Polydactyly, preaxial	1	0	0	0.23
Total Limb reduction defects (include unspecified)	9	0	1	2.33
Transverse	3	0	1	0.93
Preaxial	3	0	0	0.70
Postaxial	2	0	0	0.47
Intercalary	1	0	0	0.23
Mixed	0	0	0	0.00
Unspecified	0	0	0	0.00
Diaphragmatic hernia	6	0	0	1.40
Omphalocele	3	1	0	0.93
Gastroschisis	1	0	0	0.23
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	4	0	0	0.93
Trisomy 18	3	0	0	0.70
Down syndrome, all ages (include age unknown)	24	0	4	6.53
<20	0	0	0	0.00
20-24	3	0	0	5.64
25-29	3	0	1	3.20
30-34	3	0	0	1.98
35-39	7	0	2	11.49
40-44	7	0	1	57.97
45+	1	0	0	51.81
unknown	0	0	0	---

nr = not reported

Israel: IBDSP, Previous years rates 1974 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	68,298	91,287	87,639	80,496	93,848	125,179	200,611
Anencephaly	5.27	4.71	2.62	0.75	0.85	2.24	1.25
Spina bifida	2.78	5.59	4.91	2.61	2.02	3.99	2.89
Encephalocele	0.44	0.33	0.57	0.87	0.32	0.48	0.45
Microcephaly	nr	nr	0.00*	0.00	0.21	2.80	2.19
Holoprosencephaly	nr	0.00*	0.23	0.50	0.00	0.08	0.45
Hydrocephaly	3.66	3.61	2.74	3.85	5.86	6.07	4.09
Anophthalmos	0.00	0.00	0.00	0.00	0.00	0.16	0.15
Microphthalmos	0.88	0.11	0.57	0.50	0.96	0.56	0.65
Unspecified Anophthalmos/Microphthalmos	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anotia	0.00	0.00	0.00	0.12	0.00	0.00	0.05
Microtia	0.59	1.10	0.91	2.36	1.81	1.04	0.90
Unspecified Anotia/Microtia	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Transposition of great vessels	nr	nr	3.01*	3.60	3.84	3.91	3.34
Tetralogy of Fallot	nr	0.77	2.40	3.35	3.20	4.39	3.69
Hypoplastic left heart syndrome	nr	nr	2.00*	2.36	2.45	2.08	1.94
Coarctation of aorta	nr	0.33	1.03	2.86	2.45	2.80	3.44
Choanal atresia, bilateral	nr	0.00*	0.34	0.25	0.11	0.16	0.10
Cleft palate without cleft lip	3.66	4.49	5.36	5.59	4.26	3.51	4.44
Cleft lip with or without cleft palate	5.12	4.38	6.05	4.97	4.58	5.51	3.99
Oesophageal atresia/stenosis with or without fistula	1.46	1.53	2.74	3.73	3.09	1.44	3.59
Small intestine atresia/stenosis	nr	0.55*	1.14	1.61	0.53	1.04	0.45
Anorectal atresia/stenosis	1.61	3.40	3.31	3.60	2.98	1.60	1.74
Undescended testis (36 weeks of gestation or later)	nr	nr	0.00*	0.00	0.00*	nr	15.63*
Hypospadias	29.14	26.73	30.24	43.85	34.52	37.63	34.35
Epispadias	0.15	0.00	0.11	0.25	0.11	0.32	0.10
Indeterminate sex	nr	nr	0.00*	0.00	0.00*	0.16*	0.24*
Renal agenesis	nr	nr	0.72	0.99	0.53	0.64	0.85
Cystic kidney	0.59	0.55	1.48	0.99	1.49	2.08	2.29
Bladder exstrophy	0.15	0.22	0.68	0.37	0.32	0.24	0.50
Polydactyly, preaxial	0.29	0.66	0.46	0.37	1.07	0.96	0.75
Total Limb reduction defects (include unspecified)	3.51	2.85	2.51	3.60	1.60	2.16	1.74
Transverse	nr	0.55*	1.03	1.99	0.43	0.88	0.90
Preaxial	nr	0.55*	0.68	0.12	0.75	0.96	0.35
Postaxial	nr	0.55*	0.11	0.37	0.32	0.08	0.15
Intercalary	nr	0.55*	0.34	0.25	0.11	0.16	0.25
Mixed	nr	0.55*	0.34	0.87	0.00	0.08	0.10
Unspecified	nr	0.00*	0.00	0.00	0.00	0.00	0.00
Diaphragmatic hernia	2.15*	2.52	1.83	2.98	1.49	1.92	1.69
Omphalocele	1.90	2.52	0.80	1.12	0.43	0.88	0.85
Gastroschisis	0.00*	0.44	0.57	0.00	0.11	0.40	0.25
Unspecified Omphalocele/Gastroschisis	0.00*	0.00	0.00	0.00	0.11	0.08	0.00
Prune belly sequence	0.44	0.22	0.00	0.12	0.11	0.08	0.20
Trisomy 13	nr	1.10*	0.34	0.50	0.32	0.56	0.40
Trisomy 18	nr	0.55*	0.80	0.50	0.85	1.52	0.65
Down syndrome, all ages (include age unknown)	11.27	9.64	12.32	7.58	8.31	10.39	7.78
<20	nr	nr	nr	0.00*	0.00	13.27	3.80
20-24	nr	nr	nr	0.00*	2.37	3.95	4.52
25-29	nr	nr	nr	2.74*	5.06	5.38	3.37
30-34	nr	nr	nr	7.50*	6.57	7.73	4.17
35-39	nr	nr	nr	15.27*	14.50	22.07	14.13
40-44	nr	nr	nr	39.76*	56.84	70.98	68.19
45+	nr	nr	nr	57.80*	99.26	121.95	64.68
unknown	---	---	---	---	---	---	---

nr = not reported

* data include less than 5 years or 6 years

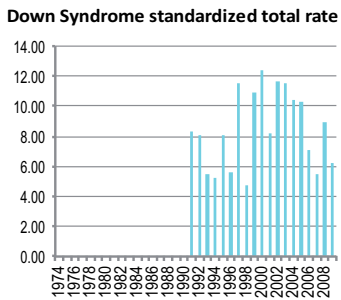
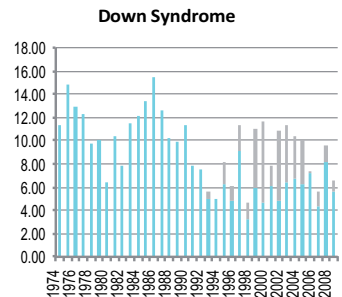
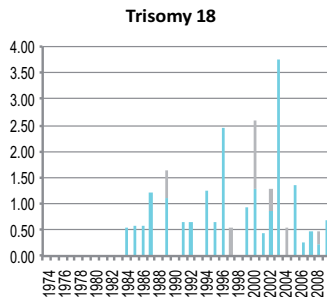
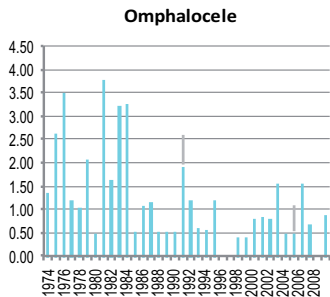
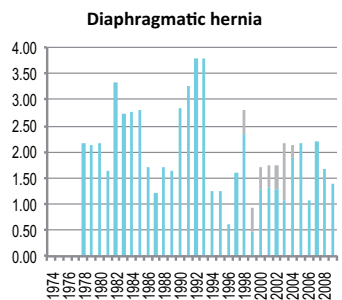
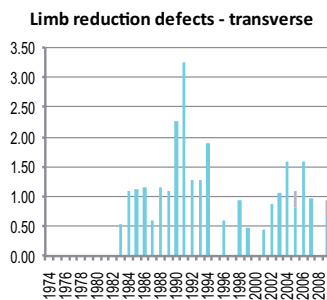
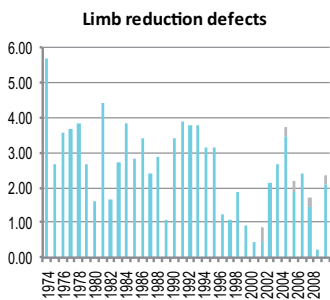
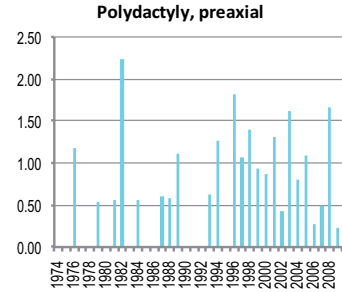
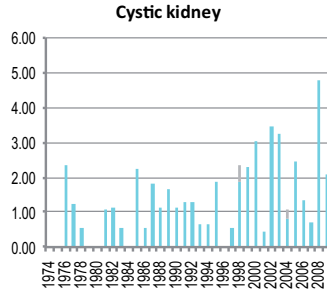
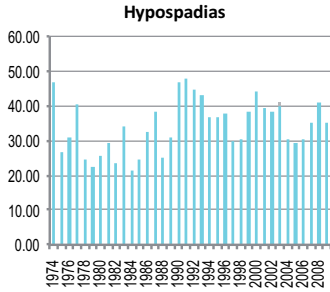
Israel: IBDSP

Time trends 1974-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates, ■ ToP rates

Israel: IBDSP



Note: ■ L+S rates, ■ ToP rates

Italy - Campania: BDRCam Birth Defects Registry of Campania

History:

The Registry started in 1991 and became a full member of the ICBDSR in 1996.

Size and coverage:

The Registry is based on reporting from hospitals distributed in Campania, a region in southern Italy. Naples is the main city. Initially 38 hospitals reported and the annual number of births was 38.000. Until 2001 the registry is hospital-based covering approximately 50.000 annual births. Actually beginning from 2002, the registry is population based covering approximately 100% of all births. Stillbirths and induced abortions are included. In 2002 is started officially a link with birth regional registry (CEDAP).

After 2004 started a new link with Hospital discharge schedules registry (SDO). The last link allows to enclose the data after pediatric hospital discharge in the first year of life and to complete the birth data on baby with birth defects. Thus the birth defects ratio is about 5% and not 2%. Unfortunately, the data obtained from SDO registry allows to analyse only minimum data set (birth date, number of birth defects, mother's place of residence. No informations on exposure is possible.

Legislation and funding:

The Registry is a surveillance Programme supported by grants from Regional Health Authorities. Participation was voluntary up to 1995. From 1996 participation is mandatory.

Sources of ascertainment:

Reports are obtained from delivery units and pediatric clinics at the participating hospitals. For selected malformations multiple sources are used with follow-up to one year using specific records from pediatric specialities departments dealing with malformed infants.

Exposure information:

For each malformed infant reported, information is given on certain exposures, including maternal drug usage and parental occupation. Beginning from 2002 informations on controls are available but only partially on induced abortions.

Background information:

Always from 2002 background information is given on certain exposures, including maternal drug usage and parental occupation. Informations on controls are available.

Addresses and Staff:

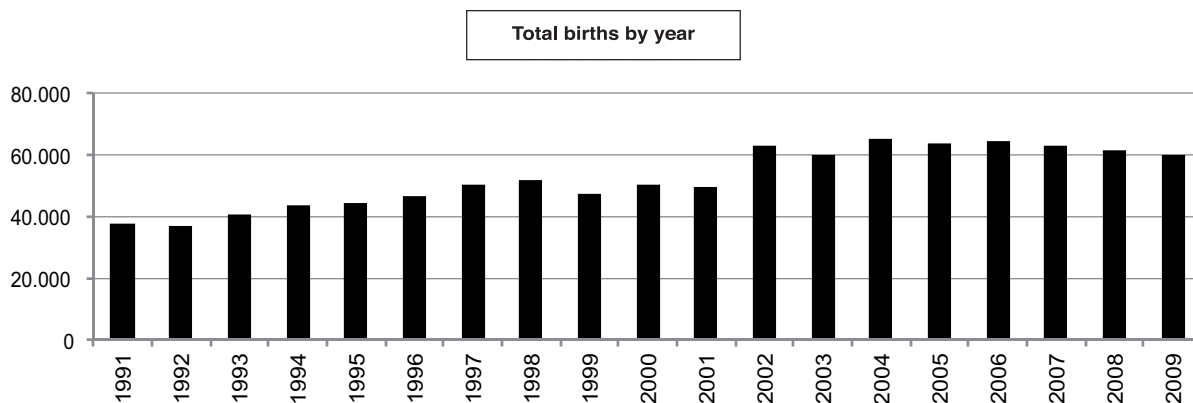
Gioacchino Scarano,
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Italy: BDRCam



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	55	87.3	Cystic kidney	5	5.0
Spina bifida	30	54.5	Limb reduction defects	13	17.6
Encephalocele	9	56.3	Diaphragmatic hernia	7	16.7
Holoprosencephaly	16	32.7	Omphalocele	11	52.4
Hydrocephaly	63	42.9	Gastroschisis	6	75.0
Hypoplastic left heart syndrome	32	66.7	Trisomy 13	6	60.0
Cleft palate without cleft lip	2	1.9	Trisomy 18	24	66.7
Cleft lip with or without cleft palate	12	10.8	Down syndrome	222	53.9
Renal agenesis	18	11.8			

Total ToPs with births defects = 829 (Ratio ToPs/Births: 4.50 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Italy: BDRCam, 2009

Live births (LB)	59,505
Stillbirths (SB)	192
Total births	59,697
Number of terminations of pregnancy (ToP) for birth defects	331

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	2	25	4.52
Spina bifida	10	0	9	3.18
Encephalocele	2	0	2	0.67
Microcephaly	13	0	0	2.18
Holoprosencephaly	3	0	2	0.84
Hydrocephaly	24	0	17	6.87
Anophthalmos	1	0	0	0.17
Microphthalmos	8	0	0	1.34
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	5	0	0	0.84
Microtia	0	0	0	0.00
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	6	0	1	1.17
Tetralogy of Fallot	24	0	2	4.36
Hypoplastic left heart syndrome	7	0	11	3.02
Coarctation of aorta	47	0	0	7.87
Choanal atresia, bilateral	5	0	0	0.84
Cleft palate without cleft lip	42	0	0	7.04
Cleft lip with or without cleft palate	35	0	5	6.70
Oesophageal atresia/stenosis with or without fistula	21	0	2	3.85
Small intestine atresia/stenosis	17	0	0	2.85
Anorectal atresia/stenosis	14	0	0	2.35
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	6	0	0	1.01
Epispadias	1	0	0	0.17
Indeterminate sex	5	0	1	1.01
Renal agenesis	37	0	3	6.70
Cystic kidney	22	0	2	4.02
Bladder exstrophy	0	0	0	0.00
Polydactyly, preaxial	8	0	0	1.34
Total Limb reduction defects (include unspecified)	20	0	9	4.86
Transverse	8	0	3	1.84
Preaxial	3	0	3	1.01
Postaxial	1	0	0	0.17
Intercalary	1	0	1	0.34
Mixed	3	0	0	0.50
Unspecified	4	0	2	1.01
Diaphragmatic hernia	6	0	5	1.84
Omphalocele	1	0	5	1.01
Gastroschisis	2	0	1	0.50
Unspecified Omphalocele/Gastroschisis	5	0	0	0.84
Prune belly sequence	0	0	0	0.00
Trisomy 13	2	0	1	0.50
Trisomy 18	4	0	5	1.51
Down syndrome, all ages (include age unknown)	66	0	86	25.46
<20	0	0	0	0.00
20-24	1	0	3	3.93
25-29	3	0	2	3.98
30-34	5	0	21	13.68
35-39	8	0	30	34.93
40-44	7	0	30	151.64
45+	0	0	0	0.00
unknown	42	0	0	---

nr = not reported

Italy-Campania: BDRCam, previous years rates 1991-2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

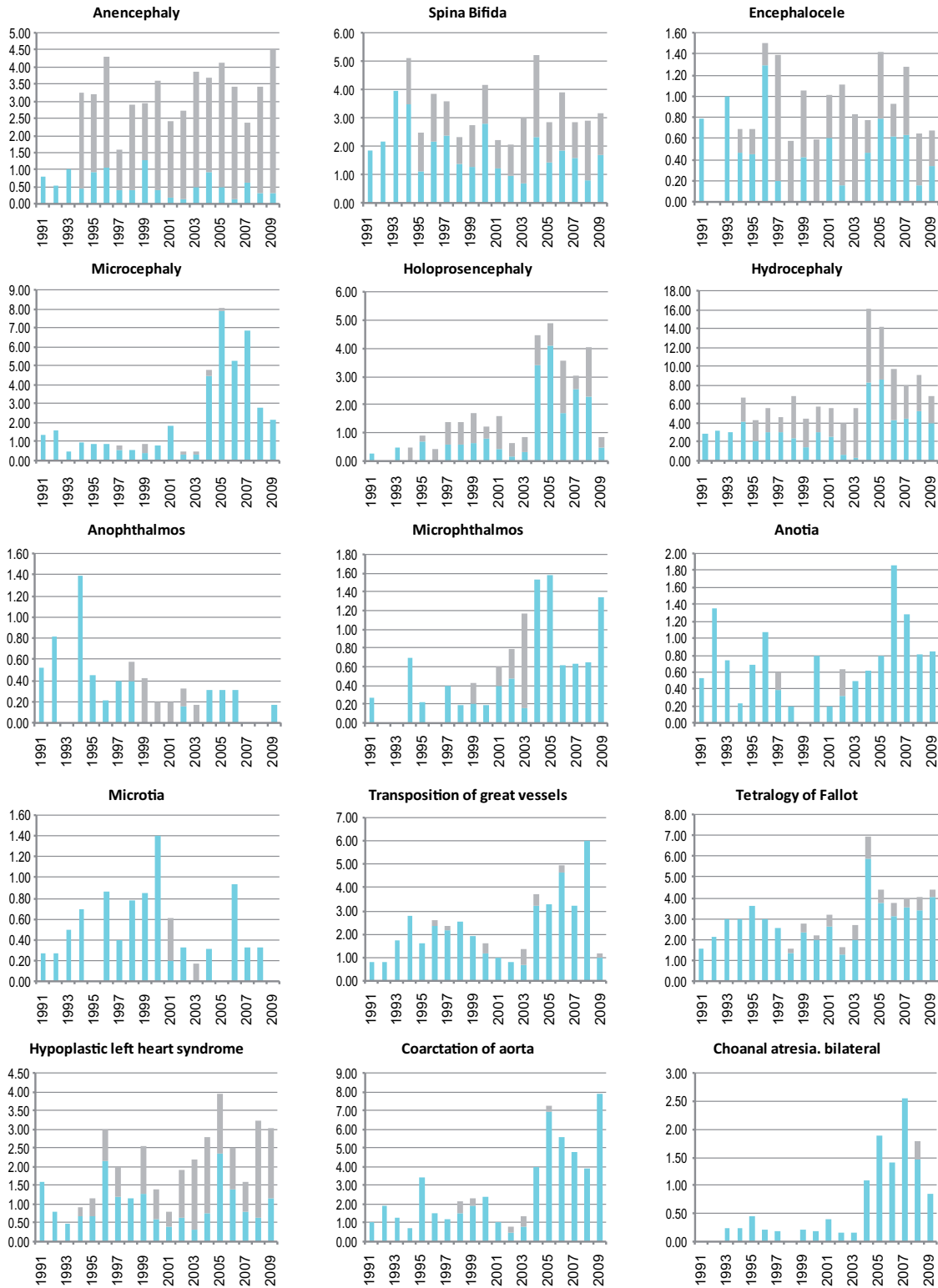
	1974-1979	1980-1984	1985-1989	1990-1994*	1995-1999	2000-2004	2005-2009
Total births				158,531	240,032	287,484	311,687
Anencephaly				1.45	2.96	3.27	3.56
Spina bifida				3.34	3.00	3.37	3.14
Encephalocele				0.63	1.04	0.87	0.99
Microcephaly				1.07	0.79	1.74	5.07
Holoprosencephaly				0.32	1.17	1.81	3.30
Hydrocephaly				4.04	5.17	7.65	9.59
Anophthalmos				0.69	0.42	0.24	0.16
Microphthalmos				0.25	0.25	0.90	0.96
Unspecified Anophthalmos/Microphthalmos				0.00	0.00	0.00	0.42
Anotia				0.69	0.50	0.56	1.12
Microtia				0.44	0.58	0.52	0.32
Unspecified Anotia/Microtia				0.00	0.00	0.03	0.19
Transposition of great vessels				1.58	2.21	1.74	3.75
Tetralogy of Fallot				2.46	2.67	3.41	4.11
Hypoplastic left heart syndrome				0.95	1.96	1.88	2.86
Coarctation of aorta				1.20	2.08	1.95	5.87
Choanal atresia, bilateral				0.13	0.21	0.42	1.70
Cleft palate without cleft lip				4.73	4.29	5.01	6.10
Cleft lip with or without cleft palate				6.81	7.17	6.61	6.64
Oesophageal atresia/stenosis with or without fistula				2.33	2.25	2.09	3.75
Small intestine atresia/stenosis				1.83	2.17	2.26	3.24
Anorectal atresia/stenosis				2.84	3.04	3.30	3.85
Undescended testis (36 weeks of gestation or later)				nr	nr	nr	nr
Hypospadias				3.66	2.79	5.67	2.57
Epispadias				0.25	0.21	0.21	0.42
Indeterminate sex				0.25	0.67	0.87	0.87
Renal agenesis				1.32	3.25	5.11	7.76
Cystic kidney				1.64	2.71	3.30	6.22
Bladder exstrophy				0.19	0.33	0.14	0.22
Polydactyly, preaxial				1.77	1.75	3.44	5.65
Total Limb reduction defects (include unspecified)				5.30	4.79	4.97	4.20
Transverse				3.78	2.42	2.68	2.57
Preaxial				0.63	0.92	0.80	0.77
Postaxial				0.25	0.54	0.52	0.39
Intercalary				0.32	0.46	0.35	0.16
Mixed				0.19	0.12	0.03	0.19
Unspecified				0.00	0.00	0.07	0.22
Diaphragmatic hernia				1.77	2.29	2.78	2.95
Omphalocele				1.32	2.00	2.05	1.48
Gastroschisis				0.32	0.62	0.59	0.26
Unspecified Omphalocele/Gastroschisis				0.00	0.00	0.03	0.19
Prune belly sequence				0.00	0.10	0.08	0.26
Trisomy 13				0.82	0.71	0.66	0.77
Trisomy 18				0.76	1.79	1.81	2.50
Down syndrome, all ages (include age unknown)				12.05	13.71	13.77	21.24
<20				4.80	3.52	4.45	0.00*
20-24				6.48	4.46	2.18	3.93*
25-29				7.35	6.02	5.33	3.98*
30-34				13.47	11.00	6.25	13.67*
35-39				38.39	31.86	27.34	34.93*
40-44				72.76	140.29	89.33	151.64*
45+				185.19	232.56	202.90	0.00*
unknown				---	---	---	---

nr = not reported

* data include less than 5 years

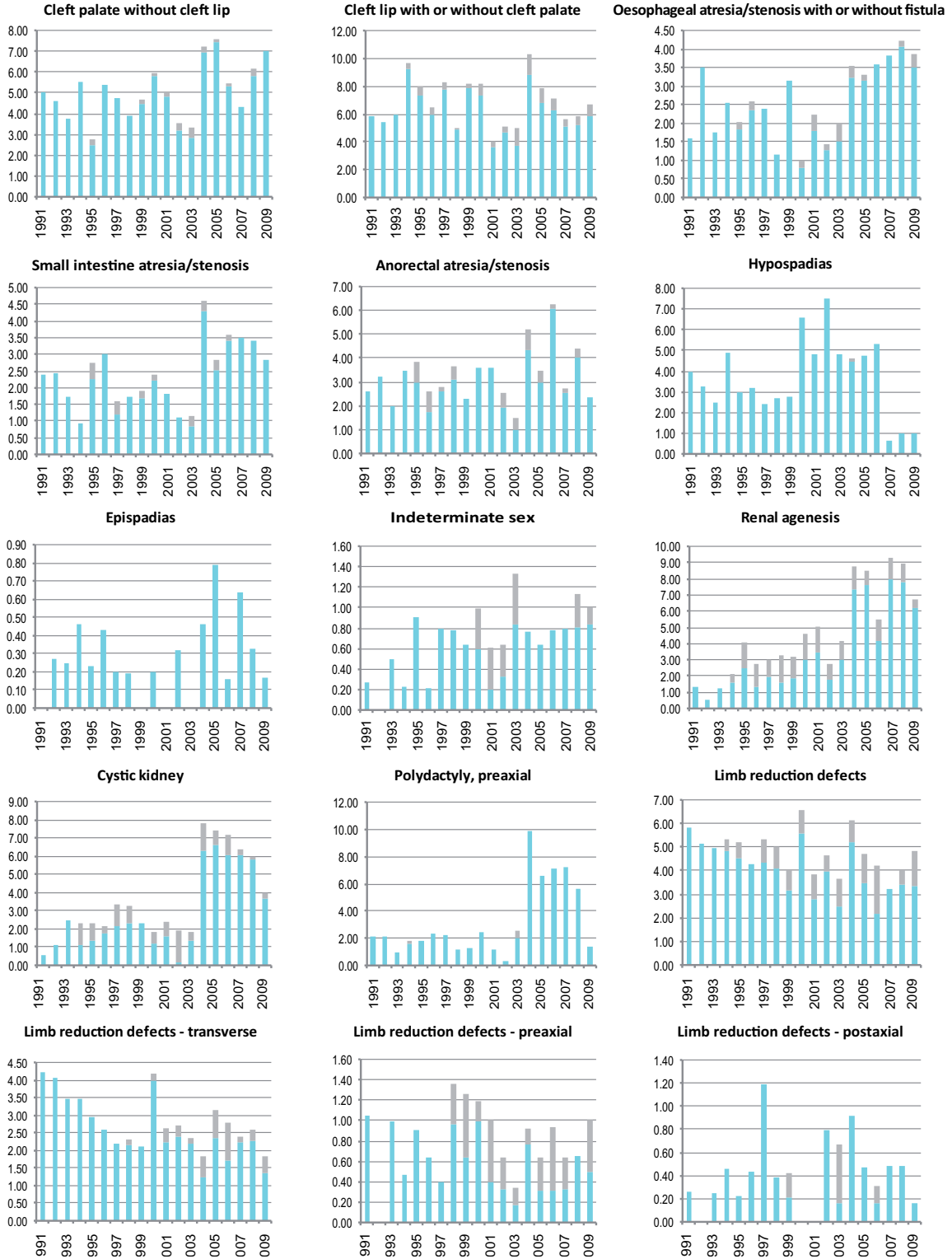
Italy-Campania: BDRCam

Time trends 1991-2009 (Birth prevalence rates per 10,000)



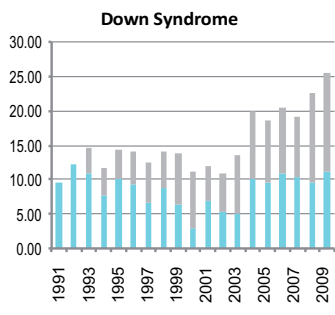
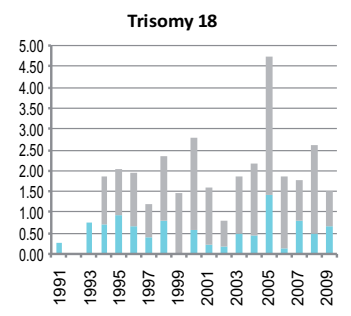
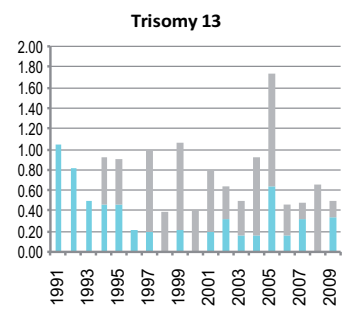
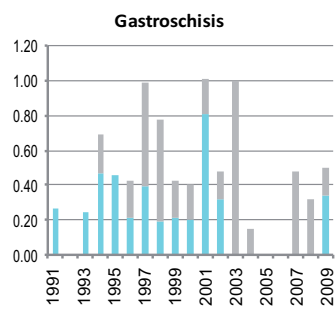
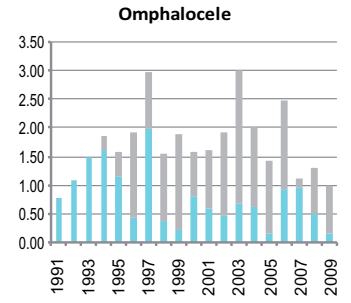
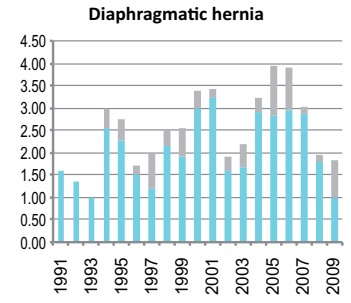
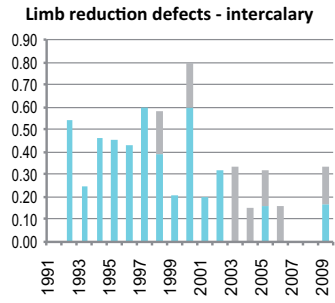
Note: ■ L+S rates, ■ ToP rates

Italy-Campania: BDRCam



Note: ■ L+S rates, ■ ToP rates

Italy-Campania: BDRCam



Note: L+S rates, ToP rates

Italy - Emilia Romagna: IMER

Emilia Romagna Registry of Congenital Malformations

History:

The registry was started in 1978 in a few hospitals and has increased in size to now include 45 delivery units. The Programme became an associate member of the Clearinghouse in 1985.

Size and coverage:

The Programme is based on approximately 90% of all births in the Emilia-Romagna region, or approximately 25,000 annual births (4% of all births in Italy). Stillbirths of 28 weeks or more gestation are included.

Legislation and funding:

The Programme is recognised and financed by the health authorities, the National Research Council, and the Regional Health Council. Hospital participation is voluntary.

Sources of ascertainment:

Reporting is made by neonatologists and pediatricians during the first week of the infant's life. Selected malformations are followed up.

Exposure information:

Detailed exposure information is obtained by

interviews of the mothers of malformed infants. For each malformed infant, a control is chosen (the baby born before or after the malformed case in the same hospital) and its mother is interviewed in a similar way.

Background information:

Some general demographic information is known for all births in the area. For each participating hospital, the number of livebirths and stillbirths are known.

Addresses and Staff:

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e Centro Malattie Rare
U.O. Neonatologia
Universita' di Bologna
Via Massarenti 11
40138 Bologna, Italy

Phone: 39-051-342754 /6364654

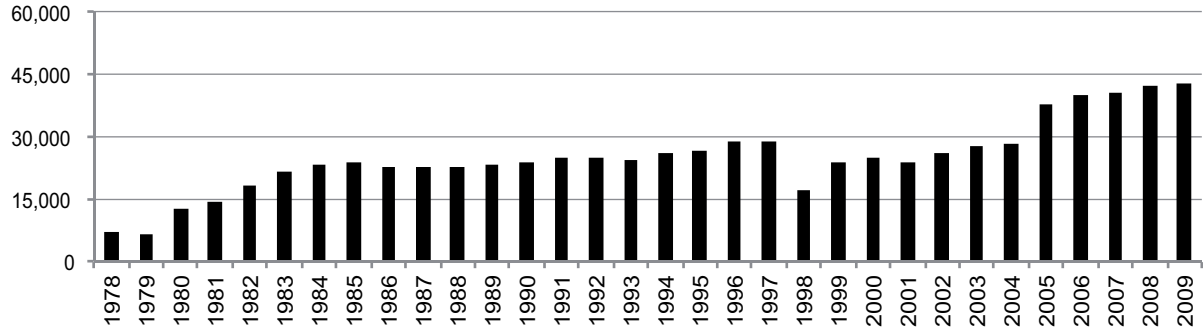
Fax: 39-051-342754

E-mail: guido.cocchi@unibo.it

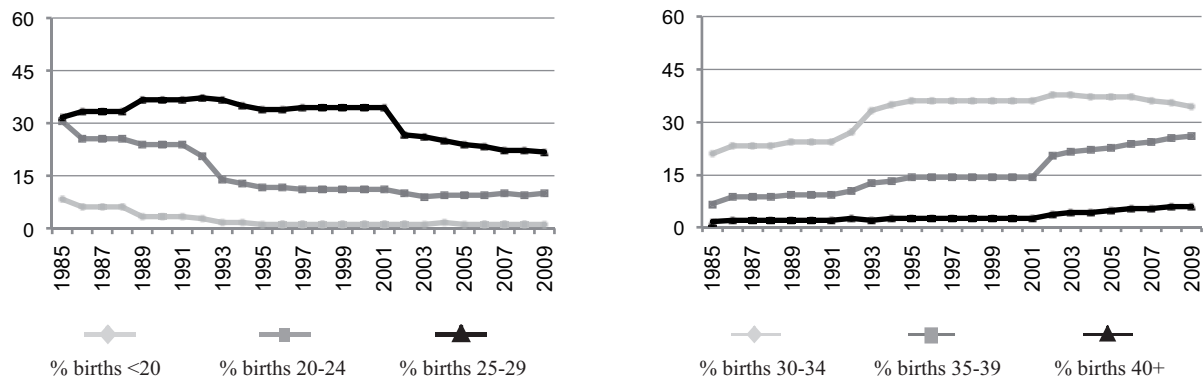
Website: <http://www.unife.it/imer/>

Italy: IMER

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009) (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	23	79.3	Cystic kidney	14	27.5
Spina bifida	22	64.7	Limb reduction defects	14	29.2
Encephalocele	6	60.0	Diaphragmatic hernia	5	13.2
Holoprosencephaly	10	76.9	Omphalocele	16	55.2
Hydrocephaly	30	63.8	Gastroschisis	2	20.0
Hypoplastic left heart syndrome	15	53.6	Trisomy 13	19	95.0
Cleft palate without cleft lip	4	6.3	Trisomy 18	39	81.3
Cleft lip with or without cleft palate	14	15.6	Down syndrome	182	70.0
Renal agenesis	12	27.9			

Total ToPs with births defects = 405 (Ratio ToPs/Births: 3.22 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Italy: IMER, 2009

Live births (LB)	42,665
Stillbirths (SB)	107
Total births	42,772
Number of terminations of pregnancy (ToP) for birth defects	194

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	1	2	7	2.34
Spina bifida	6	1	9	3.74
Encephalocele	3	0	0	0.70
Microcephaly	6	0	1	1.64
Holoprosencephaly	0	0	1	0.23
Hydrocephaly	7	0	4	2.57
Anophthalmos	0	0	0	0.00
Microphthalmos	2	0	1	0.70
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	1	0	0	0.23
Microtia	3	0	0	0.70
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	16	0	1	3.97
Tetralogy of Fallot	15	0	2	3.97
Hypoplastic left heart syndrome	5	0	5	2.34
Coarctation of aorta	15	0	1	3.74
Choanal atresia, bilateral	2	0	0	0.47
Cleft palate without cleft lip	20	0	0	4.68
Cleft lip with or without cleft palate	28	2	3	7.72
Oesophageal atresia/stenosis with or without fistula	15	0	1	3.74
Small intestine atresia/stenosis	21	0	0	4.91
Anorectal atresia/stenosis	4	0	1	1.17
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	61	0	2	14.73
Epispadias	2	0	0	0.47
Indeterminate sex	0	0	1	0.23
Renal agenesis	6	0	1	1.64
Cystic kidney	12	0	1	3.04
Bladder exstrophy	3	0	0	0.70
Polydactyly, preaxial	8	0	0	1.87
Total Limb reduction defects (include unspecified)	7	0	2	2.10
Transverse	4	0	2	1.40
Preaxial	2	0	0	0.47
Postaxial	0	0	0	0.00
Intercalary	0	0	0	0.00
Mixed	0	0	0	0.00
Unspecified	1	0	0	0.23
Diaphragmatic hernia	12	0	1	3.04
Omphalocele	7	0	5	2.81
Gastroschisis	2	0	0	0.47
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	0	0	4	0.94
Trisomy 18	2	0	15	3.97
Down syndrome, all ages (include age unknown)	29	0	68	22.68
<20	0	0	0	0.00
20-24	1	0	1	4.64
25-29	2	0	2	4.31
30-34	6	0	8	9.58
35-39	12	0	32	40.25
40-44	6	0	22	112.63
45+	0	0	2	166.67
unknown	2	0	1	---

nr = not reported

Italy: IMER, Previous years rates 1978 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979*	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	13,407	90,081	115,805	124,129	125,188	129,766	203,283
Anencephaly	1.49	1.55	0.60	0.89	1.84	1.85	2.21
Spina bifida	2.98	4.44	3.45	4.27	3.20	4.32	2.75
Encephalocele	1.49	0.11	0.86	0.64	0.80	0.69	0.74
Microcephaly	1.49	2.11	2.42	1.45	1.20	1.31	1.23
Holoprosencephaly	0.00	0.11	0.26	0.56	1.04	1.31	1.08
Hydrocephaly	3.73	4.88	3.97	4.27	4.15	7.17	4.43
Anophthalmos	0.75	0.33	0.00	0.16	0.40	0.39	0.00
Microphthalmos	0.00	1.00	0.35	0.97	0.72	0.77	0.98
Unspecified Anophthalmos/Microphthalmos	0.00	0.00	0.00	0.00	0.00	0.00	0.15
Anotia	nr	nr	nr	1.54*	0.40	0.85	0.79
Microtia	nr	nr	nr	1.16*	0.64	0.46	0.79
Unspecified Anotia/Microtia	nr	nr	nr	0.00*	0.00	0.00	0.00
Transposition of great vessels	0.75	3.00	2.42	2.82	3.75	5.63	3.94
Tetralogy of Fallot	nr	0.78	2.42	1.45	2.00	3.62	3.79
Hypoplastic left heart syndrome	0.00	1.33	1.73	1.85	2.72	2.70	2.61
Coarctation of aorta	nr	2.55	2.16	2.18	2.40	2.85	3.10
Choanal atresia, bilateral	0.00	0.22	0.26	0.32	0.08	0.46	0.34
Cleft palate without cleft lip	3.73	4.66	6.56	5.40	4.47	3.93	4.57
Cleft lip with or without cleft palate	5.97	7.66	6.82	7.01	5.75	5.70	7.03
Oesophageal atresia/stenosis with or without fistula	3.73	3.77	3.97	3.63	3.20	3.47	3.05
Small intestine atresia/stenosis	1.49	2.22	3.28	3.79	3.04	2.85	2.16
Anorectal atresia/stenosis	0.75	3.55	2.68	3.14	2.24	4.16	1.72
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr	nr	nr	nr
Hypospadias	12.68	20.20	20.38	18.12	16.09	16.95	14.76
Epispadias	nr	nr	nr	nr	0.00	0.00	0.10
Indeterminate sex	nr	nr	nr	nr	0.16	0.39	0.49
Renal agenesis	4.48	1.00	1.64	1.45	2.48	4.39	3.54
Cystic kidney	0.75	0.33	1.04	0.24	3.91	3.62	4.13
Bladder exstrophy	0.75	0.33	0.78	0.08	0.16	0.23	0.34
Polydactyly, preaxial	8.95	8.66	8.29	7.41	3.59	2.31	3.00
Total Limb reduction defects (include unspecified)	nr	nr	5.53	5.64	3.99	4.70	4.62
Transverse	nr	nr	3.28	2.82	1.92	1.62	1.91*
Preaxial	nr	nr	0.52	0.97	0.88	0.92	1.08*
Postaxial	nr	nr	0.69	0.48	0.40	0.69	0.25*
Intercalary	nr	nr	0.52	0.73	0.48	0.62	0.17*
Mixed	nr	nr	0.26	0.48	0.08	0.15	0.17*
Unspecified	nr	nr	0.26	0.16	0.24	0.69	1.00*
Diaphragmatic hernia	0.00	1.67	1.81	3.38	2.80	4.08	2.80
Omphalocele	2.24	1.33	2.25	2.18	1.28	3.08	1.87
Gastroschisis	0.00	1.00	0.69	1.05	0.48	1.39	0.89
Unspecified Omphalocele/Gastroschisis	0.00	0.33	0.95	0.56	0.00	0.00	0.00
Prune belly sequence	0.00	0.33	0.43	0.24	0.40	0.23	0.05
Trisomy 13	0.75	1.55	0.78	0.73	0.96	1.93	1.33
Trisomy 18	0.75	1.55	0.78	0.89	2.16	4.93	4.23
Down syndrome, all ages (include age unknown)	21.63	13.32	13.30	13.45	19.73	18.73	19.73
<20	nr	nr	1.40	8.59	12.63	5.57	13.03
20-24	nr	nr	4.89	5.97	8.30	7.49	4.02
25-29	nr	nr	10.97	7.71	7.70	5.30	5.25
30-34	nr	nr	15.77	13.98	13.74	11.48	9.94
35-39	nr	nr	35.62	31.95	43.16	39.00	36.75
40-44	nr	nr	71.70	79.17	177.78	112.31	89.31
45+	nr	nr	52.36	158.73	135.14	181.82	117.19
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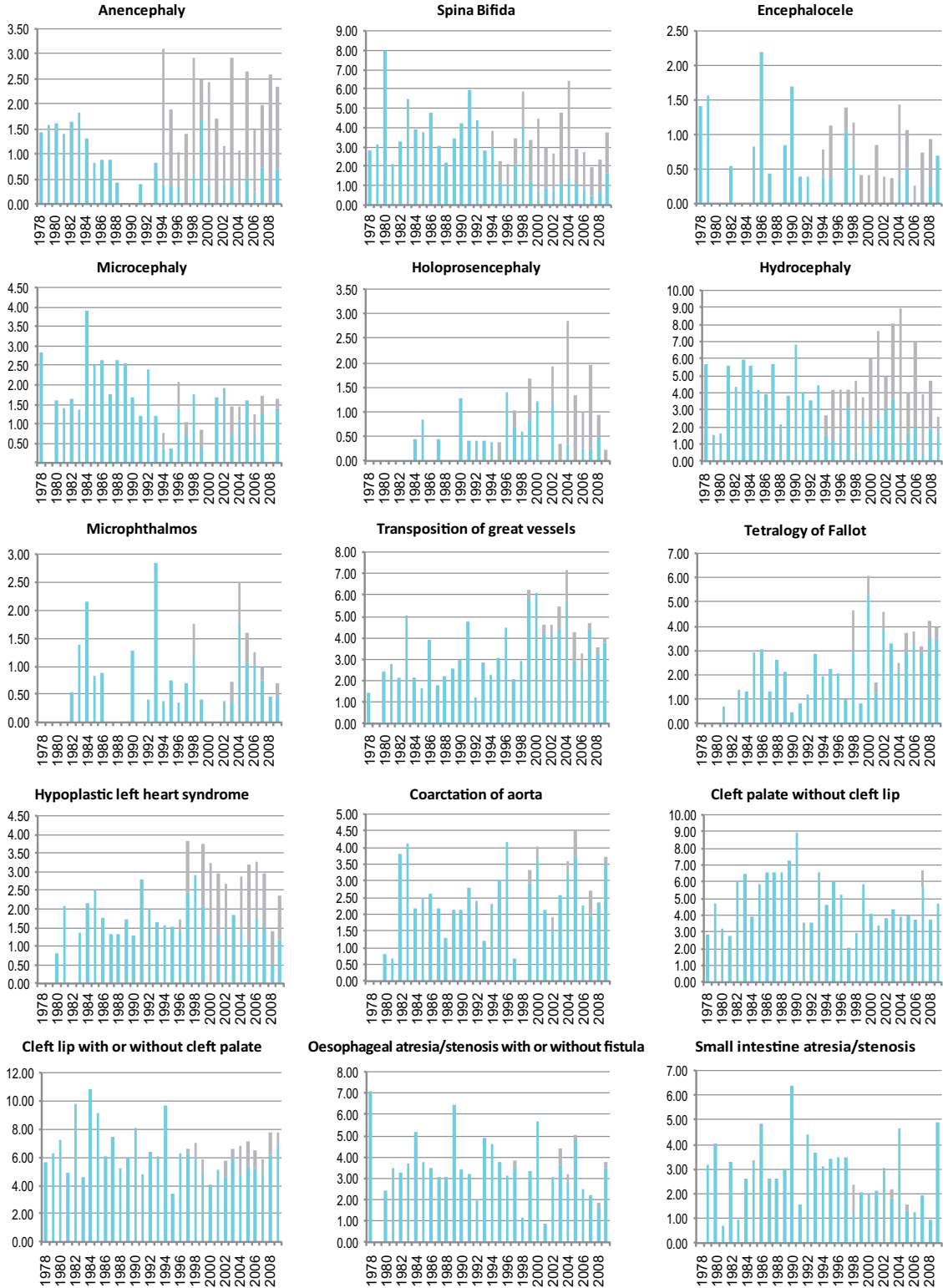
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* data include less than 5 years or 6 years

Monitoring Systems

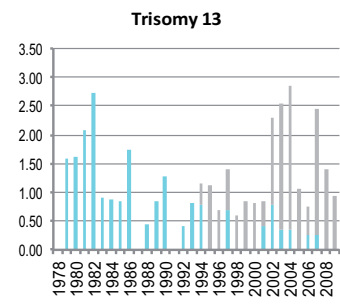
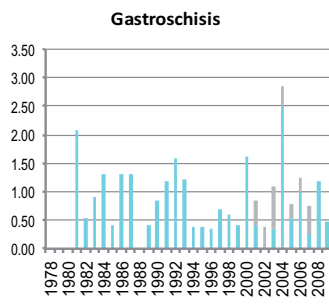
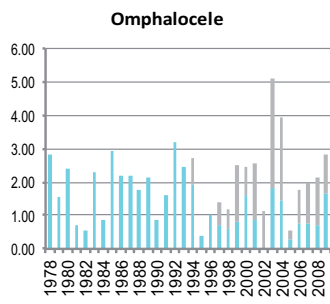
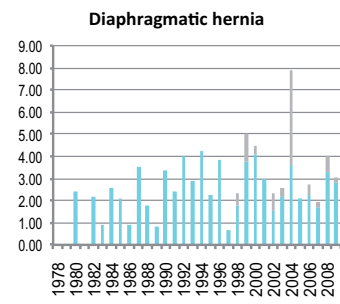
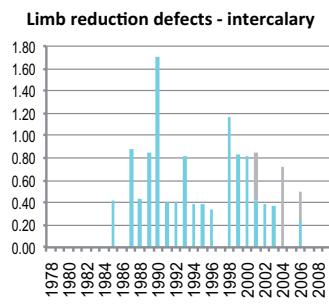
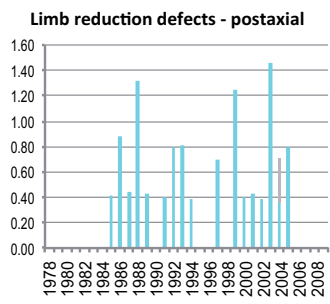
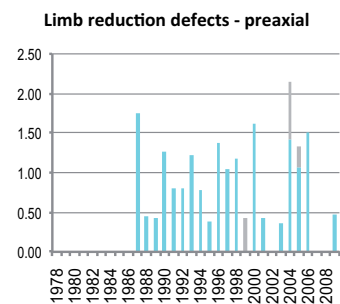
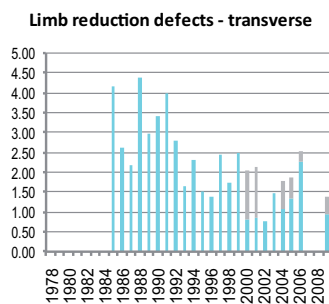
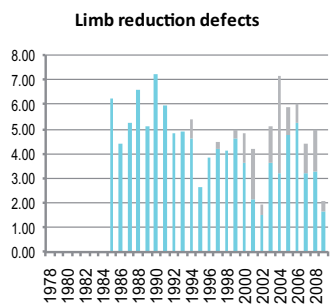
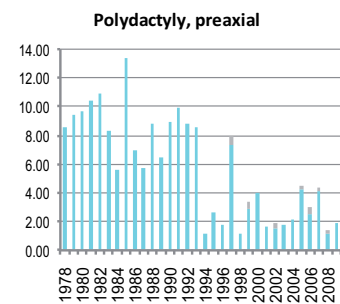
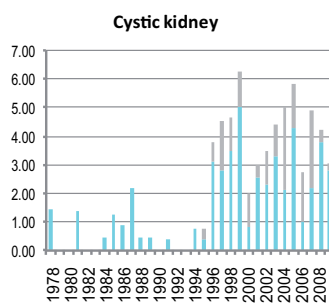
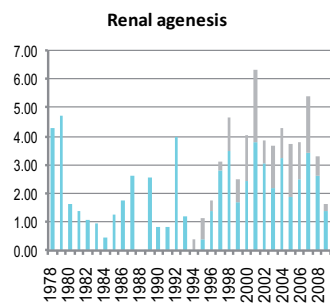
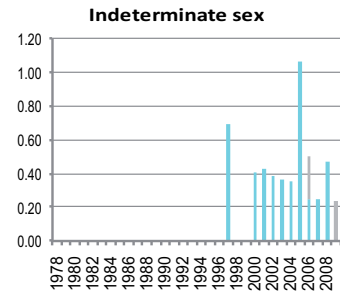
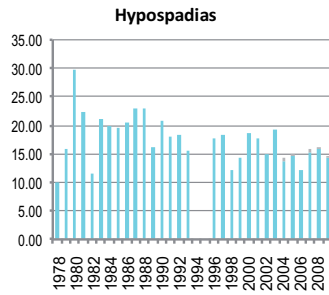
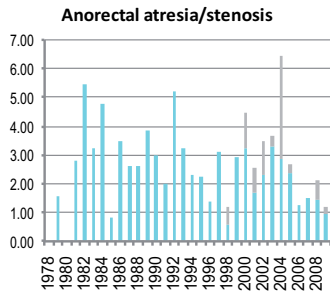
Italy: IMER

Time trends 1978-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates, ■ ToP rates

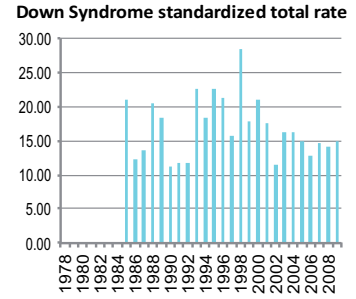
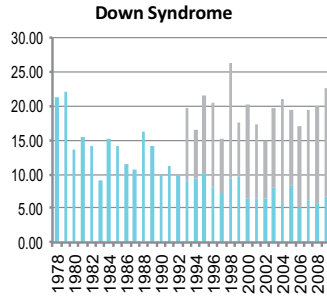
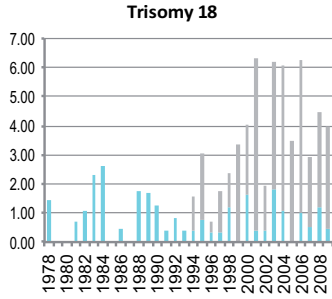
Italy: IMER



Note: ■ L+S rates, ■ ToP rates

Monitoring Systems

Italy: IMER



Note: ■ L+S rates, ■ ToP rates

ITALY-Lombardy: CMRL

Congenital Malformation Registry of Northern Lombardy

History:

The Registry started in 2000 and is located in National Cancer Institute of Milan. The Registry is full member of ICBDSR since 2007.

Size and Coverage:

The Registry is population-based and registers about 24 700 births annually, constituting 100% of the total annual births in the Provinces of Sondrio, Varese, Como and the northern part of Milan (HLA1). This is about 25% of the total annual births in the Region of Lombardy, and the 4.3% of total births in Italy.

Legislation and Funding:

The Registry is a research programme approved by the Italian Ministry of Health and supported by funding from the Italian National Cancer Institute.

Source of Ascertainment:

The registry uses active data collection methods from multiple sources (death certificates, hospital discharge records, pathology reports, birth certificates, outpatient drug prescription records, outpatient records, the social security list of the Region of Lombardy and clinical records).

The registry data are routinely cross-checked with the social security list of the Lombardy Region to up-date case (vital status) and parent information (age, vital status, etc.).

Exposure Information:

Information on exposure is not collected routinely can be collected on specific indications.

Addresses and Staff:

Programme Directors:

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Roberto Tessandori, Lucia Preto, Anna Maghini, Maria Eugenia Sanoja, Daniele Vergani, Andrea Tittarelli, Sabrina Fabiano

Congenital Malformation Registry of Northern Lombardy (CMRL)

National Cancer Institute

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Phone: +39-02 23903539 - +39-02 23903538

ITALY-Lombardy: CMRL, 2009*

Live births (LB)	10,069
Stillbirths (SB)	41
Total births	10,110
Number of terminations of pregnancy (ToP) for birth defects	33

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	1	1	1.98
Spina bifida	1	0	1	1.98
Encephalocele	0	1	0	0.99
Microcephaly	3	0	0	2.97
Holoprosencephaly	0	0	0	0.00
Hydrocephaly	2	1	5	7.91
Anophthalmos	1	0	0	0.99
Microphthalmos	1	0	0	0.99
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	1	0	0	0.99
Microtia	1	0	0	0.99
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	3	0	1	3.96
Tetralogy of Fallot	3	0	0	2.97
Hypoplastic left heart syndrome	2	0	0	1.98
Coarctation of aorta	6	0	0	5.93
Choanal atresia, bilateral	1	0	0	0.99
Cleft palate without cleft lip	4	0	0	3.96
Cleft lip with or without cleft palate	9	0	1	9.89
Oesophageal atresia/stenosis with or without fistula	2	0	0	1.98
Small intestine atresia/stenosis	3	0	0	2.97
Anorectal atresia/stenosis	3	0	0	2.97
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	23	0	0	22.75
Epispadias	0	0	0	0.00
Indeterminate sex	3	0	0	2.97
Renal agenesis	6	0	2	7.91
Cystic kidney	1	0	0	0.99
Bladder exstrophy	0	0	0	0.00
Polydactyly, preaxial	2	0	0	1.98
Total Limb reduction defects (include unspecified)	5	0	1	5.93
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	0	0	0	0.00
Omphalocele	0	0	1	0.99
Gastroschisis	1	0	1	1.98
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	nr	nr	nr	nr
Trisomy 13	0	0	1	0.99
Trisomy 18	0	0	2	1.98
Down syndrome, all ages (include age unknown)	14	0	7	20.77
<20	0	0	0	0.00
20-24	0	0	0	0.00
25-29	2	0	0	9.10
30-34	4	0	1	13.19
35-39	5	0	2	27.48
40-44	3	0	4	129.39
45+	0	0	0	0.00
unknown	0	0	0	---

nr = not reported

(*) Data for the provinces of Sondrio and Varese

Italy: North East

North East Italy Registry of Congenital Malformations

History:

The Registry was established in 1981 to include the Veneto, Friuli Venezia Giulia and Trentino Alto Adige regions. The Registry became a member of Eurocat in 1985, and an associate member of Clearinghouse in 1997.

Size and coverage:

Reports are obtained from 60 participating hospitals, with a total of approximately 57,000 annual births; the actual coverage is estimated at 73%.

Legislation and funding:

Reporting is voluntary. The Programme is partly run by privately funded research organisations and partly by Regional Health Authorities.

Sources of ascertainment:

Reports are obtained on specific forms from delivery units, induced abortion units, pediatric, cardiology, ophthalmology and pathology departments, regional induced abortion database and cytogenetic laboratories. 32 selected malformations are recorded within 7 days from birth (within 3 years of age for cardiovascular and ophthalmological anomalies only). In induced abortions all fetal anomalies are recorded. Two control infants are selected for each malformed one.

Exposure information:

Detailed information on various exposures, including maternal or paternal occupation, diseases and drug use is obtained by interview of the mothers at the birth of the malformed infants and controls. Only selected malformations are collected.

Background information:

Some epidemiological background data of all births are available. For each participating hospital the number of livebirths and stillbirths by sex and number of twin pairs are known.

Addresses and Staff:

Romano Tenconi, MD, Programme Director, until May 23, 2010

Maurizio Clementi, MD, Programme Director, from May 24, 2010

Servizio di Informazione Teratologia
Genetica Clinica, Dipartimento Pediatria
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35128 Padova, Italy

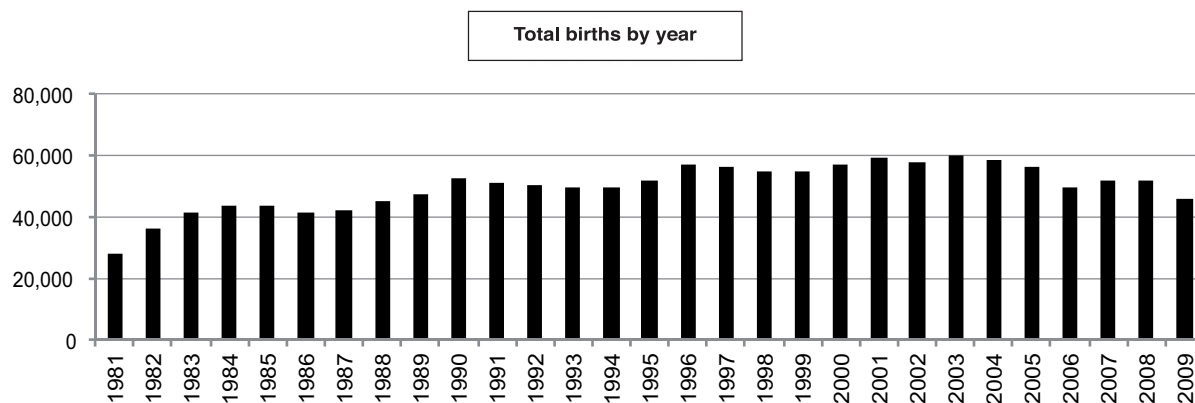
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Monitoring Systems

Italy: North East



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	16	72.7	Cystic kidney	3	5.7
Spina bifida	21	61.8	Limb reduction defects	11	23.4
Encephalocele	6	66.7	Diaphragmatic hernia	5	16.7
Holoprosencephaly	1	33.3	Omphalocele	7	33.3
Hydrocephaly	30	36.6	Gastroschisis	4	25.0
Hypoplastic left heart syndrome	6	31.6	Trisomy 13	5	100.0
Cleft palate without cleft lip	6	5.8	Trisomy 18	10	90.9
Cleft lip with or without cleft palate	8	5.8	Down syndrome	105	33.9
Renal agenesis	15	23.8			

Total ToPs with births defects = 250 (Ratio ToPs/Births: 1.68 per 1,000)

(*) % of ToPs = ToPs/(ToPs+Births)

Italy: North East, 2009

Live births (LB)	45,523
Stillbirths (SB)	44
Total births	45,567
Number of terminations of pregnancy (ToP) for birth defects	107

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	3	0.66
Spina bifida	0	0	5	1.10
Encephalocele	0	0	2	0.44
Microcephaly	4	1	0	1.10
Holoprosencephaly	0	0	0	0.00
Hydrocephaly	1	0	9	2.19
Anophthalmos	0	0	0	0.00
Microphthalmos	1	0	0	0.22
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	0	0	0	0.00
Microtia	2	0	1	0.66
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	4	0	0	0.88
Tetralogy of Fallot	3	0	0	0.66
Hypoplastic left heart syndrome	1	0	4	1.10
Coarctation of aorta	5	0	0	1.10
Choanal atresia, bilateral	4	0	0	0.88
Cleft palate without cleft lip	19	0	1	4.39
Cleft lip with or without cleft palate	27	0	2	6.36
Oesophageal atresia/stenosis with or without fistula	7	0	0	1.54
Small intestine atresia/stenosis	5	0	0	1.10
Anorectal atresia/stenosis	11	0	2	2.85
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	15	0	0	3.29
Epispadias	0	0	0	0.00
Indeterminate sex	nr	nr	nr	nr
Renal agenesis	5	0	4	1.98
Cystic kidney	7	0	1	1.76
Bladder exstrophy	2	0	0	0.44
Polydactyly, preaxial	40	0	2	9.22
Total Limb reduction defects (include unspecified)	6	0	1	1.54
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	7	0	0	1.54
Omphalocele	5	0	1	1.32
Gastroschisis	6	0	3	1.98
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	0	0	0	0.00
Trisomy 18	0	0	1	0.22
Down syndrome, all ages (include age unknown)	65	0	33	21.51
<20	0	0	0	nr
20-24	1	0	2	nr
25-29	3	0	2	nr
30-34	5	0	9	nr
35-39	7	0	10	nr
40-44	6	0	8	nr
45+	0	0	0	nr
unknown	43	0	2	---

nr = not reported

Italy: North East, Previous years rates 1981 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

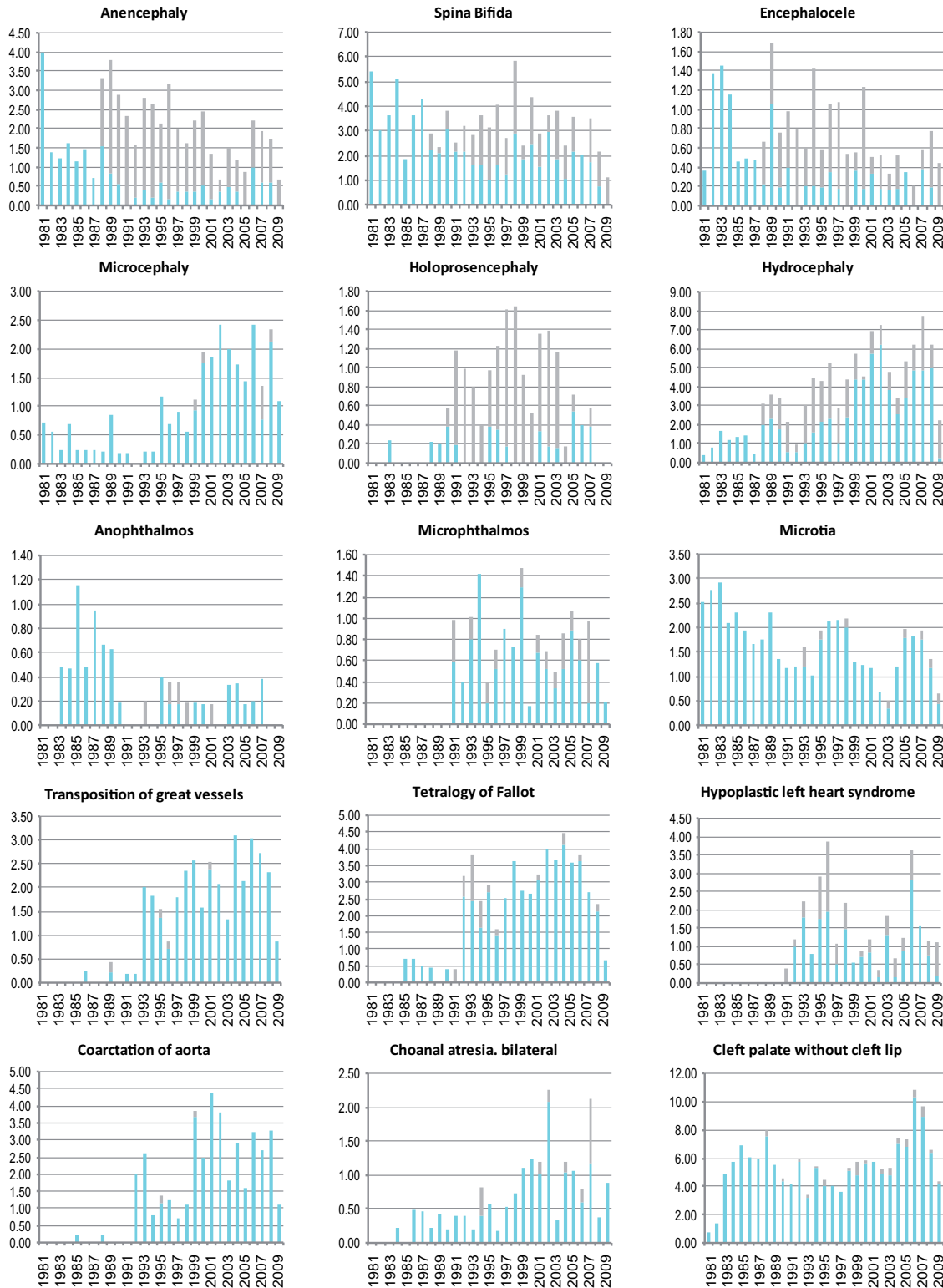
	1974-1979	1980-1984*	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		148,426	219,536	252,816	273,566	292,184	254,501
Anencephaly		1.89	2.14	2.45	2.23	1.44	1.49
Spina bifida		4.24	2.96	3.20	3.62	3.42	2.51
Encephalocele		1.15	0.77	0.91	0.77	0.62	0.47
Microcephaly		0.54	0.36	0.16	0.88	1.99	1.73
Holoprosencephaly		0.07	0.09	0.79	1.28	0.92	0.35
Hydrocephaly		1.08	2.05	2.81	4.50	5.41	5.62
Anophthalmos		0.27	0.77	0.08	0.29	0.21	0.16
Microphthalmos		0.00	0.00	0.75	0.84	0.62	0.75
Unspecified Anophthalmos/Microphthalmos		nr	nr	nr	nr	nr	nr
Anotia		0.20	0.18	0.28	0.18	0.21	0.24
Microtia		2.56	2.00	1.27	1.94	0.96	1.57
Unspecified Anotia/Microtia		0.00	0.05	0.12	0.22	0.17	0.40*
Transposition of great vessels		0.00	0.14	0.83	1.83	2.12	2.24
Tetralogy of Fallot		0.00	0.46	2.02	2.67	3.59	2.67
Hypoplastic left heart syndrome		0.00	0.00	0.91	2.12	0.99	1.73
Coarctation of aorta		0.00	0.09	1.07	1.64	3.08	2.40
Choanal atresia, bilateral		0.07	0.32	0.40	0.62	1.23	1.06
Cleft palate without cleft lip		3.50	6.47	4.71	4.61	5.89	7.82
Cleft lip with or without cleft palate		8.83	8.79	7.55	8.22	7.77	9.31
Oesophageal atresia/stenosis with or without fistula		2.29	2.23	2.81	2.49	3.25	2.44
Small intestine atresia/stenosis		0.40	0.64	1.19	0.84	2.57	2.59
Anorectal atresia/stenosis		2.49	3.33	2.41	2.67	2.70	4.20
Undescended testis (36 weeks of gestation or later)		nr	nr	nr	nr	nr	nr
Hypospadias		6.87	6.70	6.13	9.18	22.55	15.95
Epispadias		0.07	0.14	0.12	0.22	0.27	0.16
Indeterminate sex		nr	nr	nr	nr	nr	nr
Renal agenesis		0.74	0.68	0.67	0.69	0.34	3.03
Cystic kidney		0.00	0.00	0.16	0.73	1.44	2.32
Bladder exstrophy		0.34	0.14	0.44	0.22	0.24	0.35
Polydactyly, preaxial		1.62	2.32	2.49	2.01	1.68	4.87
Total Limb reduction defects (include unspecified)		5.79	5.97	5.97	5.08	4.11	3.81
Transverse		3.44	3.37	2.85	2.85	1.64	1.43*
Preaxial		0.00	0.09	0.79	0.69	0.34	0.53*
Postaxial		0.00	0.14	0.16	0.15	0.31	0.18*
Intercalary		0.54	0.87	0.95	0.37	0.31	0.36*
Mixed		1.82	1.14	0.16	0.22	0.10	0.00*
Unspecified		0.00	0.32	1.07	0.84	1.33	3.57*
Diaphragmatic hernia		0.34	0.64	0.63	0.84	1.85	1.85
Omphalocele		1.21	1.46	1.38	1.24	1.40	1.18
Gastroschisis		0.67	0.87	0.71	0.48	0.79	1.06
Unspecified Omphalocele/Gastroschisis		nr	nr	nr	nr	nr	nr
Prune belly sequence		0.07	0.00	0.32	0.22	0.00	0.00
Trisomy 13		0.81	0.64	0.83	0.99	1.27	0.63
Trisomy 18		0.94	1.59	2.22	2.63	2.43	0.98
Down syndrome, all ages (include age unknown)		13.88	15.76	16.02	16.74	17.76	19.06
<20		nr	nr	nr	nr	nr	nr
20-24		nr	nr	nr	nr	nr	nr
25-29		nr	nr	nr	nr	nr	nr
30-34		nr	nr	nr	nr	nr	nr
35-39		nr	nr	nr	nr	nr	nr
40-44		nr	nr	nr	nr	nr	nr
45+		nr	nr	nr	nr	nr	nr
unknown		---	---	---	---	---	---

nr = not reported

* data include less than 5 years

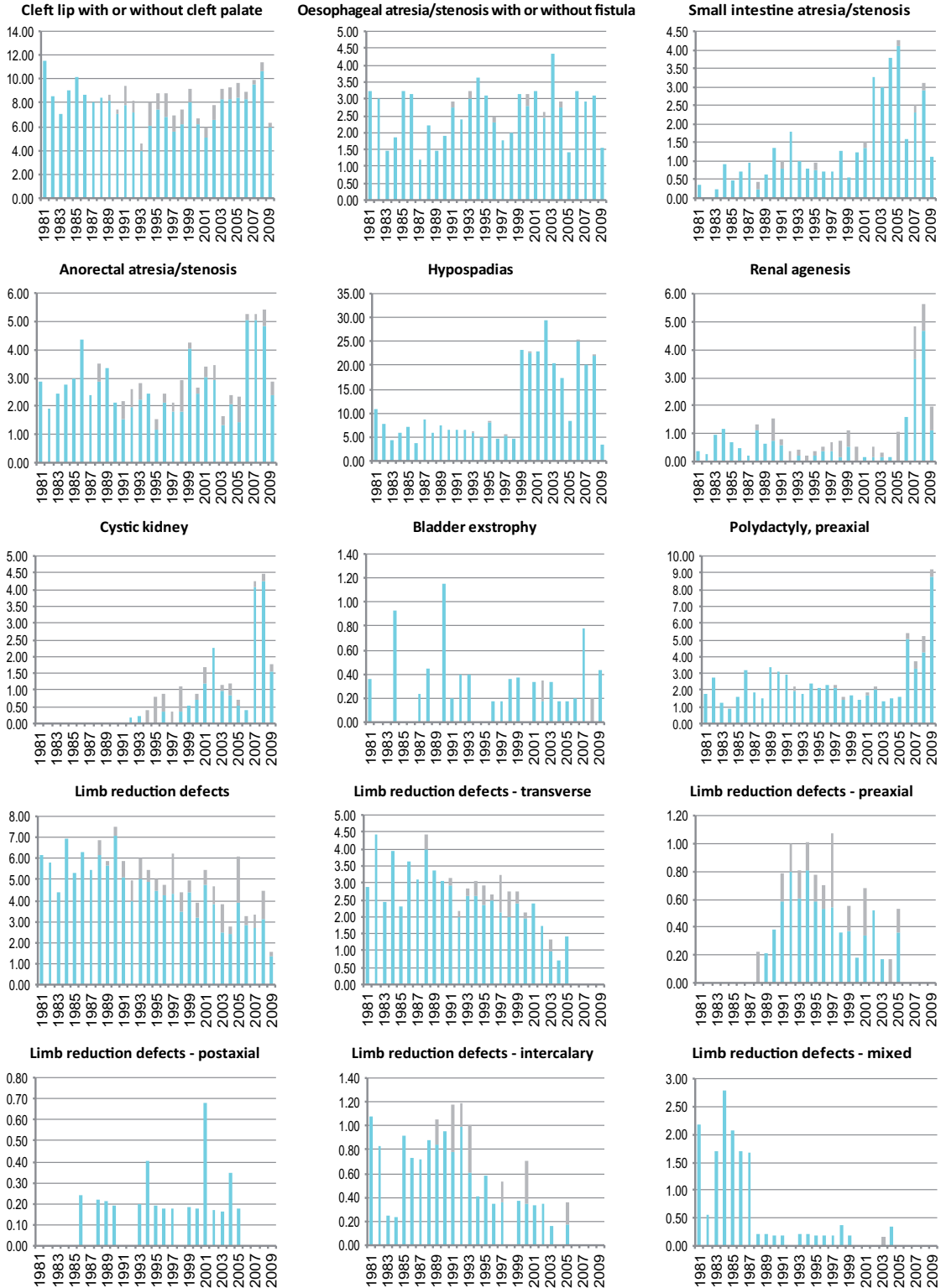
Italy: North East

Time trends 1981-2009 (Birth prevalence rates per 10,000)



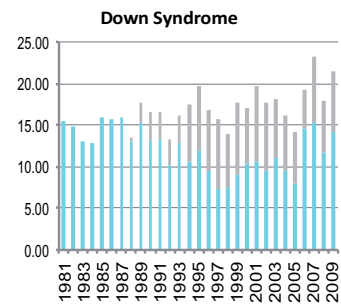
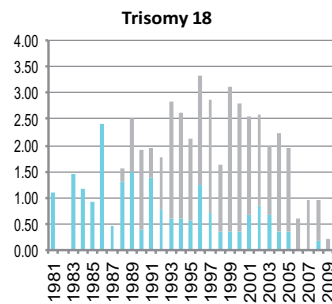
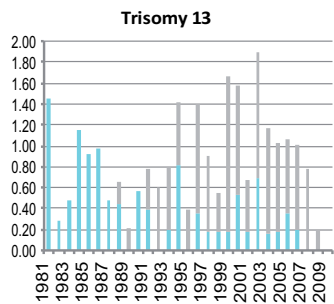
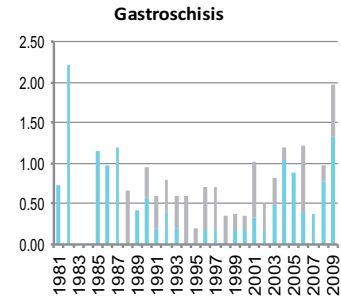
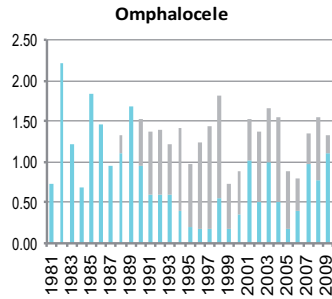
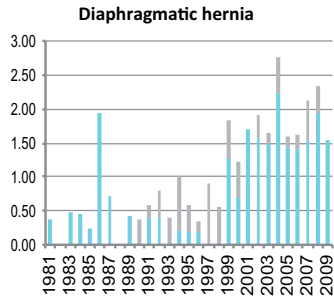
Note: ■ L+S rates, ■ ToP rates

Italy: North East



Note: ■ L+S rates, ■ ToP rates

Italy: North East



Note: ■ L+S rates, ■ ToP rates

Italy - Tuscany: RTDC

Tuscany Registry of Congenital Defects

History:

The registry started in 1979 in the province of Florence and from 1992 in the whole Tuscany region. The Programme became a full member of the Clearinghouse in 1998.

Size and coverage:

The Programme is population based, involves all the regional hospitals and the coverage is around 95% of all births in the Tuscany region (approximately 3.5 millions inhabitants and 25,000 births/year). Stillbirths of 20 weeks or more gestation and induced abortions after prenatal diagnosis of birth defects are systematically included. Malformed babies diagnosed within the first year of life are also registered.

Legislation and funding:

The Registry is a surveillance Programme included in the Regional Statistics System; it is formally recognised and supported by the Tuscany Region Health Authority.

Sources and ascertainment:

Multiple sources are used to ascertain malformed infants; records are obtained from all obstetrical and maternity units, pediatric departments, neonatal and pediatric surgery units, prenatal diagnostic centers and pathology services. Mothers are interviewed by using a standardized questionnaire.

Exposure information:

Exposure information on maternal and paternal occupation, life-style, and socio-economical characteristics are obtained by interviews of mothers of malformed infants.

Background information:

Vital statistics and other epidemiological information are obtained by the birth medical records collected by the Regional Bureau of Statistics. Selected information is obtained from the control material collected.

Addresses and Staff:

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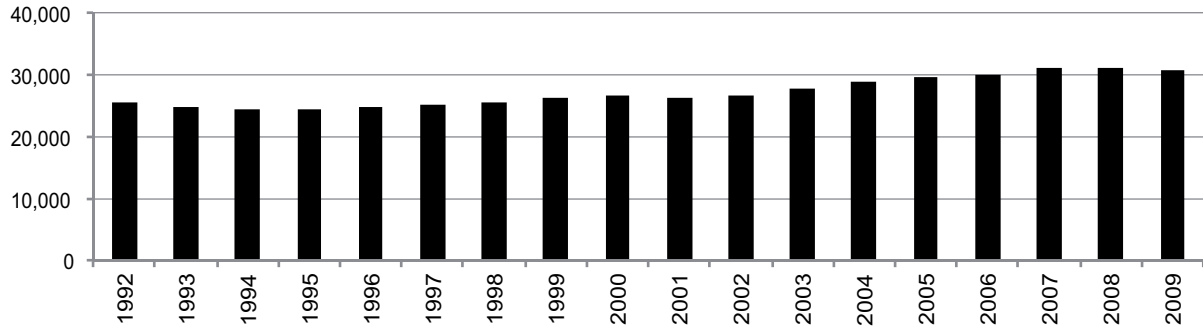
Fax: 39-050-3152095

E-mail: apier@ifc.cnr.it

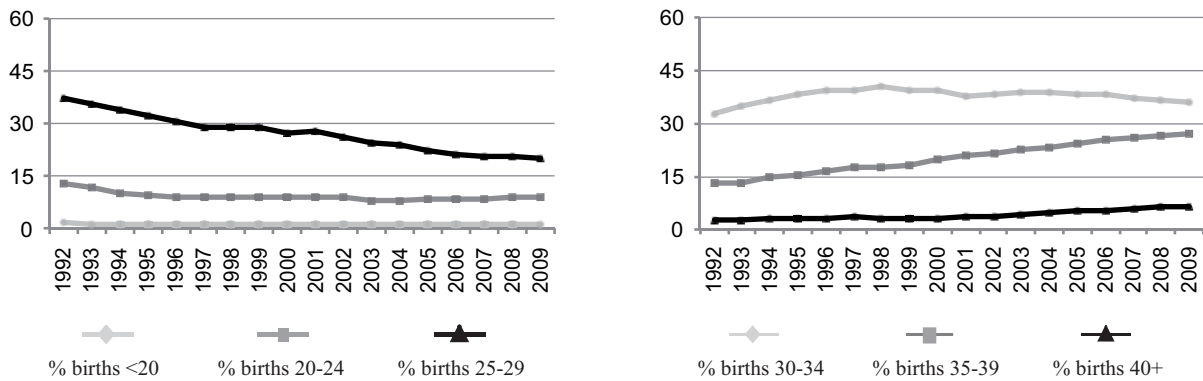
Website: www.rtdc.it

Italy - Tuscany: RTDC

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	14	100.0	Cystic kidney	10	25.6
Spina bifida	26	83.9	Limb reduction defects	13	31.0
Encephalocele	5	55.6	Diaphragmatic hernia	2	11.8
Holoprosencephaly	9	75.0	Omphalocele	21	87.5
Hydrocephaly	19	70.4	Gastroschisis	4	50.0
Hypoplastic left heart syndrome	13	61.9	Trisomy 13	15	93.8
Cleft palate without cleft lip	3	8.3	Trisomy 18	36	87.8
Cleft lip with or without cleft palate	16	27.6	Down syndrome	124	69.7
Renal agenesis	6	75.0			

Total ToPs with births defects = 417 (Ratio ToPs/Births: 4.50 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Italy - Tuscany: RTDC, 2009

Live births (LB)	30,488
Stillbirths (SB)	81
Total births	30,569
Number of terminations of pregnancy (ToP) for birth defects	153

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	6	1.96
Spina bifida	0	1	7	2.62
Encephalocele	1	1	0	0.65
Microcephaly	3	0	0	0.98
Holoprosencephaly	2	0	1	0.98
Hydrocephaly	5	1	4	3.27
Anophthalmos	0	0	0	0.00
Microphthalmos	1	0	1	0.65
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	2	0	0	0.65
Microtia	1	0	1	0.65
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	10	0	0	3.27
Tetralogy of Fallot	2	0	1	0.98
Hypoplastic left heart syndrome	1	0	8	2.94
Coarctation of aorta	7	0	0	2.29
Choanal atresia, bilateral	5	0	0	1.64
Cleft palate without cleft lip	13	0	0	4.25
Cleft lip with or without cleft palate	21	0	7	9.16
Oesophageal atresia/stenosis with or without fistula	10	0	1	3.60
Small intestine atresia/stenosis	3	0	0	0.98
Anorectal atresia/stenosis	9	0	1	3.27
Undescended testis (36 weeks of gestation or later)	28	0	0	9.16
Hypospadias	50	0	0	16.36
Epispadias	1	0	0	0.33
Indeterminate sex	1	0	1	0.65
Renal agenesis	0	0	0	0.00
Cystic kidney	13	1	2	5.23
Bladder exstrophy	0	0	0	0.00
Polydactyly, preaxial	3	0	0	0.98
Total Limb reduction defects (include unspecified)	12	0	5	5.56
Transverse	11	0	3	4.58
Preaxial	1	0	2	0.98
Postaxial	2	0	1	0.98
Intercalary	0	0	1	0.33
Mixed	0	0	0	0.00
Unspecified	1	0	0	0.33
Diaphragmatic hernia	7	0	0	2.29
Omphalocele	0	0	8	2.62
Gastroschisis	0	0	1	0.33
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	0	0	6	1.96
Trisomy 18	1	0	12	4.25
Down syndrome, all ages (include age unknown)	19	0	57	24.86
<20	1	0	0	26.46
20-24	0	0	2	7.36
25-29	2	0	1	4.91
30-34	2	0	10	10.95
35-39	6	0	23	34.71
40-44	5	0	19	123.20
45+	1	0	2	337.08
unknown	2	0	0	---

Italy - Tuscany: RTDC, Previous years rates 1992 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994*	1995-1999	2000-2004	2005-2009
Total births				74,844	125,638	136,262	152,159
Anencephaly				2.67	2.39	1.32	2.04
Spina bifida				2.67	3.02	3.30	2.56
Encephalocele				1.07	0.96	0.29	0.85
Microcephaly				1.47	0.88	0.81	0.66
Holoprosencephaly				0.67	0.72	1.10	1.05
Hydrocephaly				3.07	2.79	3.89	3.22
Anophthalmos				0.00	0.08	0.22	0.13
Microphthalmos				0.67	0.24	0.81	0.59
Unspecified Anophthalmos/Microphthalmos				0.00	0.00	0.07	0.00
Anotia				0.40	0.32	0.37	0.33
Microtia				0.40	0.72	0.29	0.53
Unspecified Anotia/Microtia				0.00	0.00	0.00	0.00
Transposition of great vessels				2.41	1.59	3.52	2.83
Tetralogy of Fallot				1.87	2.79	2.50	2.56
Hypoplastic left heart syndrome				2.27	1.35	2.72	2.17
Coarctation of aorta				2.41	2.79	2.28	2.30
Choanal atresia, bilateral				0.13	0.08	0.59	0.59
Cleft palate without cleft lip				4.01	3.66	4.26	3.42
Cleft lip with or without cleft palate				8.42	5.49	6.60	5.85
Oesophageal atresia/stenosis with or without fistula				2.14	2.55	2.35	2.30
Small intestine atresia/stenosis				1.07	0.64	1.17	1.05
Anorectal atresia/stenosis				1.60	1.99	3.16	1.77
Undescended testis (36 weeks of gestation or later)				3.47	6.53	10.20	5.45
Hypospadias				5.75	3.18	6.75	10.52
Epispadias				0.27	0.24	0.22	0.26
Indeterminate sex				0.94	0.64	0.51	0.59
Renal agenesis				1.87	1.43	0.88	0.72
Cystic kidney				3.34	3.26	4.40	4.21
Bladder exstrophy				0.40	0.16	0.22	0.26
Polydactyly, preaxial				0.80	0.96	1.39	0.99
Total Limb reduction defects (include unspecified)				5.08	4.78	6.53	4.47
Transverse				4.01	2.79	4.40	2.50
Preaxial				0.13	0.32	0.66	0.53
Postaxial				0.13	0.32	0.15	0.46
Intercalary				0.27	0.56	0.59	0.20
Mixed				0.27	0.48	0.29	0.07
Unspecified				0.00	0.00	0.66	1.31
Diaphragmatic hernia				1.20	1.43	2.57	1.51
Omphalocele				2.27	1.27	1.83	2.10
Gastroschisis				0.53	0.40	0.59	0.85
Unspecified Omphalocele/Gastroschisis				0.40	0.32	0.22	0.13
Prune belly sequence				0.13	0.16	0.00	0.13
Trisomy 13				0.40	0.80	1.32	1.64
Trisomy 18				2.81	3.34	2.79	3.55
Down syndrome, all ages (include age unknown)				13.49	16.79	16.59	17.61
<20				0.00	0.00	0.00	5.19
20-24				3.49	8.04	4.34	6.13
25-29				8.35	8.71	3.17	4.71
30-34				10.11	13.65	9.25	6.53
35-39				31.57	28.31	26.98	26.82
40-44				66.19	104.63	156.77	92.78
45+				236.22	45.45	157.89	163.93
unknown				---	---	---	---

* data include less than 5 years

Monitoring Systems

Italy - Tuscany: RTDC

Time trends 1992-2009 (Birth prevalence rates per 10,000)



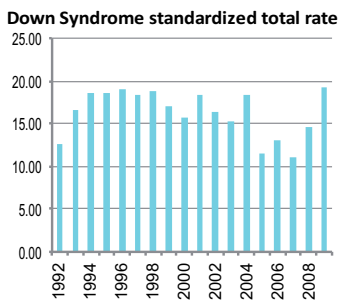
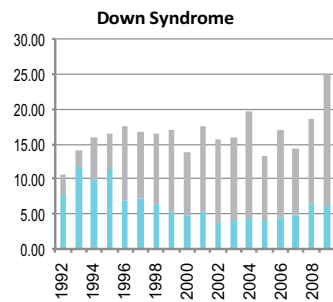
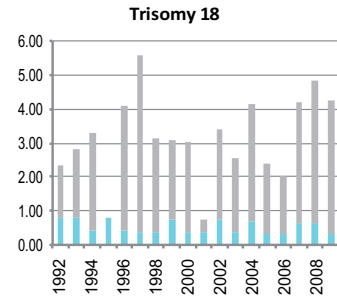
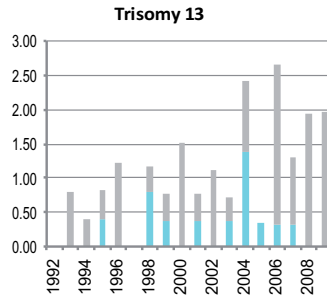
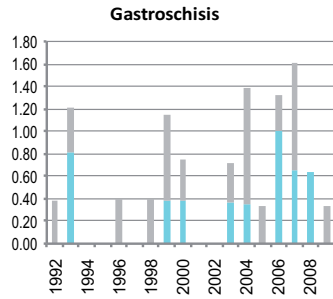
Note: ■ L+S rates, ■ ToP rates

Italy - Tuscany: RTDC



Note: ■ L+S rates, ■ ToP rates

Italy - Tuscany: RTDC



Note: ■ L+S rates, ■ ToP rates

Japan: JAOG

Japan Association of Obstetricians and Gynaecologists

History:

The Programme started in 1972 and became a full member of the Clearinghouse in 1988.

Size and coverage:

The Programme is based on reports from 270 hospitals throughout Japan. At present approximately 100,000 births are covered, representing about 9% of all Japanese births. Stillbirths of 22 weeks or more gestation are included.

Legislation and funding:

The Programme is a research Programme acknowledged by the Ministry of Welfare and supported by the Japanese Association of Obstetricians and Gynecologists.

Sources of ascertainment:

Reports are obtained from delivery units and pediatric clinics of the participating hospitals.

Exposure information:

Exposure to drugs, X-ray and viral infections are available.

Background information:

Basic epidemiological information on all births is available from each participating hospital.

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3-9 Fukuura, Kanazawaku
Yokohama, 236-0004, Japan

Phone: 81-45-787-2689

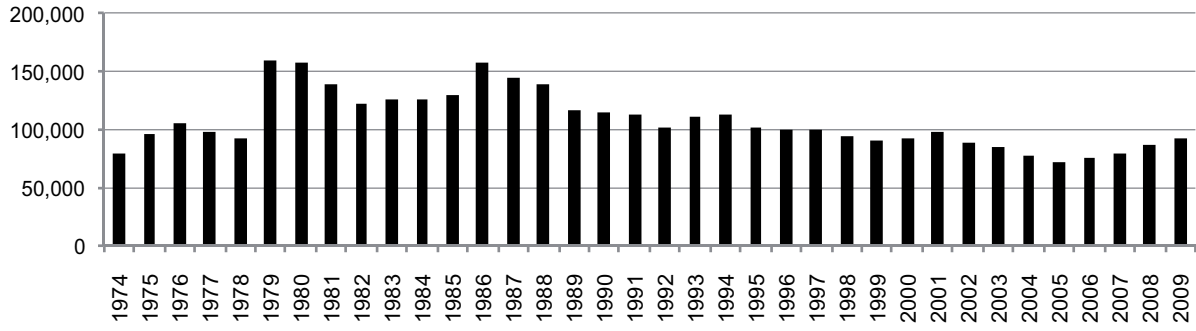
Fax: 81-45-787-2689

E-mail: hirafu@med.yokohama-cu.ac.jp

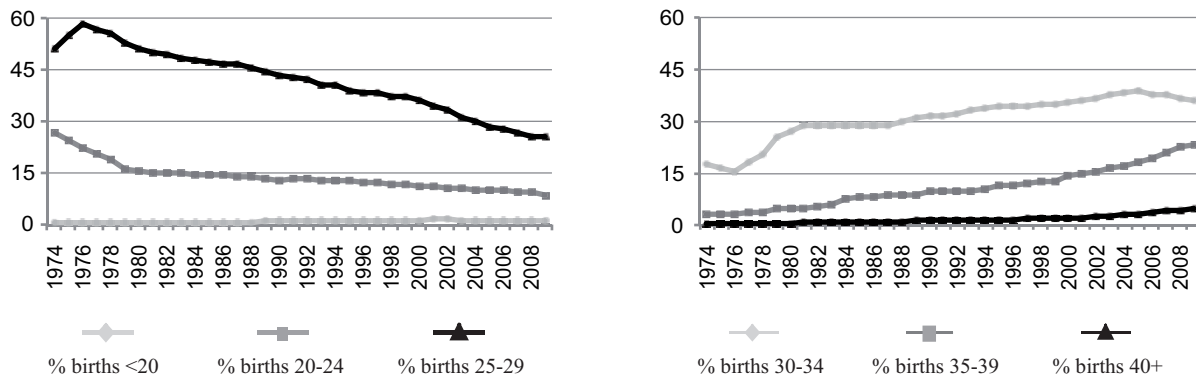
Monitoring Systems

Japan: JAOG

Total births by year



Percentage of births by year and maternal age



Japan JAOG, 2009

Live births (LB)	91,674
Stillbirths (SB)	582
Total births	92,256
Number of terminations of pregnancy (ToP) for birth defects	nr

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	3	2	nr	0.54
Spina bifida	55	2	nr	6.18
Encephalocele	7	1	nr	0.87
Microcephaly	8	5	nr	1.41
Holoprosencephaly	6	3	nr	0.98
Hydrocephaly	65	3	nr	7.37
Anophthalmos	2	0	nr	0.22
Microphthalmos	5	1	nr	0.65
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	0	0	nr	0.00
Microtia	19	3	nr	2.38
Unspecified Anotia/Microtia	nr	nr	nr	nr
Transposition of great vessels	43	0	nr	4.66
Tetralogy of Fallot	59	5	nr	6.94
Hypoplastic left heart syndrome	30	6	nr	3.90
Coarctation of aorta	63	2	nr	7.05
Choanal atresia, bilateral	0	0	nr	0.00
Cleft palate without cleft lip	36	0	nr	3.90
Cleft lip with or without cleft palate	168	15	nr	19.84
Oesophageal atresia/stenosis with or without fistula	35	4	nr	4.23
Small intestine atresia/stenosis	78	6	nr	9.11
Anorectal atresia/stenosis	67	5	nr	7.80
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	50	0	nr	5.42
Epispadias	nr	nr	nr	nr
Indeterminate sex	nr	nr	nr	nr
Renal agenesis	19	4	nr	2.49
Cystic kidney	28	2	nr	3.25
Bladder exstrophy	2	1	nr	0.33
Polydactyly, preaxial	65	1	nr	7.15
Total Limb reduction defects (include unspecified)	43	3	nr	4.99
Transverse	3	1	nr	0.43
Preaxial	13	0	nr	1.41
Postaxial	2	0	nr	0.22
Intercalary	12	0	nr	1.30
Mixed	12	2	nr	1.52
Unspecified	1	0	nr	0.11
Diaphragmatic hernia	53	8	nr	6.61
Omphalocele	25	7	nr	3.47
Gastroschisis	23	0	nr	2.49
Unspecified Omphalocele/Gastroschisis	1	1	nr	0.22
Prune belly sequence	2	0	nr	0.22
Trisomy 13	9	5	nr	1.52
Trisomy 18	56	29	nr	9.21
Down syndrome, all ages (include age unknown)	98	3	nr	10.95
<20	0	0	nr	0.00
20-24	3	0	nr	3.73
25-29	10	1	nr	4.66
30-34	18	0	nr	5.39
35-39	45	1	nr	21.31
40+	20	1	nr	46.77
unknown	0	0	nr	---

nr = not reported

Japan: JAOG, Previous years rates 1974 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

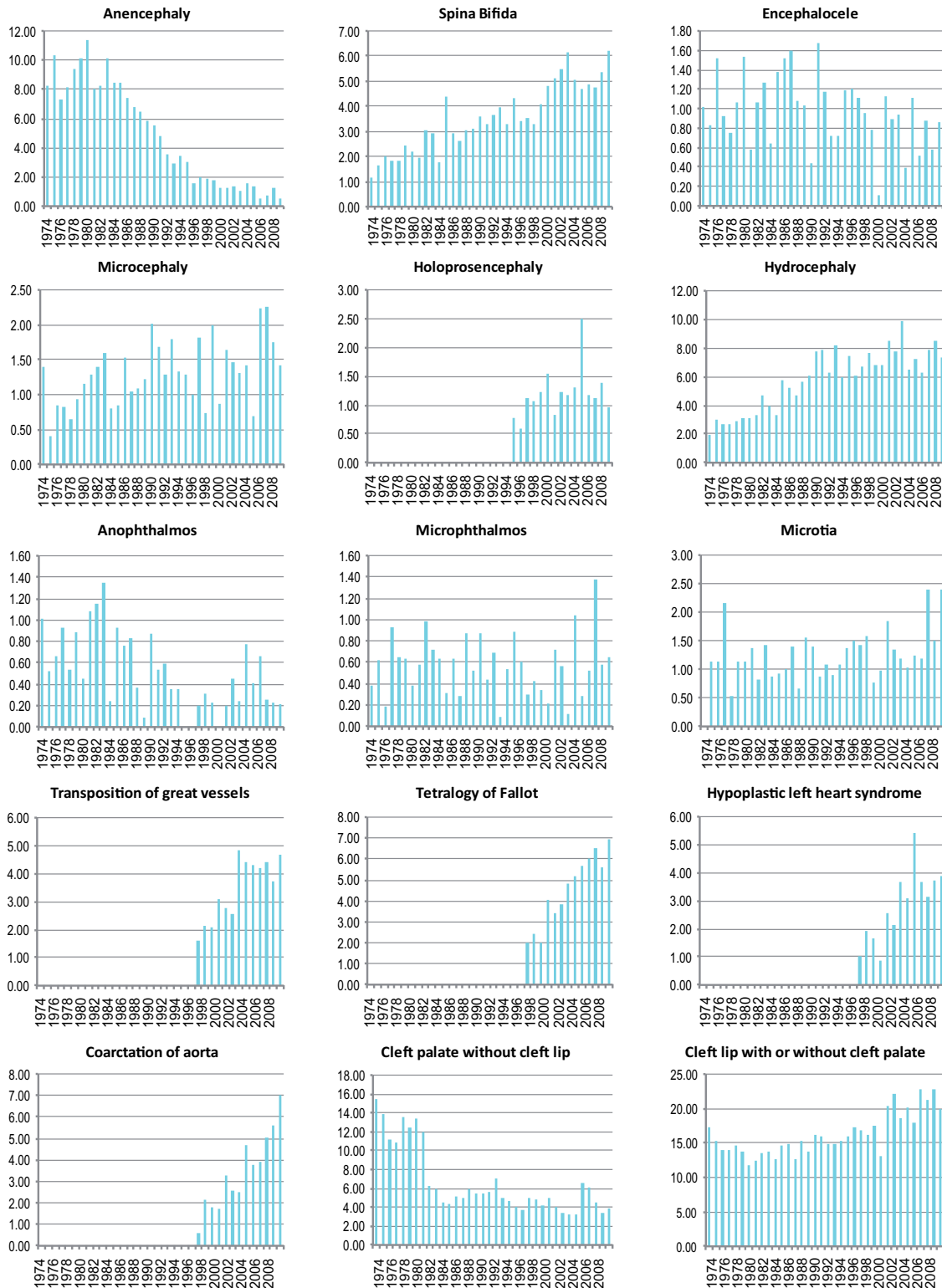
	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	630,508	668,362	685,695	551,995	484,401	439,875	406,250
Anencephaly	9.01	9.32	7.03	4.06	2.09	1.27	0.89
Spina bifida	1.90	2.35	3.19	3.55	3.74	5.32	5.22
Encephalocele	1.03	1.03	1.34	0.94	1.05	0.70	0.79
Microcephaly	0.84	1.24	1.15	1.63	1.36	1.34	1.67
Holoprosencephaly	nr	nr	nr	nr	0.95	1.20	1.40
Hydrocephaly	2.78	3.65	5.44	7.25	6.92	7.91	7.48
Anophthalmos	0.76	0.84	0.61	0.54	0.14	0.32	0.34
Microphthalmos	0.57	0.64	0.53	0.53	0.52	0.52	0.69
Unspecified Anophthalmos/Microphthalmos	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anotia	nr	nr	nr	nr	nr	nr	0.00
Microtia	1.06	1.14	1.09	1.07	1.34	1.30	1.77
Unspecified Anotia/Microtia	nr	nr	nr	nr	nr	nr	0.00
Transposition of great vessels	nr	nr	nr	nr	1.94*	3.48	4.26
Tetralogy of Fallot	nr	nr	nr	nr	2.15*	4.21	6.18
Hypoplastic left heart syndrome	nr	nr	nr	nr	1.52*	2.43	3.94
Coarctation of aorta	nr	nr	nr	nr	1.48*	2.91	5.17
Choanal atresia, bilateral	nr	nr	nr	nr	nr	nr	0.00
Cleft palate without cleft lip	12.74	8.71	5.18	5.53	4.38	3.82	4.82
Cleft lip with or without cleft palate	14.62	12.79	14.25	15.47	16.78	18.89	20.97
Oesophageal atresia/stenosis with or without fistula	1.19*	1.03	1.60	2.25	2.81	4.39	4.60
Small intestine atresia/stenosis	nr	nr	nr	nr	4.44*	5.66	7.68
Anorectal atresia/stenosis	4.04	3.55	4.24	4.17	4.38	5.46	6.70
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr	nr	nr	nr
Hypospadias	1.74	2.21	2.36	3.10	2.93	4.18	4.36
Epispadias	nr	nr	nr	nr	nr	nr	nr
Indeterminate sex	nr	nr	nr	nr	nr	nr	nr
Renal agenesis	nr	nr	0.95*	1.58	1.49	2.14	2.39
Cystic kidney	nr	nr	nr	nr	2.79*	4.30	3.94
Bladder exstrophy	0.17*	0.13	0.16	0.13	0.17	0.30	0.22
Polydactyly, preaxial	nr	nr	5.28*	6.54	6.19	6.48	6.62
Total Limb reduction defects (include unspecified)	nr	nr	nr	3.23*	3.32	3.43	3.79
Transverse	nr	nr	nr	0.36*	0.37	0.32	0.30
Preaxial	nr	nr	nr	0.58*	0.50	0.66	0.84
Postaxial	nr	nr	nr	0.17*	0.33	0.27	0.49
Intercalary	nr	nr	nr	1.39*	1.09	0.86	0.81
Mixed	nr	nr	nr	0.40*	0.64	0.82	1.03
Unspecified	nr	nr	nr	0.31*	0.39	0.50	0.32
Diaphragmatic hernia	nr	nr	2.25*	2.92	3.67	6.16	5.81
Omphalocele	0.97	1.38	2.63	3.32	3.24	3.52	3.94
Gastroschisis	1.08	0.84	1.18	1.59	1.88	2.55	2.56
Unspecified Omphalocele/Gastroschisis	0.00	0.00	0.03	0.42	0.19	0.34	0.20
Prune belly sequence	nr	nr	nr	nr	0.04	0.02	0.10
Trisomy 13	nr	nr	nr	0.36*	0.78	1.34	2.04
Trisomy 18	nr	nr	nr	2.33*	3.34	7.66	8.66
Down syndrome, all ages (include age unknown)	3.37*	4.94	5.94	6.05	8.26	9.64	11.57
<20	nr	nr	nr	8.33*	0.00	7.32	1.90
20-24	nr	nr	nr	2.07*	3.18	3.17	4.14
25-29	nr	nr	nr	4.08*	5.24	4.93	5.60
30-34	nr	nr	nr	4.96*	8.38	8.07	8.63
35-39	nr	nr	nr	16.65*	17.37	20.57	21.78
40-44	nr	nr	nr	67.33*	50.31	57.46	42.52
unknown	---	---	---	---	---	---	---

nr = not reported

* data include less than 5 years or 6 years

Japan: JAOG

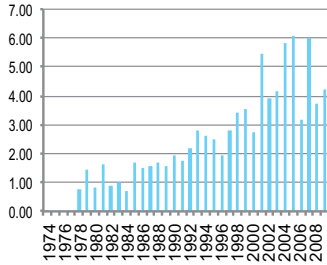
Time trends 1974-2009 (Birth prevalence rates per 10,000)



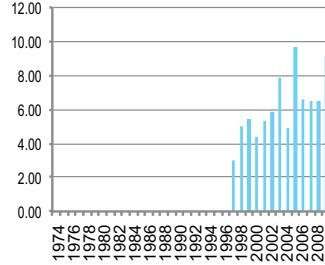
Note: ■ L+S rates

Japan: JAOG

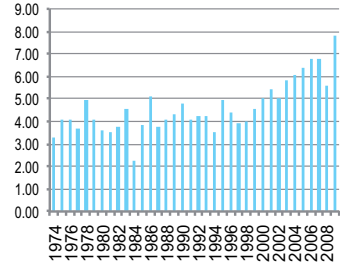
Oesophageal atresia/stenosis with or without fistula



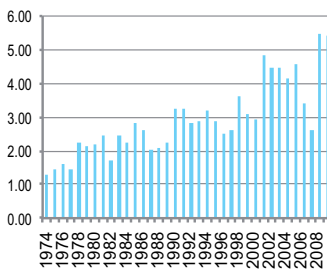
Small intestine atresia/stenosis



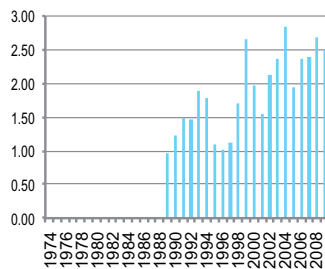
Anorectal atresia/stenosis



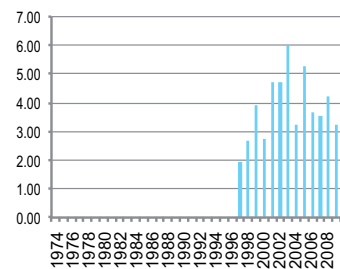
Hypospadias



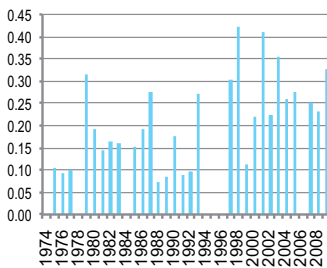
Renal agenesis



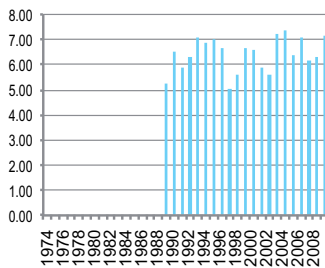
Cystic kidney



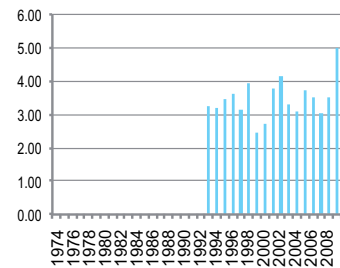
Bladder exstrophy



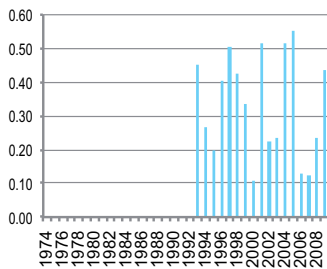
Polydactyly, preaxial



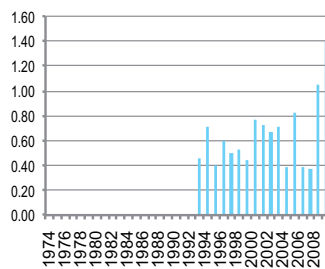
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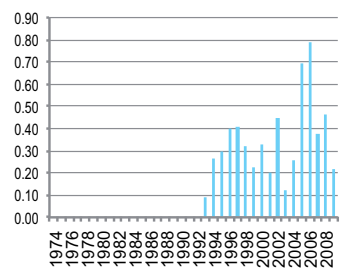
Limb reduction defects - transverse



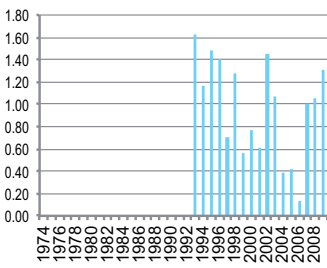
Limb reduction defects - preaxial



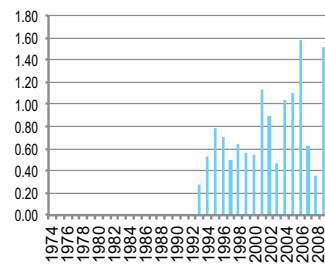
Limb reduction defects - postaxial



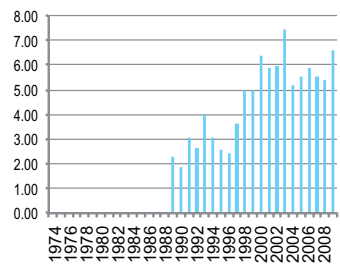
Limb reduction defects - intercalary



Limb reduction defects - mixed

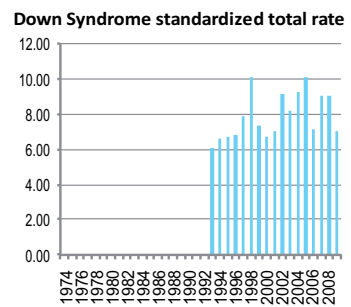
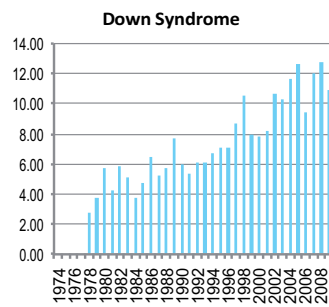
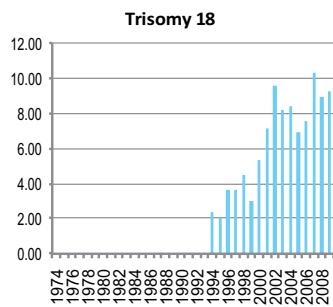
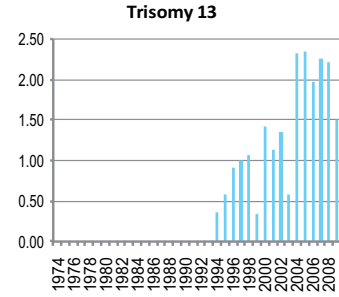
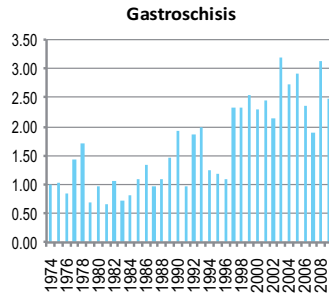
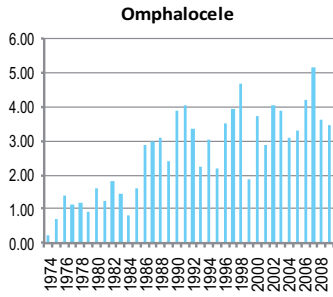


Diaphragmatic hernia



Note: ■ L+S rates

Japan: JAOG



Note: ■ L+S rates

Malta: MCAR

Malta Congenital Anomalies Register

History:

The register started in 1985 as a research project of the University of Malta. It started as a hospital based register collecting data regarding congenital anomalies diagnosed in babies born at the main general hospital. It became a member of EUROCAT in 1986. Funding for the research project was stopped in 1995 and in 1997 the Department of Health Information assumed the functions of data collection increasing coverage to all hospitals on the islands making it a population based register. The Register was accepted as an associate member of the Clearinghouse in 2000.

Size and coverage:

The registry is population based and now covers 4,000 births per year.

Legislation and funding:

The registry is run and funded by the state Department of Health Information and Research. Reporting is not statutory.

Sources of ascertainment:

The registry employs active data collection from multiple sources including delivery and obstetric

wards, doctors' reporting, cardiac lab records, genetics clinic records, National Mortality Register, National Obstetric Information Systems database, Hospital Activity Analysis databases, National Cancer Register and the Hypothyroid Screening Programme.

Exposure information:

Information regarding maternal exposure to medicinal drugs, smoking, alcohol and drug abuse as well as parental occupation are collected for all malformed infants and fetuses.

Background information:

Epidemiological background data on all births are available from the National Obstetric Information Systems database and vital statistics.

Addresses and Staff:

Miriam Gatt, MD, Programme Director
Malta Congenital Anomalies Registry
Department of Health Information and Research
95, Guardamangia Hill
Guardamangia PTA 1313, Malta

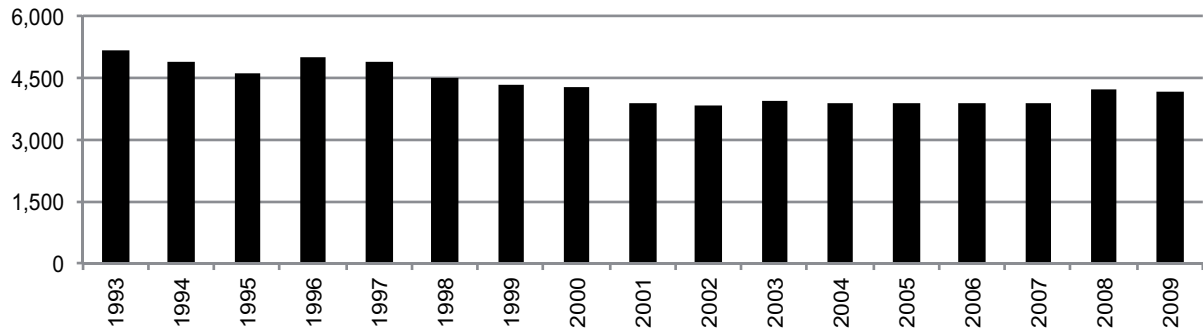
Phone: 356 25599000

Fax: 356 25599385

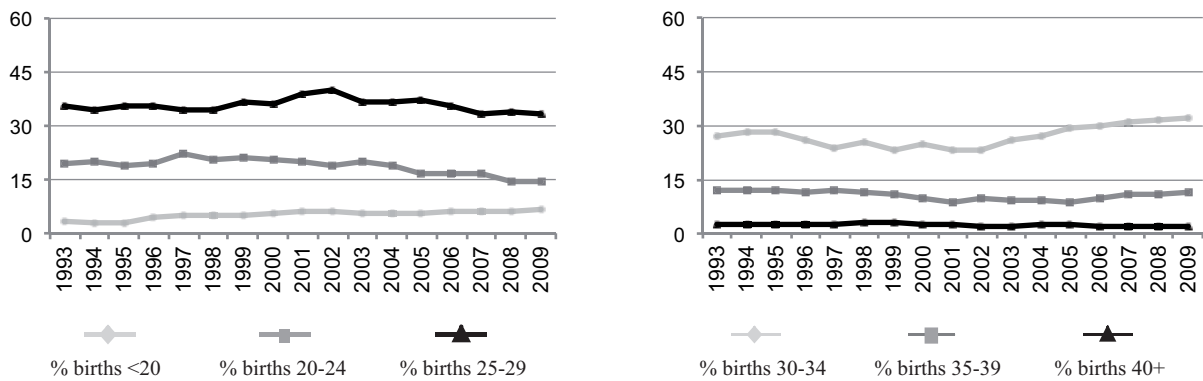
E-mail: miriam.gatt@gov.mt

Malta: MCAR

Total births by year



Percentage of births by year and maternal age



Malta: MCAR, 2009

Live births (LB)	4,152
Stillbirths (SB)	28
Total births	4,180
Number of terminations of pregnancy (ToP) for birth defects	not permitted

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	1		2.39
Spina bifida	4	0		9.57
Encephalocele	0	0		0.00
Microcephaly	0	1		2.39
Holoprosencephaly	0	0		0.00
Hydrocephaly	0	0		0.00
Anophthalmos	0	0		0.00
Microphthalmos	0	0		0.00
Unspecified Anophthalmos/Microphthalmos	0	0		0.00
Anotia	0	0		0.00
Microtia	0	0		0.00
Unspecified Anotia/Microtia	0	0		0.00
Transposition of great vessels	1	0		2.39
Tetralogy of Fallot	2	0		4.78
Hypoplastic left heart syndrome	4	0		9.57
Coarctation of aorta	1	0		2.39
Choanal atresia, bilateral	0	0		0.00
Cleft palate without cleft lip	6	0		14.35
Cleft lip with or without cleft palate	1	0		2.39
Oesophageal atresia/stenosis with or without fistula	1	0		2.39
Small intestine atresia/stenosis	1	0		2.39
Anorectal atresia/stenosis	0	1		2.39
Undescended testis (36 weeks of gestation or later)	nr	nr		nr
Hypospadias	6	0		14.35
Epispadias	0	0		0.00
Indeterminate sex	1	0		2.39
Renal agenesis	1	0		2.39
Cystic kidney	2	1		7.18
Bladder exstrophy	0	0		0.00
Polydactyly, preaxial (*)	12	0		28.71
Total Limb reduction defects (include unspecified)	1	0		2.39
Transverse	nr	nr		nr
Preaxial	nr	nr		nr
Postaxial	nr	nr		nr
Intercalary	nr	nr		nr
Mixed	nr	nr		nr
Unspecified	nr	nr		nr
Diaphragmatic hernia	0	0		0.00
Omphalocele	2	1		7.18
Gastroschisis	0	0		0.00
Unspecified Omphalocele/Gastroschisis	0	0		0.00
Prune belly sequence	0	0		0.00
Trisomy 13	1	0		2.39
Trisomy 18	2	0		4.78
Down syndrome, all ages (include age unknown)	7	0		16.75
<20	0	0		0.00
20-24	0	0		0.00
25-29	0	0		0.00
30-34	4	0		30.01
35-39	1	0		20.70
40-44	2	0		263.16
45+	0	0		0.00
unknown	0	0		---

nr = not reported

(*) All polydactyly included

Malta: MCAR, Previous years rates 1993 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994*	1995-1999	2000-2004	2005-2009
Total births				10,035	23,325	19,803	20,062
Anencephaly				3.99	4.72	1.51	1.50
Spina bifida				6.98	7.29	5.05	8.47
Encephalocele				1.99	1.71	2.02	1.99
Microcephaly				4.98	3.00	4.54	3.49
Holoprosencephaly				1.00	1.29	0.50	0.50
Hydrocephaly				6.98	5.57	3.03	2.99
Anophthalmos				1.00	0.00	0.00	0.00
Microphthalmos				0.00	1.71	1.01	0.00
Unspecified Anophthalmos/Microphthalmos				0.00	0.00	0.00	0.00
Anotia				0.00	0.00	0.00	0.00
Microtia				0.00	0.00	0.00	0.00
Unspecified Anotia/Microtia				0.00	0.00	0.00	0.00
Transposition of great vessels				2.99	4.72	4.54	5.48
Tetralogy of Fallot				1.99	4.72	3.53	4.49
Hypoplastic left heart syndrome				1.00	1.71	3.53	4.98
Coarctation of aorta				7.97	4.29	6.06	3.99
Choanal atresia, bilateral				1.99	1.29	1.01	0.50
Cleft palate without cleft lip				14.95	15.86	8.08	16.45
Cleft lip with or without cleft palate				9.97	8.57	8.58	9.47
Oesophageal atresia/stenosis with or without fistula				1.99	1.29	2.02	2.49
Small intestine atresia/stenosis				0.00	2.14	2.02	1.50
Anorectal atresia/stenosis				1.99	5.14	5.55	2.99
Undescended testis (36 weeks of gestation or later)				nr	nr	nr	nr
Hypospadias				11.96	24.44	45.45	24.92
Epispadias				1.99	0.86	0.00	0.00
Indeterminate sex				1.99	0.86	1.01	2.49
Renal agenesis				2.99	3.00	4.54	3.49
Cystic kidney				3.99	4.29	2.02	3.99
Bladder exstrophy				0.00	0.00	0.00	0.00
Polydactyly, preaxial				13.95	16.72	17.17	16.95
Total Limb reduction defects (include unspecified)				6.98	4.72	7.57	5.98
Transverse				nr	nr	nr	nr
Preaxial				nr	nr	nr	nr
Postaxial				nr	nr	nr	nr
Intercalary				nr	nr	nr	nr
Mixed				nr	nr	nr	nr
Unspecified				nr	nr	nr	nr
Diaphragmatic hernia				3.99	6.43	4.04	4.98
Omphalocele				2.99	2.14	1.51	3.99
Gastroschisis				1.99	0.43	1.51	0.50
Unspecified Omphalocele/Gastroschisis				0.00	0.00	0.00	0.00
Prune belly sequence				1.00	0.43	0.00	0.00
Trisomy 13				0.00	0.00	1.01	1.00
Trisomy 18				1.00	3.86	5.05	2.99
Down syndrome, all ages (include age unknown)				21.92	16.29	19.19	19.94
<20				0.00	9.12	8.64	15.74
20-24				0.00	0.00	0.00	6.26
25-29				8.55	3.65	9.35	4.32
30-34				14.54	22.12	22.32	14.63
35-39				84.32	44.26	64.10	58.14
40-44				204.92	130.72	155.21	255.75
45+				0.00	400.00	0.00	800.00
unknown				---	---	---	---

nr = not reported

* data include less than 5 years

Monitoring Systems

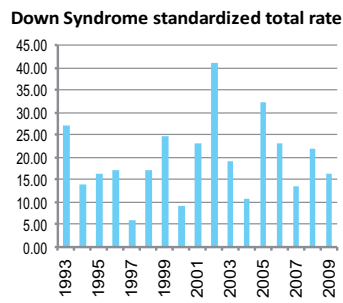
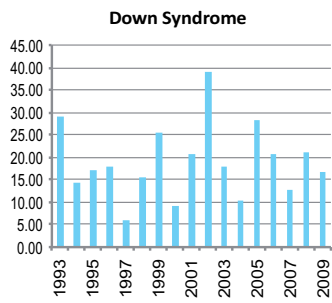
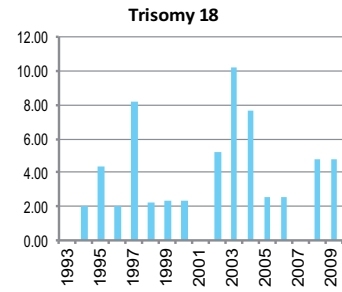
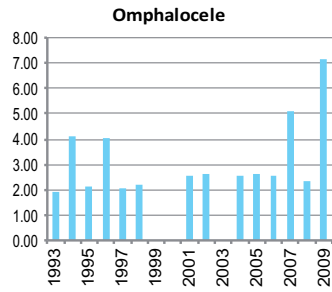
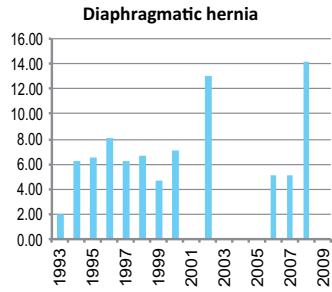
Malta: MCAR

Time trends 1993-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates

Malta: MCAR



Mexico: RYVEMCE

Mexican Registry and Epidemiological Surveillance of External Congenital Malformations

History:

The Programme was started in 1978. The Programme became a full member of the ICBDSR in 1980.

Size and coverage:

Reports are obtained from 21 hospitals in 11 cities in Mexico. Participation is voluntary. The annual number of births is approximately 62,000, about 3.5% of all births in Mexico. Stillbirths of 20 weeks or more gestation and/or at least 500g birthweight are included.

Legislation and funding:

The Programme is a research Programme and is funded by research grants.

Sources of ascertainment:

Reports are obtained from the delivery units and pediatric departments of the participating hospitals.

Exposure information:

The mother of each reported infant and the mother of a control infant-the next non-malformed infant born at that hospital with the same sex as the proband - are interviewed on various exposures, including drug usage and parental occupation.

Background information:

The total number of births in the hospitals is known.

Addresses and Staff:

Oswaldo Mutchinick, MD, Programme Director
RYVEMCE Departamento de Genética, Inst.
Nacional de Ciencias Médicas y Nutrición
Vasco de Quiroga 15, Talpan, C.P. 14000
Mexico DF, Mexico

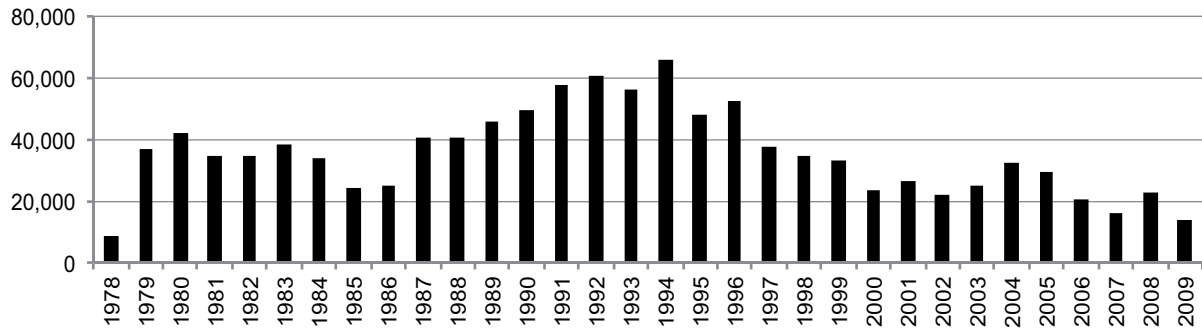
Phone: 52-55-54870900 (ext 2514 and 2515)

Fax: 52-55-56556138

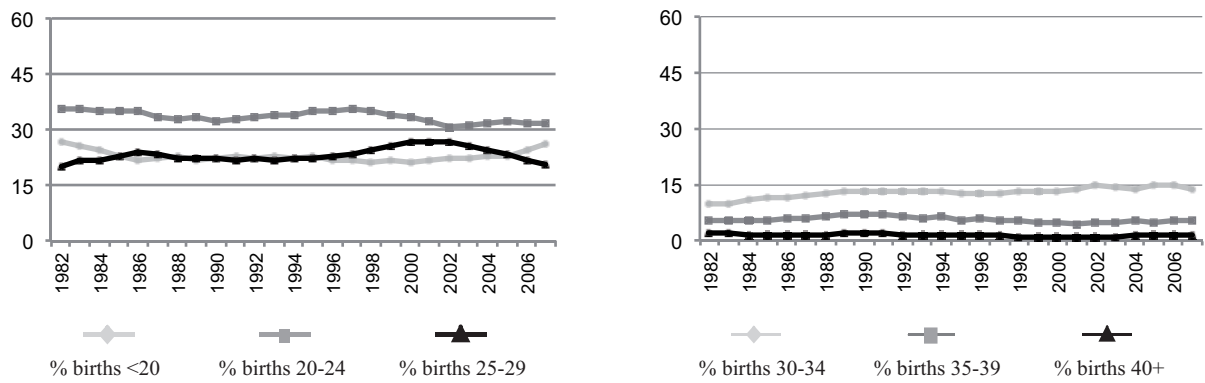
E-mail: osvaldo@servidor.unam.mx

Mexico: RYVEMCE

Total births by year



Percentage of births by year and maternal age



Mexico: RYVEMCE, 2009

Live births (LB)	13,211
Stillbirths (SB)	331
Total births	13,542
Number of terminations of pregnancy (ToP) for birth defects	not permitted

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	1	3		2.95
Spina bifida	7	0		5.17
Encephalocele	3	0		2.22
Microcephaly	2	0		1.48
Holoprosencephaly	3	2		3.69
Hydrocephaly	5	1		4.43
Anophthalmos	nr	nr		nr
Microphthalmos	nr	nr		nr
Unspecified Anophthalmos/Microphthalmos	3	2		3.69
Anotia	nr	nr		nr
Microtia	nr	nr		nr
Unspecified Anotia/Microtia	22	1		16.98
Transposition of great vessels	1	0		0.74
Tetralogy of Fallot	0	0		0.00
Hypoplastic left heart syndrome	0	0		0.00
Coarctation of aorta	1	0		0.74
Choanal atresia, bilateral	0	0		0.00
Cleft palate without cleft lip	2	0		1.48
Cleft lip with or without cleft palate	18	2		14.77
Oesophageal atresia/stenosis with or without fistula	2	1		2.22
Small intestine atresia/stenosis	3	0		2.22
Anorectal atresia/stenosis	7	0		5.17
Undescended testis (36 weeks of gestation or later)	nr	nr		nr
Hypospadias	5	0		3.69
Epispadias	0	0		0.00
Indeterminate sex	4	2		4.43
Renal agenesis	1	2		2.22
Cystic kidney	0	0		0.00
Bladder exstrophy	0	0		0.00
Polydactyly, preaxial	15	0		11.08
Total Limb reduction defects (include unspecified)	7	1		5.91
Transverse	2	0		1.48
Preaxial	2	1		2.22
Postaxial	1	0		0.74
Intercalary	1	0		0.74
Mixed	1	0		0.74
Unspecified	0	0		0.00
Diaphragmatic hernia	1	0		0.74
Omphalocele	0	1		0.74
Gastroschisis	8	1		6.65
Unspecified Omphalocele/Gastroschisis	0	0		0.00
Prune belly sequence	0	0		0.00
Trisomy 13	0	0		0.00
Trisomy 18	0	1		0.74
Down syndrome, all ages (include age unknown)	25	1		19.20
<20	5	0		0.11
20-24	5	1		0.16
25-29	4	0		0.17
30-34	2	0		0.12
35-39	5	0		0.62
40+	4	0		3.47
unknown	0	0		---

nr = not reported

Mexico: RYVEMCE, Previous years rates 1980 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		183,228	176,079	290,075	205,529	129,044	102,175
Anencephaly		18.12	19.99	16.58	14.26	6.90	4.60
Spina bifida		12.39	16.19	15.82	13.62	8.21	5.77
Encephalocele		3.27	3.18	2.28	2.63	1.63	1.57
Microcephaly		2.35	3.18	1.69	1.95	1.70	2.15
Holoprosencephaly		0.11	0.23	0.90	0.54	1.63	1.96
Hydrocephaly		5.89	4.49	6.21	5.64	6.97	6.66
Anophthalmos		2.57	1.59	2.00	0.97	2.25	1.36
Microphthalmos		nr	nr	nr	nr	nr	nr
Unspecified Anophthalmos/Microphthalmos		nr	nr	nr	nr	nr	3.44
Anotia		nr	nr	nr	nr	nr	nr
Microtia		nr	nr	nr	nr	nr	nr
Unspecified Anotia/Microtia		6.77	6.42	6.55	6.47	8.99	9.59
Transposition of great vessels		0.05	0.11	0.14	0.19	0.31	0.78
Tetralogy of Fallot		0.00	0.00	0.17	0.19	0.23	0.20
Hypoplastic left heart syndrome		0.00	0.00	0.03	0.00	0.23	0.20
Coarctation of aorta		0.05	0.06	0.03	0.10	0.00	0.39
Choanal atresia, bilateral		0.27	0.34	0.52	0.19	0.23	0.10
Cleft palate without cleft lip		3.27	3.52	4.00	2.53	2.63	2.84
Cleft lip with or without cleft palate		13.26	12.32	12.20	12.75	15.50	13.02
Oesophageal atresia/stenosis with or without fistula		1.26	1.76	2.41	1.99	2.79	2.74
Small intestine atresia/stenosis		0.65	0.85	1.34	1.22	2.17	2.25
Anorectal atresia/stenosis		3.93	4.43	5.27	4.28	5.11	4.40
Undescended testis (36 weeks of gestation or later)		nr	nr	nr	nr	nr	nr
Hypospadias		4.20	3.75	5.17	3.89	3.64	3.91
Epispadias		nr	nr	nr	nr	0.00	0.20
Indeterminate sex		1.80	1.70	2.69	2.04	2.79	3.23
Renal agenesis		0.38	0.40	0.66	0.39	0.54	1.37
Cystic kidney		0.33	0.57	0.90	0.78	1.78	0.78
Bladder exstrophy		0.49	0.40	0.45	0.44	0.23	0.10
Polydactyly, preaxial		11.84	13.80	12.20	12.65	13.41	9.30
Total Limb reduction defects (include unspecified)		6.11	6.87	6.07	5.16	6.66	5.97
Transverse		nr	nr	nr	nr	3.56	3.03
Preaxial		nr	nr	nr	nr	1.32	0.78
Postaxial		nr	nr	nr	nr	0.31	0.59
Intercalary		nr	nr	nr	nr	0.54	0.29
Mixed		nr	nr	nr	nr	0.85	0.88
Unspecified		nr	nr	nr	nr	0.08	0.39
Diaphragmatic hernia		0.55	0.80	1.10	0.92	1.32	1.08
Omphalocele		1.58	1.65	1.69	1.46	2.40	1.76
Gastroschisis		0.71	1.19	2.07	2.63	5.11	5.58
Unspecified Omphalocele/Gastroschisis		nr	nr	nr	nr	0.00	0.00
Prune belly sequence		1.20	1.08	1.07	0.73	0.70	0.29
Trisomy 13		0.33	0.34	0.14	0.15	0.31	0.88
Trisomy 18		0.65	0.57	0.38	0.15	0.31	0.78
Down syndrome, all ages (include age unknown)		12.88	13.01	14.44	12.21	10.85	12.33
<20		7.33	8.51	9.65	6.91	5.23	0.54
20-24		6.53	6.27	8.02	5.25	6.57	0.65
25-29		6.61	8.30	12.14	9.07	5.55	0.57
30-34		19.01	16.57	14.70	11.81	12.12	0.76
35-39		46.00	45.76	40.70	46.70	55.55	2.69
40-44		133.50	135.14	137.31	201.11	157.15	14.18
45+		137.46*	78.53*	226.93	176.47*	nr	123.46*
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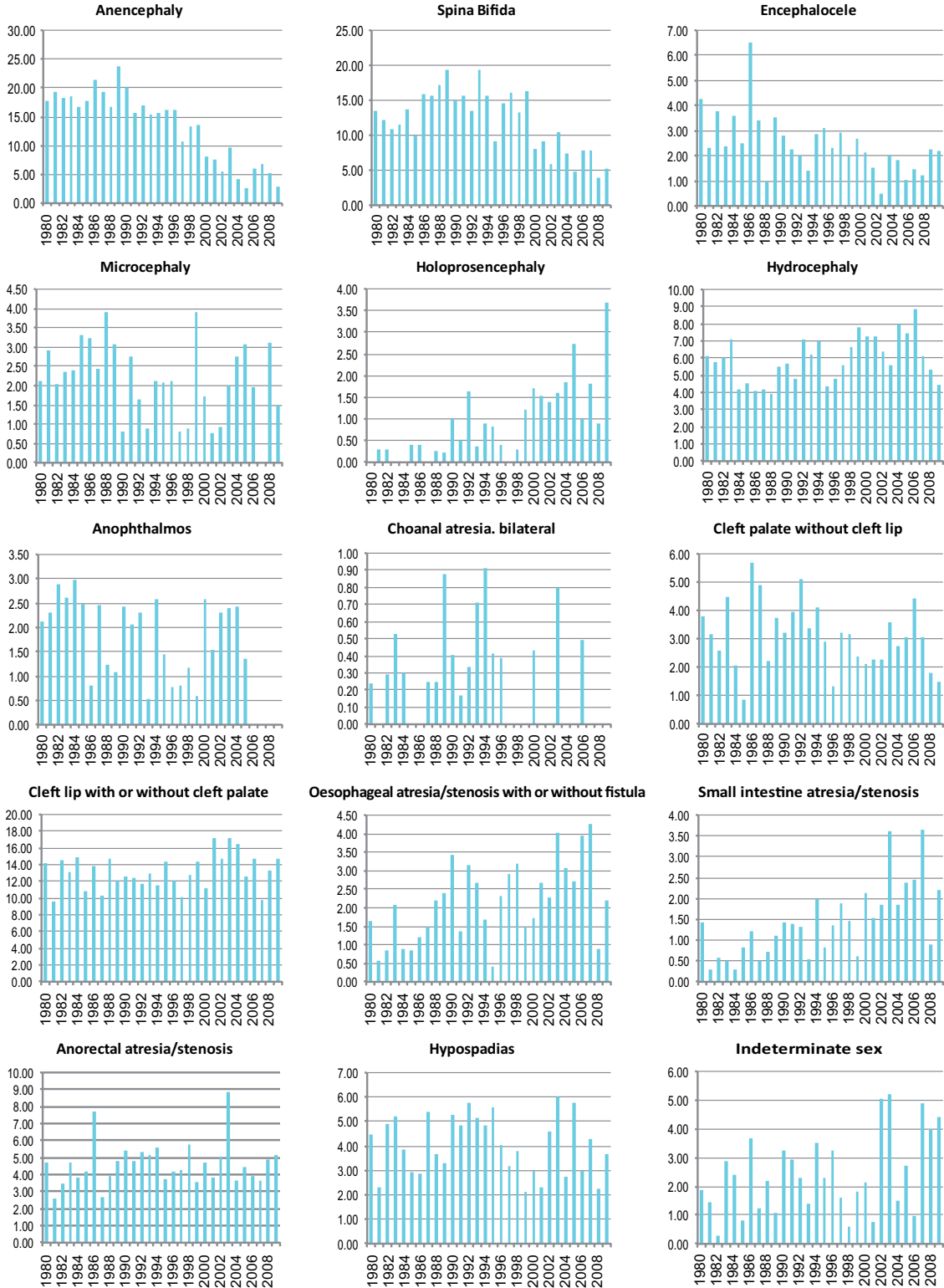
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* data include less than 5 years

Monitoring Systems

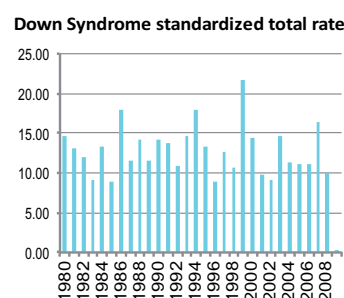
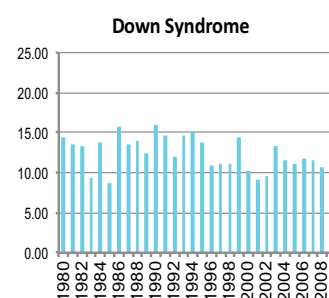
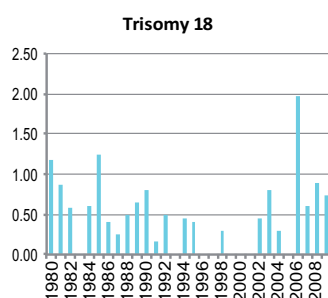
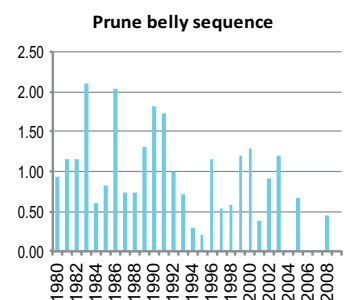
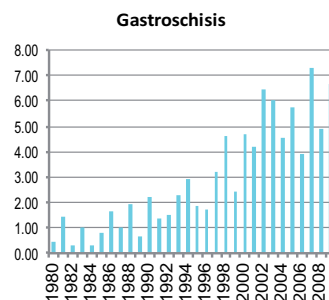
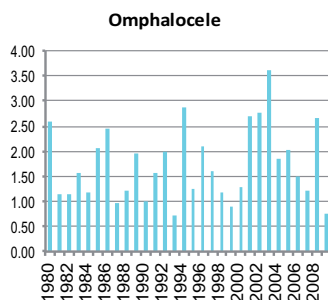
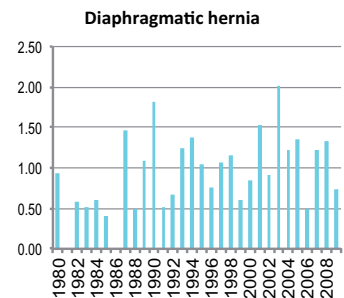
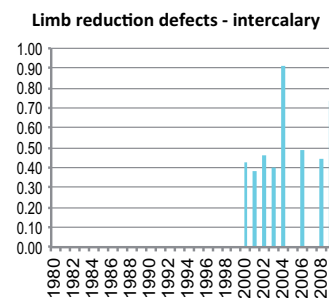
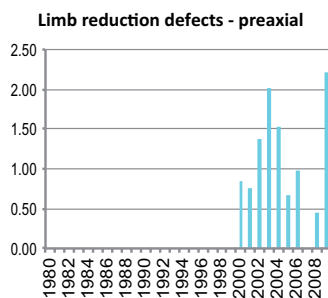
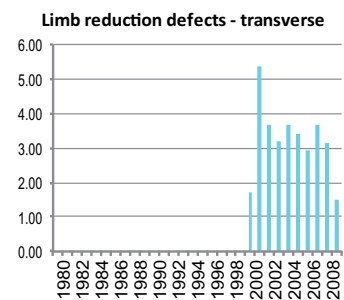
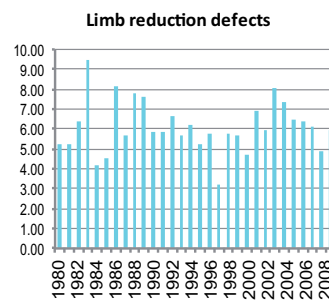
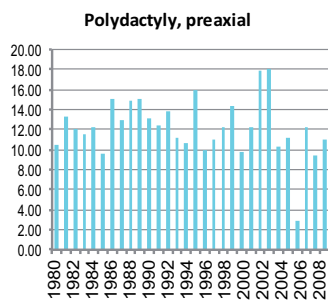
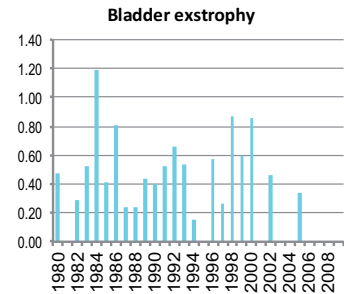
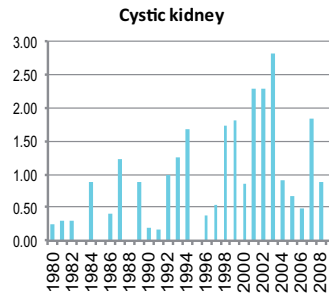
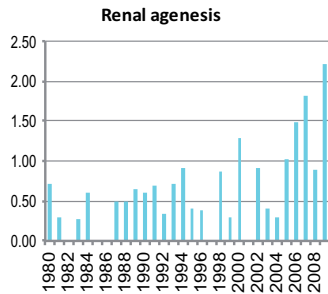
Mexico: RYVEMCE

Time trends 1980-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates

Mexico: RYVEMCE



Note: ■ L+S rates

New Zealand

New Zealand Birth Defects Registry

History:

The Registry (previously the New Zealand Birth Defects Monitoring Programme) began in 1975 and became a full member of the ICBDSR in 1979.

Size and coverage:

The Registry includes all live and fetal deaths (stillbirths) with a diagnosed birth defect in New Zealand. Livebirths are those delivered or treated in a publicly funded hospital and only these data are included in the quarterly and annual reports to the ICBDSR. There is usually an 18 month delay in receiving data on fetal deaths from the national perinatal and infant mortality databases. A voluntary system of collecting data on birth defects present in terminations of pregnancy was implemented in February 2011.

Legislation and funding:

The NZBDR is operated by Centre for Public Health Research, Massey University, under contract to the Ministry of Health.

Sources of ascertainment:

Ascertainment is from discharge records of publicly funded hospitals, fetal death notification forms, and terminations of pregnancy.

Exposure information:

Limited exposure information are currently available.

Background information:

General epidemiological characteristics for all births are available.

Addresses and Staff:

Associate Professor Barry Borman, Director
New Zealand Birth Defects Registry
Centre for Public Health Research
Massey University
PO Box 756
Wellington 6140
New Zealand

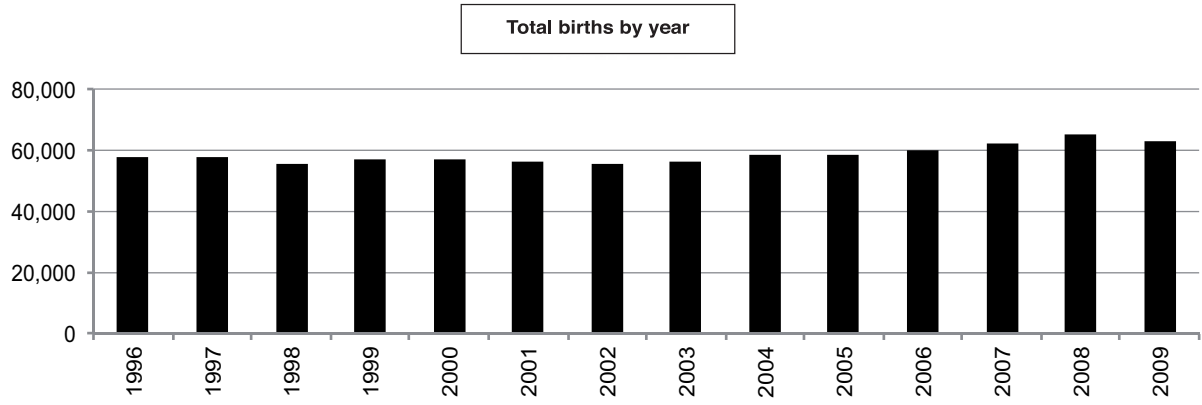
Phone: +64-4-801-5799

Fax: +64-4-380-0600

E-mail: b.borman@massey.ac.nz

Website: www.nzbdr.ac.nz

New Zealand



New Zealand, 2009

Live births (LB)	62,543
Stillbirths (SB)	384
Total births	62,927
Number of terminations of pregnancy (ToP) for birth defects	nr

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	3	nr	nr	0.48
Spina bifida	9	nr	nr	1.43
Encephalocele	2	nr	nr	0.32
Microcephaly	17	nr	nr	2.70
Holoprosencephaly	nr	nr	nr	nr
Hydrocephaly	21	nr	nr	3.34
Anophthalmos	0	nr	nr	0.00
Microphthalmos	3	nr	nr	0.48
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	nr	nr	nr	nr
Microtia	nr	nr	nr	nr
Unspecified Anotia/Microtia	nr	nr	nr	nr
Transposition of great vessels	29	nr	nr	4.61
Tetralogy of Fallot	29	nr	nr	4.61
Hypoplastic left heart syndrome	2	nr	nr	0.32
Coarctation of aorta	17	nr	nr	2.70
Choanal atresia, bilateral	9	nr	nr	1.43
Cleft palate without cleft lip	63	nr	nr	10.01
Cleft lip with or without cleft palate	48	nr	nr	7.63
Oesophageal atresia/stenosis with or without fistula	10	nr	nr	1.59
Small intestine atresia/stenosis	21	nr	nr	3.34
Anorectal atresia/stenosis	10	nr	nr	1.59
Undescended testis (36 weeks of gestation or later)	220	nr	nr	34.96
Hypospadias	134	nr	nr	21.29
Epispadias	nr	nr	nr	nr
Indeterminate sex	4	nr	nr	0.64
Renal agenesis	15	nr	nr	2.38
Cystic kidney	32	nr	nr	5.09
Bladder exstrophy	0	nr	nr	0.00
Polydactyly, preaxial	66	nr	nr	10.49
Total Limb reduction defects (include unspecified)	32	nr	nr	5.09
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	nr	nr	nr	nr
Omphalocele	28	nr	nr	4.45
Gastroschisis	7	nr	nr	1.11
Unspecified Omphalocele/Gastroschisis	6	nr	nr	0.95
Prune belly sequence	nr	nr	nr	nr
Trisomy 13	3	nr	nr	0.48
Trisomy 18	4	nr	nr	0.64
Down syndrome, all ages (include age unknown)	49	nr	nr	7.79
<20	nr	nr	nr	nr
20-24	nr	nr	nr	nr
25-29	nr	nr	nr	nr
30-34	nr	nr	nr	nr
35-39	nr	nr	nr	nr
40-44	nr	nr	nr	nr
45+	nr	nr	nr	nr
unknown	nr	nr	nr	---

nr = not reported

New Zealand, Previous years rates 1980 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		244,840	271,170	295,872	285,789	283,649	307,807
Anencephaly		5.23	2.77	0.74	0.45	0.39	0.36
Spina bifida		11.15	6.64	4.02	3.04	2.08	2.08
Encephalocele		0.60*	0.75*	nr	0.35	0.39	0.52
Microcephaly		nr	nr	nr	2.94*	2.71	2.79
Holoprosencephaly		nr	nr	nr	nr	nr	nr
Hydrocephaly		4.33	3.65	2.50	3.43	3.74	3.25
Anophthalmos		nr	nr	nr	nr	0.04	0.16*
Microphthalmos		nr	nr	nr	0.70	0.74	0.44*
Unspecified Anophthalmos/Microphthalmos		nr	nr	nr	nr	0.00	0.25*
Anotia		nr	nr	nr	nr	nr	nr
Microtia		nr	nr	nr	nr	nr	nr
Unspecified Anotia/Microtia		nr	nr	nr	nr	nr	nr
Transposition of great vessels		nr	0.55*	nr	5.09*	4.97	4.45
Tetralogy of Fallot		nr	nr	nr	4.78*	3.98	4.65
Hypoplastic left heart syndrome		nr	0.82*	nr	1.50	1.06	1.07
Coarctation of aorta		nr	nr	nr	1.77*	3.49	2.31
Choanal atresia, bilateral		nr	nr	nr	0.88*	1.13	1.10
Cleft palate without cleft lip		6.37	7.38	5.27	7.52	9.80	8.74
Cleft lip with or without cleft palate		8.99	8.41	4.06	5.42	5.32	6.76
Oesophageal atresia/stenosis with or without fistula		1.67	1.81	2.57	2.06	1.37	1.91*
Small intestine atresia/stenosis		nr	nr	nr	1.62*	2.15*	2.63
Anorectal atresia/stenosis		2.33	2.47	2.87	2.34	2.22	2.40
Undescended testis (36 weeks of gestation or later)		nr	nr	nr	62.32*	77.84	55.03
Hypospadias		13.15	13.39	11.66*	20.96*	29.68	26.09
Epispadias		nr	nr	nr	nr	nr	nr
Indeterminate sex		nr	nr	nr	0.47*	0.63	0.88
Renal agenesis		0.40*	0.33*	nr	3.52*	3.10	2.79
Cystic kidney		nr	nr	nr	5.61*	6.03	5.59
Bladder exstrophy		nr	nr	nr	0.35*	0.28	0.10
Polydactyly, preaxial		nr	nr	nr	5.99*	10.06*	15.17
Total Limb reduction defects (include unspecified)		3.72	3.10	2.43	2.41*	2.93	2.88*
Transverse		nr	nr	nr	nr	nr	nr
Preaxial		nr	nr	nr	nr	nr	nr
Postaxial		nr	nr	nr	nr	nr	nr
Intercalary		nr	nr	nr	nr	nr	nr
Mixed		nr	nr	nr	nr	nr	nr
Unspecified		nr	nr	nr	nr	nr	2.01*
Diaphragmatic hernia		1.39*	1.55*	nr	2.21*	2.54	2.54*
Omphalocele		2.72*	1.59	2.20	nr	nr	4.31*
Gastroschisis		0.05*	0.75*	nr	nr	nr	1.11*
Unspecified Omphalocele/Gastroschisis		nr	0.37*	nr	nr	nr	3.60*
Prune belly sequence		nr	nr	nr	nr	nr	nr
Trisomy 13		nr	nr	nr	0.44*	0.42	0.52
Trisomy 18		nr	nr	nr	0.88*	1.30	1.04
Down syndrome, all ages (include age unknown)		8.82	9.62	9.69*	10.22	11.49	9.65
<20		5.42	5.96*	nr	nr	nr	nr
20-24		4.50	3.68*	nr	nr	nr	nr
25-29		8.12	9.18*	nr	nr	nr	nr
30-34		10.46	8.28*	nr	nr	nr	nr
35-39		32.23	33.29*	nr	nr	nr	nr
40-44		86.39	232.36*	nr	nr	nr	nr
45+		138.89	147.06*	nr	nr	nr	nr
unknown		---	---	---	---	---	---

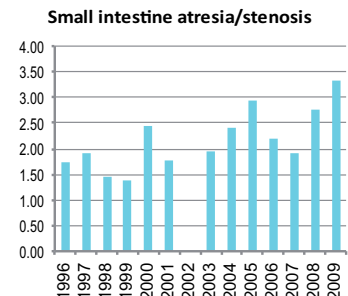
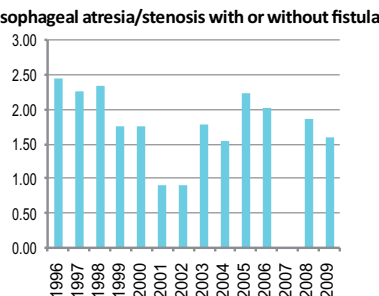
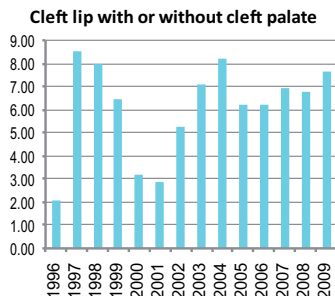
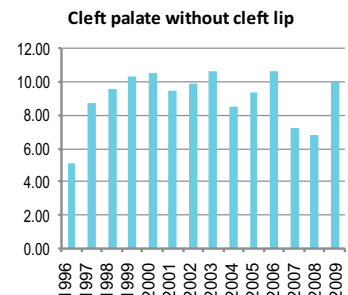
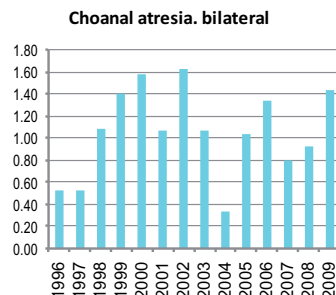
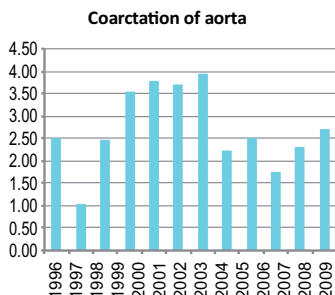
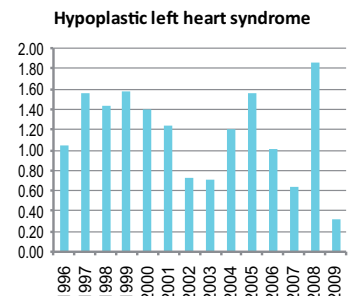
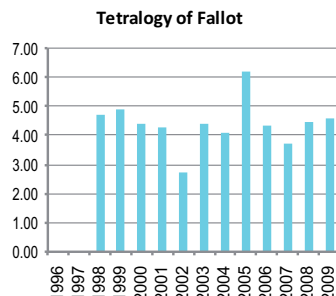
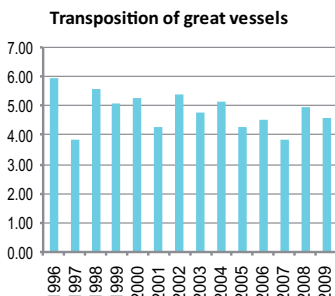
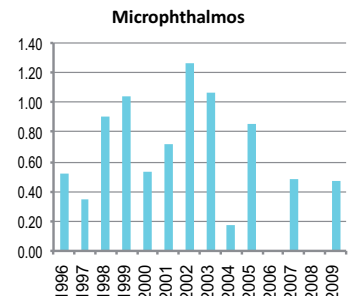
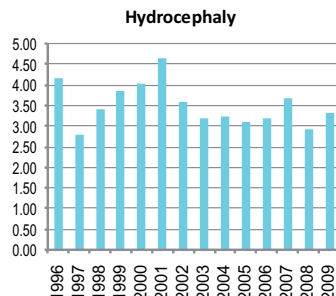
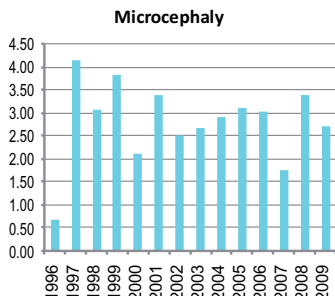
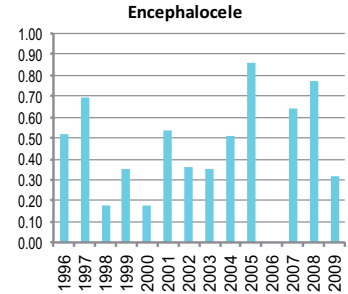
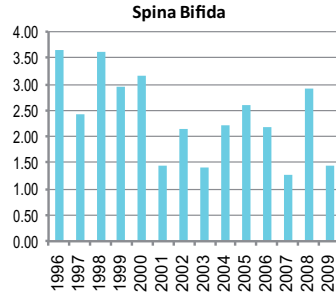
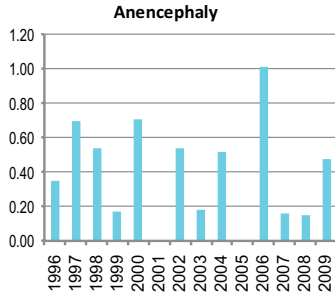
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* data include less than 5 years

Monitoring Systems

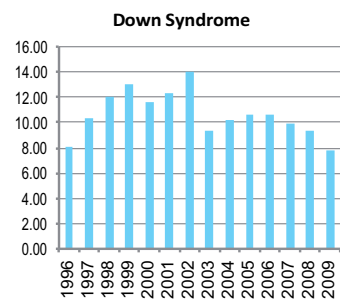
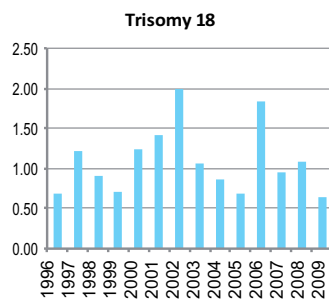
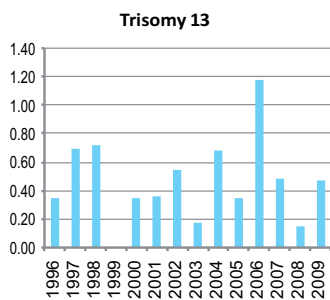
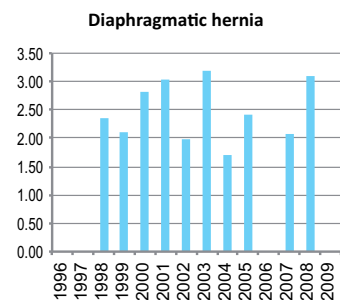
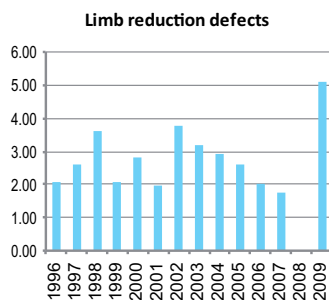
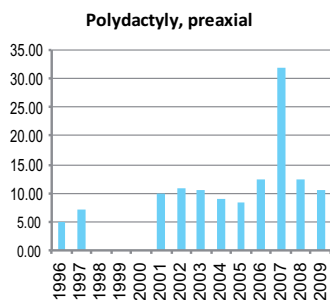
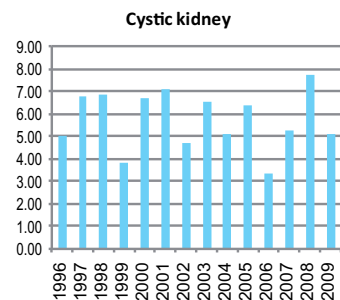
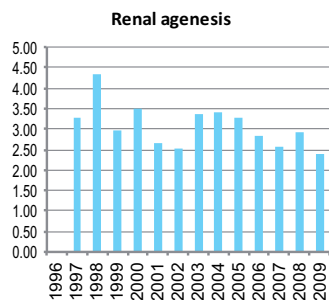
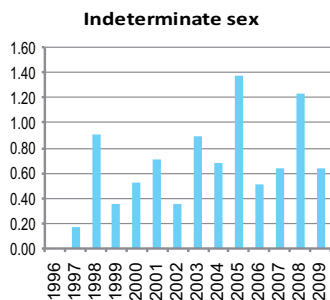
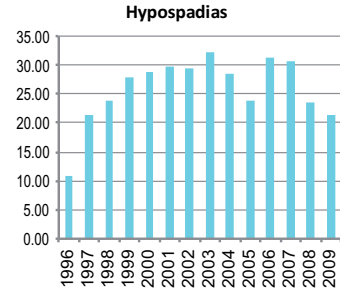
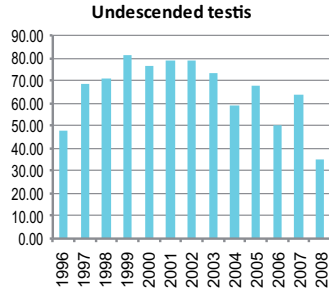
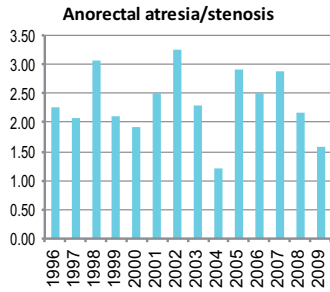
New Zealand

Time trends 1996-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates

New Zealand



Note: ■ L+S rates

Northern Netherlands

EUROCAT Registration Northern Netherlands

History:

The Programme started in 1981, and became a Clearinghouse member in 1993.

Size and coverage:

In the beginning the Programme covered 7,500 births annually in the province of Groningen and northern Drenthe. Coverage was gradually increased to 20,000 births annually in the provinces Groningen, Friesland and Drenthe from 1989 onwards (10% of the Netherlands). Home deliveries (35% of births) are included.

Legislation and funding:

The Programme is funded by the Dutch Ministry of Public Health, Welfare and Sports. The registry is carried out in the Department of Genetics of the University Medical Center Groningen of the University of Groningen.

Sources of ascertainment:

Children and fetuses with congenital anomalies are reported on a voluntary basis by various sources: obstetricians, pediatricians, clinical geneticists, surgeons, general practitioners, midwives, well-baby clinics, pathologists and the national obstetric registry. Registry personnel is also actively involved in data collection. Children and fetuses with congenital anomalies diagnosed before or after birth are eligible for registration at the EUROCAT registry, if the mother lived in the region at the time of birth and the child has not reached the age of 10 at notification. There is

no lower limit for gestational age. Spontaneous and induced abortions are included. A number of frequently occurring mild anomalies is not registered, unless they occur in combination with other congenital anomalies. Informed consent of the parents is needed.

Exposure information:

Since 1997 parents are asked to fill out a questionnaire including questions on occupational activities and medication use. Besides, pharmacy data are collected routinely and the actual use of the reported medications is verified with the mother.

Background information:

General statistics are available from the Dutch Central Bureau of Statistics (CBS).

Addresses and Staff:

Marian Bakker, Programme Director
Department of Genetics
University Medical Centre Groningen
University of Groningen
PO Box 30001
9700 RB Groningen, The Netherlands
Phone: 31-50-3617110 / 3617115

Fax: 31-50-3617232

E-mail: m.k.bakker@umcg.nl

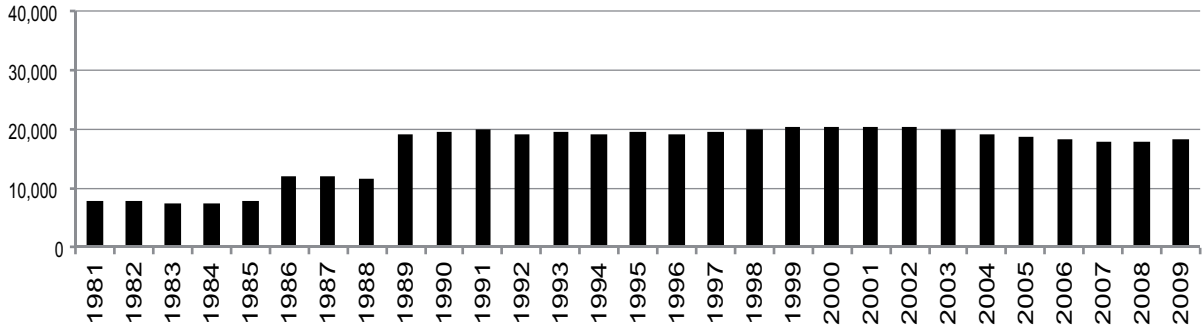
Hermien de Walle

E-mail: h.e.k.de.Walle@umcg.nl

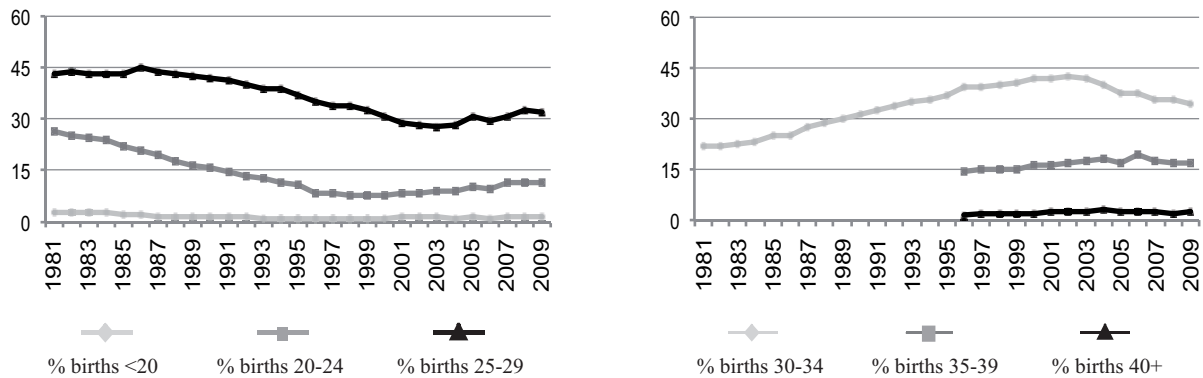
Website: www.eurocatnederland.nl

Northern Netherlands

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	14	93.3	Cystic kidney	14	40.0
Spina bifida	12	48.0	Limb reduction defects	5	19.2
Encephalocele	4	100.0	Diaphragmatic hernia	4	36.4
Holoprosencephaly	1	33.3	Omphalocele	7	58.3
Hydrocephaly	16	64.0	Gastroschisis	4	44.4
Hypoplastic left heart syndrome	9	56.3	Trisomy 13	10	76.9
Cleft palate without cleft lip	2	5.1	Trisomy 18	35	85.4
Cleft lip with or without cleft palate	5	7.7	Down syndrome	38	41.3
Renal agenesis	10	33.3			

Total ToPs with births defects = 199 (Ratio ToPs/Births: 3.70 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Northern Netherlands, 2009

Live births (LB)	18,041
Stillbirths (SB)	106
Total births	18,147
Number of terminations of pregnancy (ToP) for birth defects	76

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	7	3.86
Spina bifida	3	0	5	4.41
Encephalocele	0	0	3	1.65
Microcephaly	5	0	1	3.31
Holoprosencephaly	0	1	0	0.55
Hydrocephaly	3	1	4	4.41
Anophthalmos	0	0	0	0.00
Microphthalmos	1	0	1	1.10
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	1	0	0	0.55
Microtia	2	0	0	1.10
Unspecified Anotia/Microtia	nr	nr	nr	nr
Transposition of great vessels	8	0	0	4.41
Tetralogy of Fallot	9	0	1	5.51
Hypoplastic left heart syndrome	2	0	2	2.20
Coarctation of aorta	7	0	1	4.41
Choanal atresia, bilateral	1	0	0	0.55
Cleft palate without cleft lip	14	0	1	8.27
Cleft lip with or without cleft palate	16	0	2	9.92
Oesophageal atresia/stenosis with or without fistula	0	0	0	0.00
Small intestine atresia/stenosis	4	0	0	2.20
Anorectal atresia/stenosis	10	0	1	6.06
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	24	1	0	13.78
Epispadias	3	0	0	1.65
Indeterminate sex	1	0	1	1.10
Renal agenesis	8	1	4	7.16
Cystic kidney	9	0	7	8.82
Bladder exstrophy	3	0	0	1.65
Polydactyly, preaxial	0	0	0	0.00
Total Limb reduction defects (include unspecified)	5	0	2	3.86
Transverse	3	0	2	2.76
Preaxial	2	0	1	1.65
Postaxial	0	0	0	0.00
Intercalary	0	0	0	0.00
Mixed	1	0	1	1.10
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	4	1	1	3.31
Omphalocele	4	0	2	3.31
Gastroschisis	3	0	2	2.76
Unspecified Omphalocele/Gastroschisis	nr	nr	nr	nr
Prune belly sequence	0	0	1	0.55
Trisomy 13	1	0	3	2.20
Trisomy 18	2	0	14	8.82
Down syndrome, all ages (include age unknown)	20	0	15	19.29
<20	0	0	0	0.00
20-24	1	0	0	4.72
25-29	2	0	2	6.87
30-34	9	0	4	20.66
35-39	6	0	6	38.77
40-44	2	0	0	42.19
45+	0	0	3	3,333.33
unknown	0	0	0	---

nr = not reported

Northern Netherlands, Previous years rates 1981 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984*	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	30,709	62,263	97,298	97,969	100,552	90,450	
Anencephaly	7.49	4.18	2.57	3.57	1.99	2.43	
Spina bifida	5.21	6.58	7.40	5.72	4.48	4.98	
Encephalocele	1.63	0.96	1.34	0.92	0.70	0.66	
Microcephaly	4.88	3.69	4.42	4.39	1.69	2.10	
Holoprosencephaly	1.63	1.45	0.51	1.22	1.09	0.66	
Hydrocephaly	4.56	3.69	3.29	4.18	3.08	4.53	
Anophthalmos	0.00	0.32	0.41	0.10	0.00	0.00	
Microphthalmos	2.93	0.96	1.95	1.84	0.50	0.33	
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr	1.37*	1.65*	
Anotia	2.93	0.96	0.92	1.12	0.00	0.33	
Microtia	0.98	0.96	0.82	0.92	0.80	0.77	
Unspecified Anotia/Microtia	nr	nr	nr	nr	nr	nr	
Transposition of great vessels	2.28	3.85	4.42	4.80	3.98	4.20	
Tetralogy of Fallot	4.56	3.37	3.70	2.96	4.08	2.87	
Hypoplastic left heart syndrome	2.61	2.89	2.26	2.04	2.69	3.10	
Coarctation of aorta	6.51	5.62	5.45	5.00	5.97	4.20	
Choanal atresia, bilateral	1.30	0.80	1.34	1.02	0.90	0.66	
Cleft palate without cleft lip	7.16	6.75	8.12	6.43	8.45	7.74	
Cleft lip with or without cleft palate	16.61	15.10	15.31	14.80	14.02	13.05	
Oesophageal atresia/stenosis with or without fistula	2.28	3.21	2.67	3.98	3.98	2.10	
Small intestine atresia/stenosis	2.93	2.89	2.36	2.76	1.69	1.99	
Anorectal atresia/stenosis	1.95	3.69	2.98	3.57	3.88	3.76	
Undescended testis (36 weeks of gestation or later)	0.00	0.32	0.00	0.00	0.00	0.00	
Hypospadias	17.58	9.64	10.07	13.98	19.59	20.34	
Epispadias	0.33	0.64	0.41	0.51	0.50	0.66	
Indeterminate sex	0.00	0.32	0.21	0.51	0.40	0.77	
Renal agenesis	3.26	4.66	4.32	4.49	5.17	5.20	
Cystic kidney	2.28	5.62	5.04	4.29	3.78	6.97	
Bladder exstrophy	0.33	0.16	0.21	0.10	0.40	0.55	
Polydactyly, preaxial	2.61	1.93	1.75	2.35	1.29	0.55	
Total Limb reduction defects (include unspecified)	9.44	5.46	7.30	5.41	6.46	5.09	
Transverse	5.86	2.73	4.11	3.16	3.98	3.87	
Preaxial	1.95	0.64	1.03	0.61	0.80	1.11	
Postaxial	0.98	0.64	1.85	1.12	0.20	0.00	
Intercalary	0.33	0.00	0.31	0.10	0.10	0.22	
Mixed	0.65	0.00	0.62	0.10	0.30	0.66	
Unspecified	nr	nr	nr	nr	nr	nr	
Diaphragmatic hernia	2.28	3.05	2.16	3.47	2.88	1.77	
Omphalocele	1.95	1.77	3.60	2.65	1.49	2.21	
Gastroschisis	0.98	0.96	0.31	1.02	0.90	1.44	
Unspecified Omphalocele/Gastroschisis	nr	nr	nr	nr	nr	nr	
Prune belly sequence	0.33	0.16	0.62	0.31	0.30	0.22	
Trisomy 13	0.33	1.12	1.64	0.82	1.19	1.88	
Trisomy 18	2.61	2.25	1.54	3.78	3.98	7.63	
Down syndrome, all ages (include age unknown)	10.75	15.10	13.67	15.62	16.11	16.92	
<20	0.00	0.00	0.00	0.00	0.00	0.00	
20-24	13.01	4.25	9.04	5.89	4.68	6.10	
25-29	3.76	14.78	5.86	7.38	9.99	7.46	
30-34	13.05	8.67	14.30	12.67	9.54	16.20	
35-39	30.85	50.38	36.07	38.33	32.00	35.04	
40-44	nr	nr	nr	100.60*	130.72	57.73	
45+	nr	nr	nr	217.39*	114.94	769.23	
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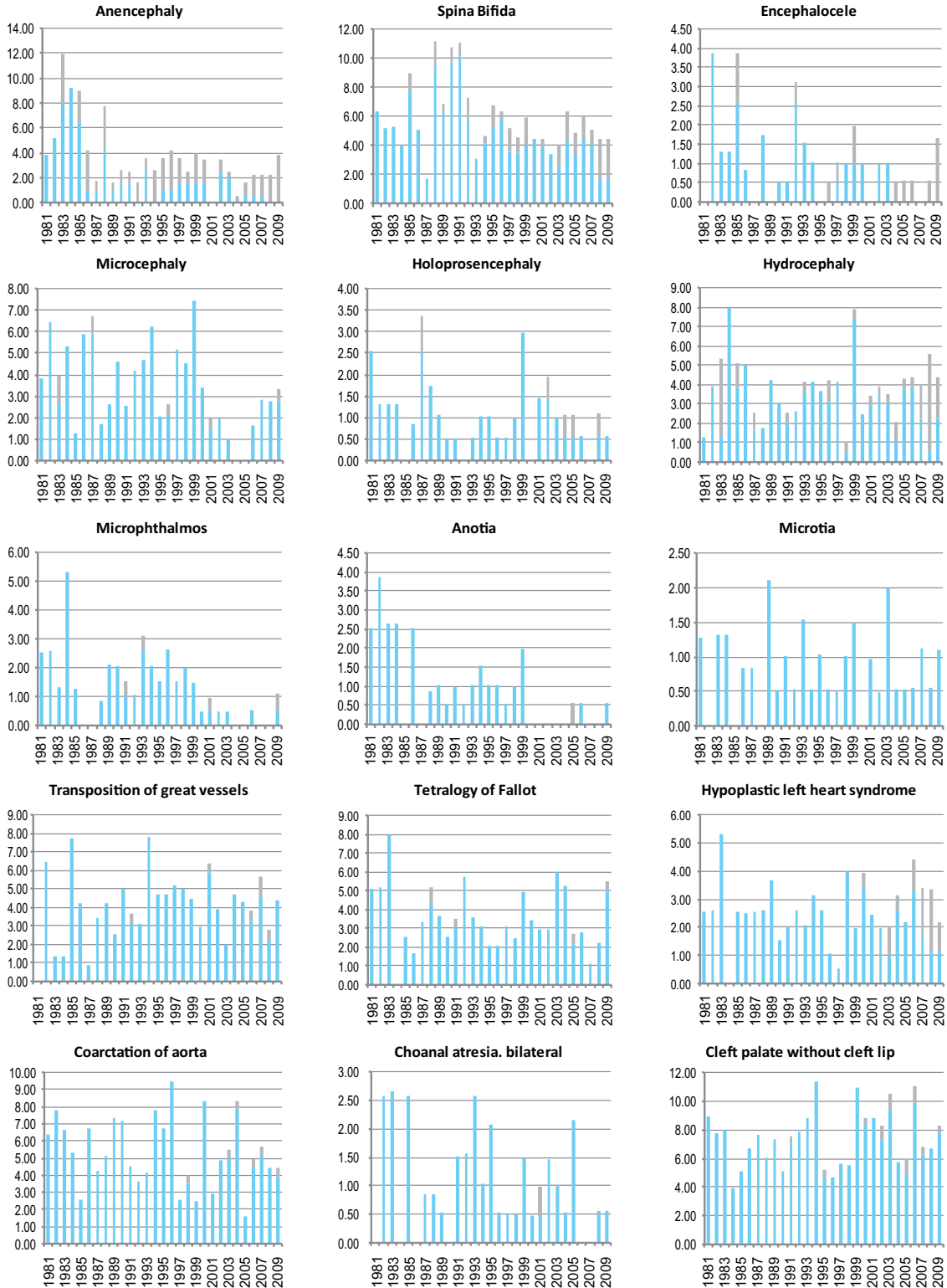
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* data include less than 5 years

Monitoring Systems

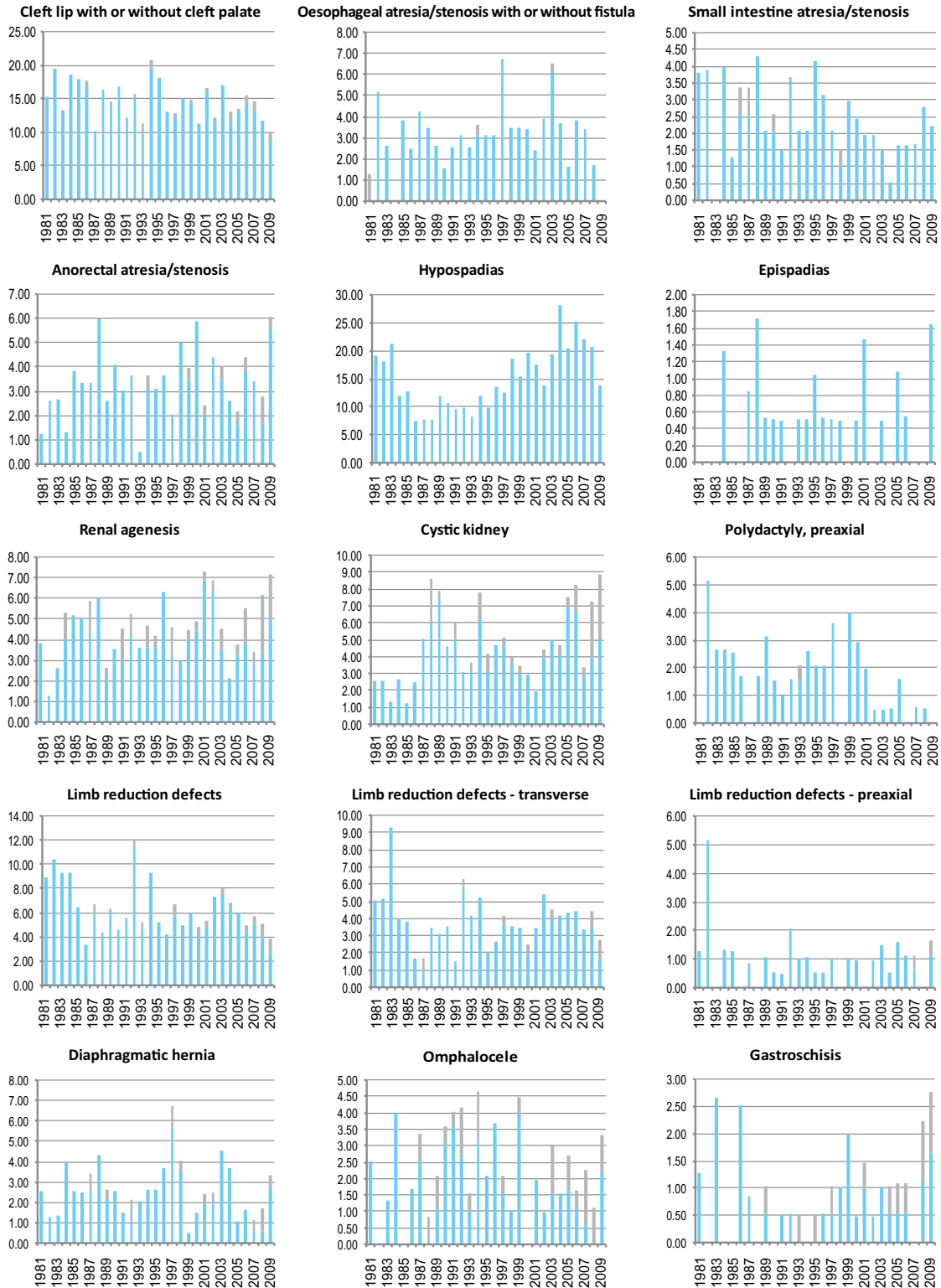
Northern Netherlands

Time trends 1981-2009 (Birth prevalence rates per 10,000)



Note: ■ L+S rates, ■ ToP rates

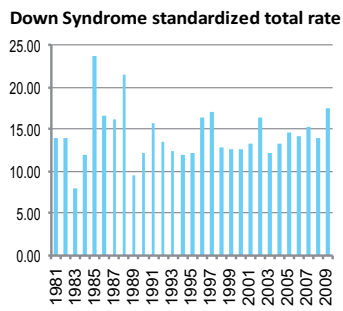
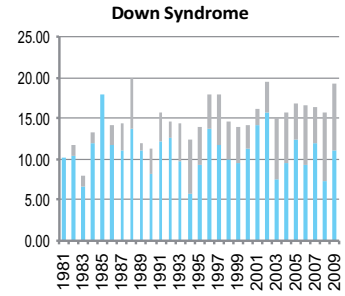
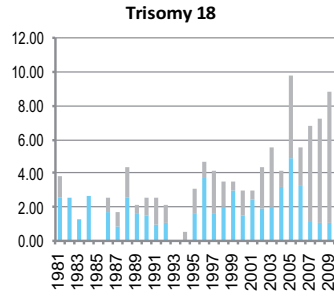
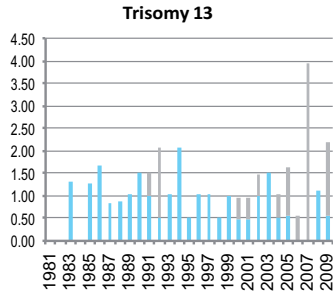
Northern Netherlands



Note: ■ L+S rates, ■ ToP rates

Monitoring Systems

Northern Netherlands



Note: ■ L+S rates, ■ ToP rates

Norway: MBRN

Medical Birth Registry of Norway

History:

The Programme was started in 1967. The Programme was a founding member of the ICBDSR and is a full member.

Size and coverage:

The programme covers all births in Norway, approximately 60,000 annual births. Notification to MBRN is compulsory for births and pregnancy terminations after 12 weeks of gestation.

Reporting to Clearinghouse includes:

- All live births
- Stillbirths from 20 weeks of gestation or birthweight 300 grams
- Pregnancy terminations from 12 weeks of gestation.

Legislation and funding:

The Programme is run and funded by the governmental Norwegian Institute of Public Health. Reporting is compulsory

Sources of ascertainment:

The registry is based on the notification of births from the delivery units and since 1999 also from the neonatal units.

Exposure information:

Some basic information, such as maternal disease and since 1999, smoking and occupation, is collected on all infants, malformed or not.

Background information:

All information available for the reported malformed infants is also available for the total population of births.

Addresses and Staff:

Tone Bjørge, MD, Programme director
Medical Birth Registry of Norway
Norwegian Institute of Public Health
Kalfarveien 31
N-5018 Bergen, Norway

Phone: 47-53 20 4002

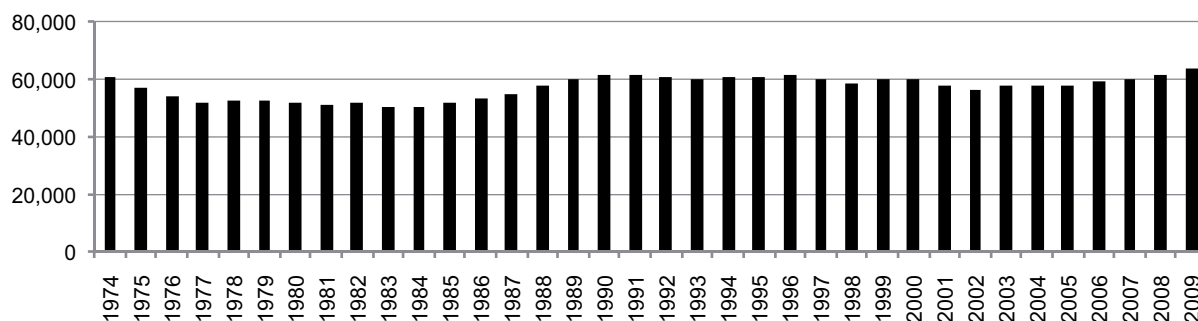
Fax: 47-53 20 4001

E-mail: tone.bjorge@isf.uib.no

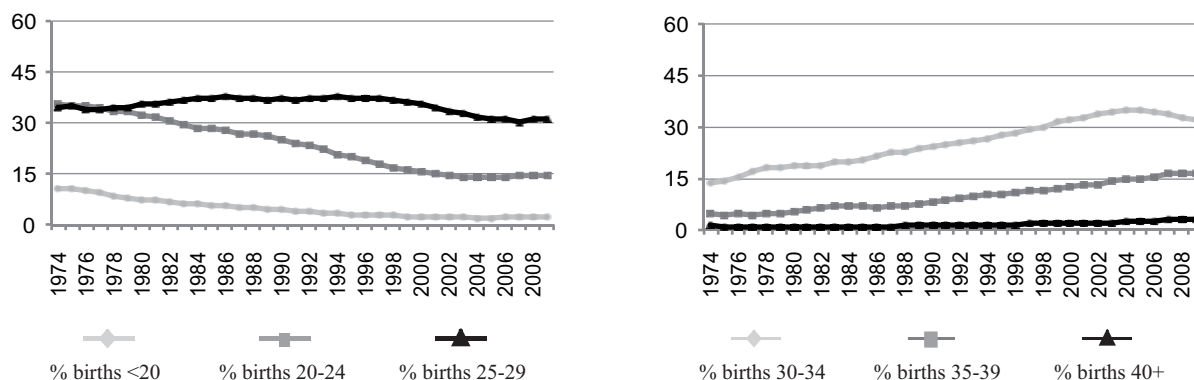
Monitoring Systems

Norway: MBRN

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009) (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	60	92.3	Cystic kidney	43	47.8
Spina bifida	65	65.0	Limb reduction defects	31	37.3
Encephalocele	17	77.3	Diaphragmatic hernia	14	24.6
Holoprosencephaly	26	86.7	Omphalocele	36	63.2
Hydrocephaly	36	42.4	Gastroschisis	8	11.9
Hypoplastic left heart syndrome	36	48.6	Trisomy 13	34	77.3
Cleft palate without cleft lip	6	5.1	Trisomy 18	56	65.1
Cleft lip with or without cleft palate	29	12.5	Down syndrome	130	41.3
Renal agenesis	26	76.5			

Total ToPs with births defects = 770 (Ratio ToPs/Births: 4.17 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Norway: MBRN, 2008

Live births (LB)	62,786
Stillbirths (SB)	272
Total births	63,313
Number of terminations of pregnancy (ToP) for birth defects	255

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	1	1	23	3.95
Spina bifida	12	0	21	5.21
Encephalocele	1	0	10	1.74
Microcephaly	2	0	2	0.63
Holoprosencephaly	3	0	8	1.74
Hydrocephaly	18	0	14	5.05
Anophthalmos	0	0	1	0.16
Microphthalmos	3	0	0	0.47
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	1	0	0	0.16
Microtia	1	0	0	0.16
Unspecified Anotia/Microtia	nr	nr	nr	nr
Transposition of great vessels	25	0	7	5.05
Tetralogy of Fallot	18	0	3	3.32
Hypoplastic left heart syndrome	10	1	11	3.47
Coarctation of aorta	15	1	5	3.32
Choanal atresia, bilateral	3	0	0	0.47
Cleft palate without cleft lip	47	0	1	7.58
Cleft lip with or without cleft palate	67	1	8	12.00
Oesophageal atresia/stenosis with or without fistula	12	0	0	1.90
Small intestine atresia/stenosis	5	0	1	0.95
Anorectal atresia/stenosis	18	1	6	3.95
Undescended testis (36 weeks of gestation or later)	130	0	0	20.53
Hypospadias	64	0	0	10.11
Epispadias	2	0	1	0.47
Indeterminate sex	5	0	0	0.79
Renal agenesis	1	0	8	1.42
Cystic kidney	12	0	17	4.58
Bladder exstrophy	1	0	1	0.32
Polydactyly, preaxial	51	0	5	8.84
Total Limb reduction defects (include unspecified)	20	0	9	4.58
Transverse	10	0	4	2.21
Preaxial	4	0	2	0.95
Postaxial	1	0	1	0.32
Intercalary	1	0	0	0.16
Mixed	7	0	6	2.05
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	17	0	5	3.47
Omphalocele	9	0	13	3.47
Gastroschisis	20	0	1	3.32
Unspecified Omphalocele/Gastroschisis	2	0	2	0.63
Prune belly sequence	4	0	11	2.37
Trisomy 13	3	0	7	1.58
Trisomy 18	5	2	17	3.79
Down syndrome, all ages (include age unknown)	82	2	40	19.59
<20	2	0	0	12.96
20-24	4	0	3	7.47
25-29	17	1	0	9.14
30-34	21	0	7	13.79
35-39	29	1	17	44.93
40-44	8	0	13	113.27
45+	1	0	0	116.28
unknown	0	0	0	---

nr = not reported

Norway: MBRN, Previous years rates 1974 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

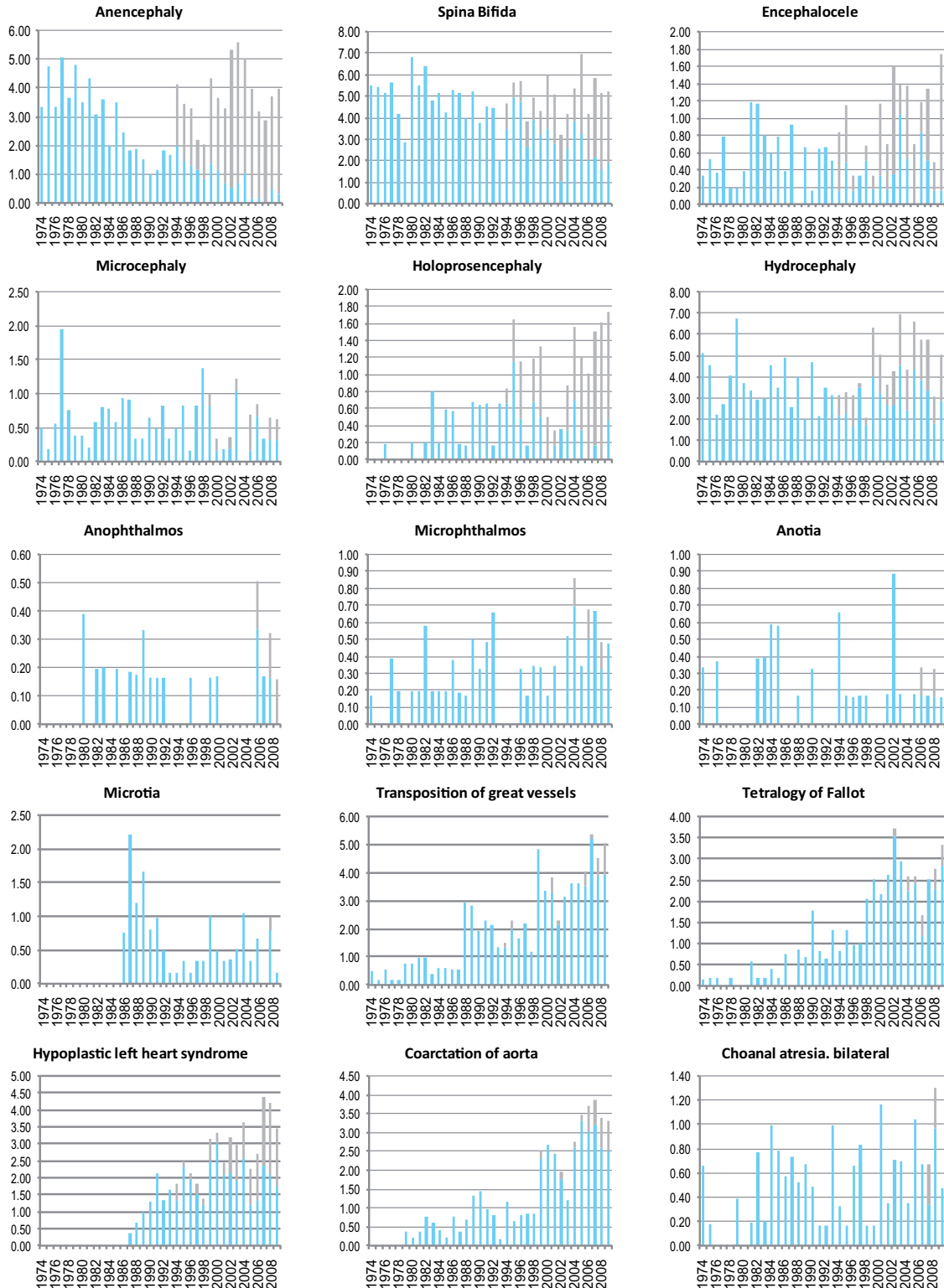
	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	327,455	255,156	276,487	304,426	300,250	289,341	301,876
Anencephaly	4.12	3.29	2.21	1.94	3.06	4.56	3.54
Spina bifida	4.83	5.72	4.77	3.88	4.90	4.77	5.47
Encephalocele	0.40	0.82	0.54	0.56	0.57	1.24	1.09
Microcephaly	0.70	0.55	0.61	0.56	0.83	0.41	0.63
Holoprosencephaly	0.03	0.27	0.43	0.59	1.10	0.73	1.42
Hydrocephaly	4.24	3.49	3.36	3.32	3.70	4.84	5.20
Anophthalmos	0.00	0.16	0.18	0.10	0.07	0.03	0.23
Microphthalmos	0.12	0.27	0.29	0.30	0.23	0.38	0.53
Unspecified Anophthalmos/Microphthalmos	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anotia	0.12	0.27	0.14	0.20	0.13	0.24	0.23
Microtia	nr	nr	1.47*	0.53	0.43	0.55	0.43
Unspecified Anotia/Microtia	nr	nr	nr	nr	nr	nr	nr
Transposition of great vessels	0.40	0.74	1.56	1.84	2.43	3.25	4.54
Tetralogy of Fallot	0.12	0.27	0.51	1.08	1.57	2.80	2.58
Hypoplastic left heart syndrome	nr	nr	0.70*	1.64	2.20	3.11	3.41
Coarctation of aorta	0.38	0.47	0.69	0.92	1.13	2.21	3.54
Choanal atresia, bilateral	0.21	0.43	0.65	0.43	0.40	0.66	0.83
Cleft palate without cleft lip	4.61	5.09	5.71	5.12	5.93	6.22	7.19
Cleft lip with or without cleft palate	14.08	14.03	14.76	13.21	12.99	12.72	13.35
Oesophageal atresia/stenosis with or without fistula	2.05	1.72	2.17	2.43	1.90	2.66	2.82
Small intestine atresia/stenosis	0.86	1.25	1.05	1.45	1.60	0.86	0.96
Anorectal atresia/stenosis	1.50	2.08	2.28	2.56	2.00	2.73	3.64
Undescended testis (36 weeks of gestation or later)	18.14	14.85	15.08	18.07	15.95	28.03	24.91
Hypospadias	12.73	13.76	16.17	15.96	14.52	16.38	13.38
Epispadias	0.27	0.35	0.47	0.16	0.33	0.24	0.13
Indeterminate sex	2.23	3.96	3.98	5.45	7.26	0.45	0.43
Renal agenesis	0.12	0.78	1.34	1.41	1.53	1.00	1.69
Cystic kidney	0.46	0.82	1.70	2.43	3.10	4.77	5.33
Bladder exstrophy	0.24	0.55	0.29	0.20	0.40	0.24	0.33
Polydactyly, preaxial	nr	nr	nr	nr	8.50*	8.19	9.18
Total Limb reduction defects (include unspecified)	8.83	6.47	7.34	6.50	6.66	3.84	4.70
Transverse	nr	nr	2.68*	3.61	3.03	2.04	2.32
Preaxial	nr	nr	0.84*	0.66	0.37	0.59	0.66
Postaxial	nr	nr	1.00*	0.56	0.40	0.07	0.17
Intercalary	nr	nr	0.17*	0.33	0.53	0.03	0.17
Mixed	nr	nr	0.00*	0.62	1.33	1.38	1.95
Unspecified	nr	nr	nr	nr	nr	nr	nr
Diaphragmatic hernia	1.92	2.39	2.53	2.37	2.93	2.49	2.75
Omphalocele	2.38	2.04	2.03	2.00	2.10	2.25	2.88
Gastroschisis	1.25	1.69	1.74	2.14	2.93	2.32	3.48
Unspecified Omphalocele/Gastroschisis	nr	nr	nr	nr	1.00*	0.45	0.60
Prune belly sequence	nr	nr	nr	nr	1.50*	1.28	2.09
Trisomy 13	nr	nr	nr	nr	1.00*	1.28	2.39
Trisomy 18	nr	nr	nr	nr	1.67*	3.63	4.84
Down syndrome, all ages (include age unknown)	9.80	9.76	11.32	10.12	12.99	17.04	17.76
<20	1.90	4.00	5.46	0.86	5.97	5.82	4.30
20-24	6.21	6.16	8.00	5.24	3.34	6.11	5.99
25-29	8.09	6.70	6.12	6.81	6.85	7.52	8.13
30-34	10.48	13.20	13.81	11.78	10.78	13.48	13.07
35-39	37.32	31.18	39.10	22.81	37.59	42.67	44.98
40-44	134.91	76.30	62.69	83.99	128.38	139.30	142.84
45+	161.29	185.19	315.79	322.58	198.68	319.63	225.35
unknown	---	---	---	---	---	---	---

nr = not reported

* data include less than 5 years

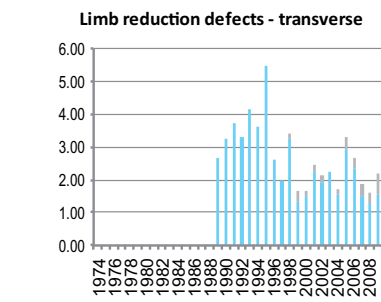
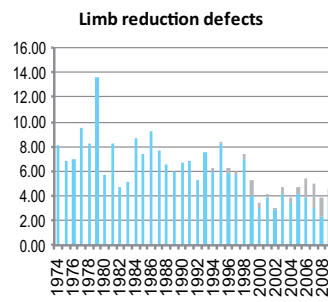
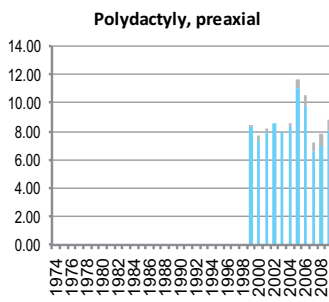
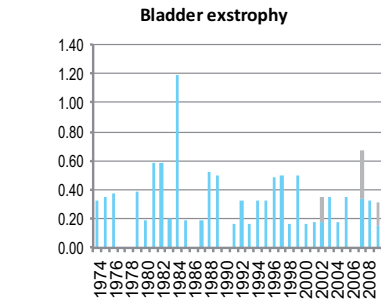
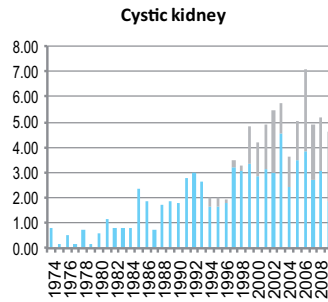
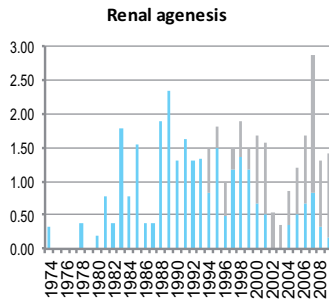
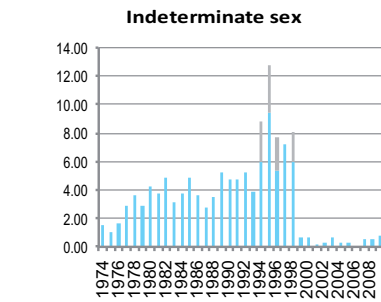
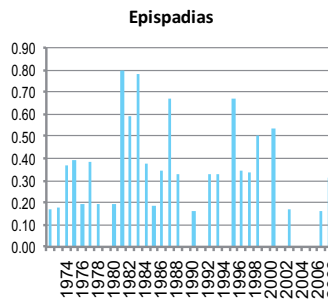
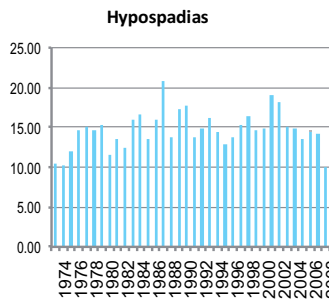
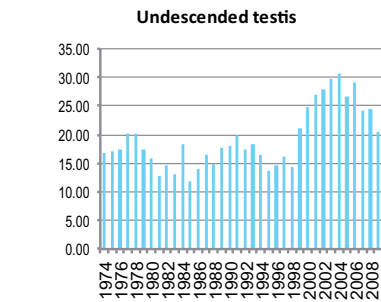
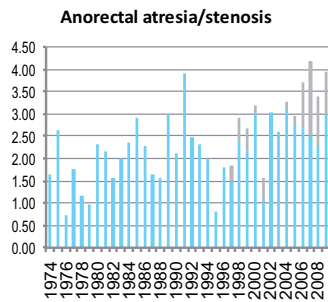
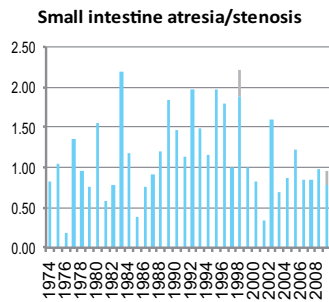
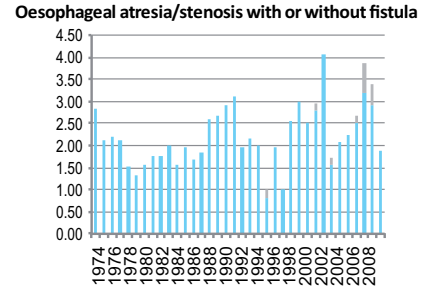
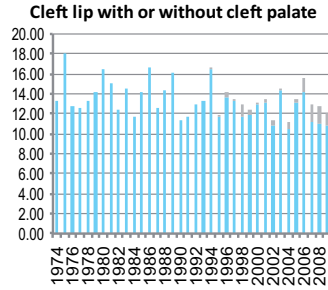
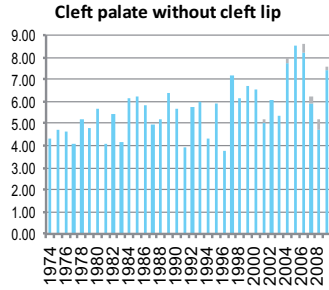
Norway: MBRN

Time trends 1974-2009 (Birth prevalence rates per 10,000)



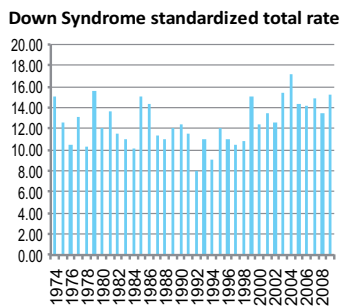
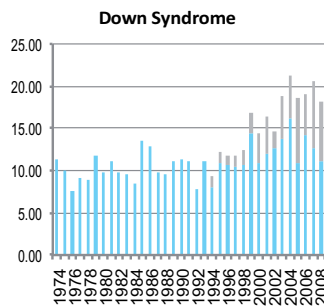
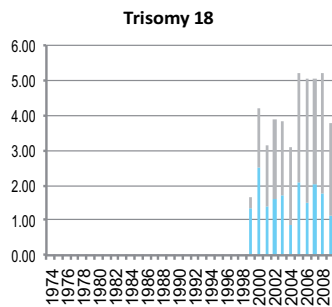
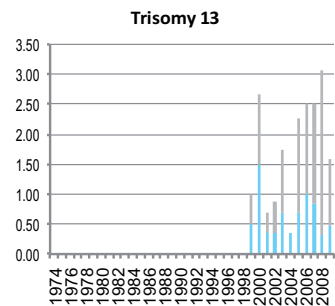
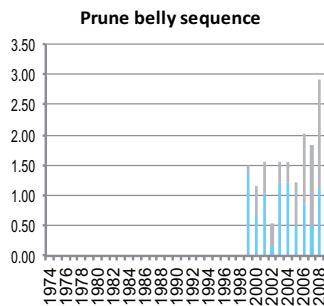
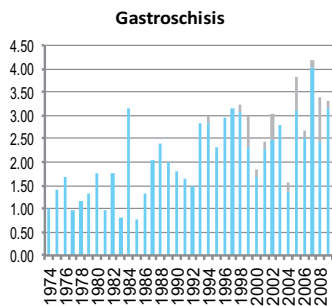
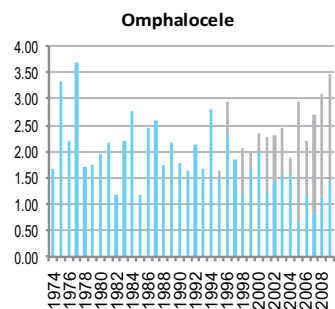
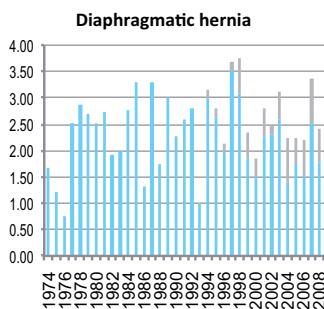
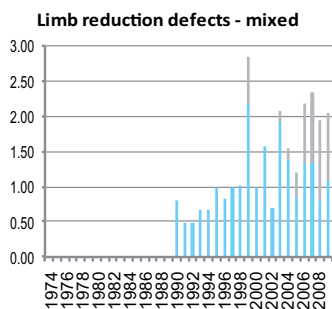
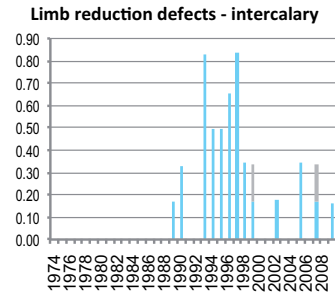
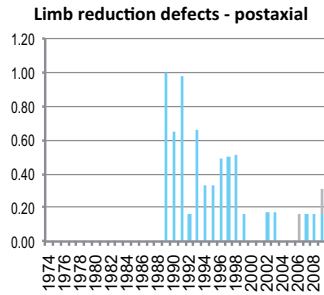
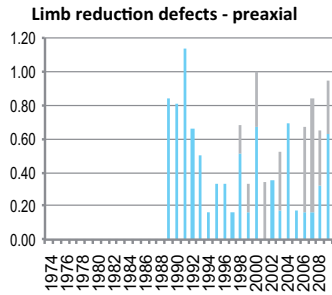
Note: ■ L+S rates, ■ ToP rates

Norway: MBRN



Note: ■ L+S rates, ■ ToP rates

Norway: MBRN



Russia - Moskow Region: MRRCM

Moscow Regional Registry of Congenital Malformation

History:

Moscow Regional Registry of Congenital malformation started the activity in 1999 and legally defined by the order of the Ministry of Health Care of Russian Federation. MRRCM became a Member of ICBDJR in 2001.

Size and coverage:

MRRCM be located as a section of Moscow Regional Medical genetic consultation by The Moscow Regional Research institute of Obstetrics and Gynecology (MONIAG). Director of the MONIAG is Professor Vladislav Krasnopolsky. The Head of the Moscow Regional Medical genetic consultation and Director of the Programme of MRRCM is Ludmila Joutchenko. The Programme of Monitoring of Birth defects covers all births in Moscow Region. In 1999 MRRCM observed 45,000 birth. There are about 64,000 births today (2007). The information about babies and fetuses with Birth defects collect from 54 maternity hospitals also from all women consultations and clinics, children clinics. Prenatal diagnosed and terminated fetuses are register also.

Legislation and funding:

Monitoring of the birth of fetuses and babies with congenital malformations is legally defined by

the Order of the Ministry of Health Care of Russian Federation in 1999.

Sources of ascertainment:

Reporting is made by neonatologist during the first week of the infant's life in maternity hospitals and by pediatricians during the first year – in pediatric clinics and departments. Reports are collected from cytogenetic laboratories, pathology departments.

Exposure information:

No exposure information is routinely collected in the registry.

Background information:

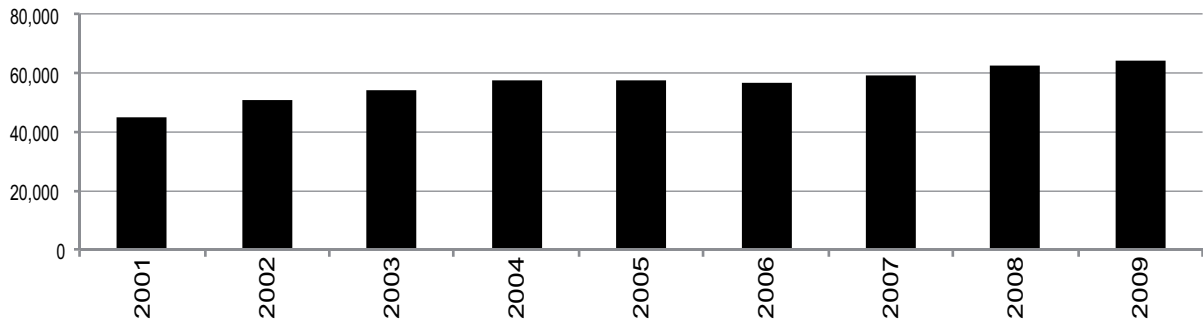
Background information on all births is available from statistics department.

Addresses and Staff:

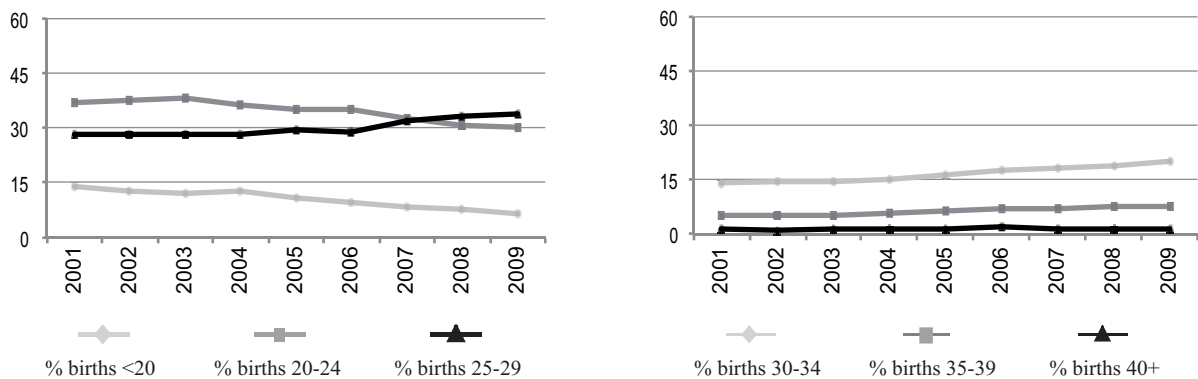
Ludmila Joutchenko, MD, Programme Director
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E-mail: mrrcm@mail.ru

Russia: MRRCM

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	38	82.6	Cystic kidney	14	25.9
Spina bifida	26	31.3	Limb reduction defects	8	15.4
Encephalocele	8	57.1	Diaphragmatic hernia	8	25.8
Holoprosencephaly	9	75.0	Omphalocele	14	31.8
Hydrocephaly	34	36.6	Gastroschisis	29	37.7
Hypoplastic left heart syndrome	9	36.0	Trisomy 13	0	0.0
Cleft palate without cleft lip	4	4.8	Trisomy 18	6	31.6
Cleft lip with or without cleft palate	10	8.7	Down syndrome	42	13.9
Renal agenesis	8	29.6			

Total ToPs with births defects = 664 (Ratio ToPs/Births: 3.57 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Russia: MRRCM, 2009

Live births (LB)	63,713
Stillbirths (SB)	291
Total births	64,004
Number of terminations of pregnancy (ToP) for birth defects	242

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	22	3.44
Spina bifida	11	0	7	2.81
Encephalocele	0	0	5	0.78
Microcephaly	1	0	3	0.62
Holoprosencephaly	1	0	2	0.47
Hydrocephaly	9	0	14	3.59
Anophthalmos	0	0	0	0.00
Microphthalmos	0	0	0	0.00
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	0	0	0	0.00
Microtia	1	0	0	0.16
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	7	0	1	1.25
Tetralogy of Fallot	8	0	1	1.41
Hypoplastic left heart syndrome	0	0	2	0.31
Coarctation of aorta	2	0	0	0.31
Choanal atresia, bilateral	0	0	0	0.00
Cleft palate without cleft lip	27	0	3	4.69
Cleft lip with or without cleft palate	45	0	4	7.66
Oesophageal atresia/stenosis with or without fistula	13	0	2	2.34
Small intestine atresia/stenosis	10	0	0	1.56
Anorectal atresia/stenosis	6	0	1	1.09
Undescended testis (36 weeks of gestation or later)	100	0	0	15.62
Hypospadias	100	0	0	15.62
Epispadias	0	0	0	0.00
Indeterminate sex	0	0	0	0.00
Renal agenesis	5	0	1	0.94
Cystic kidney	1	0	0	0.16
Bladder exstrophy	1	0	0	0.16
Polydactyly, preaxial	11	0	0	1.72
Total Limb reduction defects (include unspecified)	9	0	4	2.03
Transverse	5	0	2	1.09
Preaxial	0	0	0	0.00
Postaxial	0	0	0	0.00
Intercalary	0	0	0	0.00
Mixed	3	0	2	0.78
Unspecified	1	0	0	0.16
Diaphragmatic hernia	2	1	2	0.78
Omphalocele	7	2	2	1.72
Gastroschisis	10	0	10	3.12
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	0	0.00
Trisomy 13	3	0	0	0.47
Trisomy 18	7	0	3	1.56
Down syndrome, all ages (include age unknown)	92	3	14	17.03
<20	2	0	0	4.85
20-24	19	0	2	10.84
25-29	25	2	4	14.19
30-34	12	0	0	9.33
35-39	26	0	4	60.79
40-44	7	1	4	143.03
45+	1	0	0	263.16
unknown	0	0	0	---

nr = not reported

Russia: MRRCM, Previous years rates 2001 - 2009

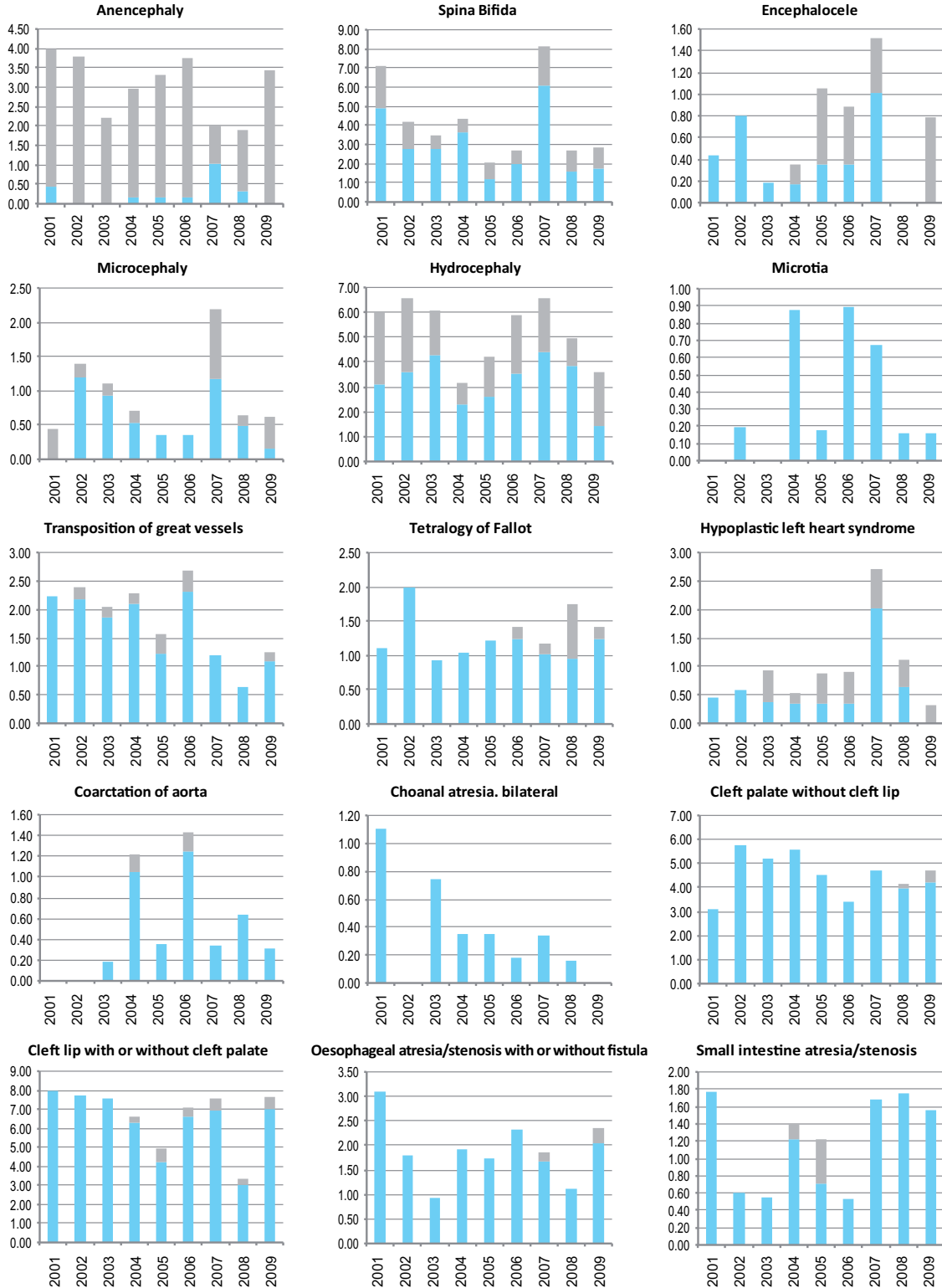
Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004*	2005-2009
Total births						206,687	299,201
Anencephaly						3.19	2.87
Spina bifida						4.69	3.68
Encephalocele						0.44	1.06*
Microcephaly						0.92	0.84
Holoprosencephaly						0.15	0.50
Hydrocephaly						5.37	5.01
Anophthalmos						0.15	0.07
Microphthalmos						0.10	0.08*
Unspecified Anophthalmos/Microphthalmos						0.00	0.00
Anotia						0.05	0.33
Microtia						0.29	0.40
Unspecified Anotia/Microtia						0.68	0.00
Transposition of great vessels						2.23	1.44
Tetralogy of Fallot						1.26	1.40
Hypoplastic left heart syndrome						0.63	1.17
Coarctation of aorta						0.39	0.60
Choanal atresia, bilateral						0.53	0.20
Cleft palate without cleft lip						4.98	4.31
Cleft lip with or without cleft palate						7.45	6.12
Oesophageal atresia/stenosis with or without fistula						1.89	1.87
Small intestine atresia/stenosis						1.06	1.37
Anorectal atresia/stenosis						2.32	1.84
Undescended testis (36 weeks of gestation or later)						21.48	14.34
Hypospadias						15.29	14.61
Epispadias						0.15	0.17
Indeterminate sex						0.48	0.38*
Renal agenesis						1.50	1.57
Cystic kidney						2.90	2.74
Bladder exstrophy						0.15	0.17*
Polydactyly, preaxial						8.81	2.47
Total Limb reduction defects (include unspecified)						3.63	2.47
Transverse						1.50	1.50
Preaxial						0.29	0.21*
Postaxial						0.19	0.04*
Intercalary						0.15	0.03
Mixed						0.63	0.56*
Unspecified						1.31	0.41*
Diaphragmatic hernia						1.55	1.67
Omphalocele						3.53	2.11
Gastroschisis						2.85	3.61
Unspecified Omphalocele/Gastroschisis						1.31	0.00
Prune belly sequence						0.05	0.10
Trisomy 13						0.19	0.21*
Trisomy 18						0.24	0.80
Down syndrome, all ages (include age unknown)						11.85	15.34
<20						6.39	5.47
20-24						6.59	8.07
25-29						7.17	10.96
30-34						16.14	15.29
35-39						41.49	53.07
40-44						138.65	144.86
45+						631.58	170.21*
unknown						---	---

* data include less than 5 years

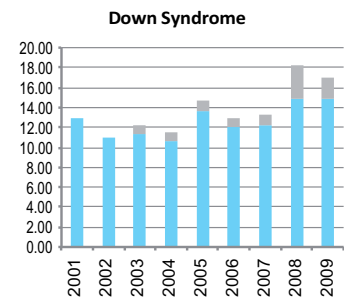
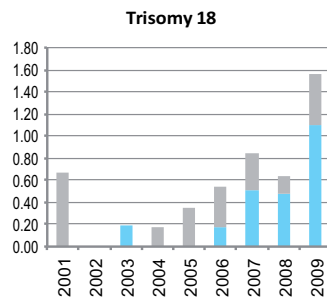
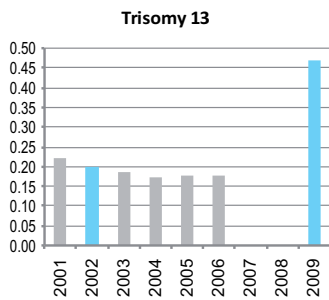
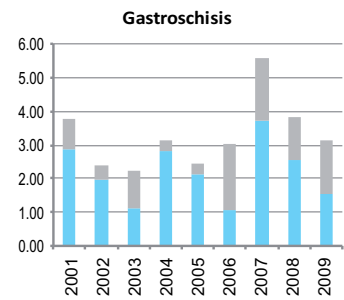
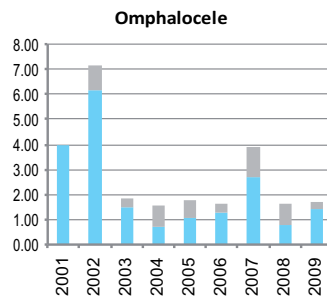
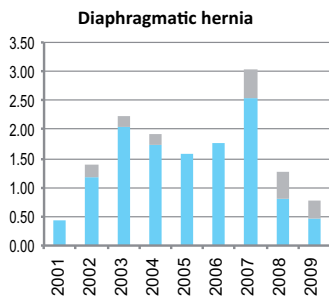
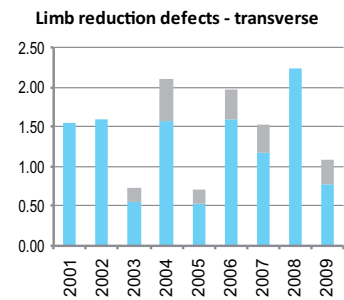
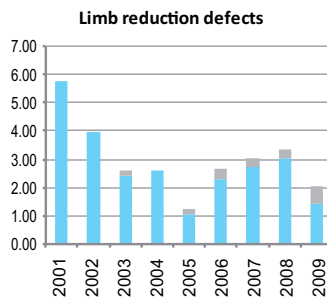
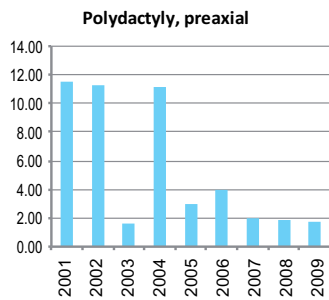
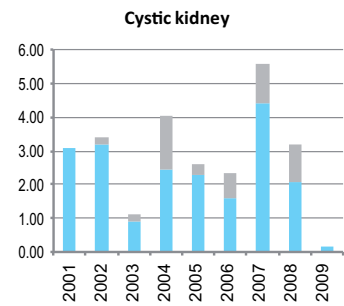
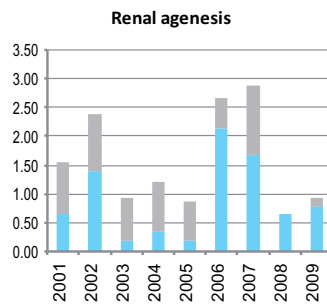
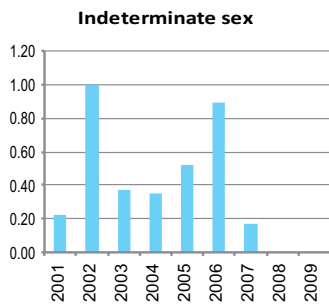
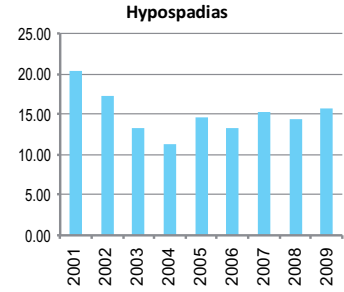
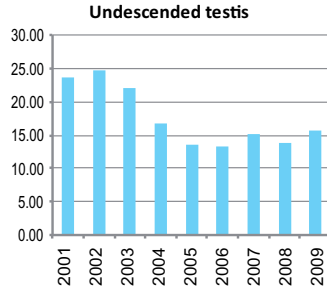
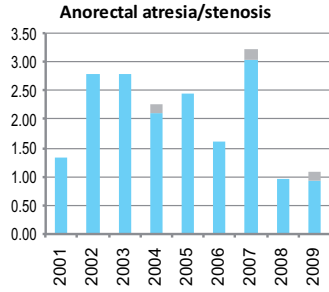
Russia: MRRCM

Time trends 2001-2009 (Birth prevalence rates per 10,000)



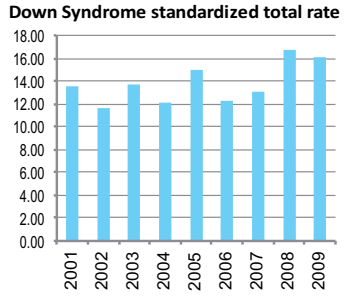
Note: ■ L+S rates, ■ ToP rates

Russia: MRRCM



Note: L+S rates, ToP rates

Russia: MRRCM



Note: ■ L+S rates, ■ ToP rates

Slovak Republic

Slovak Teratologic Information Centre, Slovak Medical University

History:

In Slovakia the collection of reports from delivery units and processing of data performs the National Health Information Centre of SR (NHIC). The obligation of reporting all groups of congenital malformations results from valid legislation norms. Reporting of congenital malformations began in 1964. The Programme of Slovak Teratological Information Center (STIC) was established in 2003 year and consists in cooperation of the Slovak Medical University, NHIC and the Center of Medical Genetics. Research collaboration began from 1995 year, under the responsibility of Dr. Elena Szabova, PhD.

Size and coverage:

The registry covers all births in the area approximately 55.000 births annually according to the Reports of birth defects from delivery units. The detailed information about cases of CM are collected in the Center of Medical Genetics, Bratislava from western regions of Slovakia (cca 15.000 births) by Eva Veghova, MD or under the running research projects at the Slovak Medical University.

Legislation and funding:

Reporting is compulsory. Analysis of data is supported by grant projects.

Sources of ascertainment:

Reports are received from NHIC, delivery units, neonatal, pediatric clinics, or departments of clinical genetics.

Exposure Information:

Detailed information on maternal and paternal occupation, drug use, etc. are collected by

interviews of case's and control's mothers only according to running research projects.

Background information:

Some background information is available from the general population statistics.

Addresses and Staff:

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833 03 Bratislava, Slovak Republic
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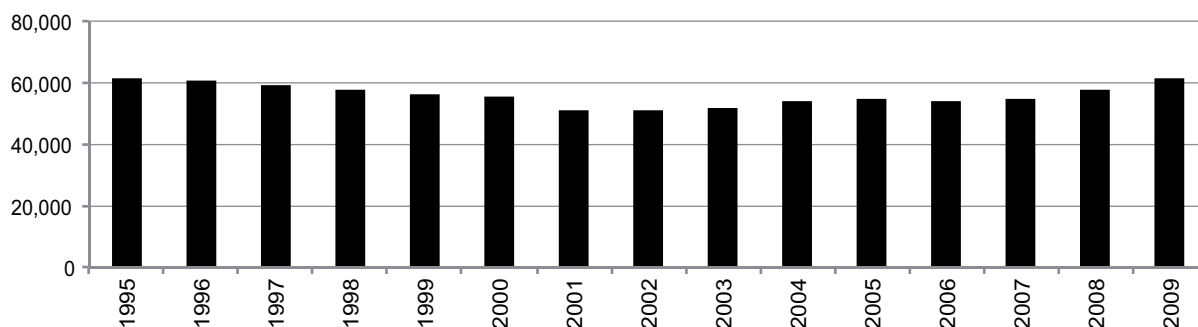
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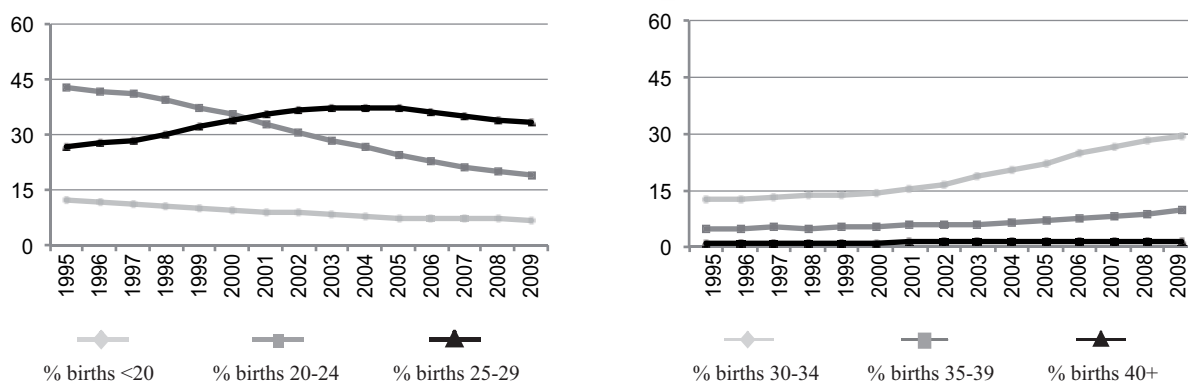
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Slovak Republic

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009) (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	10	66.7	Cystic kidney	0	0.0
Spina bifida	5	13.5	Limb reduction defects	0	0.0
Encephalocele	5	45.5	Diaphragmatic hernia	1	3.1
Holoprosencephaly	0	0.0	Omphalocele	1	11.1
Hydrocephaly	10	22.7	Gastroschisis	0	0.0
Hypoplastic left heart syndrome	0	0.0	Trisomy 13	2	50.0
Cleft palate without cleft lip	0	0.0	Trisomy 18	2	20.0
Cleft lip with or without cleft palate	0	0.0	Down syndrome	38	25.0
Renal agenesis	1	1.1			

Total ToPs with births defects = 128 (Ratio ToPs/Births: 0.74 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Slovak Republic, 2009

Live births (LB)	61,217
Stillbirths (SB)	228
Total births	61,445
Number of terminations of pregnancy (ToP) for birth defects	50

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	2	1	2	0.81
Spina bifida	11	0	3	2.28
Encephalocele	2	0	2	0.65
Microcephaly	5	0	0	0.81
Holoprosencephaly	1	0	0	0.16
Hydrocephaly	14	1	2	2.77
Anophthalmos	0	0	0	0.00
Microphthalmos	0	0	0	0.00
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	3	0	0	0.49
Microtia	0	0	0	0.00
Unspecified Anotia/Microtia	12	0	0	1.95
Transposition of great vessels	9	0	0	1.46
Tetralogy of Fallot	10	0	0	1.63
Hypoplastic left heart syndrome	10	0	0	1.63
Coarctation of aorta	7	0	0	1.14
Choanal atresia, bilateral	0	0	0	0.00
Cleft palate without cleft lip	31	0	0	5.05
Cleft lip with or without cleft palate	60	0	0	9.76
Oesophageal atresia/stenosis with or without fistula	5	0	0	0.81
Small intestine atresia/stenosis	4	0	0	0.65
Anorectal atresia/stenosis	17	0	0	2.77
Undescended testis (36 weeks of gestation or later)	75	1	0	12.37
Hypospadias	97	1	0	15.95
Epispadias	0	0	0	0.00
Indeterminate sex	1	0	0	0.16
Renal agenesis	34	0	1	5.70
Cystic kidney	5	0	0	0.81
Bladder exstrophy	0	0	0	0.00
Polydactyly, preaxial	16	0	0	2.60
Total Limb reduction defects (include unspecified)	16	0	0	2.60
Transverse	nr	nr	nr	nr
Preaxial	nr	nr	nr	nr
Postaxial	nr	nr	nr	nr
Intercalary	nr	nr	nr	nr
Mixed	nr	nr	nr	nr
Unspecified	nr	nr	nr	nr
Diaphragmatic hernia	14	0	1	2.44
Omphalocele	2	0	1	0.49
Gastroschisis	5	0	0	0.81
Unspecified Omphalocele/Gastroschisis	1	0	1	0.33
Prune belly sequence	0	0	0	0.00
Trisomy 13	1	0	1	0.33
Trisomy 18	3	0	2	0.81
Down syndrome, all ages (include age unknown)	40	0	13	8.63
<20	nr	nr	nr	nr
20-24	nr	nr	nr	nr
25-29	nr	nr	nr	nr
30-34	nr	nr	nr	nr
35-39	nr	nr	nr	nr
40-44	nr	nr	nr	nr
45+	nr	nr	nr	nr
unknown	nr	nr	nr	---

nr = not reported

Slovak Republic, Previous years rates 1995 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

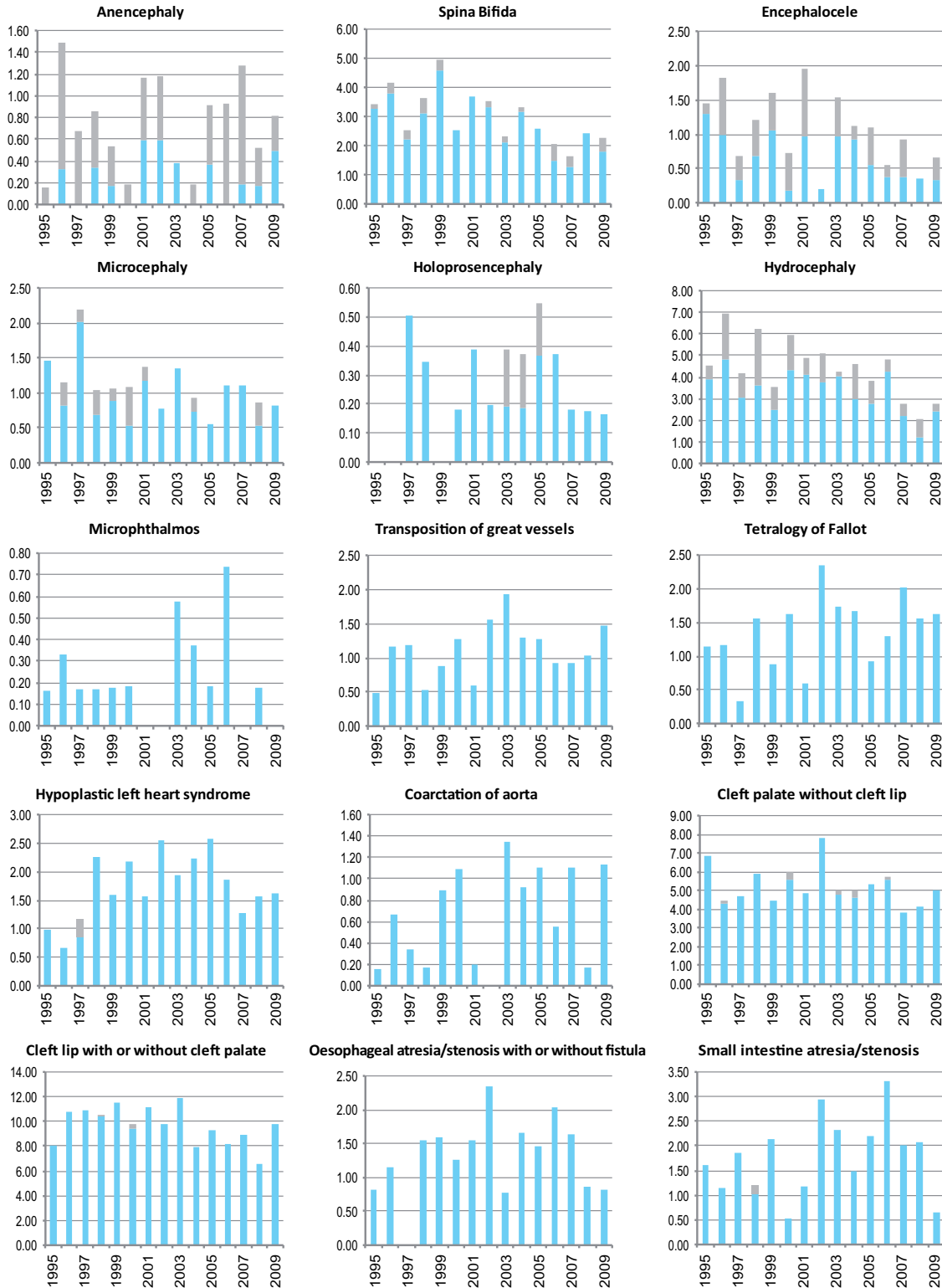
	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births					295,732	263,632	282,409
Anencephaly					0.74	0.61	0.89
Spina bifida					3.72	3.07	2.20
Encephalocele					1.35	1.10	0.71
Microcephaly					1.39	1.10	0.89
Holoprosencephaly					0.17	0.30	0.28
Hydrocephaly					5.11	4.97	3.22
Anophthalmos					0.03	0.08	0.04
Microphthalmos					0.20	0.23	0.21
Unspecified Anophthalmos/Microphthalmos					0.00	0.00	0.00
Anotia					0.10	0.15	0.14
Microtia					0.27	0.34	0.14
Unspecified Anotia/Microtia					0.17	0.53	0.85
Transposition of great vessels					0.85	1.33	1.13
Tetralogy of Fallot					1.01	1.59	1.49
Hypoplastic left heart syndrome					1.32	2.09	1.77
Coarctation of aorta					0.44	0.72	0.81
Choanal atresia, bilateral					0.24	0.11	0.25
Cleft palate without cleft lip					5.28	5.73	4.82
Cleft lip with or without cleft palate					10.35	10.09	8.57
Oesophageal atresia/stenosis with or without fistula					1.01	1.52	1.35
Small intestine atresia/stenosis					1.59	1.67	2.02
Anorectal atresia/stenosis					1.56	2.96	2.66
Undescended testis (36 weeks of gestation or later)					6.12	8.34	10.02
Hypospadias					23.26	23.63	17.95
Epispadias					0.17	0.15	0.18
Indeterminate sex					0.51	0.34	0.21
Renal agenesis					2.50	5.46	5.88
Cystic kidney					0.85	1.63	1.10
Bladder exstrophy					0.17	0.19	0.00
Polydactyly, preaxial					1.59	3.57	2.44
Total Limb reduction defects (include unspecified)					3.52	3.64	3.22
Transverse					nr	nr	nr
Preaxial					nr	nr	nr
Postaxial					nr	nr	nr
Intercalary					nr	nr	nr
Mixed					nr	nr	nr
Unspecified					0.03	0.00	0.06*
Diaphragmatic hernia					1.28	1.48	1.81
Omphalocele					0.57	0.68	0.53
Gastroschisis					0.78	1.21	0.85
Unspecified Omphalocele/Gastroschisis					0.00	0.00	0.12*
Prune belly sequence					0.00	0.23	0.07
Trisomy 13					0.27	0.34	0.28
Trisomy 18					0.27	0.46	0.60
Down syndrome, all ages (include age unknown)					9.37	10.28	8.89
<20					6.97	4.76	1.84*
20-24					6.50	4.17	3.66*
25-29					6.17	7.14	5.86*
30-34					12.54	11.81	10.09*
35-39					34.56	43.93	27.31*
40-44					71.60	102.73	83.64*
45+					173.91	336.13	125.79*
unknown					---	---	---

nr = not reported

* data include less than 5 years

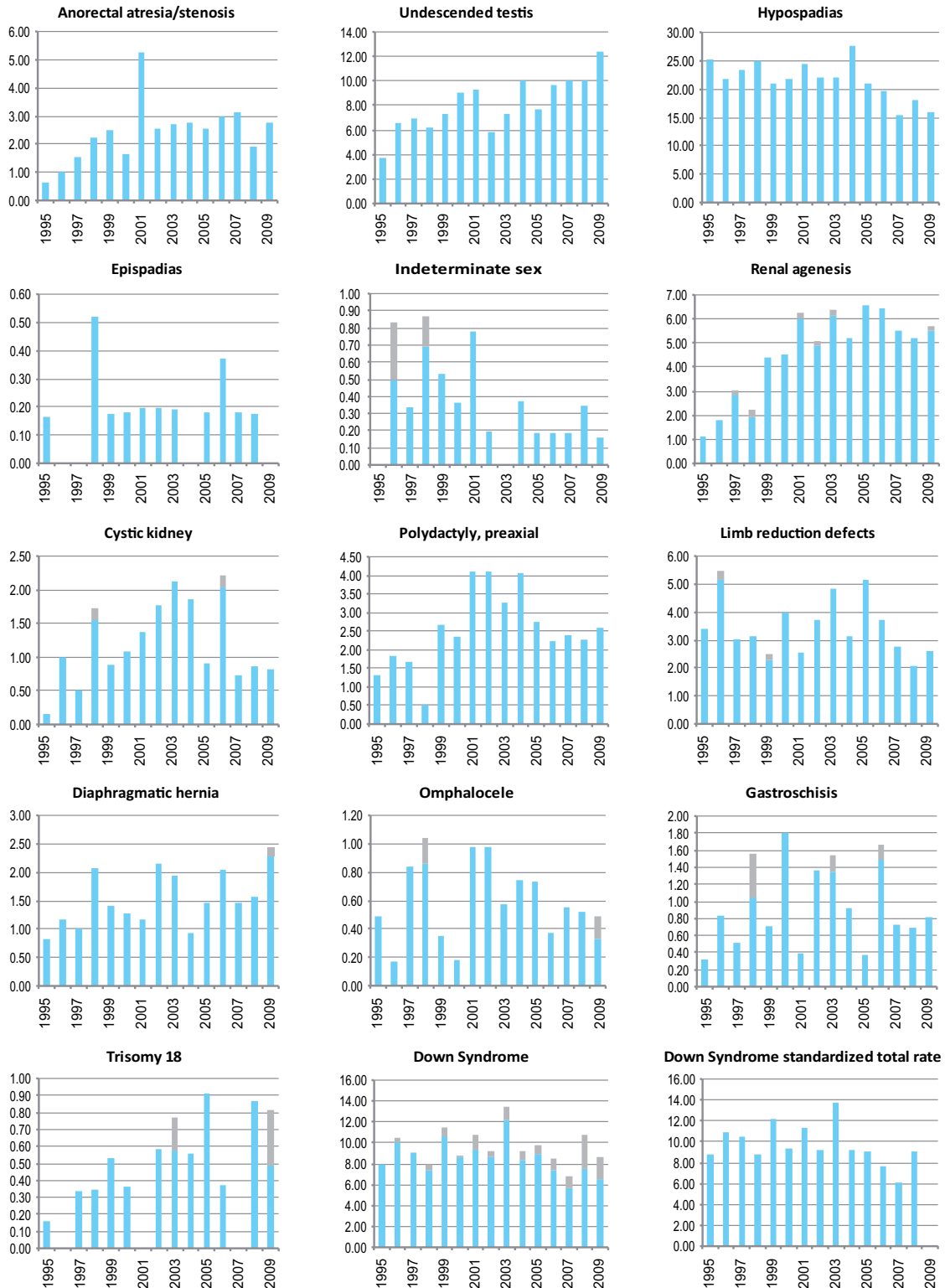
Slovak Republic

Time trends 1995-2009 (Birth prevalence rates per 10,000)



Note: L+S rates, ToP rates

Slovak Republic



Note: ■ L+S rates, ■ ToP rates

South America: ECLAMC

Latin American Collaborative Study of Congenital Malformations

History:

The Programme started in 1967 and has grown in size and coverage. The Programme became a full member of the International Clearinghouse in 1977.

Size and coverage:

The number of participating hospitals has grown from 20 in 1977 to 70 at the present time, distributed over most South American countries. The annual number of births covered is at present approximately 150,000, less than 1% of all births. Stillbirths of at least 500g birthweight have been included since 1978.

Legislation and funding:

The Programme is a research Programme with voluntary participation of hospitals and funded by research grants provided from several sources, mainly the national research councils of Argentina and Brazil.

Sources of ascertainment:

Reporting is made by collaborating pediatricians at the delivery units of participating hospitals.

Exposure information:

The mother of each reported infant and the mother of a control infant - the next non-malformed infant born at that hospital with the same sex as the proband - are interviewed on various exposures, including drug usage and parental occupation.

Background information:

Background information is obtained partly from summarising tables of births in each participating hospitals, partly from the matched control newborns.

Addresses and Staff:

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Phone: 55-21-25528952

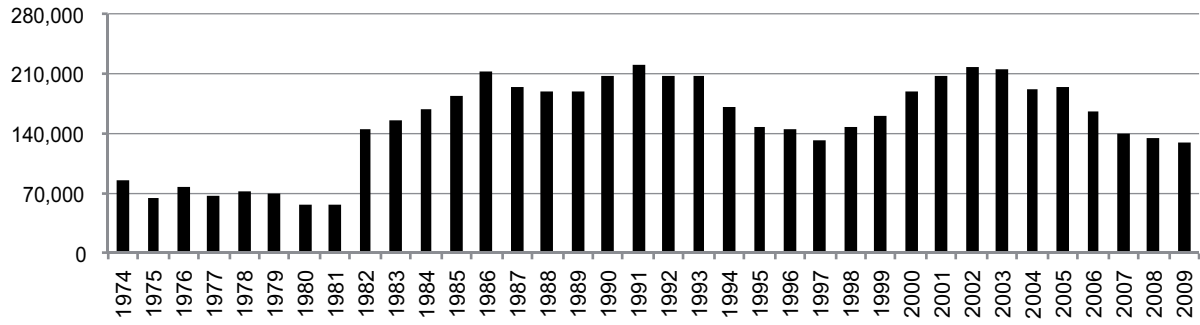
Fax: 55-21-22604282(5521)

E-mail: castilla@centroin.com.br

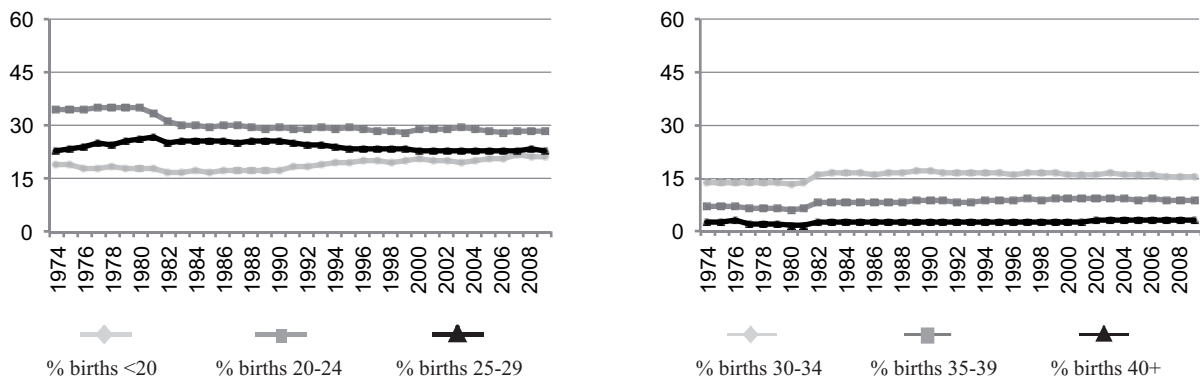
Monitoring Systems

South America: ECLAMC

Total births by year



Percentage of births by year and maternal age



South America: ECLAMC, 2009

Live births (LB)	126,491
Stillbirths (SB)	1,627
Total births	128,118
Number of terminations of pregnancy (ToP) for birth defects	not permitted

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	27	31		4.53
Spina bifida	84	5		6.95
Encephalocele	26	5		2.42
Microcephaly	54	1		4.29
Holoprosencephaly	7	6		1.01
Hydrocephaly	185	8		15.06
Anophthalmos	10	2		0.94
Microphthalmos	12	3		1.17
Unspecified Anophthalmos/Microphthalmos	0	0		0.00
Anotia	3	0		0.23
Microtia	50	5		4.29
Unspecified Anotia/Microtia	4	1		0.39
Transposition of great vessels	8	0		0.62
Tetralogy of Fallot	11	1		0.94
Hypoplastic left heart syndrome	5	2		0.55
Coarctation of aorta	3	1		0.31
Choanal atresia, bilateral	2	0		0.16
Cleft palate without cleft lip	39	2		3.20
Cleft lip with or without cleft palate	98	9		8.35
Oesophageal atresia/stenosis with or without fistula	38	3		3.20
Small intestine atresia/stenosis	18	1		1.48
Anorectal atresia/stenosis	50	6		4.37
Undescended testis (36 weeks of gestation or later)	112	1		8.82
Hypospadias	86	1		6.79
Epispadias	0	0		0.00
Indeterminate sex	17	4		1.64
Renal agenesis	24	3		2.11
Cystic kidney	62	6		5.31
Bladder exstrophy	3	0		0.23
Polydactyly, preaxial	32	1		2.58
Total Limb reduction defects (include unspecified)	59	6		5.07
Transverse	20	3		1.80
Preaxial	8	1		0.70
Postaxial	1	0		0.08
Intercalary	9	0		0.70
Mixed	20	2		1.72
Unspecified	1	0		0.08
Diaphragmatic hernia	31	2		2.58
Omphalocele	31	11		3.28
Gastroschisis	99	11		8.59
Unspecified Omphalocele/Gastroschisis	0	1		0.08
Prune belly sequence	6	2		0.62
Trisomy 13	2	0		0.16
Trisomy 18	0	0		0.00
Down syndrome, all ages (include age unknown)	154	3		12.25
<20	18	0		6.65
20-24	22	0		6.08
25-29	11	0		3.79
30-34	21	0		10.64
35-39	48	2		45.10
40-44	32	1		95.46
45+	1	0		41.67
unknown	1	0		---

nr = not reported

South America: ECLAMC, Previous years rates 1974 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

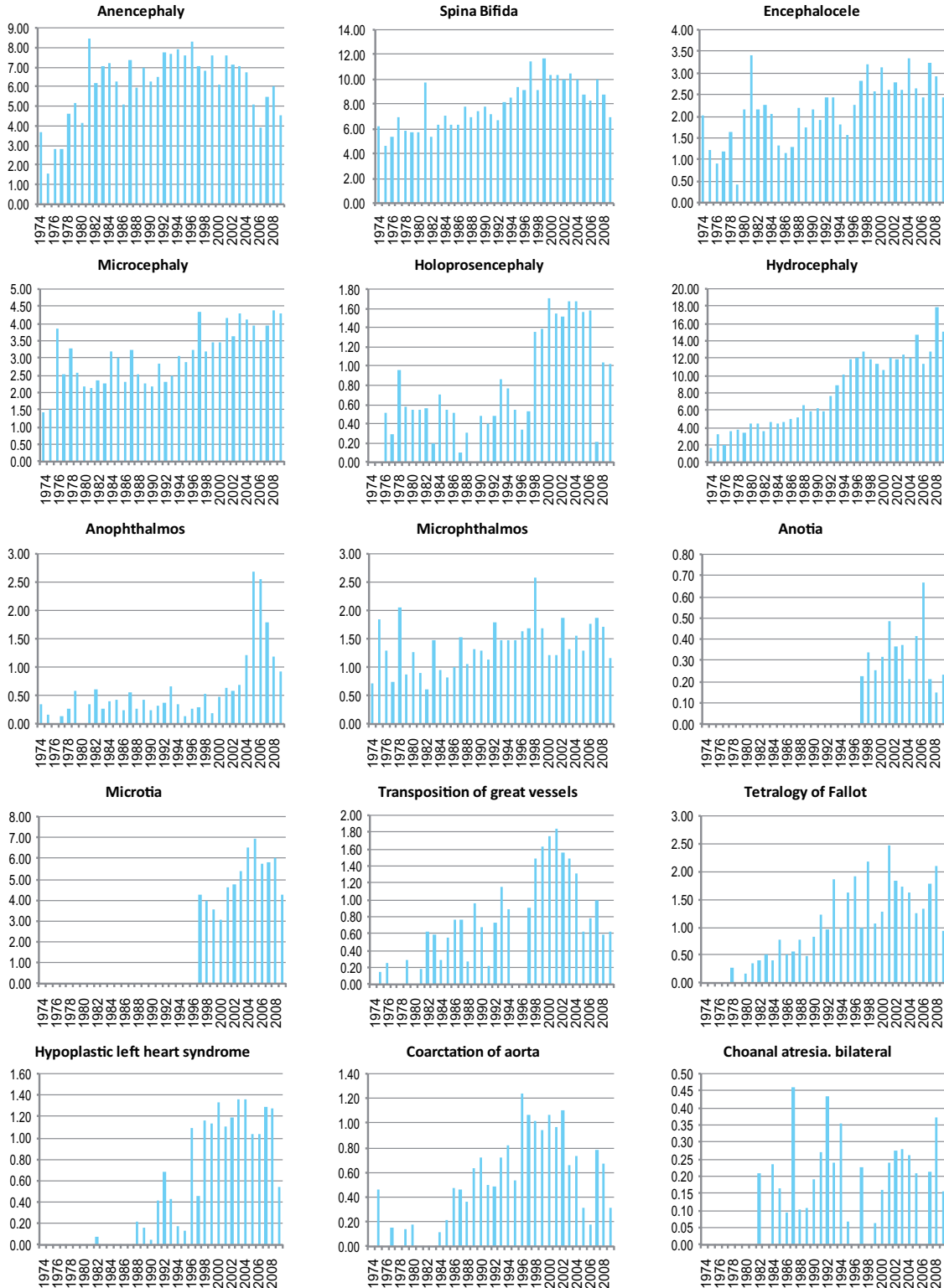
	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	438,055	579,119	968,001	1,012,539	731,513	1,018,471	759,401
Anencephaly	3.47	6.73	6.28	7.18	7.49	6.93	4.96
Spina bifida	5.82	6.54	6.97	7.62	10.14	10.22	8.55
Encephalocele	1.26	2.28	1.53	2.16	2.47	2.89	2.71
Microcephaly	2.53	2.54	2.67	2.57	3.40	3.94	3.99
Holoprosencephaly	0.39	0.50	0.30	0.59	0.85	1.62	1.13
Hydrocephaly	2.88	4.30	5.50	7.68	11.93	11.84	14.26
Anophthalmos	0.25	0.38	0.38	0.40	0.29	0.72	1.94
Microphthalmos	1.23	1.04	1.15	1.43	1.82	1.44	1.55
Unspecified Anophthalmos/Microphthalmos	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anotia	nr	nr	nr	nr	0.27*	0.35	0.36
Microtia	nr	nr	nr	nr	3.91*	4.88	5.87
Unspecified Anotia/Microtia	nr	nr	nr	nr	0.09*	0.10	0.16
Transposition of great vessels	0.11	0.41	0.66	0.72	1.03	1.59	0.72
Tetralogy of Fallot	0.05	0.41	0.62	1.19	1.56	1.80	1.46
Hypoplastic left heart syndrome	0.00	0.02	0.07	0.36	0.81	1.27	1.04
Coarctation of aorta	0.11	0.05	0.43	0.64	0.96	0.90	0.43
Choanal atresia, bilateral	0.00	0.12	0.19	0.30	0.07	0.25	0.18
Cleft palate without cleft lip	3.20	3.35	3.31	3.87	3.73	5.03	4.36
Cleft lip with or without cleft palate	11.07	10.53	10.83	10.46	12.59	13.46	12.54
Oesophageal atresia/stenosis with or without fistula	2.01	2.68	2.58	2.83	3.40	3.67	3.44
Small intestine atresia/stenosis	0.48	1.64	1.44	1.82	2.01	3.06	2.94
Anorectal atresia/stenosis	2.76	3.82	3.64	4.46	4.85	5.70	5.25
Undescended testis (36 weeks of gestation or later)	1.58	3.35	4.58	4.80	5.21	6.74	9.47
Hypospadias	3.47	4.71	4.00	4.36	5.10	5.04	6.89
Epispadias	0.14	0.38	0.28	0.36	0.12	0.23	0.14
Indeterminate sex	1.00	2.33	1.90	1.88	1.72	2.29	2.54
Renal agenesis	0.43	0.66	0.85	1.61	2.24	2.50	2.54
Cystic kidney	0.55	1.11	1.47	2.06	3.70	4.28	4.04
Bladder exstrophy	0.14	0.21	0.28	0.25	0.33	0.39	0.22
Polydactyly, preaxial	2.97	2.28	2.52	2.64	2.95	3.92	3.69
Total Limb reduction defects (include unspecified)	4.09	5.49	4.83	5.52	6.14	6.77	7.85
Transverse	2.15	2.61	2.70	2.73	2.95	3.63	2.45
Preaxial	0.62	1.11	0.99	1.11	1.57	1.40	1.19
Postaxial	0.27	0.50	0.26	0.47	0.40	0.41	0.46
Intercalary	0.48	0.59	0.34	0.49	0.56	0.47	0.87
Mixed	0.48	0.60	0.42	0.58	0.55	0.63	2.38
Unspecified	0.09	0.09	0.12	0.14	0.11	0.22	0.50
Diaphragmatic hernia	0.73	1.31	1.73	2.13	3.43	3.89	3.49
Omphalocele	1.10	1.93	2.32	2.51	3.17	3.40	4.21
Gastroschisis	0.09	0.40	0.65	1.18	2.64	3.26	7.33
Unspecified Omphalocele/Gastroschisis	0.37	0.36	0.40	0.47	1.01	1.35	0.55
Prune belly sequence	0.02	0.54	0.74	0.74	1.18	1.03	0.75
Trisomy 13	0.18	0.50	0.43	0.55	0.85	0.89	0.53
Trisomy 18	0.23	0.71	0.99	0.98	1.78	2.02	1.37
Down syndrome, all ages (include age unknown)	14.63	14.78	14.94	15.84	18.00	19.75	17.51
<20	7.68	7.10	6.76	6.83	8.37	6.85	9.22
20-24	7.09	7.33	6.30	7.97	8.69	10.15	7.93
25-29	7.60	8.30	6.89	8.72	9.40	10.33	8.64
30-34	13.66	15.81	15.47	15.48	16.87	16.86	16.60
35-39	56.45	44.24	44.49	47.05	50.39	57.76	49.57
40-44	161.18	141.15	152.52	148.49	179.36	177.78	151.17
45+	269.28	283.57	270.52	244.78	361.34	374.62	329.90
unknown	---	---	---	---	---	---	---

nr = not reported

* data include less than 5 years

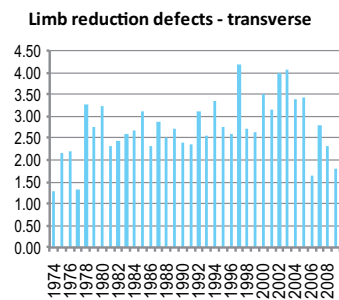
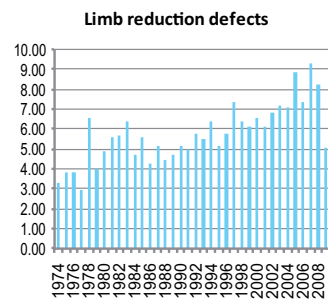
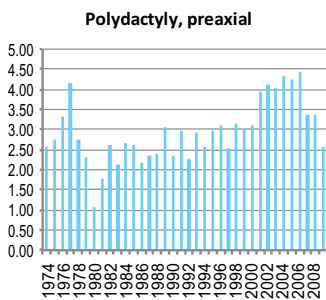
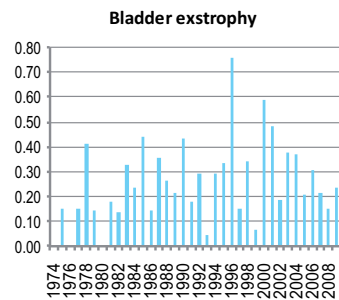
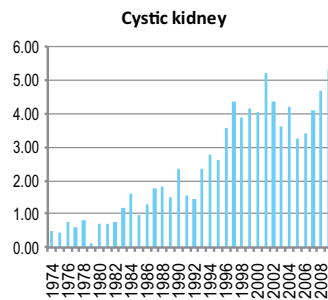
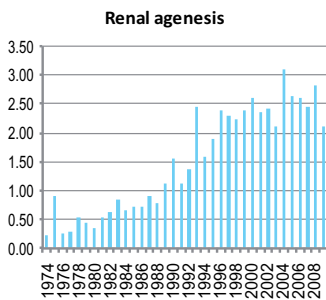
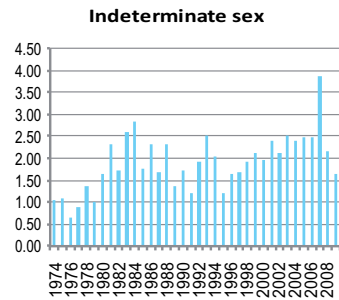
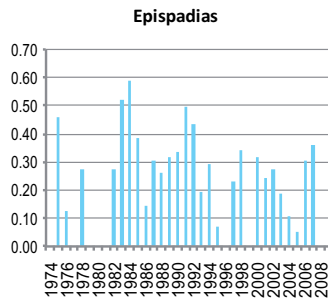
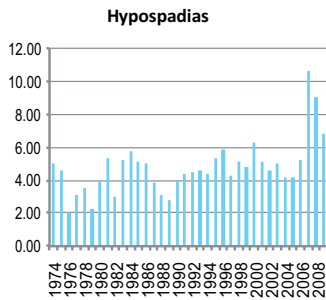
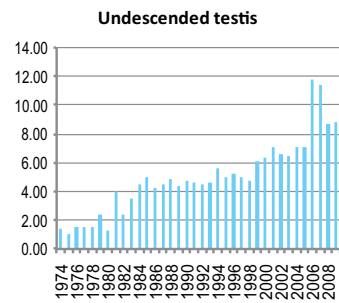
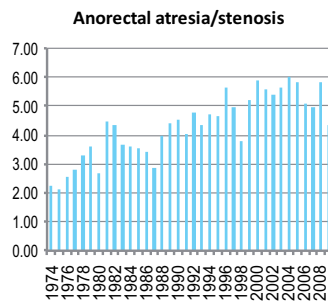
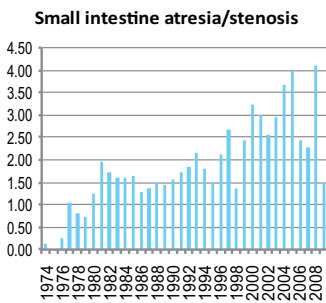
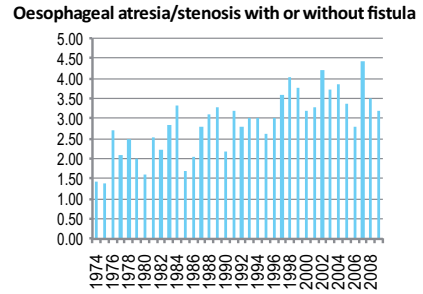
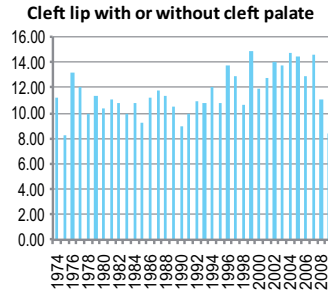
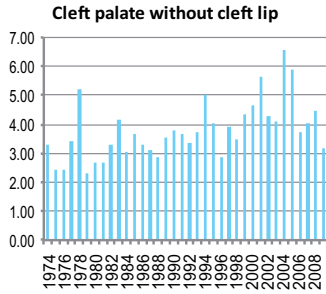
South America: ECLAMC

Time trends 1974-2009 (Birth prevalence rates per 10,000)



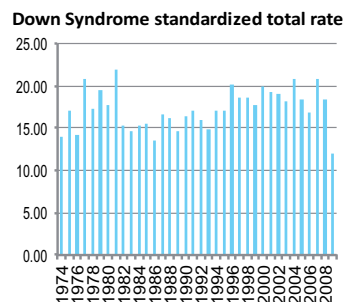
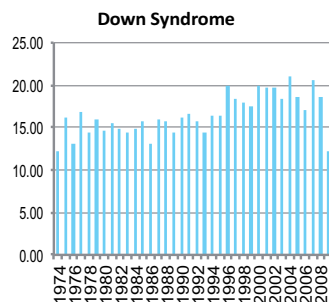
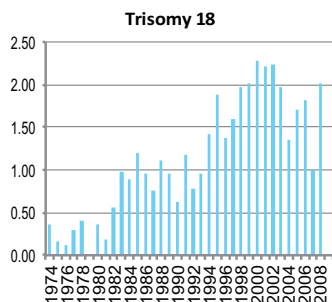
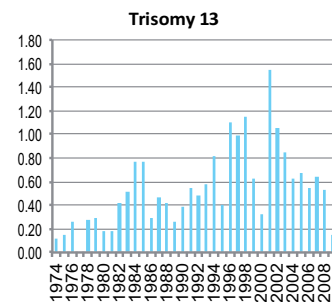
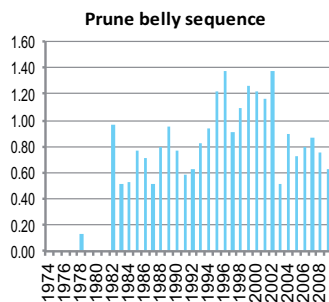
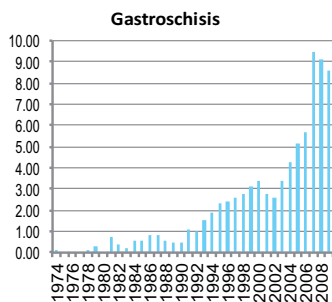
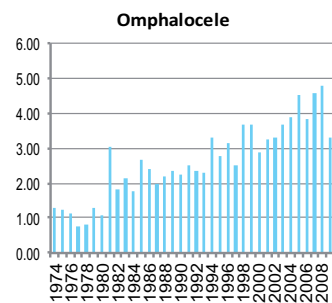
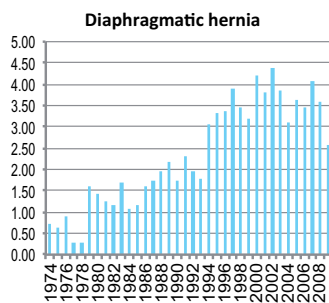
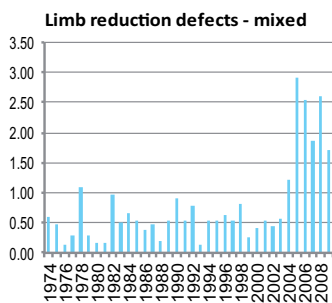
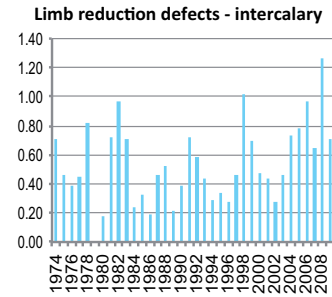
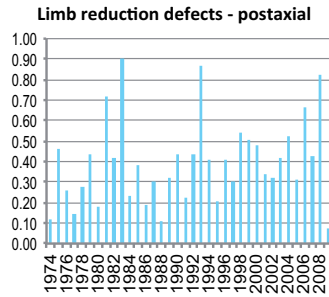
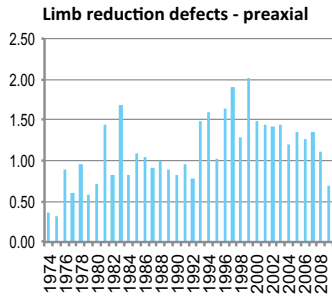
Note: ■ L+S rates

South America: ECLAMC



Note: ■ L+S rates

South America: ECLAMC



Note: ■ L+S rates

Spain: ECEMC

Spanish Collaborative Study of Congenital Malformations

History:

The programme was created in 1976 by Prof. Dr. María Luisa Martínez-Frías, as a hospital-based case-control study and surveillance system. ECEMC joined ICBDSP in 1979. It is also a member of EUROCAT contributing with data since 1980. In January 2002 the ECEMC Programme became integrated into the CIAC (Research Center on Congenital Anomalies), of the Instituto de Salud Carlos III (ISCIII), now dependent from the Ministerio de Economía y Competitividad, of Spain. In 2006 the ECEMC was recognized as an excellence Research programme to be integrated into the CIBERER (Centre for Biomedical Research on Rare Diseases). ECEMC also operates two Teratogen Information Services (TIS) since 1991, one for the general population and another one for physicians. ECEMC, the two TIS and CIAC are directed by Prof. Martínez-Frías.

Size and coverage:

Data are obtained from about 70 hospitals distributed all over Spain. The annual number of births is about 100,000, representing more than 20% of all Spanish births. Stillbirths of at least 24 weeks or 500 g. have been included since 1980. Data on terminations of pregnancy due to the presence of congenital anomalies, which can be legally performed under defined circumstances, can be gathered on a routine basis only in some participating hospitals.

Legislation and funding:

It is a research programme with voluntary participation of hospitals (but mandatory subjugation to the operating rules expressed in the Operating Manual, for those participating), and is financed mainly by the Spanish Administration and, partially, by non-governmental organisations.

Sources of ascertainment:

The detection period comprises the first 3 days of life, including major and/or minor/mild defects. For some selected cases a longer follow-up can be performed. Controls are defined as the next non-malformed infant born at the same hospital that the case with the same sex as the malformed infant. The information comes from delivery units and paediatric departments of the participating hospitals. Mothers are interviewed directly by the participating physicians, during those first 3 days after infant's delivery, to fill in the ECEMC standard protocols, which include more than 300 data for each child, whether case or control. The information for each case and its control is gathered by the same physician after the written informed consent of parents. In many instances, photographs, imaging studies, high-resolution bands karyotypes and molecular analysis when needed (which are performed at the central

group of the ECEMC), and other complementary studies are available. Biological samples are also stored in the ECEMC registry for those cases and controls for which the collaborating physicians send them, with the informed consent of the parents.

Exposure information:

The mother of each reported infant (case or control) is interviewed within the first three days after delivery to obtain data on several exposures (parental occupation, maternal acute or chronic diseases, drug usage, illicit drugs, alcohol and tobacco maternal consumption, exposure to other chemical or physical factors), apart from the other data gathered (family history, obstetrical and demographic data, paternal exposures among others). It is important to note that when the pediatricians detect the cases and select the control children, they are blinded to the different maternal and family data that they are going to collect.

Background information:

Total number of births by sex and number of twin pairs in each participating hospital are gathered. Other background information is obtained from the control material.

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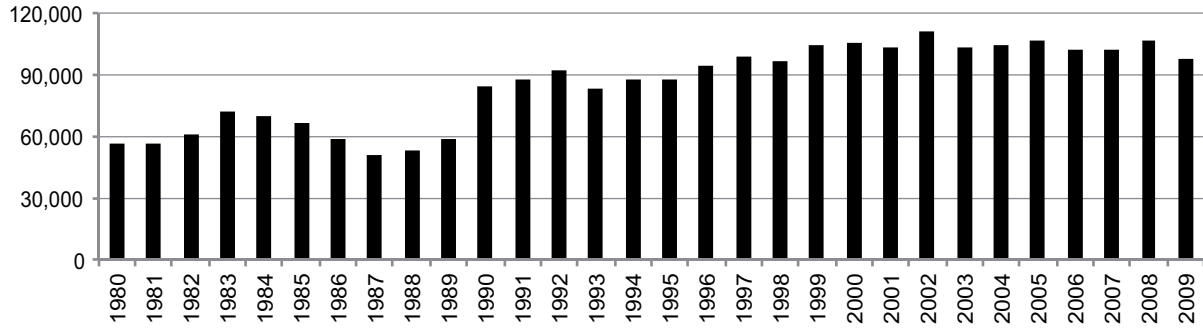
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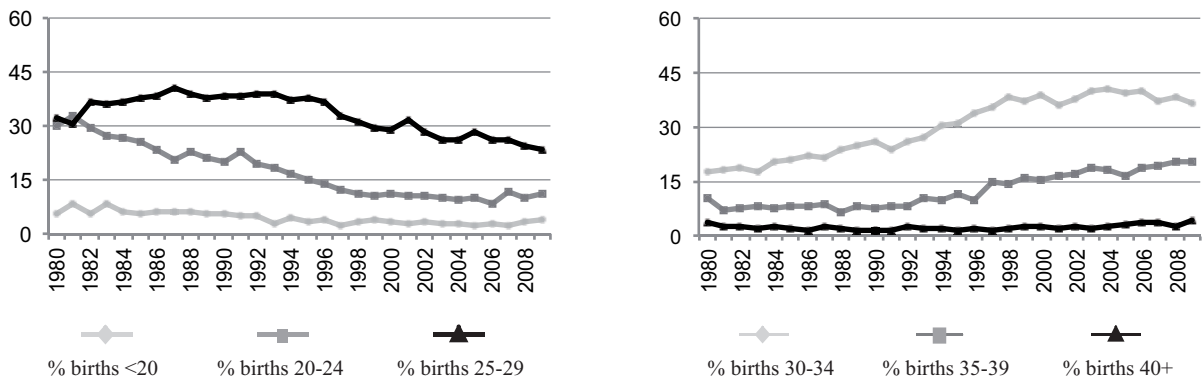
David Prieto, PhD
Professor of Biostatistics
Lecturer of the Department of Epidemiology & Population Health (Medical Statistics Unit)
London School of Hygiene & Tropical Medicine

Spain: ECEMC

Total births by year



Percentage of births by year and maternal age



Spain: ECEMC, 2009

Live births (LB)	97,725
Stillbirths (SB)	345
Total births	98,070
Number of terminations of pregnancy (ToP) for birth defects	nr

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	0	0	nr	0.00
Spina bifida	5	0	nr	0.51
Encephalocele	0	1	nr	0.10
Microcephaly	8	0	nr	0.82
Holoprosencephaly	3	1	nr	0.41
Hydrocephaly	14	0	nr	1.43
Anophthalmos	2	0	nr	0.20
Microphthalmos	9	0	nr	0.92
Unspecified Anophthalmos/Microphthalmos	0	0	nr	0.00
Anotia	0	0	nr	0.00
Microtia	22	1	nr	2.35
Unspecified Anotia/Microtia	0	0	nr	0.00
Transposition of great vessels	10	1	nr	1.12
Tetralogy of Fallot	7	0	nr	0.71
Hypoplastic left heart syndrome	1	0	nr	0.10
Coarctation of aorta	2	1	nr	0.31
Choanal atresia, bilateral	3	0	nr	0.31
Cleft palate without cleft lip	26	0	nr	2.65
Cleft lip with or without cleft palate	22	1	nr	2.35
Oesophageal atresia/stenosis with or without fistula	12	1	nr	1.33
Small intestine atresia/stenosis	4	0	nr	0.41
Anorectal atresia/stenosis	7	1	nr	0.82
Undescended testis (36 weeks of gestation or later)	21	1	nr	2.24
Hypospadias	14	0	nr	1.43
Epispadias	2	0	nr	0.20
Indeterminate sex	8	0	nr	0.82
Renal agenesis	0	0	nr	0.00
Cystic kidney	11	1	nr	1.22
Bladder exstrophy	1	0	nr	0.10
Polydactyly, preaxial	21	0	nr	2.14
Total Limb reduction defects (include unspecified)	37	3	nr	4.08
Transverse	16	1	nr	1.73
Preaxial	5	1	nr	0.61
Postaxial	0	0	nr	0.00
Intercalary	1	0	nr	0.10
Mixed	9	0	nr	0.92
Unspecified	6	1	nr	0.71
Diaphragmatic hernia	7	1	nr	0.82
Omphalocele	5	0	nr	0.51
Gastroschisis	4	3	nr	0.71
Unspecified Omphalocele/Gastroschisis	1	0	nr	0.10
Prune belly sequence	2	0	nr	0.20
Trisomy 13	0	1	nr	0.10
Trisomy 18	3	2	nr	0.51
Down syndrome, all ages (include age unknown)	68	3	nr	7.24
<20	0	0	nr	0.00
20-24	2	1	nr	2.66
25-29	7	0	nr	3.03
30-34	21	0	nr	5.87
35-39	24	1	nr	12.51
40-44	9	1	nr	27.96
45+	5	0	nr	111.86
unknown	0	0	nr	---

nr = not reported

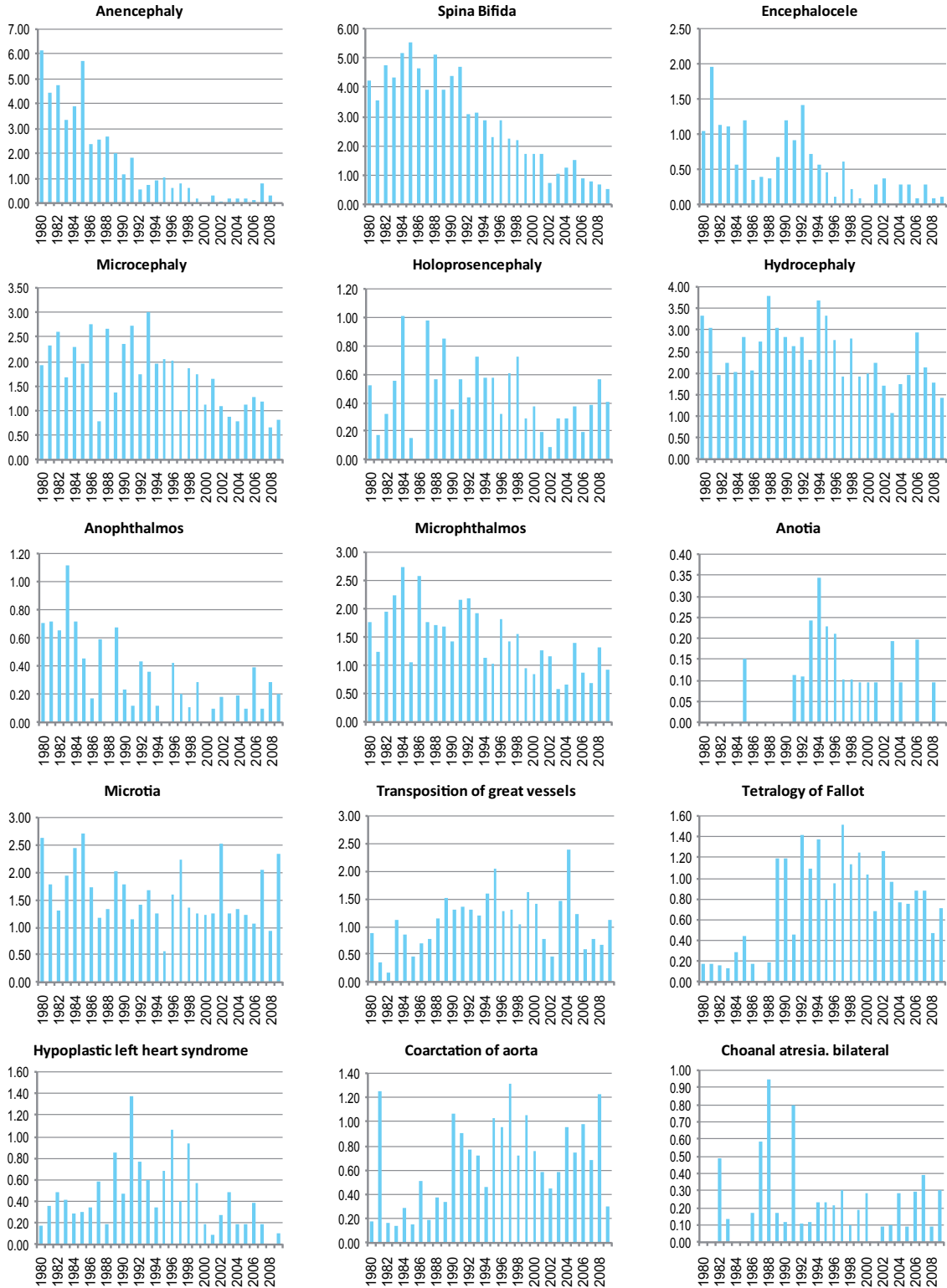
Spain: ECEMC, Previous years rates 1980 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births		315,670	287,748	433,858	481,187	527,288	515,449
Anencephaly		4.44	3.16	1.04	0.64	0.15	0.27
Spina bifida		4.44	4.66	3.62	2.24	1.29	0.87
Encephalocele		1.14	0.63	0.97	0.29	0.19	0.17
Microcephaly		2.15	1.91	2.35	1.72	1.10	1.01
Holoprosencephaly		0.54	0.49	0.53	0.50	0.25	0.39
Hydrocephaly		2.47	2.88	2.86	2.51	1.74	2.06
Anophthalmos		0.79	0.38	0.25	0.21	0.09	0.21
Microphthalmos		2.03	1.74	1.77	1.35	0.91	1.05
Unspecified Anophthalmos/Microphthalmos		0.00	0.00	0.00	0.00	0.00	0.00
Anotia		0.00	0.03	0.16	0.15	0.09	0.06
Microtia		2.03	1.84	1.45	1.41	1.54	1.51
Unspecified Anotia/Microtia		0.00	0.00	0.00	0.00	0.00	0.00
Transposition of great vessels		0.70	0.90	1.36	1.45	1.29	0.87
Tetralogy of Fallot		0.19	0.42	1.11	1.14	0.95	0.74
Hypoplastic left heart syndrome		0.35	0.45	0.71	0.73	0.25	0.17
Coarctation of aorta		0.38	0.31	0.78	1.02	0.66	0.80
Choanal atresia, bilateral		0.13	0.35	0.28	0.21	0.15	0.23
Cleft palate without cleft lip		5.13	3.96	5.32	3.99	3.94	3.43
Cleft lip with or without cleft palate		5.89	5.14	5.90	4.49	3.74	3.12
Oesophageal atresia/stenosis with or without fistula		2.31	1.60	2.35	1.60	1.97	1.63
Small intestine atresia/stenosis		0.60	0.42	0.55	0.37	0.63	0.54
Anorectal atresia/stenosis		2.50	2.36	2.07	2.18	1.95	1.67
Undescended testis (36 weeks of gestation or later)		1.81	2.50	2.67	2.91	2.39	2.10
Hypospadias		2.79	2.19	2.07	1.66	2.28	1.44
Epispadias		0.22	0.14	0.25	0.06	0.08	0.10
Indeterminate sex		1.01	0.94	0.88	0.60	0.55	0.49
Renal agenesis		0.60	0.94	0.65	0.50	0.06	0.10
Cystic kidney		1.17	1.46	1.73	1.79	1.40	1.63
Bladder exstrophy		0.22	0.42	0.21	0.27	0.21	0.17
Polydactyly, preaxial		2.38	2.50	3.43	2.58	1.84	2.37
Total Limb reduction defects (include unspecified)		7.41	6.32	7.05	5.84	4.67	4.25
Transverse		3.14	2.81	2.47	2.41	1.86	1.71
Preaxial		1.20	1.04	0.92	0.73	0.59	0.60
Postaxial		0.13	0.17	0.18	0.25	0.11	0.10
Intercalary		0.57	0.24	0.65	0.15	0.34	0.17
Mixed		1.17	0.87	1.24	1.10	0.89	0.91
Unspecified		1.20	1.18	1.59	1.21	0.68	0.49
Diaphragmatic hernia		2.76	2.12	2.24	1.54	0.63	1.13
Omphalocele		1.81	1.32	1.11	0.91	0.53	0.56
Gastroschisis		0.60	0.38	0.35	0.46	0.36	0.68
Unspecified Omphalocele/Gastroschisis		0.32	0.38	0.21	0.06	0.02	0.02
Prune belly sequence		0.57	0.52	0.55	0.31	0.15	0.23
Trisomy 13		0.38	0.45	0.46	0.52	0.34	0.23
Trisomy 18		0.89	0.97	1.08	0.69	0.64	0.66
Down syndrome, all ages (include age unknown)		14.41	15.22	12.70	10.85	7.97	7.10
<20		7.35	8.07	8.57	1.81	1.79	5.59
20-24		6.98	6.37	4.50	5.08	4.90	4.86
25-29		6.10	8.18	7.74	5.78	5.00	3.47
30-34		9.77	15.09	14.26	10.92	6.98	5.53
35-39		46.67	41.61	35.92	23.78	12.68	11.71
40-44		147.44	186.36	64.92	51.95	45.00	28.29
45+		233.13	141.70	248.45	531.91	42.64	89.80
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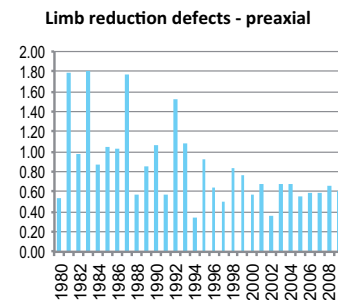
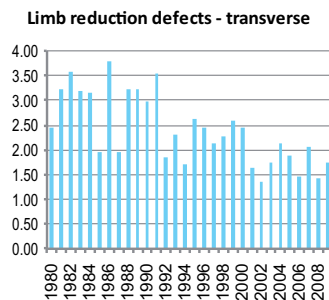
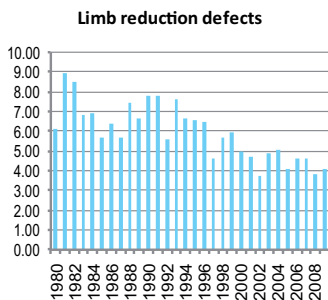
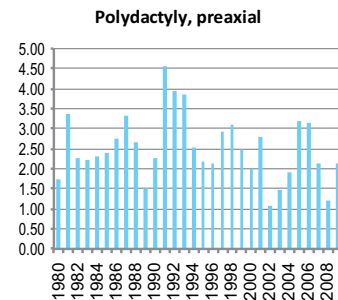
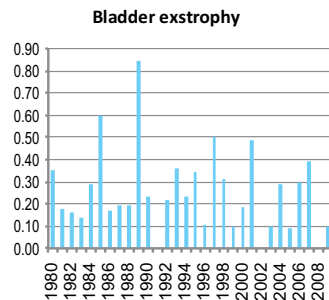
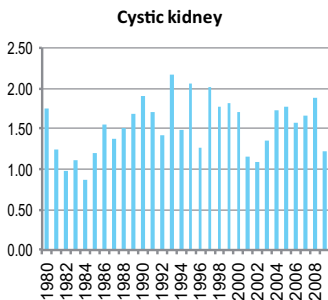
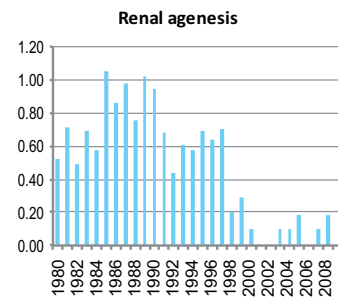
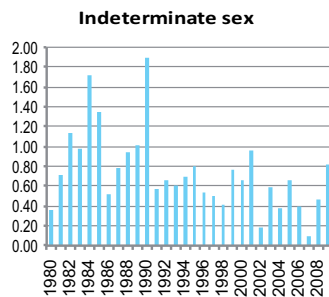
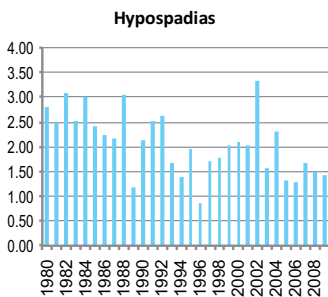
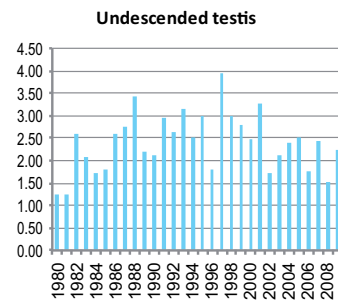
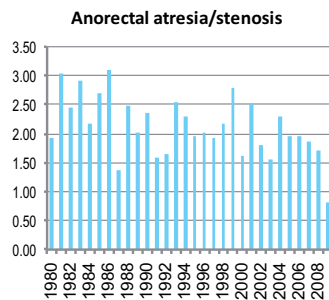
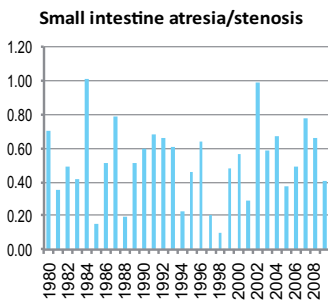
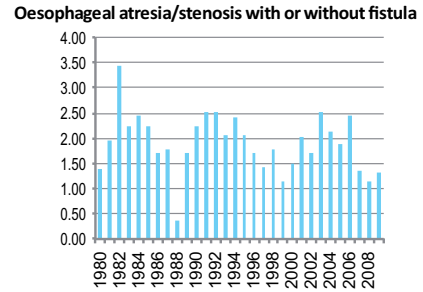
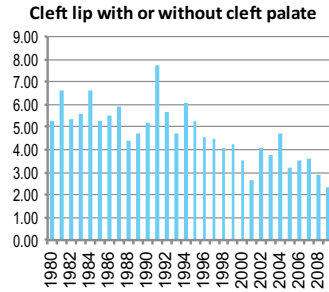
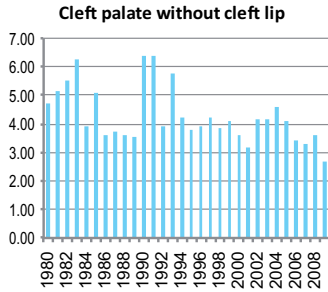
Spain: ECEMC

Time trends 1980-2009 (Birth prevalence rates per 10,000)



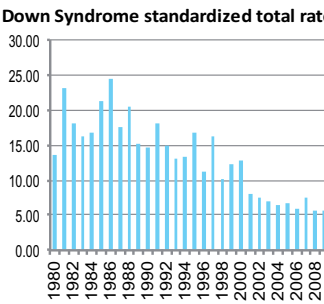
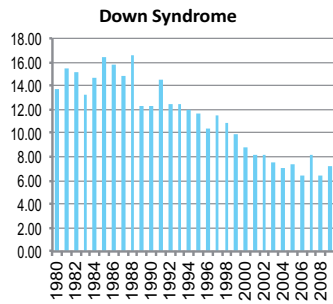
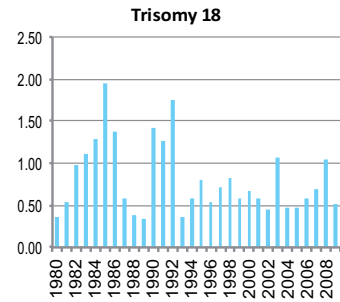
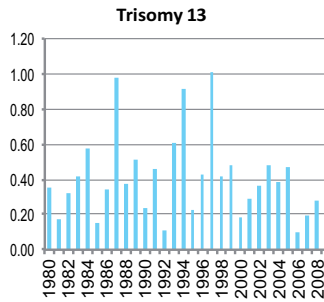
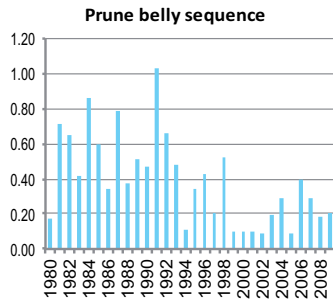
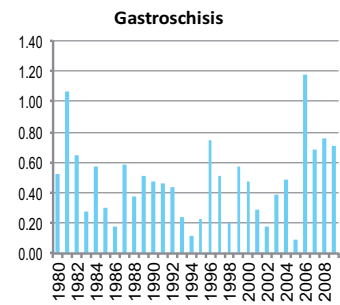
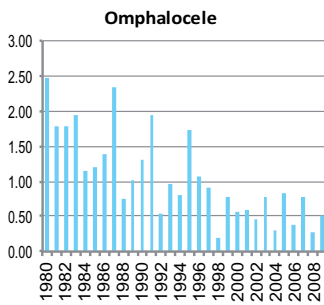
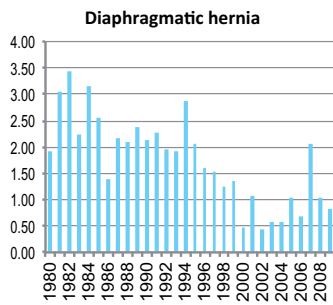
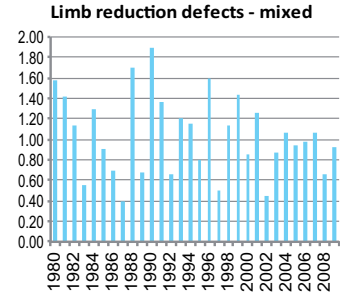
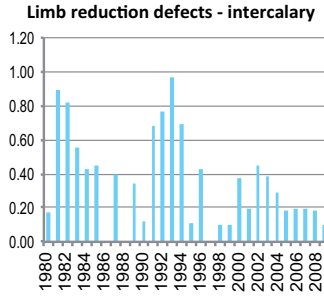
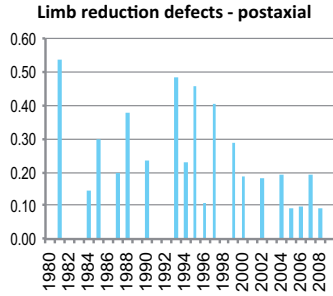
Note: ■ L+S rates

Spain: ECEMC



Note: ■ L+S rates

Spain: ECEMC



Note: ■ L+S rates

Sweden

The Swedish Registry of Congenital Malformations and the Medical Birth Registry

History:

The Swedish Registry of Congenital Malformations started in 1964 and changed name to The Swedish Birth Defects Register in 2007. The Swedish Medical Registry started in 1973. The programme was a founding member of the ICBDSDR and contributed with data until 1994. The register has a new regime from 1999 and is since then again a full member of the ICBDSDR.

Size and coverage:

All births in Sweden are included, approximately 100,000 – 120,000 annual births. The definition of a child is all children born alive and foetal deaths after 22 weeks gestation. In 1999 a special fetal surveillance system was started to include those fetuses with congenital anomalies who were terminated as a result of prenatal diagnosis.

Legislation and funding:

Reporting of birth defects in live- and stillborn infants is compulsory. Reporting of terminated pregnancies because of birth defects of the fetuses is, however, not compulsory. The registers are run by and funded by the National Board of Health and Social Welfare (Governmental).

Sources of ascertainment:

Reports are received from delivery units, paediatric clinics, pathology departments, child cardiology clinics, and cytogenetic laboratories.

Exposure information:

Some exposure information for all births is available in the Medical Birth Registry: maternal occupation, civic status, maternal smoking, drug use during pregnancy, contraceptive usage, and maternal diseases.

Background information:

Epidemiological background data are available on all birth in the Medical Birth Registry.

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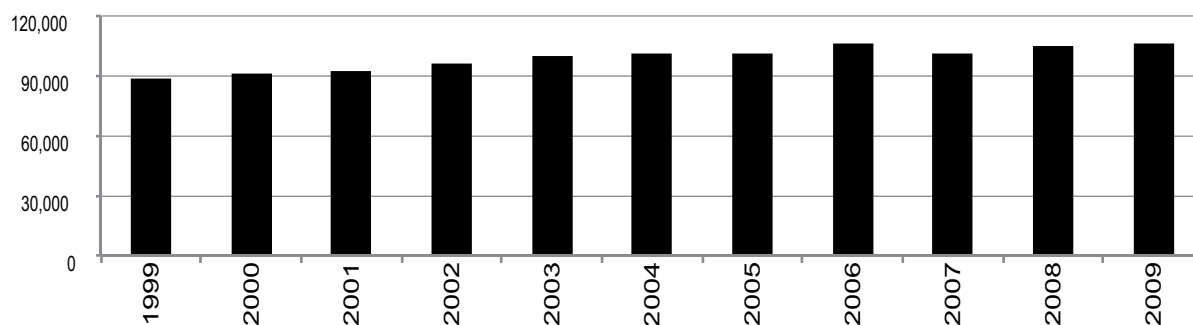
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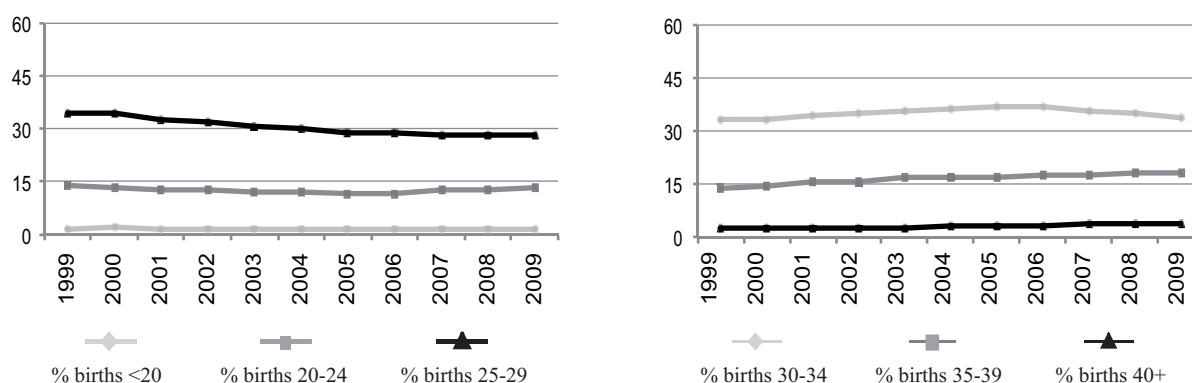
Monitoring Systems

Sweden

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	93	92.1	Cystic kidney	39	37.9
Spina bifida	84	59.6	Limb reduction defects	29	18.7
Encephalocele	31	77.5	Diaphragmatic hernia	43	43.4
Holoprosencephaly	14	66.7	Omphalocele	48	72.7
Hydrocephaly	66	65.3	Gastroschisis	13	25.5
Hypoplastic left heart syndrome	46	59.7	Trisomy 13	86	78.9
Cleft palate without cleft lip	7	4.1	Trisomy 18	195	79.3
Cleft lip with or without cleft palate	8	4.1	Down syndrome	534	57.3
Renal agenesis	34	50.7			

Total ToPs with births defects = 1,647 (Ratio ToPs/Births: 5.25 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

Sweden, 2009

Live births (LB)	106,320
Stillbirths (SB)	435
Total births	106,755
Number of terminations of pregnancy (ToP) for birth defects	582

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	3	1	28	3.00
Spina bifida	18	0	22	3.75
Encephalocele	4	0	7	1.03
Microcephaly	3	0	3	0.56
Holoprosencephaly	1	0	6	0.66
Hydrocephaly	13	0	21	3.18
Anophthalmos	0	0	0	0.00
Microphthalmos	2	0	1	0.28
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	4	0	0	0.37
Microtia	3	0	0	0.28
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	18	0	3	1.97
Tetralogy of Fallot	20	0	2	2.06
Hypoplastic left heart syndrome	9	0	13	2.06
Coarctation of aorta	38	0	5	4.03
Choanal atresia, bilateral	6	0	0	0.56
Cleft palate without cleft lip	50	0	3	4.96
Cleft lip with or without cleft palate	91	0	6	9.09
Oesophageal atresia/stenosis with or without fistula	28	0	2	2.81
Small intestine atresia/stenosis	20	0	1	1.97
Anorectal atresia/stenosis	30	0	6	3.37
Undescended testis (36 weeks of gestation or later)	5	0	0	0.47
Hypospadias	265	0	1	24.92
Epispadias	4	0	0	0.37
Indeterminate sex	1	0	0	0.09
Renal agenesis	12	0	4	1.50
Cystic kidney	20	0	16	3.37
Bladder exstrophy	2	0	0	0.19
Polydactyly, preaxial	23	0	1	2.25
Total Limb reduction defects (include unspecified)	47	0	12	5.53
Transverse	29	0	9	3.56
Preaxial	3	0	1	0.37
Postaxial	3	0	0	0.28
Intercalary	4	0	0	0.37
Mixed	9	0	2	1.03
Unspecified	0	0	0	0.00
Diaphragmatic hernia	19	0	9	2.62
Omphalocele	7	0	22	2.72
Gastroschisis	11	1	5	1.59
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	1	0.09
Trisomy 13	7	0	37	4.12
Trisomy 18	12	1	68	7.59
Down syndrome, all ages (include age unknown)	142	1	207	32.79
<20	1	0	0	5.64
20-24	3	1	1	3.53
25-29	16	0	8	7.86
30-34	37	0	28	17.83
35-39	39	0	77	58.99
40-44	31	0	82	284.56
45+	12	0	10	1062.80
unknown	3	0	1	---

nr = not reported

Sweden, Previous years rates 1999 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999*	2000-2004	2005-2009
Total births					88,512	479,555	521,583
Anencephaly					3.39	3.71	3.45
Spina bifida					4.63	4.59	4.43
Encephalocele					1.13	1.06	1.17
Microcephaly					0.45	0.23	0.44
Holoprosencephaly					0.56	0.96	0.92
Hydrocephaly					2.60	3.52	3.24
Anophthalmos					0.23	0.17	0.17
Microphthalmos					0.23	0.46	0.33
Unspecified Anophthalmos/Microphthalmos					0.00	0.00	0.10
Anotia					1.24	0.90	0.73
Microtia					0.00	0.10	0.27
Unspecified Anotia/Microtia					0.00	0.00	0.06
Transposition of great vessels					2.26	3.63	3.53
Tetralogy of Fallot					2.37	2.56	2.93
Hypoplastic left heart syndrome					1.92	2.31	2.43
Coarctation of aorta					3.62	4.44	4.66
Choanal atresia, bilateral					0.68	0.69	0.31
Cleft palate without cleft lip					6.33	5.21	5.56
Cleft lip with or without cleft palate					11.64	9.78	8.01
Oesophageal atresia/stenosis with or without fistula					1.69	2.63	2.47
Small intestine atresia/stenosis					2.49	2.46	2.19
Anorectal atresia/stenosis					3.50	3.04	2.80
Undescended testis (36 weeks of gestation or later)					nr	nr	0.22*
Hypospadias					20.79	20.35	22.41
Epispadias					0.11	0.21	0.21
Indeterminate sex					0.11	0.27	0.19
Renal agenesis					2.49	1.67	1.67
Cystic kidney					2.94	3.11	3.66
Bladder exstrophy					0.34	0.25	0.27
Polydactyly, preaxial					3.62	4.69	3.20
Total Limb reduction defects (include unspecified)					4.63	5.17	4.83
Transverse					2.71	3.86	2.99
Preaxial					0.23	0.25	0.54
Postaxial					0.11	0.19	0.15
Intercalary					0.11	0.23	0.25
Mixed					1.47	0.65	0.58
Unspecified					0.00	0.00	1.10
Diaphragmatic hernia					3.05	2.69	3.14
Omphalocele					2.26	2.61	2.45
Gastroschisis					2.37	1.77	1.69
Unspecified Omphalocele/Gastroschisis					0.00	0.00	0.00
Prune belly sequence					0.11	0.10	0.21
Trisomy 13					2.03	2.31	3.34
Trisomy 18					5.87	6.05	8.24
Down syndrome, all ages (include age unknown)					22.48	24.48	28.91
<20					5.97	9.62	10.25
20-24					7.22	9.32	7.06
25-29					6.26	9.12	9.67
30-34					15.57	16.89	17.61
35-39					58.93	55.36	55.68
40-44					143.39	170.42	210.01
45+					224.72	466.02	694.94
unknown					---	---	---

nr = not reported

* data include less than 5 years

Sweden

Time trends 1999-2009 (Birth prevalence rates per 10,000)



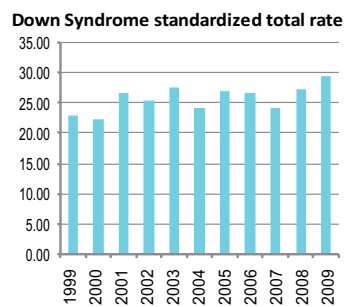
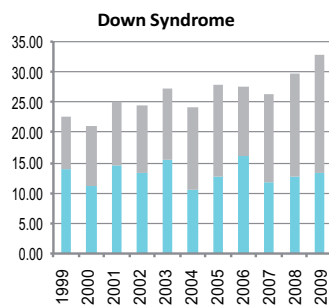
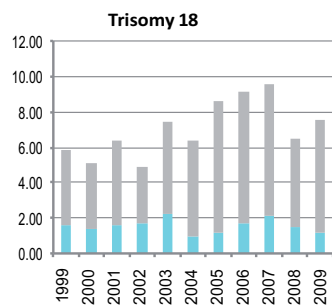
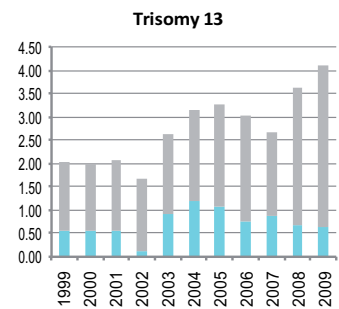
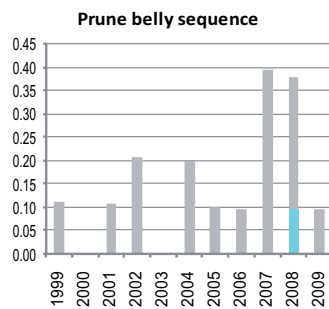
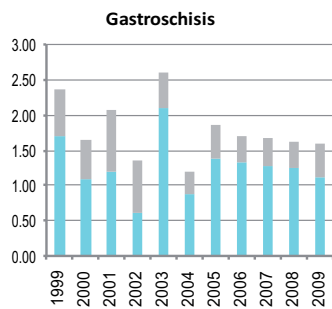
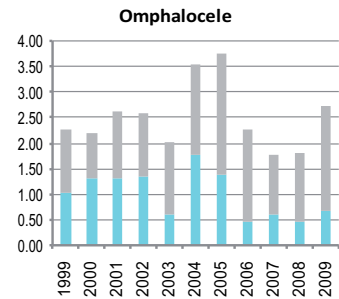
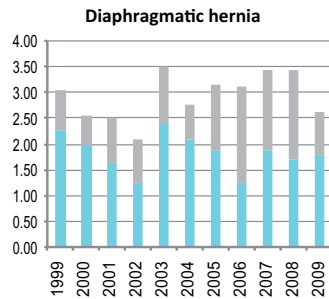
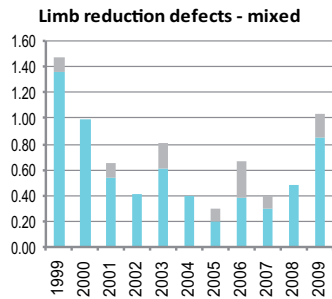
Note: L+S rates, ToP rates

Sweden



Note: ■ L+S rates, ■ ToP rates

Sweden



Note: L+S rates, ToP rates

Ukraine: OMNI-Net Ukraine Birth Defects Program

History:

Population based birth defects surveillance began in 2000 in the framework of the Ukrainian-American Birth Defects Program (UABDP) funded by the United States Agency for International Development (USAID). The program became an associate member of ICBDSP in 2001. In 2005 the USAID component was completed and the program was assumed by OMNI-Net, a not-for-profit international organization incorporated in Ukraine, and is continued as OMNI-Net Ukraine Birth Defects Program. OMNI-Net represents five resource OMNI-Centers all of which provide care for children with birth defects, promote prevention programs, participate in parental organizations and engage in collaborative programs with national and international partners.

Program objectives include universal folic acid flour fortification, methods to reduce alcohol impact on child development in collaboration with partners and promoting international partnerships.

Legislation and funding:

OMNI-Net personnel are financed from regional budgets. The legislation and rules by the Ministry of Health mandates the reporting of birth defects. BD data is reported by Oblast Vital Statistics Centrum who aggregates, formats and forwards the data to the Ministry of Health.

Population Coverage:

BD surveillance annually covers about 30000 births in two oblasts (provinces) of Northwestern Ukraine – Rivne and Volyn, representing approximately 6% of births in Ukraine. The population is relatively homogeneous and stable (data is pooled from these two oblasts). The northern counties (rayons) of both oblasts are contaminated from Chernobyl disaster.

Sources of ascertainment:

Relevant hospital admission/discharge summaries are systematically reviewed. Qualified Registry

specialists also routinely review all medical records of regional pediatric cardiology centres and obtain ascertainment of diagnostic details. Data from specialty clinics, laboratories (including cytogenetic one) and other services are explored. Our cytogenetic laboratories are the only ones in the region and they provide us with study reports. Pregnancy, obstetrics, delivery, neonatal and pediatrics records are reviewed. The information is substantial regarding service providers located in regional centres, but limited regarding service providers in rural environments.

Maximum Age at Diagnosis:

Up to 1 year of age.

Exposure information:

Routine information collection is limited except when ad hoc circumstances are noted. An expansion of exposure data collection is in progress.

Prenatal diagnosis information:

The information is substantial regarding service providers located in regional centers, but limited regarding service providers in rural environment.

Background information.

Data regarding ionizing radiation pollution in contaminated rayons is available by special agreements. Data from a population based neonatal registry is also available by special agreements.

Addresses and Staff:

Program Director: Dr. Wladimir Wertelecki
Medical Coordinator: Dr. Lyubov Yevtushok
"OMNI-Net for Children", 36, 16 Lypnya Str., Room 709, Rivne, Ukraine 33028

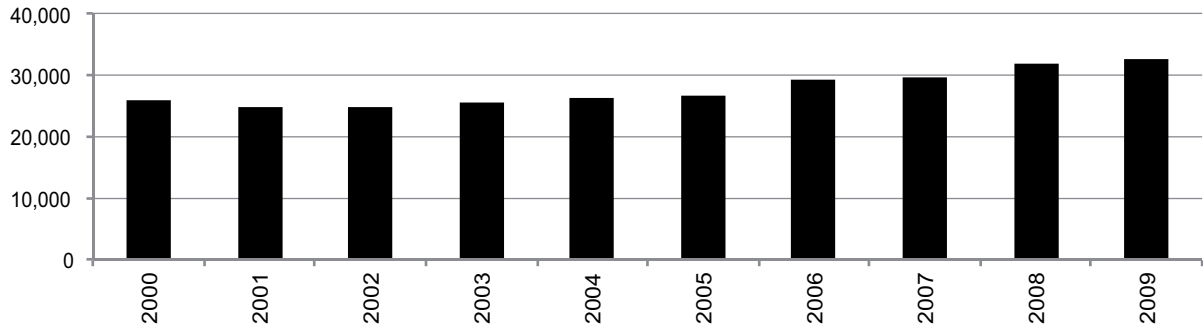
Phone/Fax: 38 036 262 3447

E-mail: werteleckiomni@gmail.com
yevtushokl@gmail.com
rivneomni2@gmail.com

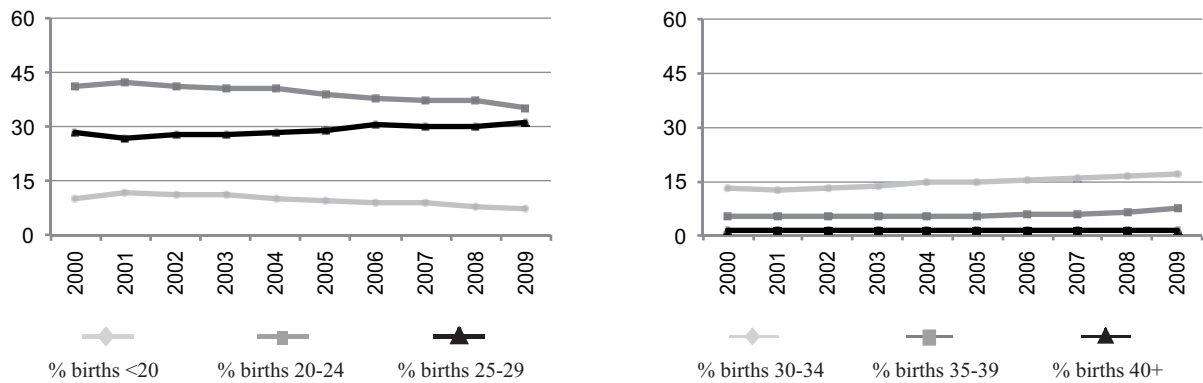
Website: <http://www.ibis-birthdefects.org/>

Ukraine: OMNI-Net

Total births by year



Percentage of births by year and maternal age



Ukraine: OMNI-Net, 2009

Live births (LB)	32,289
Stillbirths (SB)	197
Total births	32,486
Number of terminations of pregnancy (ToP) for birth defects	nr

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	1	6	18	7.70
Spina bifida	14	1	19	10.47
Encephalocele	3	0	3	1.85
Microcephaly	19	1	nr	6.16
Holoprosencephaly	6	2	nr	2.46
Hydrocephaly	16	7	nr	7.08
Anophthalmos	2	0	nr	0.62
Microphthalmos	6	0	nr	1.85
Unspecified Anophthalmos/Microphthalmos	0	0	nr	0.00
Anotia	1	0	nr	0.31
Microtia	11	0	nr	3.39
Unspecified Anotia/Microtia	0	0	nr	0.00
Transposition of great vessels	8	0	nr	2.46
Tetralogy of Fallot	12	1	nr	4.00
Hypoplastic left heart syndrome	10	0	nr	3.08
Coarctation of aorta	5	0	nr	1.54
Choanal atresia, bilateral	1	0	nr	0.31
Cleft palate without cleft lip	26	0	nr	8.00
Cleft lip with or without cleft palate	25	1	nr	8.00
Oesophageal atresia/stenosis with or without fistula	6	0	nr	1.85
Small intestine atresia/stenosis	4	1	nr	1.54
Anorectal atresia/stenosis	6	0	nr	1.85
Undescended testis (36 weeks of gestation or later)	97	0	nr	29.86
Hypospadias	11	0	nr	3.39
Epispadias	0	0	nr	0.00
Indeterminate sex	1	0	nr	0.31
Renal agenesis	2	0	nr	0.62
Cystic kidney	20	3	nr	7.08
Bladder exstrophy	3	0	nr	0.92
Polydactyly, preaxial	14	0	nr	4.31
Total Limb reduction defects (include unspecified)	15	0	nr	4.62
Transverse	11	0	nr	3.39
Preaxial	1	0	nr	0.31
Postaxial	1	0	nr	0.31
Intercalary	0	0	nr	0.00
Mixed	1	0	nr	0.31
Unspecified	0	0	nr	0.00
Diaphragmatic hernia	9	3	nr	3.69
Omphalocele	8	1	nr	2.77
Gastroschisis	5	1	nr	1.85
Unspecified Omphalocele/Gastroschisis	0	0	nr	0.00
Prune belly sequence	0	0	nr	0.00
Trisomy 13	1	0	nr	0.31
Trisomy 18	2	0	nr	0.62
Down syndrome, all ages (include age unknown)	38	0	nr	11.70
<20	0	0	nr	0.00
20-24	7	0	nr	6.11
25-29	9	0	nr	8.82
30-34	7	0	nr	12.65
35-39	6	0	nr	25.37
40-44	7	0	nr	141.13
45+	2	0	nr	555.56
unknown	0	0	nr	---

nr = not reported

Ukraine: OMNI-Net, Previous years rates 2000 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births						127,547	149,606
Anencephaly						8.31	8.42
Spina bifida						11.45	10.09
Encephalocele						2.12	2.01
Microcephaly						2.74	4.61
Holoprosencephaly						0.55	1.40
Hydrocephaly						5.64	6.15
Anophthalmos						0.08	0.20
Microphthalmos						1.02	1.54
Unspecified Anophthalmos/Microphthalmos						0.00	0.07
Anotia						0.31	0.40
Microtia						1.65	2.41
Unspecified Anotia/Microtia						0.00	0.00
Transposition of great vessels						3.45	3.68
Tetralogy of Fallot						2.12	2.67
Hypoplastic left heart syndrome						0.94	1.67
Coarctation of aorta						1.33	1.67
Choanal atresia, bilateral						0.00	0.07
Cleft palate without cleft lip						4.31	5.95
Cleft lip with or without cleft palate						8.86	8.29
Oesophageal atresia/stenosis with or without fistula						1.49	2.34
Small intestine atresia/stenosis						1.49	1.67
Anorectal atresia/stenosis						2.82	1.87
Undescended testis (36 weeks of gestation or later)						38.81	34.42
Hypospadias						3.14	3.41
Epispadias						0.31	0.07
Indeterminate sex						0.55	0.27
Renal agenesis						0.78	0.80
Cystic kidney						2.04	4.41
Bladder exstrophy						0.86	0.60
Polydactyly, preaxial						2.82	4.81
Total Limb reduction defects (include unspecified)						3.84	3.61
Transverse						2.27	1.87
Preaxial						0.47	0.53
Postaxial						0.24	0.40
Intercalary						0.31	0.27
Mixed						0.24	0.47
Unspecified						0.31	0.00
Diaphragmatic hernia						1.88	2.54
Omphalocele						1.25	1.94
Gastroschisis						1.02	1.80
Unspecified Omphalocele/Gastroschisis						0.00	0.00
Prune belly sequence						0.00	0.00
Trisomy 13						0.16	0.40
Trisomy 18						0.31	0.40
Down syndrome, all ages (include age unknown)						12.31	13.03
<20						7.18	11.77
20-24						7.61	6.27
25-29						9.28	8.60
30-34						16.38	15.04
35-39						30.40	37.03
40-44						102.62	142.72
45+						816.33	326.80
unknown						---	---

nr = not reported

Ukraine: OMNI-Net

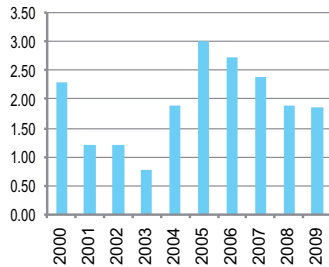
Time trends 2000-2009 (Birth prevalence rates per 10,000)



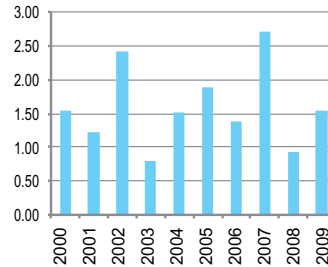
Note: L+S rates, ToP rates

Ukraine: OMNI-Net

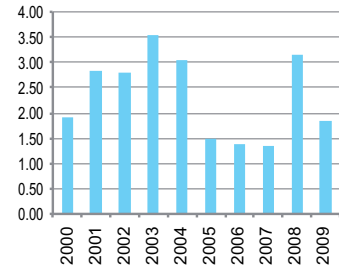
Oesophageal atresia/stenosis with or without fistula



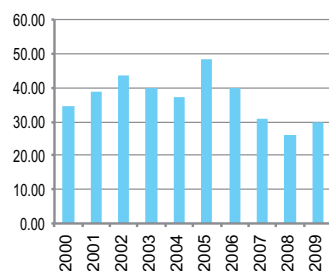
Small intestine atresia/stenosis



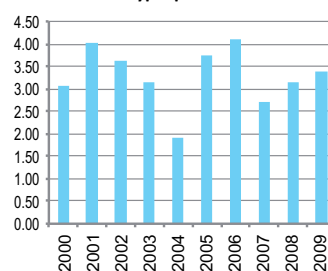
Anorectal atresia/stenosis



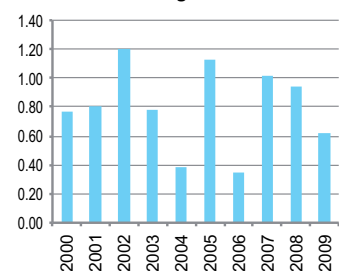
Undescended testis



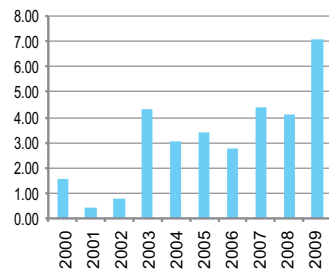
Hypospadias



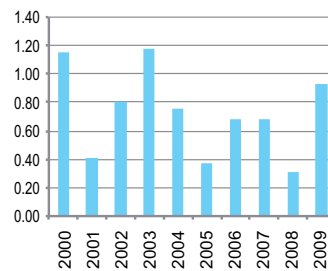
Renal agenesis



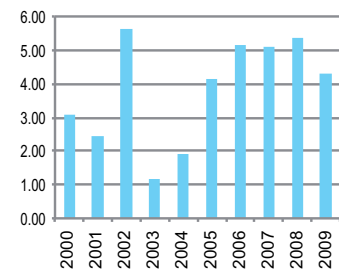
Cystic kidney



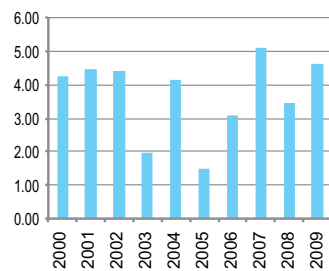
Bladder exstrophy



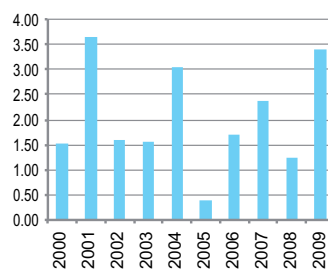
Polydactyly, preaxial



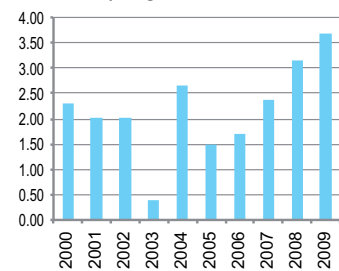
Limb reduction defects



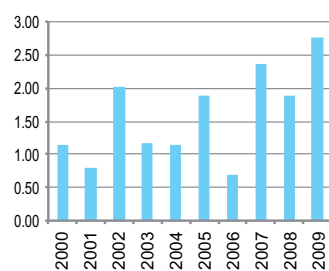
Limb reduction defects - transverse



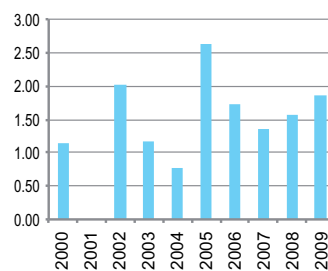
Diaphragmatic hernia



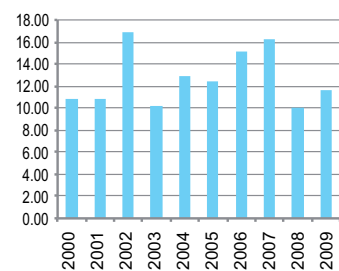
Omphalocele



Gastroschisis

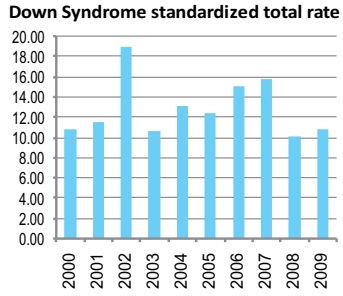


Down Syndrome



Note: L+S rates, ToP rates

Ukraine: OMNI-Net



Note: ■ L+S rates, ■ ToP rates

United Kingdom-Wales: CARIS

Congenital Anomaly Register and Information System for Wales

History:

CARIS aims to describe the pattern of congenital anomalies in Wales and provide:

- a description of anomalies and rates
- an assessment of antenatal detection and interventions
- information for health care planning
- identification of clusters and causes

Start of data collection: 1.1.1998. ICBDSR member: 2004. EUROCAT member: 1998.

Funding: Public Health Wales. Base: Singleton Hospital, Swansea

Population Coverage:

All pregnancies of mothers normally resident in Wales. This includes spontaneous fetal losses and terminations of pregnancy. Annual live birth rate of 35,000

Sources of Ascertainment:

Voluntary reporting

Multiple source reporting including inpatient data
Clinical obstetric and paediatric champion in each delivery unit

Data coordinator in each delivery unit

Data exchange with bordering registers in England

Termination of Pregnancy:

Legal up to 24 weeks gestation in any pregnancy but no upper age limit for cases of major anomaly

Stillbirth Definition and Early Fetal Deaths:

Stillbirth = fetal death at or after 24 weeks gestation. No lower limit for inclusion of spontaneous fetal losses

Exposure Data Availability:

Maternal drugs, folic acid dosage and timing, maternal and paternal diseases and occupations

Denominators and Controls Information:

Data obtained from Office for National Statistics

Address and Staff:

Margery Morgan, Programme Director
Congenital Anomaly Register and Information Service for Wales (CARIS)

Public Health Wales

Singleton Hospital

Sketty Lane

Swansea, Wales, UK, SA2 8QA

Phone: 44-1792-285241

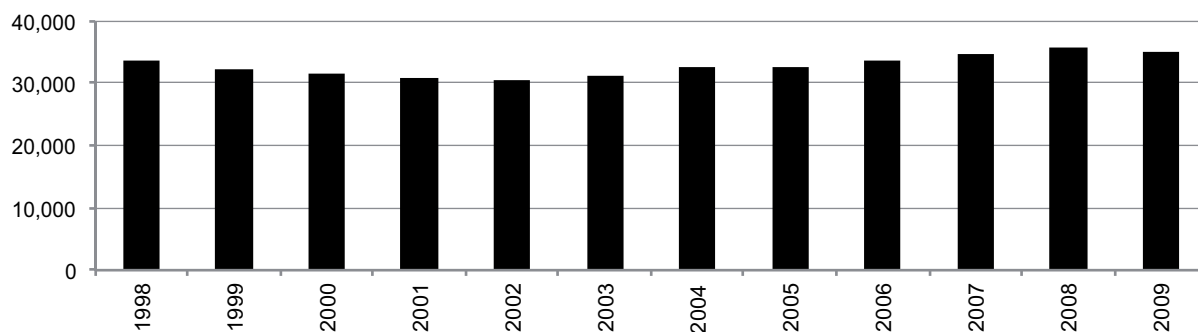
Fax: 44-1792-285241

Relevant Contact Person: David Tucker

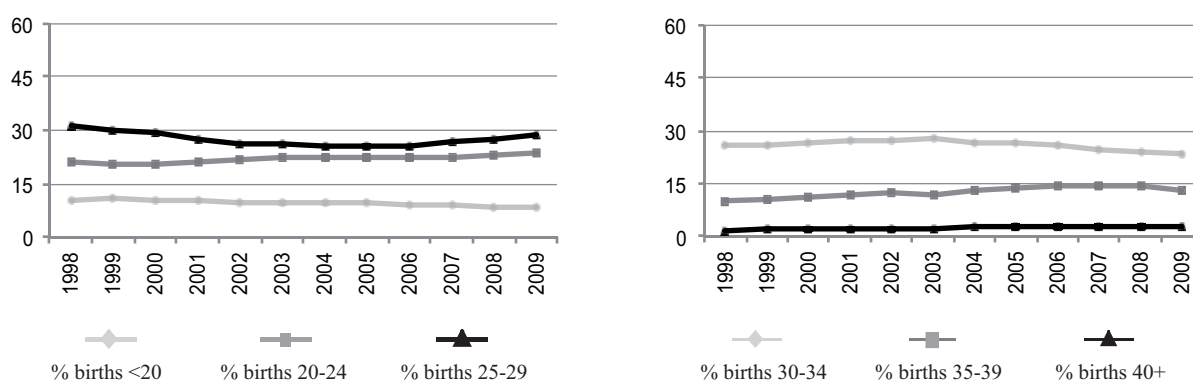
E-mail: david.tucker2@wales.nhs.uk

United Kingdom-Wales: CARIS

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009) (Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	50	98.0	Cystic kidney	20	21.5
Spina bifida	47	69.1	Limb reduction defects	34	35.4
Encephalocele	17	81.0	Diaphragmatic hernia	10	24.4
Holoprosencephaly	13	92.9	Omphalocele	27	60.0
Hydrocephaly	54	55.1	Gastroschisis	4	7.5
Hypoplastic left heart syndrome	14	42.4	Trisomy 13	20	83.3
Cleft palate without cleft lip	10	11.8	Trisomy 18	46	70.8
Cleft lip with or without cleft palate	22	16.1	Down syndrome	115	49.6
Renal agenesis	18	85.7			

Total ToPs with births defects = 566 (Ratio ToPs/Births: 5.36 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

United Kingdom-Wales: CARIS, 2009

Live births (LB)	34,937
Stillbirths (SB)	180
Total births	35,117
Number of terminations of pregnancy (ToP) for birth defects	187

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP (*)	Total rate
Anencephaly	0	0	20	5.70
Spina bifida	9	≤ 3	16	nc
Encephalocele	≤ 3	0	7	nc
Microcephaly	9	0	≤ 3	nc
Holoprosencephaly	≤ 3	0	5	nc
Hydrocephaly	13	≤ 3	17	nc
Anophthalmos	0	0	0	0.00
Microphthalmos	≤ 3	0	0	nc
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	0	0	≤ 3	nc
Microtia	≤ 3	0	0	nc
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	19	≤ 3	≤ 3	nc
Tetralogy of Fallot	17	0	≤ 3	nc
Hypoplastic left heart syndrome	4	≤ 3	≤ 3	nc
Coarctation of aorta	17	0	0	4.84
Choanal atresia, bilateral	0	0	0	0.00
Cleft palate without cleft lip	24	0	≤ 3	nc
Cleft lip with or without cleft palate	42	0	8	14.24
Oesophageal atresia/stenosis with or without fistula	9	≤ 3	≤ 3	nc
Small intestine atresia/stenosis	≤ 3	0	0	nc
Anorectal atresia/stenosis	15	0	≤ 3	nc
Undescended testis (36 weeks of gestation or later)	37	0	0	10.54
Hypospadias	76	0	0	21.64
Epispadias	0	0	0	0.00
Indeterminate sex	0	0	0	0.00
Renal agenesis	≤ 3	0	7	nc
Cystic kidney	16	0	7	6.55
Bladder exstrophy	≤ 3	0	0	nc
Polydactyly, preaxial	≤ 3	≤ 3	≤ 3	nc
Total Limb reduction defects (include unspecified)	20	0	14	9.68
Transverse	11	0	4	4.27
Preaxial	≤ 3	0	5	nc
Postaxial	≤ 3	0	≤ 3	nc
Intercalary	≤ 3	0	≤ 3	nc
Mixed	≤ 3	0	≤ 3	nc
Unspecified	≤ 3	0	≤ 3	nc
Diaphragmatic hernia	13	0	≤ 3	nc
Omphalocele	7	0	11	5.13
Gastroschisis	18	0	≤ 3	nc
Unspecified Omphalocele/Gastroschisis	0	0	≤ 3	nc
Prune belly sequence	≤ 3	0	0	nc
Trisomy 13	≤ 3	0	6	nc
Trisomy 18	≤ 3	4	10	nc
Down syndrome, all ages (include age unknown)	40	≤ 3	45	nc
<20	0	0	≤ 3	nc
20-24	15	0	≤ 3	nc
25-29	5	0	≤ 3	nc
30-34	6	0	11	20.61
35-39	12	0	22	73.07
40-44	≤ 3	≤ 3	7	nc
45+	0	0	0	0.00
unknown	0	0	0	---

nc = not calculable

(*) According to national guidelines number for LB, SB and ToPs ≤ 3 should not be explicitly published

United Kingdom-Wales: CARIS, Previous years rates 1998 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999*	2000-2004	2005-2009
Total births					65,886	156,423	172,035
Anencephaly					8.35	6.90	4.94
Spina bifida					7.89	8.25	6.68
Encephalocele					2.73	1.79	2.27
Microcephaly					6.83	6.58	4.48
Holoprosencephaly					1.06	1.79	1.34
Hydrocephaly					11.84	9.46	8.43
Anophthalmos					0.91	0.19	0.17
Microphthalmos					1.97	2.05	1.34
Unspecified Anophthalmos/Microphthalmos					0.00	0.00	0.00
Anotia					0.61	0.06	0.58
Microtia					0.61	0.70	0.52
Unspecified Anotia/Microtia					0.00	0.00	0.00
Transposition of great vessels					5.62	4.73	4.30
Tetralogy of Fallot					3.64	2.81	4.36
Hypoplastic left heart syndrome					3.49	3.58	3.08
Coarctation of aorta					6.37	6.71	5.35
Choanal atresia, bilateral					0.15	0.19	0.29
Cleft palate without cleft lip					10.32	9.40	8.89
Cleft lip with or without cleft palate					11.38	9.91	12.03
Oesophageal atresia/stenosis with or without fistula					3.34	3.45	2.91
Small intestine atresia/stenosis					2.28	1.60	2.09
Anorectal atresia/stenosis					4.71	4.48	3.72
Undescended testis (36 weeks of gestation or later)					28.23	8.06	10.64
Hypospadias					27.93	30.30	27.26
Epispadias					0.46	0.45	0.23
Indeterminate sex					0.15	0.58	0.93
Renal agenesis					3.34	1.85	2.09
Cystic kidney					10.93	10.29	8.78
Bladder exstrophy					0.61	0.19	0.35
Polydactyly, preaxial					0.61	1.47	0.81
Total Limb reduction defects (include unspecified)					12.14	9.40	9.18
Transverse					5.46	4.41	4.94
Preaxial					2.28	1.09	1.69
Postaxial					0.61	0.51	0.29
Intercalary					1.52	1.73	1.40
Mixed					0.76	1.21	0.52
Unspecified					1.52	1.21	0.47
Diaphragmatic hernia					3.49	3.71	4.01
Omphalocele					3.04	4.09	4.30
Gastroschisis					5.31	5.82	6.05
Unspecified Omphalocele/Gastroschisis					0.61	0.58	0.35
Prune belly sequence					0.15	0.19	0.12
Trisomy 13					2.12	2.56	2.03
Trisomy 18					4.86	4.67	6.05
Down syndrome, all ages (include age unknown)					19.12	20.71	22.44
<20					12.83	7.70	5.91
20-24					8.06	6.19	11.50
25-29					11.93	10.97	7.74
30-34					15.82	17.30	18.83
35-39					56.93	54.12	59.56
40-44					140.85	174.21	139.25
45+					0.00	388.89	313.90
unknown					---	---	---

* data include less than 5 years

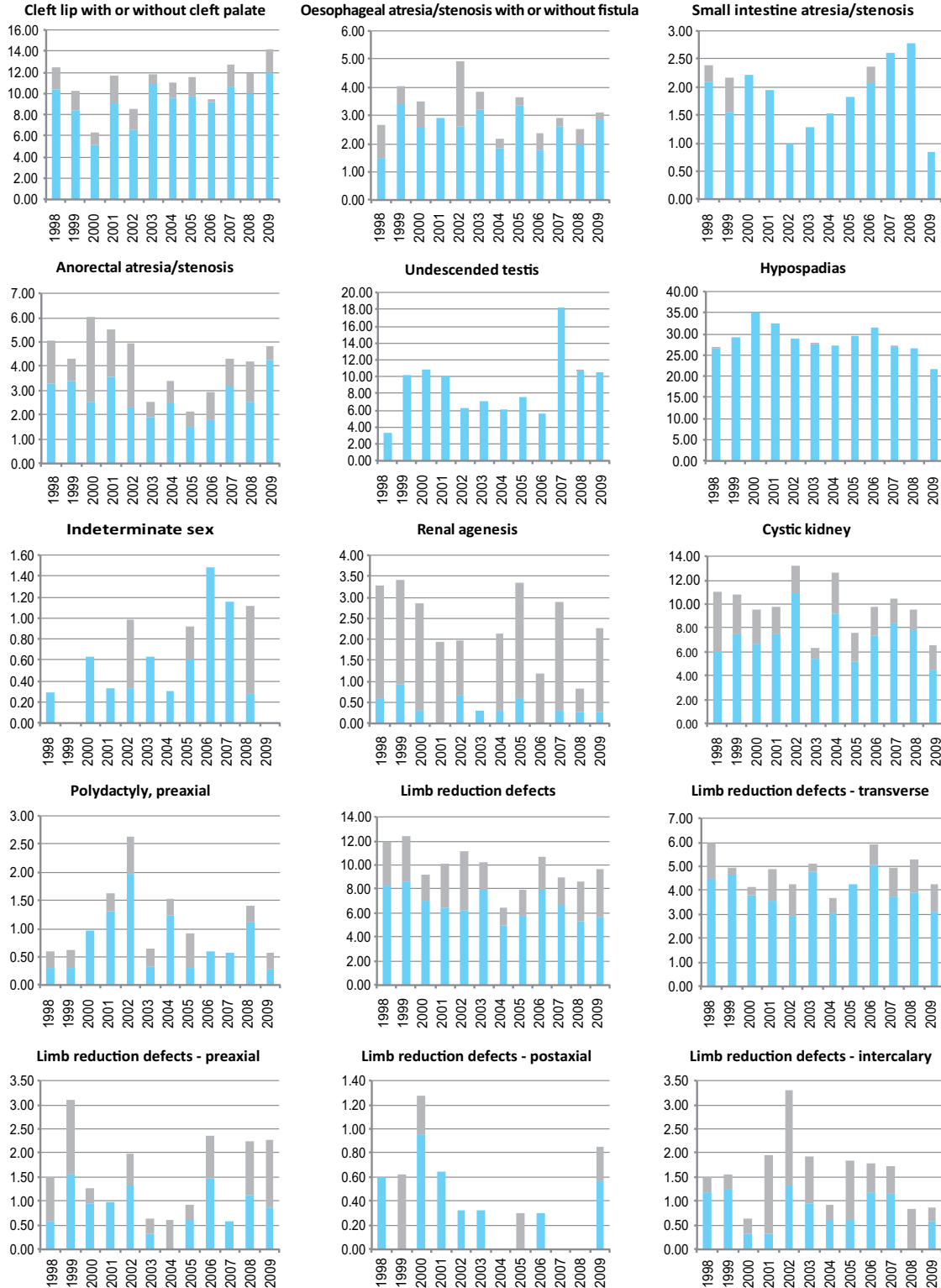
United Kingdom-Wales: CARIS

Time trends 1998-2009 (Birth prevalence rates per 10,000)



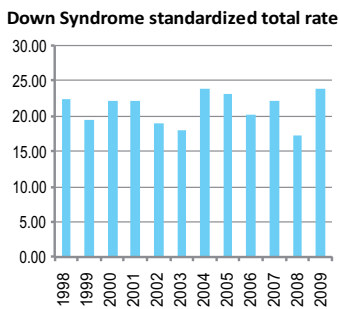
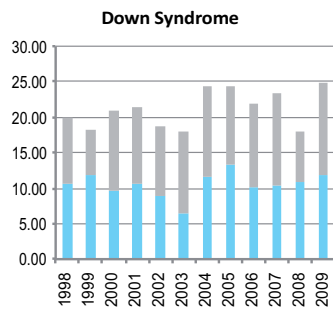
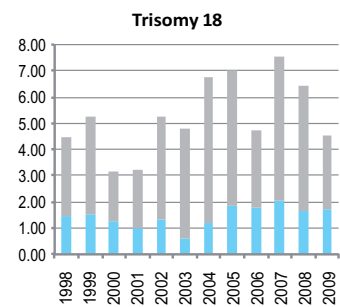
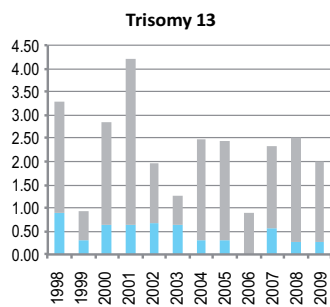
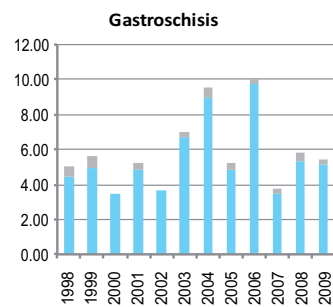
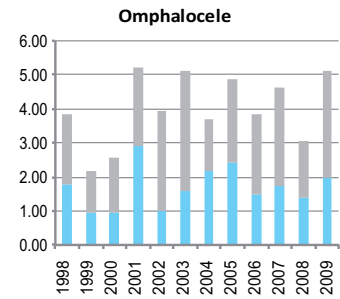
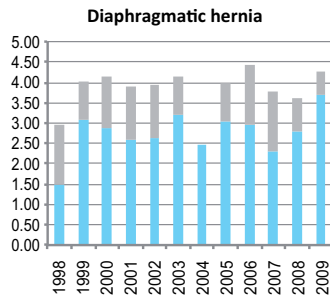
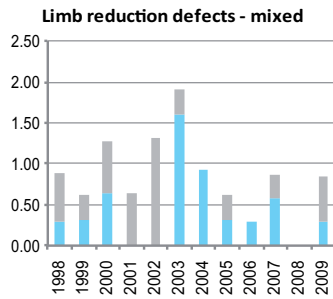
Note: ■ L+S rates, ■ ToP rates

United Kingdom-Wales: CARIS



Note: ■ L+S rates, ■ ToP rates

United Kingdom-Wales: CARIS



Note: L+S rates, ToP rates

USA-Atlanta: MACDP

Metropolitan Atlanta Congenital Defects Program

History:

The Programme started in 1967 and was a founding member of the ICBDSR. The Programme is a full member of the ICBDSR. Size and coverage: The Programme covers all births within a five-county area in metropolitan Atlanta, Georgia. The annual number of births in this area is approximately 50,000. Stillbirths and terminations of at least 20 weeks gestation are included. Elective terminations at any gestational age are included.

Legislation and funding:

In 1994 the Georgia Department of Human Resources (GDHR) added birth defects to the list of legally reportable conditions in Georgia. In 1997 the GDHR authorised the Birth Defects Branch at the Centers for Disease Control and Prevention (CDC) to act with and on its behalf to collect health information on children with birth defects. The Programme is funded by the Centers for Disease Control and Prevention.

Sources of ascertainment:

Multiple sources, such as delivery units, paediatric departments, neonatal intensive care units, laboratories, prenatal diagnostic centres and tertiary care centres, are used to ascertain

malformed infants born in the defined area with a follow-up to age six years.

Exposure information:

Exposure information is obtained by interview for mothers of reported malformed infants who participate in various research projects.

Background information:

Number of live births and demographic information on the five counties are obtained from vital statistics.

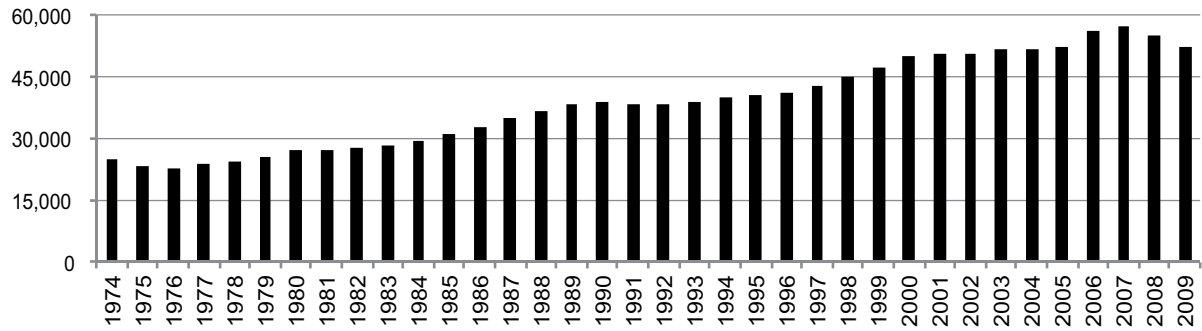
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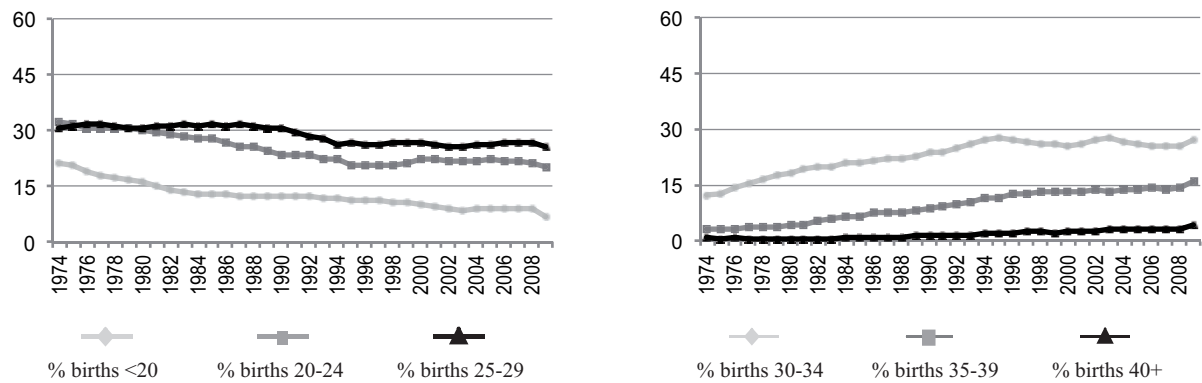
Csaba Siffel, MD, PhD
E-mail: csiffel@cdc.gov

USA-Atlanta: MACDP

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	40	67.8	Cystic kidney	16	14.2
Spina bifida	19	26.4	Limb reduction defects	9	10.8
Encephalocele	8	33.3	Diaphragmatic hernia	6	12.5
Holoprosencephaly	5	17.2	Omphalocele	11	23.9
Hydrocephaly	11	8.1	Gastroschisis	5	6.3
Hypoplastic left heart syndrome	4	11.1	Trisomy 13	15	60.0
Cleft palate without cleft lip	3	3.5	Trisomy 18	39	48.8
Cleft lip with or without cleft palate	15	9.1	Down syndrome	51	18.7
Renal agenesis	5	20.8			

Total ToPs with births defects = not reported
(*) % of ToPs = ToPs/(ToPs+Births)

USA-Atlanta: MACDP, 2009

Live births (LB)	51,926
Stillbirths (SB)	420
Total births	52,346
Number of terminations of pregnancy (ToP) for birth defects	nr

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	3	4	20	5.16
Spina bifida	20	2	6	5.35
Encephalocele	2	1	4	1.34
Microcephaly	26	0	0	4.97
Holoprosencephaly	7	4	4	2.87
Hydrocephaly	45	7	5	10.89
Anophthalmos	1	0	0	0.19
Microphthalmos	5	0	0	0.96
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	2	0	0	0.38
Microtia	9	0	0	1.72
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	25	2	2	5.54
Tetralogy of Fallot	28	0	1	5.54
Hypoplastic left heart syndrome	10	5	3	3.44
Coarctation of aorta	32	0	1	6.30
Choanal atresia, bilateral	2	0	0	0.38
Cleft palate without cleft lip	33	1	3	7.07
Cleft lip with or without cleft palate	48	1	12	11.65
Oesophageal atresia/stenosis with or without fistula	16	0	0	3.06
Small intestine atresia/stenosis	14	1	0	2.87
Anorectal atresia/stenosis	23	0	0	4.39
Undescended testis (36 weeks of gestation or later)	13	0	0	2.48
Hypospadias	21	0	0	4.01
Epispadias	0	0	0	0.00
Indeterminate sex	4	1	1	1.15
Renal agenesis	11	0	4	2.87
Cystic kidney	44	2	9	10.51
Bladder exstrophy	3	0	0	0.57
Polydactyly, preaxial	16	0	0	3.06
Total Limb reduction defects (include unspecified)	27	3	5	6.69
Transverse	14	2	3	3.63
Preaxial	6	0	2	1.53
Postaxial	0	0	0	0.00
Intercalary	3	1	0	0.76
Mixed	0	0	0	0.00
Unspecified	3	0	0	0.57
Diaphragmatic hernia	16	0	4	3.82
Omphalocele	13	1	7	4.01
Gastroschisis	16	1	3	3.82
Unspecified Omphalocele/Gastroschisis	0	0	0	0.00
Prune belly sequence	0	0	2	0.38
Trisomy 13	2	1	11	2.67
Trisomy 18	12	9	22	8.21
Down syndrome, all ages (include age unknown)	61	1	28	17.19
<20	3	0	0	8.32
20-24	9	0	0	8.49
25-29	13	0	2	11.19
30-34	13	0	5	12.82
35-39	15	1	10	30.89
40-44	5	0	9	67.44
45+	2	0	0	104.71
unknown	1	0	2	---

nr = not reported

(*) ToP cases include cases with pregnancy outcome unknown

USA-Atlanta: MACDP, Previous years rates 1974 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999	2000-2004	2005-2009
Total births	143,922	139,240	173,520	194,162	216,010	254,792	272,668
Anencephaly	5.35	3.95	3.46	2.88	4.12	2.24	3.08
Spina bifida	7.23	6.61	5.94	4.48	4.77	3.49	4.44
Encephalocele	1.88	2.44	2.02	1.13	2.08	1.26	1.21
Microcephaly	5.00	6.03	6.11	4.84	8.38	6.08	5.02
Holoprosencephaly	0.56	0.79	1.33	1.29	1.16	0.63	1.72
Hydrocephaly	9.59	9.26	7.03	5.67	7.45	7.46	7.70
Anophthalmos	0.56	0.65	0.58	0.82	0.23	0.35	0.40
Microphthalmos	3.89	3.81	3.11	2.88	2.96	2.43	1.03
Unspecified Anophthalmos/Microphthalmos	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Anotia	0.21	0.22	0.06	0.21	0.19	0.27	0.18
Microtia	1.32	1.29	1.79	1.08	1.34	1.61	1.10
Unspecified Anotia/Microtia	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Transposition of great vessels	4.86	5.82	4.73	4.84	5.42	5.61	4.47
Tetralogy of Fallot	2.92	3.73	4.15	3.61	4.54	4.24	4.11
Hypoplastic left heart syndrome	2.29	3.02	2.13	2.94	3.24	2.39	2.05
Coarctation of aorta	3.89	4.24	5.13	4.27	4.91	5.69	5.06
Choanal atresia, bilateral	0.42	0.07	0.46	0.21	0.46	0.43	0.40
Cleft palate without cleft lip	7.71	3.95	5.30	4.74	5.65	6.00	5.24
Cleft lip with or without cleft palate	11.46	11.35	9.11	9.37	9.44	8.75	9.68
Oesophageal atresia/stenosis with or without fistula	2.29	2.51	2.36	2.16	2.04	2.04	2.16
Small intestine atresia/stenosis	1.46	1.65	1.67	1.80	1.67	1.96	2.27
Anorectal atresia/stenosis	4.66	3.52	4.26	3.71	3.47	3.26	3.52
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr	13.20*	18.17	9.98
Hypospadias	1.25	1.58	4.61	4.79	8.29	8.40	5.43
Epispadias	0.97	0.86	0.63	0.62	0.42	0.43	0.48
Indeterminate sex	2.29	1.80	1.15	1.13	1.34	1.65	1.50
Renal agenesis	2.08	1.87	1.21	1.34	1.16	1.10	1.21
Cystic kidney	2.43	2.73	4.21	5.10	5.83	6.32	6.56
Bladder exstrophy	0.49	0.22	0.23	0.36	0.09	0.12	0.15
Polydactyly, preaxial	1.95	1.87	2.59	3.35	2.64	2.16	2.31
Total Limb reduction defects (include unspecified)	6.18	4.45	4.61	4.79	6.34	5.49	4.55
Transverse	3.68	3.09	2.77	3.45	3.38	3.22	2.35
Preaxial	1.18	0.57	0.81	0.82	1.20	0.94	0.66
Postaxial	0.21	0.22	0.35	0.26	0.32	0.20	0.26
Intercalary	0.63	0.22	0.29	0.05	0.28	0.24	0.40
Mixed	0.07	0.36	0.29	0.15	0.74	0.78	0.59
Unspecified	0.42	0.00	0.12	0.05	0.42	0.08	0.26
Diaphragmatic hernia	2.57	2.30	2.82	2.37	2.18	2.83	2.93
Omphalocele	3.89	3.16	3.11	2.58	2.45	1.96	2.46
Gastroschisis	1.67	1.87	2.31	2.73	1.71	3.18	4.36
Unspecified Omphalocele/Gastroschisis	0.00	0.00	0.06	0.00	0.00	0.00	0.00
Prune belly sequence	0.63	0.50	0.46	0.36	0.32	0.47	0.44
Trisomy 13	1.18	1.08	1.67	1.18	1.94	1.96	1.54
Trisomy 18	0.63	1.94	2.07	2.47	4.44	4.71	4.25
Down syndrome, all ages (include age unknown)	8.82	10.99	10.37	12.67	17.68	17.58	16.43
<20	nr	7.01	6.48	7.23	10.48	6.38	8.40
20-24	nr	6.68	8.65	6.95	10.21	4.99	8.17
25-29	nr	8.29	6.82	7.22	8.01	7.96	7.65
30-34	nr	16.81	12.67	11.70	13.55	15.07	13.87
35-39	nr	20.65	22.97	31.73	43.33	48.90	35.62
40-44	nr	80.32	66.62	70.80	137.67	119.17	94.14
45+	nr	0.00	0.00	487.80	251.26	121.21	104.71
unknown	---	---	---	---	---	---	---

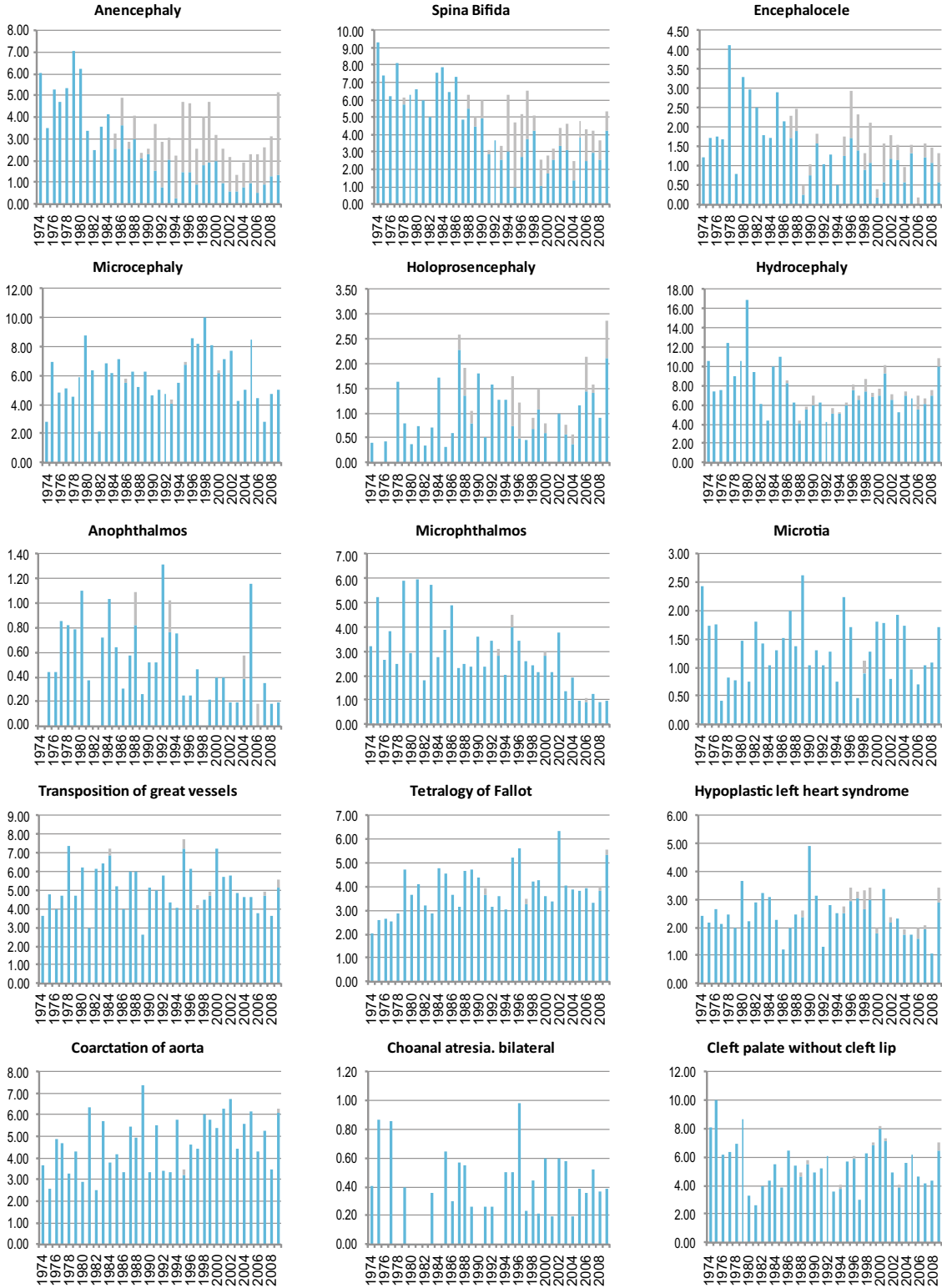
nr = not reported

* data include less than 5 years

Monitoring Systems

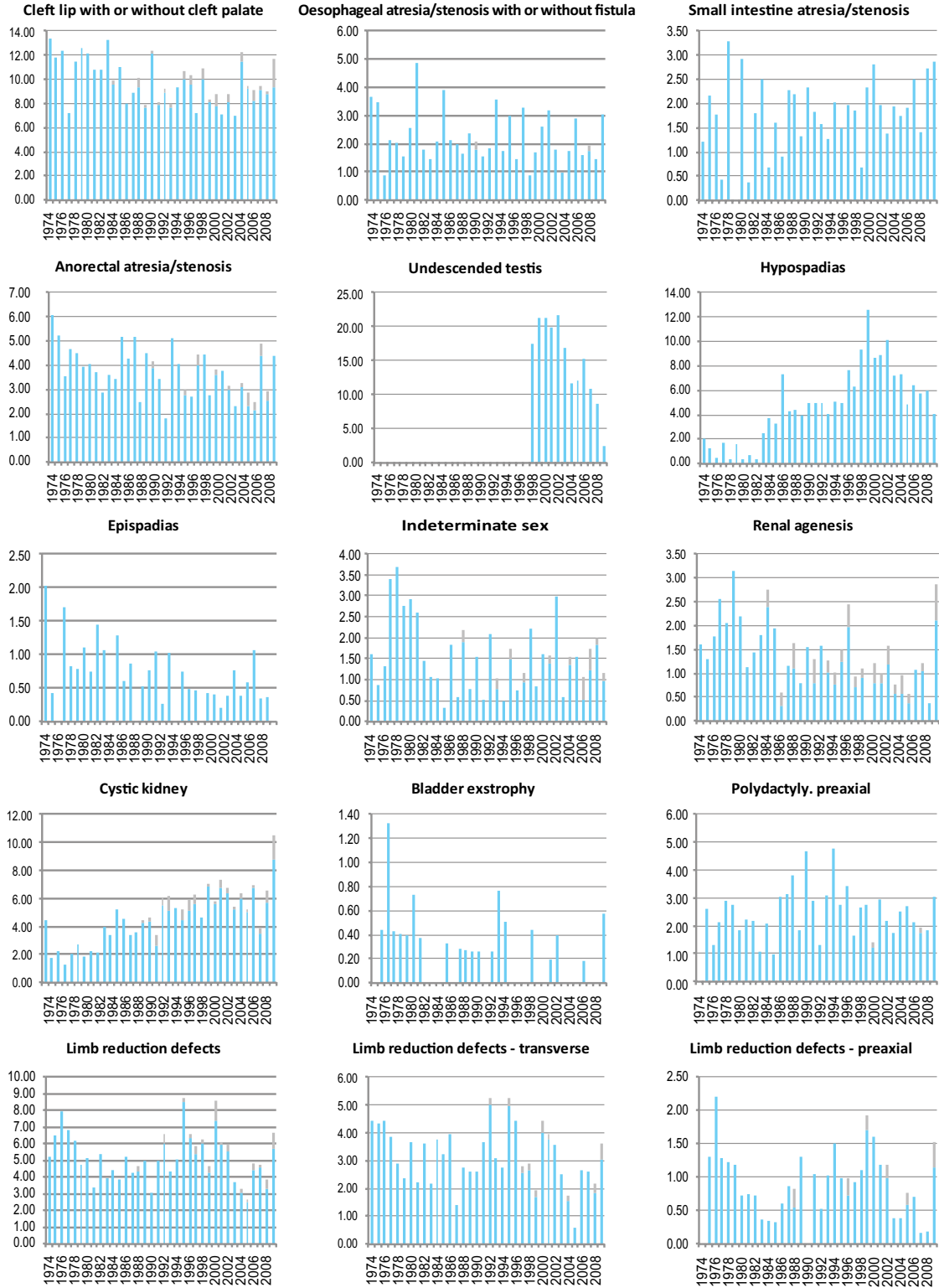
USA-Atlanta: MACDP

Time trends 1974-2009 (Birth prevalence rates per 10,000)



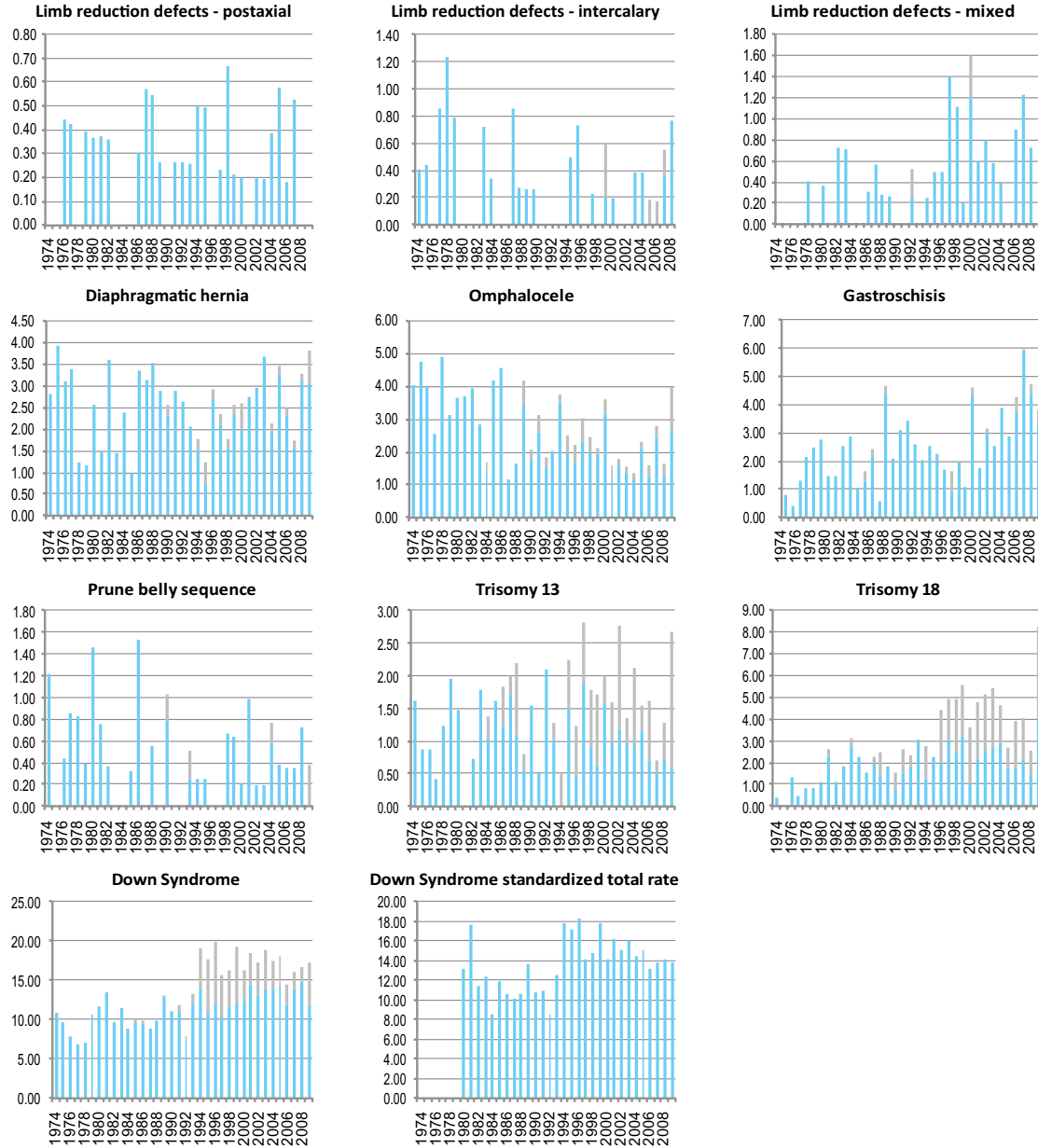
Note: ■ L+S rates, ■ ToP rates

USA-Atlanta: MACDP



Note: ■ L+S rates, ■ ToP rates

USA-Atlanta: MACDP



Note: ■ L+S rates, ■ ToP rates

USA-Texas: BDES

Texas Birth Defects Epidemiology and Surveillance Branch

History:

BDES was established after an unusual cluster of anencephaly cases that occurred in Brownsville, Texas in 1991. Epidemiologic investigations revealed a higher than expected rate of neural tube defects among children born to Hispanic mothers living in South Texas. In recognition that epidemiologic resources are routinely needed to investigate birth defects clusters, the Texas State Legislature passed the Texas Birth Defects Act in 1993, which authorized the establishment of BDES. Since 1994, BDES has maintained the Texas Birth Defects Registry, an active population-based birth defects surveillance system, which has been statewide since 1999. Through multiple sources of information, the Registry monitors all births in Texas and identifies cases of birth defects. Children identified through the Registry are referred to appropriate medical and community services. In 1996, the CDC-funded Texas Center for Birth Defects Research and Prevention was established under the auspices of BDES. The Programme is a full member of the ICBDSP.

Size and coverage:

The Programme covers all deliveries to mothers residing in Texas (approximately 380,000 annually). Stillbirths and terminations of any gestational age are included. Cases diagnosed up to age one are included (up to any age for fetal alcohol syndrome). As of 2006, there were over 100,000 birth defect cases in the Registry.

Legislation and funding:

Birth defects surveillance was mandated by the Texas Birth Defects Act in 1993, and is codified in the Texas Health and Safety Code Chapter 87. About

one-half of funding for the birth defects registry is from state general revenue with the remainder from federal block grants.

Sources of ascertainment:

Birth hospitals, birthing centres, lay midwives, hospitals where affected children are treated.

Exposure information:

Limited information on maternal illnesses and conditions, limited information on maternal exposures such as medications.

Background information:

Basic demographics, reproductive history, gestational age, delivery information.

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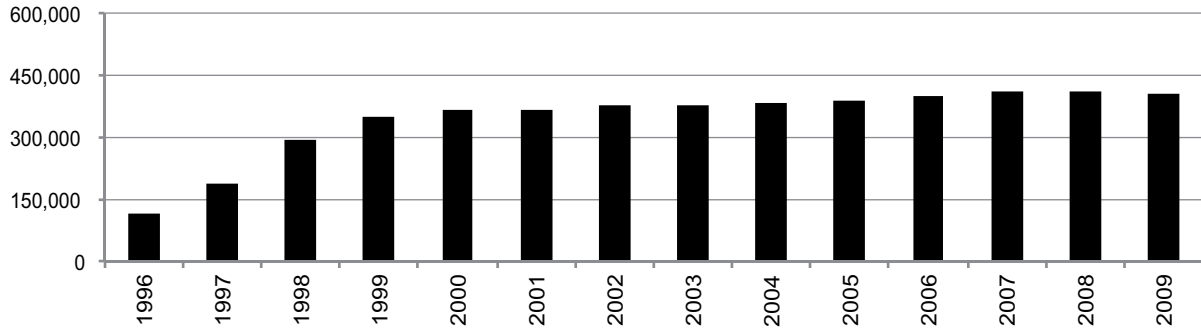
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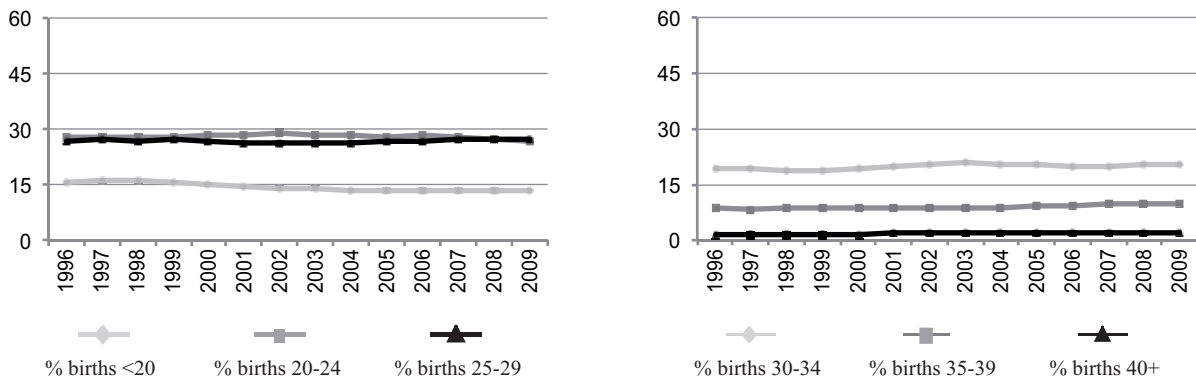
Monitoring Systems

USA-Texas: BDES

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)

(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	103	31.7	Cystic kidney	15	2.1
Spina bifida	20	4.5	Limb reduction defects	22	3.2
Encephalocele	18	15.1	Diaphragmatic hernia	3	0.8
Holoprosencephaly	9	6.8	Omphalocele	16	6.5
Hydrocephaly	13	1.6	Gastroschisis	11	1.5
Hypoplastic left heart syndrome	0	0.0	Trisomy 13	24	16.1
Cleft palate without cleft lip	7	1.0	Trisomy 18	63	18.9
Cleft lip with or without cleft palate	36	2.9	Down syndrome	58	3.5
Renal agenesis	21	8.7			

Total ToPs with births defects = 577 (Ratio ToPs/Births: 0.47 per 1,000)
 (*) % of ToPs = ToPs/(ToPs+Births)

USA-Texas: BDES, 2009

Live births (LB)	401,599
Stillbirths (SB)	2,270
Total births	403,869
Number of terminations of pregnancy (ToP) for birth defects	207

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	42	40	41	3.05
Spina bifida	139	5	9	3.79
Encephalocele	25	5	7	0.92
Microcephaly	525	2	2	13.10
Holoprosencephaly	27	3	4	0.84
Hydrocephaly	258	10	3	6.71
Anophthalmos	12	1	0	0.32
Microphthalmos	97	2	0	2.45
Unspecified Anophthalmos/Microphthalmos	0	0	0	0.00
Anotia	3	1	1	0.12
Microtia	129	0	0	3.19
Unspecified Anotia/Microtia	0	0	0	0.00
Transposition of great vessels	221	0	0	5.47
Tetralogy of Fallot	149	0	0	3.69
Hypoplastic left heart syndrome	86	0	0	2.13
Coarctation of aorta	198	0	0	4.90
Choanal atresia, bilateral	54	1	0	1.36
Cleft palate without cleft lip	218	6	2	5.60
Cleft lip with or without cleft palate	345	19	10	9.26
Oesophageal atresia/stenosis with or without fistula	88	0	0	2.18
Small intestine atresia/stenosis	72	0	0	1.78
Anorectal atresia/stenosis	187	6	5	4.90
Undescended testis (36 weeks of gestation or later) (§)	495	1	0	12.28
Hypospadias	682	0	0	16.89
Epispadias	38	0	0	0.94
Indeterminate sex	10	17	5	0.79
Renal agenesis	65	2	9	1.88
Cystic kidney	262	4	5	6.71
Bladder exstrophy	4	0	0	0.10
Polydactyly, preaxial	165	1	0	4.11
Total Limb reduction defects (include unspecified)	204	11	5	5.45
Transverse	106	6	5	2.90
Preaxial	45	1	0	1.14
Postaxial	7	0	0	0.17
Intercalary	5	1	0	0.15
Mixed	30	2	0	0.79
Unspecified	11	1	0	0.30
Diaphragmatic hernia	106	3	1	2.72
Omphalocele	64	20	5	2.20
Gastroschisis	223	13	4	5.94
Unspecified Omphalocele/Gastroschisis	13	4	6	0.57
Prune belly sequence	5	0	1	0.15
Trisomy 13	32	12	9	1.31
Trisomy 18	60	28	25	2.80
Down syndrome, all ages (include age unknown)	515	12	22	13.59
<20	43	0	0	8.04
20-24	55	1	0	5.19
25-29	85	1	5	8.21
30-34	91	3	2	11.59
35-39	127	5	10	35.74
40-44	102	2	5	132.19
45+	12	0	0	237.15
unknown	0	0	0	---

(*) Only definite diagnosed cases are reported. Data for 2009 are still provisional.

(§) Undescended testes is not coded in infants less than 36 weeks gestation unless another reportable defect is present or there was a medical/surgical intervention for this problem. Only 4.5% are <36 weeks gestation.

USA-Texas: BDES, Previous years rates 1996 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999*	2000-2004	2005-2009
Total births					947,252	1,870,900	2,010,927
Anencephaly					3.42	2.57	2.50
Spina bifida					4.54	3.58	3.62
Encephalocele					1.07	0.83	0.94
Microcephaly					6.01	7.73	10.85
Holoprosencephaly					1.43	1.21	1.11
Hydrocephaly					7.41	6.25	6.42
Anophthalmos					0.38	0.30	0.33
Microphthalmos					2.49	2.55	2.80
Unspecified Anophthalmos/Microphthalmos					0.00	0.00	0.00
Anotia					0.25	0.27	0.28
Microtia					2.42	2.64	3.05
Unspecified Anotia/Microtia					0.00	0.00	0.00
Transposition of great vessels					4.99	4.81	5.12
Tetralogy of Fallot					3.05	3.29	3.82
Hypoplastic left heart syndrome					2.11	2.10	2.08
Coarctation of aorta					4.76	4.68	5.14
Choanal atresia, bilateral					1.22	1.10	1.27
Cleft palate without cleft lip					5.81	5.37	5.74
Cleft lip with or without cleft palate					10.83	10.70	10.45
Oesophageal atresia/stenosis with or without fistula					2.24	1.99	2.06
Small intestine atresia/stenosis					1.71	1.72	1.90
Anorectal atresia/stenosis					4.44	4.85	4.93
Undescended testis (36 weeks of gestation or later)					7.83	9.19	12.23
Hypospadias					18.25	16.57	15.86
Epispadias					0.58	0.70	0.88
Indeterminate sex					1.68	1.00	0.74
Renal agenesis					2.14	1.96	1.93
Cystic kidney					4.32	4.75	5.76
Bladder exstrophy					0.18	0.26	0.14
Polydactyly, preaxial					2.82	3.27	3.84
Total Limb reduction defects (include unspecified)					5.50	5.30	5.54
Transverse					2.59	2.71	2.88
Preaxial					1.14	1.07	1.23
Postaxial					0.26	0.21	0.25
Intercalary					0.10	0.12	0.18
Mixed					1.25	0.95	0.82
Unspecified					0.17	0.23	0.18
Diaphragmatic hernia					2.70	2.63	2.85
Omphalocele					2.29	2.14	2.02
Gastroschisis					3.77	4.16	5.76
Unspecified Omphalocele/Gastroschisis					0.62	0.64	0.51
Prune belly sequence					0.26	0.31	0.26
Trisomy 13					1.18	1.20	1.12
Trisomy 18					2.46	2.23	2.69
Down syndrome, all ages (include age unknown)					11.93	12.80	13.36
<20					7.63	7.08	7.64
20-24					6.87	6.53	6.64
25-29					6.44	7.48	7.42
30-34					12.30	12.11	13.21
35-39					35.50	36.57	35.92
40-44					108.22	121.40	113.07
45+					116.86	195.84	187.69
unknown					---	---	---

* data include less than 5 years

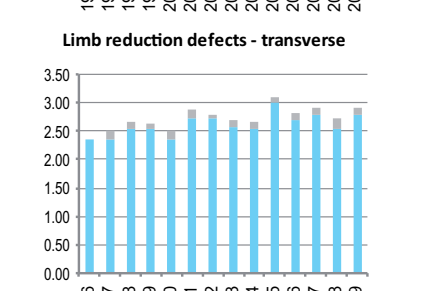
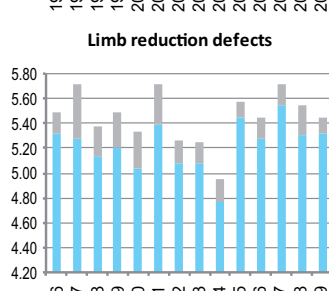
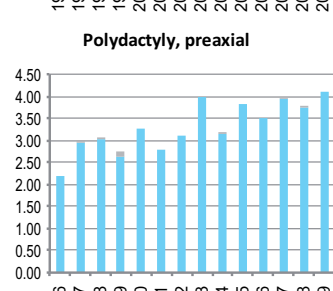
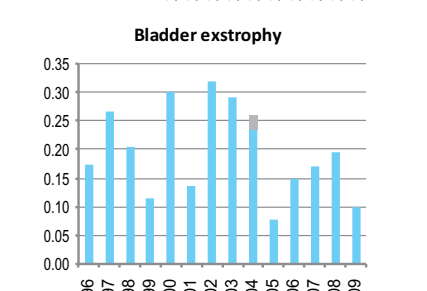
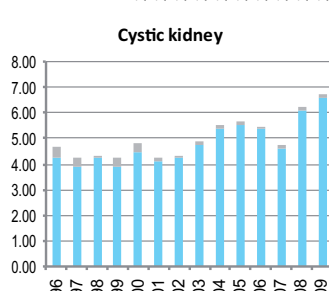
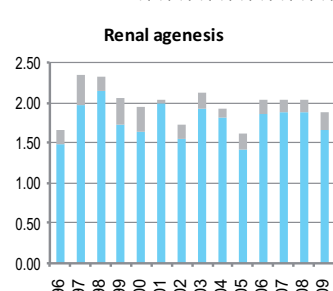
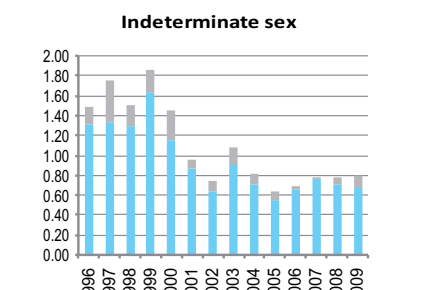
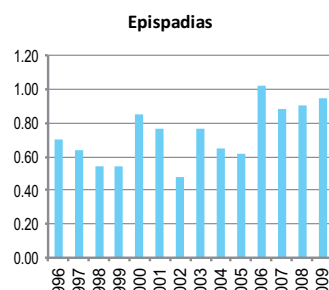
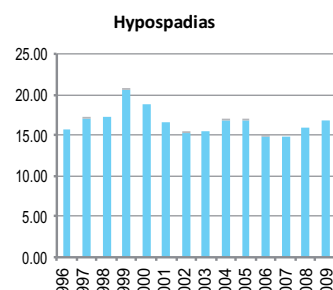
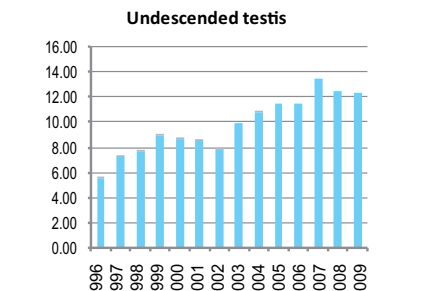
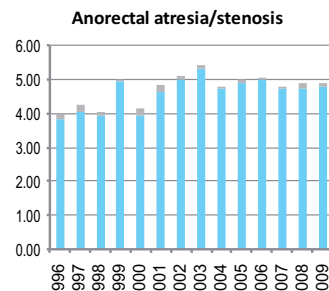
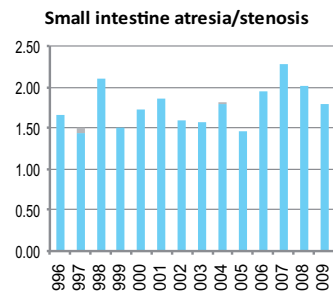
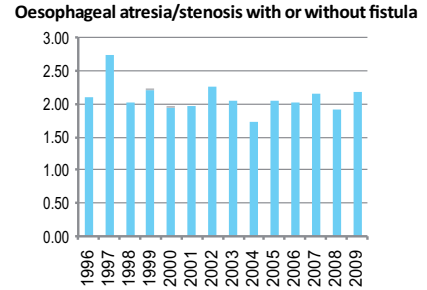
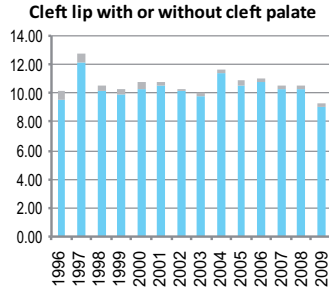
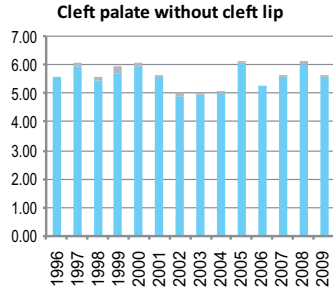
USA-Texas: BDES

Time trends 1996-2009 (Birth prevalence rates per 10,000)



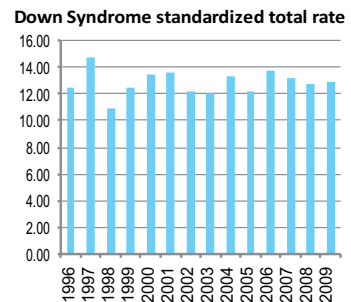
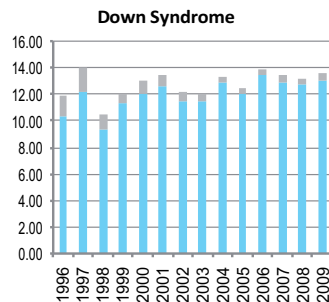
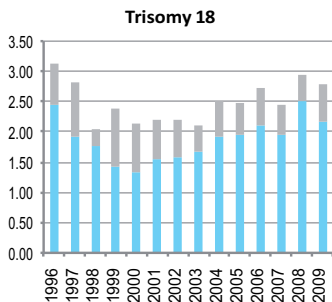
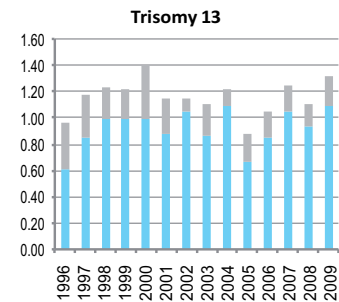
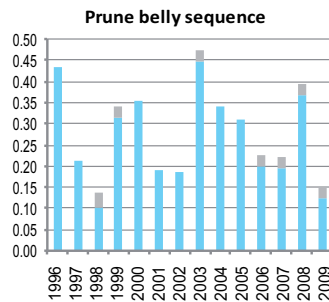
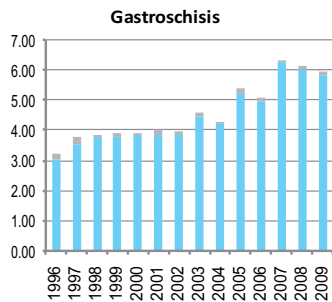
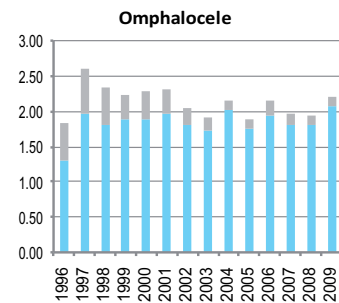
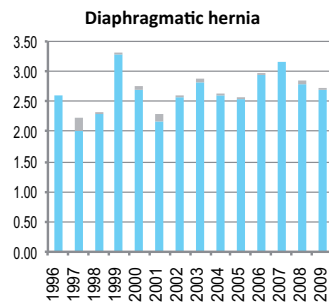
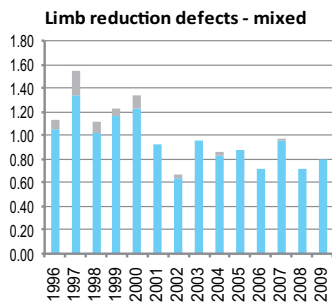
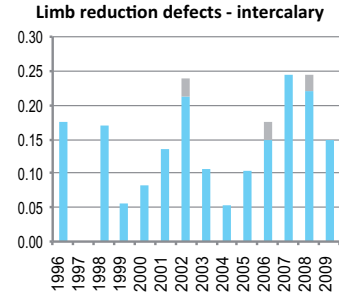
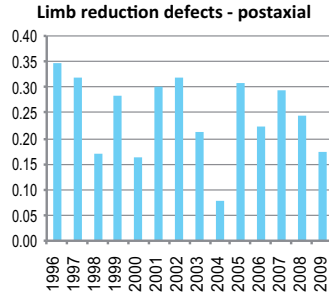
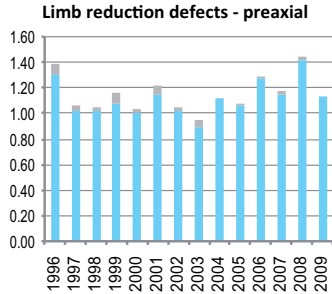
Note: L+S rates, ToP rates

USA-Texas: BDES



Note: L+S rates, ToP rates

USA-Texas: BDES



Note: L+S rates, ToP rates

USA-Utah: UBDN

Utah Birth Defects Network

History:

The Utah Birth Defect Network (UBDN) began in 1994 monitoring neural tube defects, expanding its identification of major malformations through 1999 when all major structural birth defects were identified. The program is a full member of the ICBDSR.

Size and coverage:

The UBDN is a statewide population-based surveillance system covering over 50,000 births annually.

Legislation and funding:

In 1999 an Administrative Rule was enacted under the Utah Health Code Statute which mandates all delivery hospitals and laboratories to report any pregnancy or infant diagnosed with a birth defect. This administrative rule also covers those health care providers and other agencies that voluntarily report a birth defect case to the UBDN. The UBDN surveillance staff is funded by Maternal Child Health. The UBDN has many research projects funded from federal sources (e.g., Centers for Disease Control and Prevention).

Sources of ascertainment:

Multiple sources ($n=128$), such as delivery units, paediatric departments, laboratories, prenatal diagnostic centers, hospital discharge data, other specialties, and champions are used to ascertain malformed infants born in Utah. These sources include reports that are generated by the facilities, case reports submitted by individual care providers, as well as reports actively obtained by UBDN staff reviewing records or log books.

Exposure information:

Basic risk factors including medications taken during pregnancy, infections, chronic conditions are all recorded based on medical records abstraction.

Background information:

Detailed background information including demographics, reproductive history, gestational age, prenatal diagnostics, and family history are all collected from the medical record. The number of births and basic demographic data are obtained from vital statistics.

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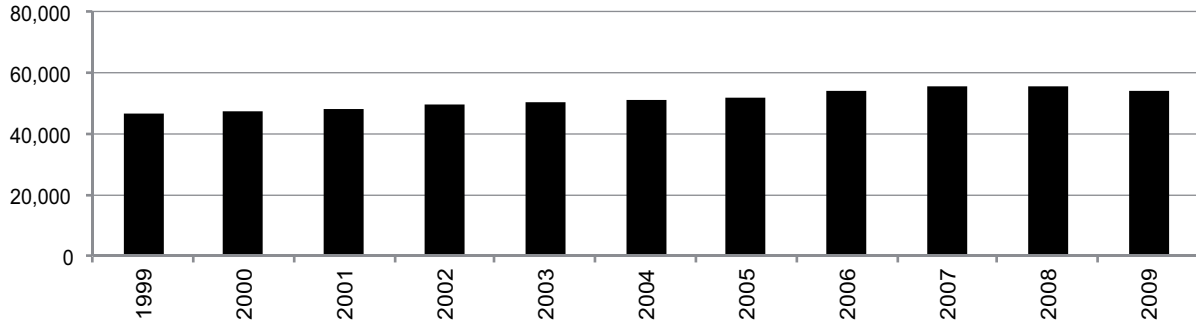
Fax: 801 883 4669

E-mail: aenance@utah.gov

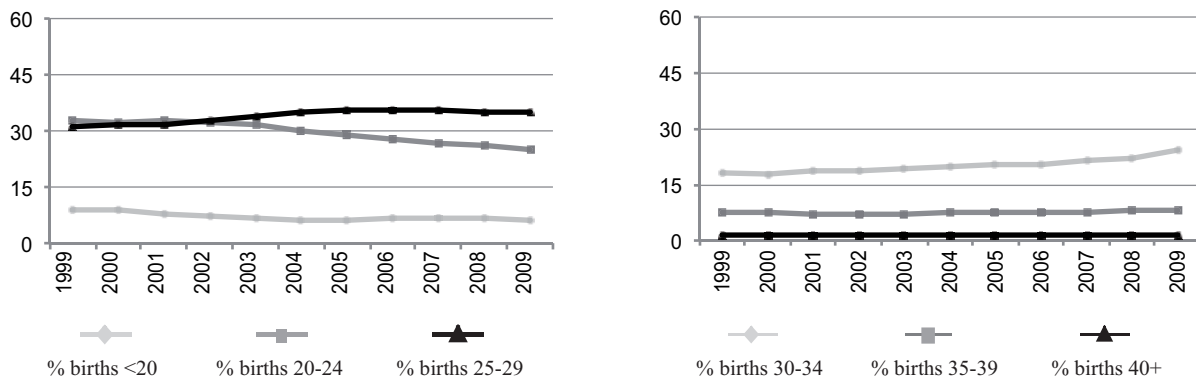
Website: <http://www.health.utah.gov/birthdefect/>

USA-Utah: UBDN

Total births by year



Percentage of births by year and maternal age



Terminations of Pregnancy (ToPs) in selected malformations (2007-2009)
(Total cases: isolated + multiples + syndromes)

Birth defects	ToPs	% of ToPs (*)	Birth defects	ToPs	% of ToPs (*)
Anencephaly	20	46.5	Cystic kidney	8	11.8
Spina bifida	5	7.4	Limb reduction defects	5	4.8
Encephalocele	6	40.0	Diaphragmatic hernia	1	1.7
Holoprosencephaly	9	24.3	Omphalocele	10	20.4
Hydrocephaly	2	4.0	Gastroschisis	2	2.3
Hypoplastic left heart syndrome	3	4.8	Trisomy 13	8	25.0
Cleft palate without cleft lip	2	2.0	Trisomy 18	18	32.7
Cleft lip with or without cleft palate	9	4.1	Down syndrome	27	11.3
Renal agenesis	4	8.5			

Total ToPs with births defects = 136 (Ratio ToPs/Births: 0.82 per 1,000)
(*) % of ToPs = ToPs/(ToPs+Births)

USA-Utah: UBDN, 2009

Live births (LB)	53,849
Stillbirths (SB)	297
Total births	54,146
Number of terminations of pregnancy (ToP) for birth defects	49

Birth Defects	Number of cases			Rates*10,000
	LB	SB	ToP	Total rate
Anencephaly	2	4	10	2.95
Spina bifida	17	1	0	3.32
Encephalocele	3	0	2	0.92
Microcephaly	32	0	0	5.91
Holoprosencephaly	9	1	3	2.40
Hydrocephaly	4	0	0	0.74
Anophthalmos	3	1	0	0.74
Microphthalmos	6	0	0	1.11
Unspecified Anophthalmos/Microphthalmos	nr	nr	nr	nr
Anotia	0	0	0	0.00
Microtia	17	0	1	3.32
Unspecified Anotia/Microtia	nr	nr	nr	nr
Transposition of great vessels	12	2	0	2.59
Tetralogy of Fallot	14	1	1	2.95
Hypoplastic left heart syndrome	19	1	1	3.88
Coarctation of aorta	43	2	2	8.68
Choanal atresia, bilateral	5	0	0	0.92
Cleft palate without cleft lip	30	0	0	5.54
Cleft lip with or without cleft palate	74	0	4	14.41
Oesophageal atresia/stenosis with or without fistula	14	0	1	2.77
Small intestine atresia/stenosis	5	0	0	0.92
Anorectal atresia/stenosis	18	0	2	3.69
Undescended testis (36 weeks of gestation or later)	nr	nr	nr	nr
Hypospadias	58	0	0	10.71
Epispadias	1	0	0	0.18
Indeterminate sex	nr	nr	nr	nr
Renal agenesis	13	1	1	2.77
Cystic kidney	17	2	6	4.62
Bladder exstrophy	1	0	0	0.18
Polydactyly, preaxial	nr	nr	nr	nr
Total Limb reduction defects (include unspecified)	32	0	0	5.91
Transverse	12	0	0	2.22
Preaxial	8	0	0	1.48
Postaxial	2	0	0	0.37
Intercalary	4	0	0	0.74
Mixed	30	0	0	5.54
Unspecified	2	0	0	0.37
Diaphragmatic hernia	17	1	0	3.32
Omphalocele	14	3	4	3.88
Gastroschisis	20	2	1	4.25
Unspecified Omphalocele/Gastroschisis	nr	nr	nr	nr
Prune belly sequence	2	1	2	0.92
Trisomy 13	8	1	4	2.40
Trisomy 18	7	5	5	3.14
Down syndrome, all ages (include age unknown)	69	4	15	16.25
<20	3	1	0	11.82
20-24	8	0	0	5.96
25-29	9	1	0	5.32
30-34	16	0	5	16.23
35-39	18	2	6	57.97
40-44	12	0	4	208.33
45+	3	0	0	476.19
unknown	0	0	0	---

nr = not reported

USA-Utah: UBDN, Previous years rates 1999 - 2009

Birth prevalence rates: (LB+SB+TOP) * 10,000

	1974-1979	1980-1984	1985-1989	1990-1994	1995-1999*	2000-2004	2005-2009
Total births					46,458	246,111	270,568
Anencephaly					1.94	2.07	2.70
Spina bifida					3.44	3.94	4.21
Encephalocele					0.22	0.98	0.92
Microcephaly					3.01	4.75	5.21
Holoprosencephaly					1.08	1.34	2.14
Hydrocephaly					3.01	4.71	3.40
Anophthalmos					0.00	0.24	0.52
Microphthalmos					1.94	1.50	1.55
Unspecified Anophthalmos/Microphthalmos					0.00	0.00	0.00*
Anotia					0.22	0.08	0.15
Microtia					1.08	2.76	3.14
Unspecified Anotia/Microtia					0.00	0.00	0.00*
Transposition of great vessels					6.46	4.96	3.95
Tetralogy of Fallot					6.24	3.90	3.44
Hypoplastic left heart syndrome					3.87	3.58	3.59
Coarctation of aorta					8.83	7.88	9.13
Choanal atresia, bilateral					0.00	0.16	0.44
Cleft palate without cleft lip					6.03	7.72	6.50
Cleft lip with or without cleft palate					12.70	14.38	13.05
Oesophageal atresia/stenosis with or without fistula					4.30	2.19	2.96
Small intestine atresia/stenosis					1.72	1.06	1.59
Anorectal atresia/stenosis					4.52	3.17	3.47
Undescended testis (36 weeks of gestation or later)					nr	nr	nr
Hypospadias					4.09	4.79	9.54
Epispadias					0.43	0.16	0.07
Indeterminate sex					nr	nr	nr
Renal agenesis					4.30	3.45	3.22
Cystic kidney					3.01	5.85	4.51
Bladder exstrophy					0.22	0.20	0.15
Polydactyly, preaxial					nr	nr	nr
Total Limb reduction defects (include unspecified)					6.03	5.81	6.69
Transverse					4.09	2.72	3.47
Preaxial					0.86	1.79	1.37
Postaxial					0.00	0.12	0.22
Intercalary					0.00	0.12	0.30
Mixed					0.65	0.93	1.77
Unspecified					0.22	0.16	0.26
Diaphragmatic hernia					2.58	3.66	3.33
Omphalocele					2.15	2.84	2.81
Gastroschisis					4.30	4.84	5.21
Unspecified Omphalocele/Gastroschisis					0.00	0.00	0.00*
Prune belly sequence					0.00	0.20	0.26
Trisomy 13					0.65	1.71	2.11
Trisomy 18					3.66	3.33	3.51
Down syndrome, all ages (include age unknown)					15.93	15.60	14.38
<20					6.96	11.41	8.44
20-24					7.89	8.82	7.55
25-29					11.08	8.37	8.26
30-34					9.54	15.70	12.42
35-39					76.54	46.37	46.29
40-44					109.38	161.20	160.79
45+					185.19	526.32	276.68
unknown					---	---	---

nr = not reported

* data include less than 5 years

Monitoring Systems

USA-Utah: UBDN

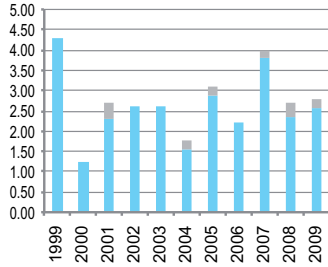
Time trends 1999-2009 (Birth prevalence rates per 10,000)



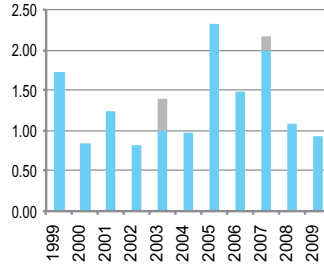
Note: L+S rates, ToP rates

USA-Utah: UBDN

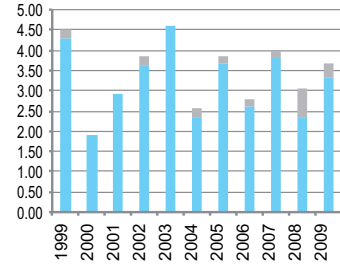
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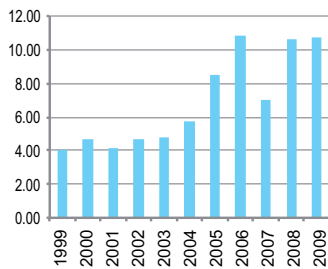
Small intestine atresia/stenosis



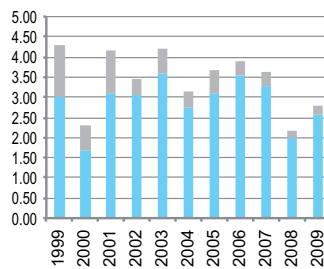
Anorectal atresia/stenosis



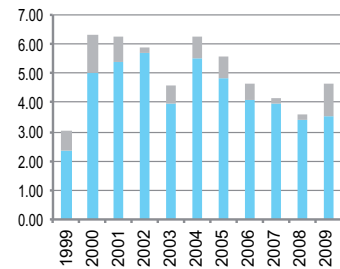
Hypospadias



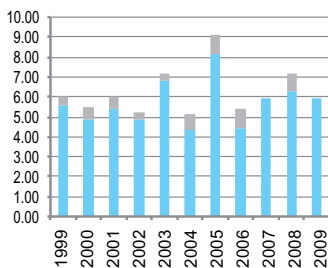
Renal agenesis



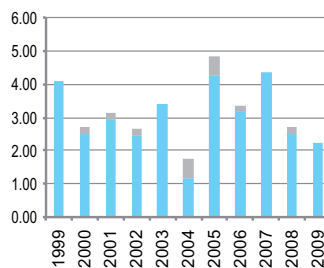
Cystic kidney



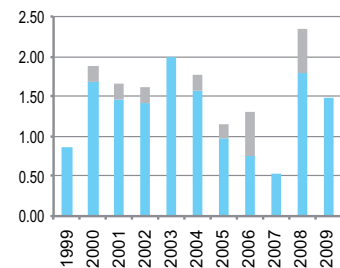
Limb reduction defects



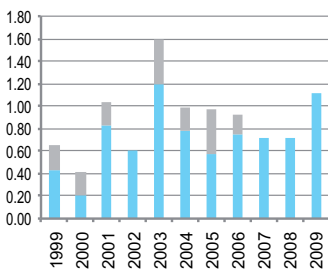
Limb reduction defects - transverse



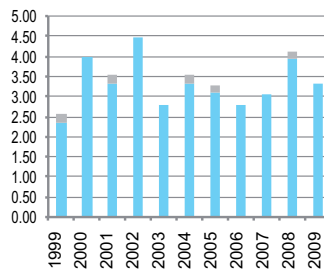
Limb reduction defects - preaxial



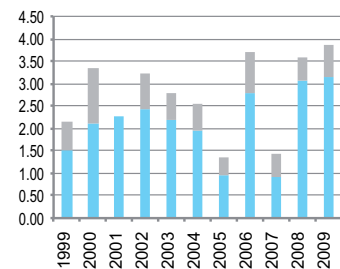
Limb reduction defects - mixed



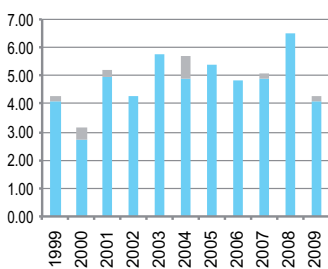
Diaphragmatic hernia



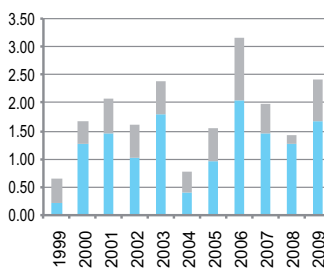
Omphalocele



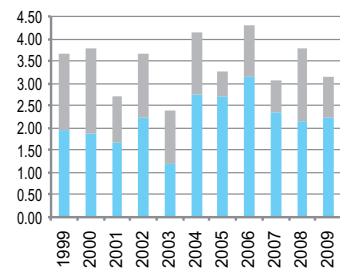
Gastroschisis



Trisomy 13



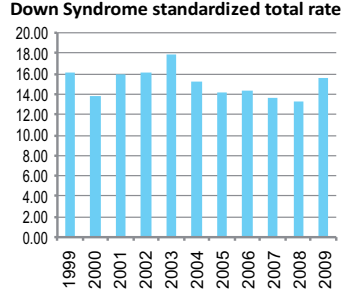
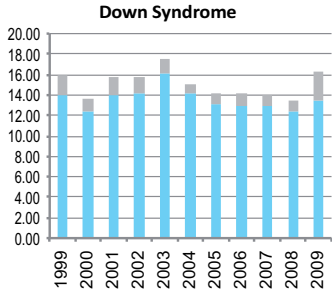
Trisomy 18



Note: L+S rates, ToP rates

Monitoring Systems

USA-Utah: UBDN



Note: ■ L+S rates, ■ ToP rates

Monitoring Systems, not contributing with Annual Data: description of the registry

Australia: VBDR

Victorian Birth Defects Registry

History:

In 1979 the Commonwealth Government agreed in principle to collect more information about births and birth defects. It was decided that the States would be responsible for setting up their own systems and the Commonwealth would establish a National Perinatal Statistics Unit, to collate information from all the states and provide an overall picture. The Victorian Perinatal Data Collection Unit (VPDCU), established under the Health Act of 1958, operates under the aegis of the Consultative Council on Obstetric and Paediatric Mortality and Morbidity (the Council). One of the fundamental purposes of the VPDCU was the establishment and maintenance of the Victorian Birth Defects Register (VBDR). The VPDCU and VBDR were established in 1982.

Size and coverage:

The VBDR collects information on all birth defects for livebirths, stillbirths and terminations of pregnancy pre 20 wks gestation and children up to 18 yrs of age (irrespective of the age at diagnosis). Approximately 3.8% of babies are born with a birth defect at or after 20 weeks gestation. We also follow up terminations for birth defects before 20 weeks, once these are included the overall prevalence is approximately 4%. Birth defects are notified to the register for those babies/fetus' who were born in Victoria.

Legislation and funding:

The ongoing maintenance of the VBDR is enshrined in the legislation pertaining to the VPDCU (Health Act 1958) and is an ongoing function of the VPDCU, however notification of birth defects outside the reporting period on the Perinatal Morbidity Statistics form (28 days) is a voluntary process. There is a section for reporting of birth defects on the Perinatal form which is completed at the time of birth. Several measures are taken to ensure the ascertainment of birth defects outside this reporting period which will be specified in 'sources of ascertainment'. The VPDCU & VBDR are funded by the Department of Human Services (State Government).

Sources of ascertainment:

Perinatal forms (approx 48.8%)
 Hospital listings* (approx 28.8%)
 Perinatal death certificates/autopsy reports (approx 7.8%)
 Cytogenetic reports (approx 9.3%)
 Maternal & Child Health Nurse (approx 4.2%)
 Other professionals/parents (approx 1.1%)

* These include obtaining annual inpatient listings from the two major paediatric teaching hospitals detailing all children up to the age of five years who have been subsequently admitted to these hospitals each year with a birth defect. We also obtain annual listings from specialist clinics at these hospital for all children up to the age of five years who have visited either as an inpatient or an outpatient. This procedure has also been adopted for Monash Medical Centre. Other listings are also received from Newborn Screening Services and Genetic Health Services Victoria.

Exposure information:

No exposure information is available.

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Canada: British Columbia British Columbia Health Status Registry (BCHSR) Congenital Anomalies Surveillance Programme

History:

The Programme was established in 1952 as the Crippled Children's Registry. Until 1959 the Programme had an age limit of 21, but this was removed in 1960 and the name was changed to the Registry for Handicapped Children and Adults and included all familial conditions and congenital malformations. In 1975, the Registry's name was changed to the Health Surveillance Registry as risk registers for amniocentesis, rubella, hyaline membrane disease, and fetal alcohol syndrome were added. In 1991, the Royal Commission Report on Health Care and Costs contained a recommendation that Vital Statistics should develop and maintain a registry of individuals with disabilities to assist in the development of long-range plans and to monitor the changing needs of the population. Subsequently, in September 1992, amendments to the Health Act established the legislative mandate and responsibilities for the HSR. The Registry's current name, Health Status Registry, was acquired in 1992. In order to refocus the Registry's emphasis on children, the criteria for registration of individuals with long-term physical, mental and/or emotional problems was restricted to persons under the age of 20 years old, however registration of persons with genetic conditions was not age limited. By 2000 there were approximately 215,000 records in the Registry.

Size and coverage:

The registry covers all births in the province approximately 45,000 births annually including stillbirths with at least 20 weeks gestation or birth weight 500 grams or more.

Legislation and funding:

In 1992, amendments to the Health Act established the legislative mandate and responsibilities for the BC HSR. Funding comes from the British Columbia Vital Statistics Agency.

Sources of ascertainment:

Sources include: Notice of Live and Stillbirth, Death registrations, Hospital Admission/Discharge Abstracts, Children's Hospital, Sunnyhill Hospital, UBC and Victoria General Medical Genetics Clinics, Child Development Centres, Health Regions, the Asante Centre for Fetal Alcohol Syndrome.

Exposure information:

Information on complications of pregnancy, labour or delivery is available on Vital Statistics birth registrations and environmental/occupational and drug/alcohol/smoking lifestyle related information can be obtained from the death registrations for the deceased.

Background information:

The registry data are regularly matched to Vital Statistics birth registrations to obtain birth particulars of the registrants and maternal/paternal information, and also matched to death registrations to get the date of death and causes of death if the registered person was deceased. The registry also registers cases of medically terminated pregnancies due to congenital anomalies.

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United Kingdom-Wessex: WANDA Wessex Antenatally Detected Anomalies Register

History:

The Registry was formally established in 1994, and is located in the Clinical Genetics Department of the teaching hospital in Southampton. The focus of the register is antenatal and includes all fetuses suspected to have a congenital anomaly. All babies born with an anomaly, potentially detectable antenatally, are also included. There is no limit to the age at which cases may be reported, but in reality few cases are registered after the neonatal period. The link with Genetics, however, ensures the inclusion of all unbalanced chromosome errors, whenever detected. The term 'congenital anomaly' is used here in its widest sense and includes chromosome errors, inborn errors of metabolism and syndromes where a gene mutation has been identified.

With the clinical perspective to this register, multidisciplinary meetings are held on a regular basis in each district covered. At these, all cases that have arisen in the intervening time period are discussed and management issues addressed. In addition, feedback from the register is used to inform local policies.

Size and coverage:

The Register is population based with approximately 27,000 deliveries per year and covers all births in the old Wessex region, Jersey and Guernsey. All miscarriages, stillbirths, TOPFAs and live births are included where an anomaly has been diagnosed.

Sources of Ascertainment:

Reporting is voluntary and multisource and includes sonographers, radiologists, obstetricians, midwives, paediatricians, paediatric surgeons, paediatric cardiologists, geneticists, genetics laboratories and pathologists.

Exposure information:

This is anecdotally recorded only.

Background information:

The approach of the register is to focus on collecting data that is reliably available and so relatively complete. This includes maternal and child demographics, full antenatal findings, test results and the postnatal findings and diagnosis. This may include family history and maternal health and medications but data on the father are not kept unless relevant to the diagnosis of the fetus/child.

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USA-California: CBDMP California Birth Defects Monitoring Program

History:

The California Birth Defects Monitoring Program was established in 1983 to monitor rates and trends and conduct epidemiological investigations to find causes of birth defects. The Program has had both state and federal funding, and is a branch of the California Department of Public Health, within the Maternal, Child and Adolescent Health Division.

Size and coverage:

The Program operates a population-based registry among approximately 223,000 births. The registry includes 12 counties whose birth defects rates and trends are representative of California which reflect the state's racial/ethnic diversity.

Legislation and funding:

The Program operates under statutory authority: Health and Safety Code Sections 103825-103855. The Program has received money from these sources in the past: Federal Block Grant Funds from Title V, State General Fund, and special funds from the Prenatal Genetic Disease Screening Program. Since July 2009, only Title V funding remains for the Registry.

Sources of ascertainment:

Staff actively ascertain data at hospitals and genetic centers by reviewing logs and identifying children with structural birth defects generally encompasses within BPA 740-759, diagnosed prenatally through age one. All diagnostic information is abstracted direct from medical records; registry files are cross-linked with vital statistics data to verify demographic information.

Background information:

Registry data, a description of Program activities, research findings, and publications are available at www.cdph.ca.gov

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Selection of papers by Programme Directors and their collaborators are reported as following. The details are sent from the Programme Directors only for the listed Surveillance Programs. Collaborative publications, made by two or more ICBDSR members in any context, are first shown and not repeated in the specific Surveillance System list. Papers can be requested to Authors.

Collaborative Publications

Bermejo-Sánchez E, Cuevas L, Amar E, Bakker MK, Bianca S, Bianchi F, Canfield MA, Castilla EE, Clementi M, Cocchi G, Feldkamp ML, Landau D, Leoncini E, Li Z, Lowry RB, Mastroiacovo P, Mutchinick OM, Rissmann A, Ritvanen A, Scarano G, Siffel C, Szabova E, Martínez-Frías ML. Amelia: a multi-center descriptive epidemiologic study in a large dataset from the International Clearinghouse for Birth Defects Surveillance and Research, and overview of the literature. *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):288-304.

Bermejo-Sánchez E, Cuevas L, Amar E, Bianca S, Bianchi F, Botto LD, Canfield MA, Castilla EE, Clementi M, Cocchi G, Landau D, Leoncini E, Li Z, Lowry RB, Mastroiacovo P, Mutchinick OM, Rissmann A, Ritvanen A, Scarano G, Siffel C, Szabova E, Martínez-Frías ML. Phocomelia: a worldwide descriptive epidemiologic study in a large series of cases from the International Clearinghouse for Birth Defects Surveillance and Research, and overview of the literature. *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):305-20.

Botto LD, Feldkamp ML, Amar E, Carey JC, Castilla EE, Clementi M, Cocchi G, de Walle HE, Halliday J, Leoncini E, Li Z, Lowry RB, Marengo LK, Martínez-Frías ML, Merlob P, Morgan M, Muñoz LL, Rissmann A, Ritvanen A, Scarano G, Mastroiacovo P. Acardia: epidemiologic findings and literature review from the International Clearinghouse for Birth Defects Surveillance and Research. *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):262-73

Castilla EE, Mastroiacovo P. Very rare defects: what can we learn? *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):252-61.

Clementi M, Di Gianantonio E, Cassina M, Leoncini E, Botto LD, Mastroiacovo P; SAFE-Med Study Group. (Castilla EE, Bakker MK, Bianca S, Cocchi G, de Vigan C, Merlob P, Pierini A, Scarano G, Sipek A, Yamanaka M). Treatment of hyperthyroidism in pregnancy and birth defects. *J Clin Endocrinol Metab.* 2010, 95: E337-E341.

Cocchi G, Gualdi S, Bower C, Halliday J, Jonsson B, Myrelid A, Mastroiacovo P, Amar E, Bakker MK, Correa A, Doray B, Melve KK, Koshnood B, Landau D, Mutchinick OM, Pierini A, Ritvanen A, Ruddock

V, Scarano G, Sibbald B, Sípek A, Tenconi R, Tucker D, Annerén G. International trends of Down syndrome 1993-2004: Births in relation to maternal age and terminations of pregnancies. *Birth Defects Res A Clin Mol Teratol.* 2010 88(6):474-9.

Feldkamp ML, Botto LD, Amar E, Bakker MK, Bermejo-Sánchez E, Bianca S, Canfield MA, Castilla EE, Clementi M, Csaky-Szunyogh M, Leoncini E, Li Z, Lowry RB, Mastroiacovo P, Merlob P, Morgan M, Mutchinick OM, Rissmann A, Ritvanen A, Siffel C, Carey JC. Cloacal exstrophy: an epidemiologic study from the International Clearinghouse for Birth Defects Surveillance and Research. *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):333-43.

IPDTC Working Group. Prevalence at Birth of Cleft Lip With or Without Cleft Palate: Data From the International Perinatal Database of Typical Oral Clefts (IPDTC). *Cleft Palate Craniofac J.* 2011 Jan;48(1):66-81. Epub 2010 Apr 6

Leoncini E, Botto LD, Cocchi G, Annerén G, Bower C, Halliday J, Amar E, Bakker MK, Bianca S, Canessa Tapia MA, Castilla EE, Csáky-Szunyogh M, Dastgiri S, Feldkamp ML, Gatt M, Hirahara F, Landau D, Lowry RB, Marengo L, McDonnell R, Mathew TM, Morgan M, Mutchinick OM, Pierini A, Poetzsch S, Ritvanen A, Scarano G, Siffel C, Sípek A, Szabova E, Tagliabue G, Vollset SE, Wertelecki W, Zhuchenko L, Mastroiacovo P. How valid are the rates of Down syndrome internationally? Findings from the International Clearinghouse for Birth Defects Surveillance and Research. *Am J Med Genet A.* 2010;152A(7):1670-80

Lisi A, Botto LD, Robert-Gnansia E, Castilla EE, Bakker MK, Bianca S, Cocchi G, de Vigan C, Dutra MG, Horacek J, Merlob P, Pierini A, Scarano G, Sipek A, Yamanaka M, Pierpaolo Mastroiacovo. Surveillance of Adverse Fetal Effects of Medications (SAFE-Med): findings from the International Clearinghouse of Birth Defects Surveillance and Research. *Reproductive Toxicology* 2010, 29: 433-442.

Luquetti DV, Leoncini E, Mastroiacovo P. Microtia-anotia: a global review of prevalence rates. *Birth Defects Res A Clin Mol Teratol.* 2011 Sep;91(9):813-22

Mutchinick OM, Luna-Muñoz L, Amar E, Bakker MK, Clementi M, Cocchi G, da Graça Dutra M, Feldkamp ML, Landau D, Leoncini E, Li Z, Lowry

B, Marengo LK, Martínez-Frías ML, Mastroiacovo P, Métneki J, Morgan M, Pierini A, Rissman A, Ritvanen A, Scarano G, Siffel C, Szabova E, Arteaga-Vázquez J. Conjoined twins: a worldwide collaborative epidemiological study of the International Clearinghouse for Birth Defects Surveillance and Research. *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):274-87.

Orioli IM, Amar E, Arteaga-Vazquez J, Bakker MK, Bianca S, Botto LD, Clementi M, Correa A, Csaky-Szunyogh M, Leoncini E, Li Z, López-Camelo JS, Lowry RB, Marengo L, Martínez-Frías ML, Mastroiacovo P, Morgan M, Pierini A, Ritvanen A, Scarano G, Szabova E, Castilla EE. Sirenomelia: an epidemiologic study in a large dataset from the International Clearinghouse of Birth Defects Surveillance and Research, and literature review. *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):358-73.

Orioli IM, Amar E, Bakker MK, Bermejo-Sánchez E, Bianchi F, Canfield MA, Clementi M, Correa A, Csáky-Szunyogh M, Feldkamp ML, Landau D, Leoncini E, Li Z, Lowry RB, Mastroiacovo P, Morgan M, Mutchinick OM, Rissmann A, Ritvanen A, Scarano G, Szabova E, Castilla EE. Cyclopia: an epidemiologic study in a large dataset from the International Clearinghouse of Birth Defects Surveillance and Research. *Am J Med Genet C Semin Med Genet.* 2011 Nov 15;157C(4):344-57.

Siffel C, Correa A, Amar E, Bakker MK, Bermejo-Sánchez E, Bianca S, Castilla EE, Clementi M, Cocchi G, Csáky-Szunyogh M, Feldkamp ML, Landau D, Leoncini E, Li Z, Lowry RB, Marengo LK, Mastroiacovo P, Morgan M, Mutchinick OM, Pierini A, Rissmann A, Ritvanen A, Scarano G, Szabova E, Olney RS. Bladder exstrophy: an epidemiologic study from the International Clearinghouse for Birth Defects Surveillance and Research, and an overview of the literature. *Am J Med Genet C Semin Med Genet.* 2011 Nov 5;157C(4):321-32.

Australia – Western: WARDA

Abeywardana S, Bower C, Halliday J, Chan A, Sullivan EA. Prevalence of neural tube defects in Australia prior to mandatory folic acid fortification of bread flour. *ANZ J Public Health* 2010 Aug;34:351-5.

Berry R.J, Bailey L, Mulinare J, Bower C. Fortification of flour with folic acid. *Food and Nutrition Bulletin* 2010; 31:S22-S35.

Bower C, Rudy E, Callaghan A, Quick J, Nassar N. Age at diagnosis of birth defects. *Birth Defects Research Part A* 2010; 88:251-255.

Bower CI, Lester-Smith D, Elliott E. Congenital anomalies – why bother? [Commentary]. *Med J Aust* 2010; 192: 300.

Colvin L, Slack-Smith L, Stanley FJ, Bower C. Dispensing patterns and pregnancy outcomes for women dispensed selective serotonin reuptake inhibitors in pregnancy. *Birth Defects Res A Clin Mol Teratol.* 2011 Mar;91(3):142-52. Erratum in: *Birth Defects Res A Clin Mol Teratol.* 2011 Apr;91(4):268

Colvin L, Slack-Smith L, Stanley FJ, Bower C. Linking a pharmaceutical claims database with a birth defects registry to investigate birth defect rates of suspected teratogens. *Pharmacoepidemiology and Drug Safety* 2010; 19:1137-1150.

Dye DE, Brameld KJ, Maxwell S, Goldblatt J, Bower C, Leonard H, Bourke J, Glasson EJ, O'Leary P. The impact of single gene and chromosomal disorders on hospital admissions of children and adolescents: a population-based study. *Public Health Genomics.* 2011;14:153-61.

Geelhoed EA, Bebbington A, Bower C, Deshpande A, Leonard H. Direct health care costs of children and adolescents with Down syndrome. *J Pediatr.* 2011 Oct;159(4):541-5. Epub 2011 Jul 23.

Hansen M, Milne E, de Klerk N, Kurinczuk JJ, Jacoby P, Bower C. ART, birth defects and subfertility-what should prospective patients be told? [letter] *J Assist Reprod Genet.* 2011 Sep 1

Hendrie D, Bebbington A, Bower C, Leonard H. Measuring use and cost of health sector and related care in a population of girls and young women with Rett syndrome. *Research in Autism Spectrum Disorders* 2011; 5: 901–909

Maxwell S, Brameld K, Bower C, Dickinson JE, Goldblatt J, Hadlow N, Hewitt B, Murch A, Murphy A, Stock R, O'Leary P. Socio-demographic disparities in the uptake of prenatal screening and diagnosis in Western Australia. *Aust NZ J Obstet Gynaecol.* 2011 Feb;51:9-16.

Nassar N, Abeywardana P, Barker A, Bower C. Parental occupational exposure to potential endocrine disrupting chemicals and risk of hypospadias in infants. *Occupational and Environmental Medicine* 2010 Sep;67:585-9

Oddy W.H, Payne J, Miller M, de Klerk N, Bower C. Association of pre-pregnancy weight and birth defects [Letter]. *Australian and New Zealand Journal of Obstetrics and Gynaecology* 2010; 50: 205

O'Leary CM, Bower C. Guidelines for pregnancy: What's an acceptable risk, and how is the evidence (finally) shaping up? *Drug Alcohol Rev.* 2011 Sep 29

O'Leary CM, Nassar N, Kurinczuk JJ, de Klerk N, Geelhoed E, Elliott EJ, Bower C. Prenatal alcohol exposure and risk of birth defects. *Pediatrics.* 2010; 126:e843-50.

Payne J, France K, Henley N, D'Antoine H, Bartu A, O'Leary C, Elliott E, Bower C. Changes in health professionals' knowledge, attitudes and practice following provision of educational resources about prevention of prenatal alcohol exposure and fetal alcohol spectrum disorder. *Paediatr Perinat Epidemiol.* 2011 Jul;25:316-27.

Payne JM, France KE, Henley N, D'Antoine HA, Bartu AE, Mutch RC, Elliott EJ, Bower C. Paediatricians' knowledge, attitudes and practice following provision of educational resources about prevention of prenatal alcohol exposure and Fetal Alcohol Spectrum Disorder. *J Paediatr Child Health.* 2011; 47:704-10.

Payne JM, France KE, Henley N, D'Antoine HA, Bartu AE, O'Leary CM, Elliott EJ, Bower C, Geelhoed E. RE-AIM evaluation of the Alcohol and Pregnancy Project: educational resources to inform health professionals about prenatal alcohol exposure and fetal alcohol spectrum disorder. *Eval Health Prof.* 2011 Mar;34:57-80.

Peadon E, Payne J, Henley N, D'Antoine H, Bartu A, O'Leary C, Bower C, Elliott EJ. Attitudes and behaviour predict women's intention to drink alcohol during pregnancy: the challenge for health professionals. *BMC Public Health* 2011 11:584.

Peadon E, Payne J, Henley N, D'Antoine H, Bartu A, O'Leary C, Bower C, Elliott E.J. Women's knowledge and attitudes regarding alcohol consumption in pregnancy: a national survey. *BMC Public Health* 2010; 10: 510

Peadon E, Payne J, Henley N, D'Antoine H, Bartu A, O'Leary C, Bower C, Elliott EJ. Attitudes and behaviour predict women's intention to drink alcohol during pregnancy: the challenge for health professionals. *BMC Public Health.* 2011 Jul 22;11:584.

Thottungal AD, Charles AK, Dickinson JE, Bower C. Caudal dysgenesis and sirenomelia-single centre experience suggests common pathogenic basis. *American Journal of Medical Genetics Part A* 2010; 152A: 2578-87

Colombia – Bogota: BCMSP

Fernández N, Henao-Mejía J, Monterrey P, Pérez J, Zarante I. Association between maternal prenatal vitamin use and congenital abnormalities of the genitourinary tract in a developing country. *J Pediatr Urol.* 2012 Apr;8(2):121-6.

Suaréz-Ovand F, Ordóñez-Vásquez A, Zarante I. Defectos del tube neural y ácido fólico: patogenia, metabolismo y desarrollo embriológico. Revisión de la literatura. *Rev Col Obstet Ginecol.* 2010, 61(1):49-60 [Article in Spanish]

Zarante I, Franco L, López C, Fernández N. [Frequencies of congenital malformations: assessment and prognosis of 52,744 births in three cities of Colombia]. *Biomedica.* 2010 Jan-Mar;30(1):65-71. . [Article in Spanish]

Czech Republic

Šípek A. Jr., Mihalová R., Panczak A., Janashia M., Celbová L., Kohoutová M.: Advanced maternal age as a sole indication for amniocentesis--analysis of 418 fetal karyotypes. *Ceska Gynekol.* 2011 Jun;76(3):230-4.

France: Paris

Boyd PA, Loane M, Garne E, Khoshnood B, Dolk H. Sex chromosome trisomies in Europe: prevalence, prenatal detection and outcome of pregnancy. *Eur J Hum Genet.* 2010.

De SE, Morris JK and a EUROCAT Working Group (member Khoshnood B). Case-control analysis of paternal age and trisomic anomalies. *Arch Dis Child.* 2010;95:893-897.

Garne E, Khoshnood B, Loane M, Boyd P, Dolk H and a EUROCAT Working Group. Termination of pregnancy for fetal anomaly after 23 weeks of gestation: a European register-based study. *BJOG* 2010; 117:660-666.

Houyel L, Khoshnood B, Anderson RH et al. Population-based evaluation of a suggested anatomic and clinical classification of congenital heart defects based on the International Paediatric and Congenital Cardiac Code. *Orphanet J Rare Dis* 2011;6:64.

Jentink J, Bakker MK, Nijenhuis CM, Wilffert B, de Jong-van den Berg LT and a EUROCAT Working Group (member Khoshnood B). Does folic acid use decrease the risk for spina bifida after in utero exposure to valproic acid? *Pharmacoepidemiol Drug Saf.* 2010;19:803-807.

Jentink J, Dolk H, Loane MA, Morris JK, Wellesley D, Garne E, et al and a EUROCAT Working Group (member Khoshnood B). Intrauterine exposure to carbamazepine and specific congenital malformations: systematic review and case-control study. *BMJ*. 2010;341:c6581.

Jentink J, Loane MA, Dolk H, Barisic I, Garne E, Morris JK, de Jong-van den Berg LT; EUROCAT Antiepileptic Study Working Group (member Khoshnood B). Valproic acid monotherapy in pregnancy and major congenital malformations. *N Engl J Med* 2010; 362:2185-93.

Jouannic JM, Thieulin AC, Bonnet D, Houyel L, Lelong N, Goffinet F, Khoshnood B. Measurement of nuchal translucency for prenatal screening of congenital heart defects: a population-based evaluation. *Prenat Diagn* 2011;31:1264-1269.

Khoshnood B, Greenlees R, Loane M, Dolk H. Paper 2: EUROCAT public health indicators for congenital anomalies in Europe. *Birth Defects Res (Part A)* 2011;91 Suppl 1:S16-S22.

Mangione R, Lelong N, Fontanges M, Amat S, Rosenblatt J, Khoshnood B, Jouannic JM. Visualization of intracranial translucency at the 11-13-week scan is improved after specific training. *Ultrasound Obstet Gynecol* 2011.

Tararbit K, Houyel L, Bonnet D, De Vigan C, Lelong N, Goffinet F, Khoshnood B. Risk of congenital heart defects associated with assisted reproductive technologies: a population-based evaluation. *Eur Heart J* 2011;32:500-508.

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Boyd P., Loane M., Garne E., Khoshnood B., Dolk H., EUROCAT Working Group: Sex chromosome trisomies in Europe: prevalence, prenatal detection and outcome of pregnancy. In: *European Journal of Human Genetics* (19) 2011, 2, 231-234 <http://www.nature.com/ejhg/journal/vaop/ncurrent/abs/ejhg2010148a.html>

De Souza, E., Morris, J., The EUROCAT Working Group: Case-control analysis of paternal age and trisomic anomalies. In: *Archives of Disease in Childhood* (11), 2010, 95, 893-897. <http://adc.bmj.com/content/early/2010/06/28/adc.2009.176438.abstract>

Garne E., Khoshnood B., Loane M., Boyd P.A., Dolk H., The EUROCAT Working Group: Termination of pregnancy for fetal anomaly after 23 weeks of gestation: a European register-based study. In: *BJOG* (117), 2010, 6, 660-666. http://www.bjog.org/details/journalArticle/679931/Termination_of_pregnancy_for_fetal_anomaly_after_23weeks_of_gestation_a_Euro.html

www.bjog.org/details/journalArticle/679931/Termination_of_pregnancy_for_fetal_anomaly_after_23weeks_of_gestation_a_Euro.html

Greenlees R, Neville A, Addor MC, Amar E, Arriola L, Bakker M, Barisic I, Boyd PA, Calzolari E, Doray B, Draper E, Vollset SE, Garne E, Gatt M, Haeusler M, Kallen K, Khoshnood B, Latos-Bielenska A, Martinez-Frias ML, Materna-Kiryluk A, Dias CM, McDonnell B, Mullaney C, Nelen V, O'Mahony M, Pierini A, Queisser-Luff A, Randrianaivo-Ranjatoélina H, Rankin J, Rissmann A, Ritvanen A, Salvador J, Sipek A, Tucker D, Verellen-Dumoulin C, Wellesley D, Wertelecki W. Paper 6: EUROCAT member registries: organization and activities. In: *Birth defects research*. - New York, NY [u.a.] : Wiley-Liss, Bd. 91.2011, S. 51-100. <http://onlinelibrary.wiley.com/doi/10.1002/bdra.20775/abstract> <https://www.thieme-connect.de/ejournals/abstract/zbchir/doi/10.1055/s-0031-1283775>

Jentink, J., Loane, M., Dolk, H., Barisic, I., Garne, E., Morris, J., de Jong-van den Berg, L., for the EUROCAT Antiepileptic Study Working Group: Valproic Acid Monotherapy in Pregnancy and Major Congenital Malformations. In: *NEJM* (362), 2010, 23, 2185-2193. <http://content.nejm.org/cgi/content/short/362/23/2185>

Krause, H., Reißmann, A., Haß, H.-J., Kroker, S., Meyer, F.: Was muss der (Viszeral-)Chirurg von der Kinderchirurgie wissen - kinderchirurgische Aspekte in der (Viszeral-)Chirurgie. In: *Zentralblatt für Chirurgie* (136) 2011, 5, 458-470.

Lindinger, A., Schwedler, G., Hense, H.-W. For the participants of the PAN study : Prevalence of Congenital Heart Defects in Newborns in Germany: Results of the First Registration Year of the PAN Study (July 2006 to June 2007). In: *Klinische Pädiatrie* (222), 2010, 5, 321-326 <https://www.thieme-connect.de/ejournals/abstract/klinpaed/doi/10.1055/s-0030-1254155>

Mangold, E., Ludwig, K.U., Birnbaum, S., Baluardo, C., Ferrian, M., Herms, S., Reutter, H., de Assis, N.A., Chawa, T.A., Mattheisen, M., Steffens, M., Barth, S., Kluck, N., Paul, A., Becker, J., Lauster, C., Schmidt, G., Braumann, B., Scheer, M., Reich, R.H., Hemprich, A., Pöttsch, S., Blaumeiser, B., Moebus, S., Krawczak, M., Schreiber, S., Meifinger, T., Wichmann, H.-E., Steegers-Theunissen, R.P., Kramer, F.-J., Cichon, S., Propping, P., Wienker, T.F., Knapp, M., Rubini, M., Mossey, P.A., Hoffmann, P., Nöthen, M.M. Genome-wide association study identifies two susceptibility loci for nonsyndromic cleft lip with or without cleft palate. In: *Nature Genetics* (42), 2010, 1, 24-26. <http://www.nature.com/ng/journal/v42/n1/abs/ng.506.html>

Pöttsch, S., Bretschneider, D., Hoyer-Schuschke, J., Class, D., Firsching, R., Gerlach, K.-L.: Neugeborenes mit frontonasaler Schwellung. In: Monatsschrift Kinderheilkunde (158), 2010, 5, 427-429. <http://www.springerlink.com/content/23k2413685102311/?p=e227cccf7e146a4a46bc4cfa58a20d7&pi=1>

Pöttsch, S.: 5. Einsendertreffen des Fehlbildungsmonitoring Sachsen-Anhalt. In: Ärzteblatt Sachsen-Anhalt (21), 2010, 1, 19-20. http://www.aerzteblatt-sachsen-anhalt.de/02/images/stories/10_heft_01/S19-20_5einsendertreffen.pdf

Pöttsch, S.: Vitaminpräparate - Wie viel Folsäure ist empfehlenswert? In: Volksstimme 05.01.2010 http://www.volksstimme.de/vsm/ratgeber/ratgeber_aktuell/?em_cnt=1594150

Rißmann, A.: Medikation mit AT1-Blocker. Offener Brief an die Gynäkologen und Geburtshelfer, Internisten, Allgemeinmediziner und Neonatologen. In: Ärzteblatt Sachsen-Anhalt (21), 2010, 11, 22 http://www.aerzteblatt-sachsen-anhalt.de/02/images/stories/10_heft_11/22.pdf

Stender, M., Grossberndt, S., Köhn, A., Hoyer-Schuschke, J., Pöttsch, S.: Diät und unausgewogene Ernährung - Risikofaktor für angeborene Fehlbildungen?. In: Ernährungs-Umschau (58), 2011, 6, 297-303. http://www.ernaehrungs-umschau.de/themen/wissenschaft_aktuell/?id=4944

Ireland: Dublin

Delany C, McDonnell R, Robson M, Corcoran S, Fitzpatrick C, De La Harpe D. Folic acid supplement use in the prevention of neural tube defects. *Ir Med J.* 2011; 104(1):12-5.

Dolk H, Loane M, Garne E, and a European Surveillance of Congenital Anomalies (EUROCAT) Working Group - Addor MC, Bakker M, Barisic I, Bianca S, Boyd P, Calzolari E, Doray B, Gatt M, Haeusler M, Khoshnood B, Melve KK, Latos-Bielenska A, McDonnell B, Mullaney C, Nelen V, O'Mahony M, Pierini A, Poetzsch S, Queisser-Luft A, Randrianaivo H, Rankin J, Salvador J, Tucker D, Verellen-Dumoulin C, Wellesley D, Wertelecki W). Congenital Heart Defects in Europe: Prevalence and Perinatal Mortality, 2000 to 2005. *Circulation* 2011 Mar 1;123(8):841-9. Epub 2011 Feb 14.

Greenlees R, Neville A, Addor MC, Amar E, Arriola L, Bakker M, Barisic I, Boyd PA, Calzolari E, Doray B, Draper E, Vollset SE, Garne E, Gatt M, Haeusler M, Kallen K, Khoshnood B, Latos-Bielenska A, Martinez-Frias ML, Materna-Kirylyuk A, Dias CM, McDonnell

B, Mullaney C, Nelen V, O'Mahony M, Pierini A, Queisser-Luft A, Randrianaivo-Ranjatoélina H, Rankin J, Rissmann A, Ritvanen A, Salvador J, Sipek A, Tucker D, Verellen-Dumoulin C, Wellesley D, Wertelecki W. Paper 6: EUROCAT member registries: organization and activities. *Birth Defects Res A Clin Mol Teratol.* 2011 Mar;91 Suppl 1:S51-S100. Epub 2011 Mar 4.

Northern Netherlands

Bakker MK, De Walle HEK, Wilffert B, De Jong-van den Berg LTW. Fluoxetine and Infantile Hypertrophic Pylorus Stenosis: A Signal from a Birth Defects — Drug Exposure Surveillance Study. *Pharmacoepidemiol Drug Saf.* 2010; 19: S1–S347

Bakker MK, De Walle HE, Wilffert B, Berg LT. Fluoxetine and infantile hypertrophic pylorus stenosis: a signal from a birth defects-drug exposure surveillance study. *Pharmacoepidemiol Drug Saf.* 2010 Aug;19(8):808-13.

Bakker MK, de Walle HEK, de Jong-van den Berg LTW. Fluoxetine and Hypertrophic Pyloric Stenosis: a Signal from a Birth Defect Case-Control Monitoring System Birth Defects Research (Part A) 88:503–510 (2010)

Bakker MK. Commentary to Pedersen LH et al: Selective serotonin reuptake inhibitors in pregnancy and congenital malformations: population based cohort study. *EBMH* May 2010, Vol 12 No 2.

Bergman JEH, Blake KD, Bakker MK, du Marchie Sarvaas GJ, Free RH and van Ravenswaaij-Arts CMA. Death in CHARGE syndrome after the neonatal period. *Clinical Genetics* 2010; 77: 232-240.

Crijns HJ, Jentink J, Garne E, Gispen-de Wied CC, Straus SM, de Jong-van den Berg LT; EUROCAT Working Group (Marian Bakker). The distribution of congenital Anomalies within the VACTERL association among tumor necrosis factor antagonist-exposed pregnancies is similar to the general population. *The Journal of Rheumatology* 2011; 38:9 P1-P4 <http://www.ncbi.nlm.nih.gov/pubmed/21724702>

De Souza E, Morris JK; EUROCAT Working Group. Case-control analysis of paternal age and trisomic anomalies. *Arch Dis Child.* 2010 Jun 28.

Dolk H, Loane M, Garne E; a European Surveillance of Congenital Anomalies (EUROCAT) Working Group (Bakker MK). Congenital Heart Defects in Europe: Prevalence and Perinatal Mortality, 2000

to 2005. *Circulation*. 2011 Mar 1;123(8):841-849. Epub 2011 Feb 14. <http://www.ncbi.nlm.nih.gov/pubmed/21321151>

Garne E, Dolk H, Loane M, Wellesley D, Barisic I, Calzolari E, Densem J, EUROCAT Working Group (Bakker MK). Surveillance of Multiple Congenital Anomalies: Implementation of a computer Algorithm in European Registers for Classification of Cases. *Birth Defect Research (Part A): Clinical and Molecular Teratology* 91:S44-S50 (2011). <http://onlinelibrary.wiley.com/doi/10.1002/bdra.20777/pdf>

Garne E, Khoshnood B, Loane M, Boyd PA, Dolk H, EUROCAT Working Group (de Walle HEK). Termination of pregnancy for fetal anomaly after 23 weeks of gestation: a European register-based study. *BJOG* 2010 May;117(6):660-6.

Greenlees R, Neville A, Addor MC, Amar E, Arriola L, Bakker M, Barisic I, Boyd PA, Calzolari E, Doray B, Draper E, Vollset SE, Garne E, Gatt M, Haeusler M, Kallen K, Khoshnood B, Latos-Bielenska A, Martinez-Frias ML, Materna-Kiryluk A, Dias CM, McDonnell B, Mullaney C, Nelen V, O'Mahony M, Pierini A, Queisser-Luff A, Randrianaivo-Ranjatoélina H, Rankin J, Rissmann A, Ritvanen A, Salvador J, Sipek A, Tucker D, Verellen-Dumoulin C, Wellesley D, Wertenleki W.. EUROCAT Member Registries: Organization and Activities. *Birth Defects Research (Part A): clinical and Molecular Teratology* 91: S51-S100 (2011) <http://onlinelibrary.wiley.com/doi/10.1002/bdra.20775/pdf>

Jentink J, Bakker MK, Nijenhuis CM, Wilffert B, de Jong-van den Berg LT. Does folic acid use decrease the risk for spina bifida after in utero exposure to valproic acid? *Pharmacoepidemiol Drug Saf*. 2010 Aug;19(8):803-7.

Jentink J, Dolk H, Loane MA, Morris JK, Wellesley D, Garne E, de Jong-van den Berg L for the EUROCAT Antiepileptic Study Working Group (Marian Bakker). Intrauterine exposure to carbamazepine, and specific congenital malformations: systematic review and case-control-study. *BMJ* 2010; 341:c6581

Jentink J, Loane MA, Dolk H, Barisic I, Garne E, Morris JK, de Jong-van den Berg LT; EUROCAT Antiepileptic Study Working Group. Valproic acid monotherapy in pregnancy and major congenital malformations. *N Engl J Med*. 2010 Jun 10;362(23):2185-93.

Khoshnood B, Greenlees R, Loane M, Dolk H, EUROCAT Working Group (Bakker MK). EUROCAT Public Health Indicators for Congenital Anomalies

in Europe. *Birth Defects Research (Part A): Clinical and Molecular Teratology* 91:S16-S22 (2011).<http://onlinelibrary.wiley.com/doi/10.1002/bdra.20776/pdf>

Loane M, Dolk H, Garne E, Greenlees R, EUROCAT Working Group (Bakker MK). EUROCAT Data Quality Indicators for Population-Based Registries of Congenital Anomalies. *Birth Defects Research (PART A): Clinical and Molecular Teratology* 91:S23-S30 (2011). <http://onlinelibrary.wiley.com/doi/10.1002/bdra.20779/pdf>

Loane M, Dolk H, Kelly A, Teljeur C, Greenlees R, Densem J, EUROCAT Working Group (Bakker MK). EUROCAT Statistical Monitoring: Identification and Investigation of Ten Year Trends of Congenital Anomalies in Europe. *Birth Defect Research (Part A): Clinical and Molecular Teratology* 91:S31-S43 (2011). <http://onlinelibrary.wiley.com/doi/10.1002/bdra.20778/pdf>

Rozendaal AM, Mohangoo AD, Luijsterburg AJM, Bakker MK, Ongkosuwito EM, Vermeij-Keers C. Prevalentie van schisis in Nederland en Noord-Nederland in 1997-2007. *Tijdschrift voor Kindergeneeskunde*, februari 2011, nr. 1, P16-P25. http://www2.bsl.nl/corp/common/framecreator.asp?ak=geneeskunde&ap=vakb&altp=http://vb23.bsl.nl/frontend/default.asp?product_id=0376-7442

Rozendaal AM, Mohangoo AD, Ongkosuwito EM, Buitendijk SE, Bakker MK, Vermeij-Keers C. Regional Variation in Prevalence of Oral Cleft Live births in het Netherlands 1997-2007: Time trend analysis of Data from three Dutch Registries. *Am J Med Genet A*. 2011 Nov 21. [Epub ahead of print] <http://onlinelibrary.wiley.com/doi/10.1002/ajmg.a.34343/pdf>

van Spaendonck-Zwarts K, van Hessem L, Jongbloed JD, de Walle HE, Capetanaki Y, van der Kooi AJ, van Langen IM, van den Berg MP, van Tintelen JP. Desmin-related myopathy: a review and meta-analysis. *Clin Genet*. 2010 Jul 21.

Norway: MBRN

Baghestan E, Irgens LM, Bør Dahl PE, Rasmussen S. Trends in risk factors for obstetric anal sphincter injuries in Norway. *Obstet Gynecol* 2010;116(1):25-34. <http://www.ncbi.nlm.nih.gov/pubmed/20567164>

Beatty TH, Murray JC, Marazita ML, Munger RG, Ruczinski I, Hejmanski JB, Liang KY, Wu T, Murray T, Fallin MD, Redett RA, Raymond G, Schwender H, Jin SC, Cooper ME, Dunnwald M, Mansilla MA,

- Leslie E, Bullard S, Lidral AC, Moreno LM, Menezes R, Vieira AR, Petrin A, Wilcox AJ, Lie RT, Jabs EW, Wu-Chou YH, Chen PK, Wang H, Ye X, Huang S, Yeow V, Chong SS, Jee SH, Shi B, Christensen K, Melbye M, Doheny KF, Pugh EW, Ling H, Castilla EE, Czeizel AE, Ma L, Field LL, Brody L, Pangilinan F, Mills JL, Molloy AM, Kirke PN, Scott JM, Arcos-Burgos M, Scott AF. A genome-wide association study of cleft lip with and without cleft palate identifies risk variants near MAFB and ABCA4. *Nat Genet* 2010;42(6):525-9. Erratum in: *Nat Genet* 2010;42(8):727. Scott, James M [corrected to Scott, John M]. <http://www.ncbi.nlm.nih.gov/pubmed/20436469>
- Bjørstad AR, Irgens-Hansen K, Daltveit AK, Irgens LM. Macrosomia: mode of delivery and pregnancy outcome. *Acta Obstet Gynecol Scand* 2010;89(5):664-9. <http://www.ncbi.nlm.nih.gov/pubmed/20235897>
- Borthen I, Eide MG, Daltveit AK, Gilhus NE. Delivery outcome of women with epilepsy: a population-based cohort study. *BJOG* 2010;117(12):1537-43. <http://www.ncbi.nlm.nih.gov/pubmed/20716254>
- Boyles AL, Deroo LA, Lie RT, Taylor JA, Jugessur A, Murray JC, Wilcox AJ. Maternal Alcohol Consumption, Alcohol Metabolism Genes, and the Risk of Oral Clefts: A Population-based Case-Control Study in Norway, 1996-2001. *Am J Epidemiol* 2010;172(8):924-31. <http://www.ncbi.nlm.nih.gov/pubmed/20810466>
- Eidem I, Stene LC, Henriksen T, Hanssen KF, Vangen S, Vollset SE, Jøner G. Congenital anomalies in newborns of women with type 1 diabetes: nationwide population-based study in Norway, 1999-2004. *Acta Obstet Gynecol Scand* 2010;89(11):1403-11. <http://www.ncbi.nlm.nih.gov/pubmed/20929418>
- Garne E, Khoshnood B, Loane M, Boyd P, Dolk H; EUROCAT Working Group (...Kari K Melve,...). Termination of pregnancy for fetal anomaly after 23 weeks of gestation: a European register-based study. *BJOG* 2010;117(6):660-6. <http://www.ncbi.nlm.nih.gov/pubmed/20374608>
- Hampson SE, Tonstad S, Irgens LM, Meltzer HM, Vollrath ME. Mothers' negative affectivity during pregnancy and food choices for their infants. *Int J Obes (Lond)* 2010;34(2):327-31. <http://www.ncbi.nlm.nih.gov/pubmed/19918247>
- Jentink J, Dolk H, Loane MA, Morris JK, Wellesley D, Garne E, de Jong-van den Berg L; EUROCAT Antiepileptic Study Working Group (...Melve K...). Intrauterine exposure to carbamazepine and specific congenital malformations: systematic review and case-control study. *BMJ* 2010;341:c6581. <http://www.ncbi.nlm.nih.gov/pubmed/21127116>
- Jentink J, Loane MA, Dolk H, Barisic I, Garne E, Morris JK, de Jong-van den Berg LT; EUROCAT Antiepileptic Study Working Group (...Melve K...). Valproic acid monotherapy in pregnancy and major congenital malformations. *New Engl J Med* 2010;362(23):2185-93. <http://www.ncbi.nlm.nih.gov/pubmed/20558369>
- Jugessur A, Shi M, Gjessing HK, Lie RT, Wilcox AJ, Weinberg CR, Christensen K, Boyles AL, Daack-Hirsch S, Nguyen TT, Christiansen L, Lidral AC, Murray JC. Maternal genes and facial clefts in offspring: a comprehensive search for genetic associations in two population-based cleft studies from Scandinavia. *PLoS One* 2010;5(7):e11493. <http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0011493>
- Kringeland T, Daltveit AK, Møller A. What characterizes women who want to give birth as naturally as possible without painkillers or intervention? *Sex Reprod Healthc* 2010;1(1):21-6. <http://www.ncbi.nlm.nih.gov/pubmed/21122592>
- Kringeland T, Daltveit AK, Møller A. How Does Preference for Natural Childbirth Relate to the Actual Mode of Delivery? A Population-based Cohort Study from Norway. *Birth* 2010;37(1):21-27. <http://www.ncbi.nlm.nih.gov/pubmed/20402718>
- Leveresen KT, Sommerfelt K, Rønnestad A, Kaarsen PI, Farstad T, Skranes J, Støen R, Elgen IB, Rettedal S, Eide GE, Irgens LM, Markestad T. Predicting neurosensory disabilities at two years of age in a national cohort of extremely premature infants. *Early Hum Dev* 2010;86(9):581-6. <http://www.ncbi.nlm.nih.gov/pubmed/20800392>
- Lygre GB, Björkman L, Haug K, Skjærven R, Helland V. Exposure to dental amalgam restorations in pregnant women. *Community Dent Oral Epidemiol* 2010;38(5):460-9. <http://www.ncbi.nlm.nih.gov/pubmed/20406270>
- Melve KK, Skjærven R, Rasmussen S, Irgens LM. Recurrence of Stillbirth in Sibships: Population-based Cohort Study. *Am J Epidemiol* 2010;172(10):1123-30. <http://www.ncbi.nlm.nih.gov/pubmed/20843865>
- Moster D, Wilcox AJ, Vollset SE, Markestad T, Lie RT. Cerebral palsy among term and postterm births. *JAMA* 2010;304(9):976-982. <http://www.ncbi.nlm.nih.gov/pubmed/20810375>

References by ICBDSR Members, 2010-2011

- Nilsen RM, Vollset SE, Monsen AL, Ulvik A, Haugen M, Meltzer HM, Magnus P, Ueland PM. Infant Birth Size Is Not Associated with Maternal Intake and Status of Folate during the Second Trimester in Norwegian Pregnant Women. *J Nutr* 2010;140(3):572-9. <http://www.ncbi.nlm.nih.gov/pubmed/20089778>
- Nordtveit TI, Melve KK, Skjærven R. Mothers' and fathers' birth characteristics and perinatal mortality in their offspring: a population-based cohort study. *Paediatr Perinat Epidemiol* 2010;24(3):282-92. <http://www.ncbi.nlm.nih.gov/pubmed/20415758>
- Sandvik MK, Iversen BM, Irgens LM, Skjærven R, Leivestad T, Søfteland E, Vikse BE. Are adverse pregnancy outcomes risk factors for development of end-stage renal disease in women with diabetes? *Nephrol Dial Transplant* 2010;(11):3600-7. <http://www.ncbi.nlm.nih.gov/pubmed/20494895>
- Stoltenberg C, Schjølberg S, Bresnahan M, Hornig M, Hirtz D, Dahl C, Lie KK, Reichborn-Kjennerud T, Schreuder P, Alsaker E, Øyen AS, Magnus P, Surén P, Susser E, Lipkin WI; ABC Study Group. The Autism Birth Cohort: a paradigm for gene-environment-timing research. *Mol Psychiatry* 2010;15(7):676-80. <http://www.ncbi.nlm.nih.gov/pubmed/20571529>
- Tandberg A, Bjørge T, Nygård O, Børudahl PE, Skjærven R. Trends in incidence and mortality for triplets in Norway 1967-2006: the influence of assisted reproductive technologies. *BJOG* 2010;117(6):667-75. <http://www.ncbi.nlm.nih.gov/pubmed/20236102>
- Tjora E, Karlsen L, Moster D, Markestad T. Early severe weight loss in newborns after discharge from regular nurseries. *Acta Paediatr* 2010;99:654-657. <http://www.ncbi.nlm.nih.gov/pubmed/20085550>
- Vikanes Å, Skjærven R, Grijbovski AM, Gunnes N, Vangen S, Magnus P. Recurrence of hyperemesis gravidarum across generations: population based cohort study. *BMJ* 2010;340:1071-72. <http://www.ncbi.nlm.nih.gov/pubmed/21030362>
- Vollset SE (Ed.). Annual statistics for the Medical Birth Registry of Norway 2008. Report. Norwegian Institute of Public Health, Bergen 2010. ISSN: 1504-3320 <http://www.fhi.no/dokumenter/b05ede8c59.pdf>
- Wallenius M, Skomsvoll JF, Irgens L, Salvesen KA, Koldingsnes W, Mikkelsen K, Kaufmann C, Kvien TK. Post partum onset of rheumatoid arthritis and other chronic arthritides: results from a patient register linked to a medical birth registry. *Ann Rheum Dis* 2010;69(2):332-6. <http://www.ncbi.nlm.nih.gov/pubmed/19717397>
- Ye X, Skjærven R, Basso O, Baird DD, Eggesbo M, Uicab LA, Haug K, Longnecker MP. In utero exposure to tobacco smoke and subsequent reduced fertility in females. *Hum Reprod* 2010;25(11):2901-6. <http://www.ncbi.nlm.nih.gov/pubmed/20817739>
- Beaty TH, Ruczinski I, Murray JC, Marazita ML, Munger RG, Hetmanski JB, Murray T, Redett RJ, Fallin MD, Liang KY, Wu T, Patel PJ, Jin SC, Zhang TX, Schwender H, Wu-Chou YH, Chen PK, Chong SS, Cheah F, Yeow V, Ye X, Wang H, Huang S, Jabs EW, Shi B, Wilcox AJ, Lie RT, Jee SH, Christensen K, Doheny KF, Pugh EW, Ling H, Scott AF. Evidence for gene-environment interaction in a genome wide study of nonsyndromic cleft palate. *Genet Epidemiol* 2011;35(6):469-78 <http://www.ncbi.nlm.nih.gov/pubmed/21618603>
- Bjørge T (Ed.). Annual statistics for the Medical Birth Registry of Norway 2009. Report. Norwegian Institute of Public Health, Bergen 2011. ISSN: 1504-3320 <http://www.fhi.no/dokumenter/9a55cc5467.pdf>
- Borthen I, Eide M, Daltveit AK, Gilhus N. Obstetric outcome in women with epilepsy: a hospital-based, retrospective study. *BJOG* 2011;118(8):956-65. <http://www.ncbi.nlm.nih.gov/pubmed/21557799>
- Boyles AL, Ballard JL, Gorman EB, McConaughy DR, Cabrera RM, Wilcox AJ, Lie RT, Finnell RH. Association between inhibited binding of folic acid to folate receptor {alpha} in maternal serum and folate-related birth defects in Norway. *Hum Reprod* 2011;26(8):2232-8. <http://www.ncbi.nlm.nih.gov/pubmed/21576080>
- Cupul-Uicab LA, Ye X, Skjærven R, Haug K, Longnecker MP. Reproducibility of reported in utero exposure to tobacco smoke. *Ann Epidemiol* 2011;21(1):48-52. <http://www.ncbi.nlm.nih.gov/pubmed/21130369>
- Cupul-Uicab LA, Baird DD, Skjærven R, Saha-Chaudhuri P, Haug K, Longnecker MP. In utero exposure to maternal smoking and women's risk of fetal loss in the Norwegian Mother and Child Cohort (MoBa). *Hum Reprod* 2011;26(2):458-65. <http://www.ncbi.nlm.nih.gov/pubmed/21147823>
- Dolk H, Loane M, Garne E; European Surveillance of Congenital Anomalies (EUROCAT) Working Group (...Melve KK...). Congenital heart defects in Europe: prevalence and perinatal mortality, 2000 to 2005. *Circulation* 2011;123(8):841-9. <http://www.ncbi.nlm.nih.gov/pubmed/21321151>
- Eidem I, Vangen S, Hanssen KF, Vollset SE, Henriksen T, Joner G, Stene LC. Perinatal and infant mortality

References by ICBD SR Members, 2010-2011

in term and preterm births among women with type 1 diabetes. *Diabetologia* 2011;54(11):2771-8. <http://www.ncbi.nlm.nih.gov/pubmed/21866407>

Elkamil AI, Andersen GL, Salvesen KÅ, Skranes J, Irgens LM, Vik T. Induction of labor and cerebral palsy: a population-based study in Norway. *Acta Obstet Gynecol Scand* 2011;90(1):83-91. <http://www.ncbi.nlm.nih.gov/pubmed/21275920>

Engeland A, Bjørge T, Daltveit AK, Skurtveit S, Vangen S, Vollset SE, Furu K. Risk of diabetes after gestational diabetes and preeclampsia. A registry-based study of 230,000 women in Norway. *Eur J Epidemiol* 2011;26(2):157-63. <http://www.ncbi.nlm.nih.gov/pubmed/21298469>

Espnes MG, Bjørge T, Engeland A. Comparison of recorded medication use in the Medical Birth Registry of Norway with prescribed medicines registered in the Norwegian Prescription Database. *Pharmacoepidemiol Drug Saf* 2011;20(3):243-8. <http://www.ncbi.nlm.nih.gov/pubmed/21351305>

Garne E, Dolk H, Loane M, Wellesley D, Barisic I, Calzolari E, Densem J, EUROCAT Working Group (...Melve KK...). Paper 5: Surveillance of multiple congenital anomalies: Implementation of a computer algorithm in European registers for classification of cases. *Birth Defects Res A Clin Mol Teratol* 2011;91(S1):S44-S50. <http://www.ncbi.nlm.nih.gov/pubmed/21384529>

Greenlees R, Neville A, Addor MC, Amar E, Arriola L, Bakker M, Barisic I, Boyd PA, Calzolari E, Doray B, Draper E, Vollset SE, Garne E, Gatt M, Haeusler M, Kallen K, Khoshnood B, Latos-Bielenska A, Martinez-Frias ML, Materna-Kiryluk A, Dias CM, McDonnell B, Mullaney C, Nelen V, O'Mahony M, Pierini A, Queisser-Luft A, Randrianaivo-Ranjatoélina H, Rankin J, Rissmann A, Ritvanen A, Salvador J, Sipek A, Tucker D, Verellen-Dumoulin C, Wellesley D, Wertelecki W. Paper 6: EUROCAT member registries: organization and activities. *Birth Defects Res A Clin Mol Teratol* 2011;91(S1):S51-S100. <http://www.ncbi.nlm.nih.gov/pubmed/21381185>

Handal M, Engeland A, Rønning M, Skurtveit S, Furu K. Use of prescribed opioid analgesics and co-medication with benzodiazepines in women before, during, and after pregnancy: a population-based cohort study. *Eur J Clin Pharmacol* 2011;67(9):953-60. <http://www.ncbi.nlm.nih.gov/pubmed/21484468>

Henningsen AKA, Romundstad LB, Gissler M, Nygren KG, Lidegaard O, Skjærven R, Tiitinen A, Andersen AN, Wennerholm UB, Pinborg A. Infant and maternal health monitoring using a

combined Nordic database on ART and safety. *Acta Obstet Gynecol Scand* 2011;90(7):683-691. <http://www.ncbi.nlm.nih.gov/pubmed/21477001>

Hoff JM, Loane M, Gilhus NE, Rasmussen S, Daltveit AK. Arthrogyposis multiplexa congenita: an epidemiologic study of nearly 9 million births in 24 EUROCAT registers. *Eur J Obstet Gynecol Reprod Biol* 2011;159(2):347-50. <http://www.ncbi.nlm.nih.gov/pubmed/22005589>

Håberg SE, London SJ, Nafstad P, Nilsen RM, Ueland PM, Vollset SE, Nystad W. Maternal folate levels in pregnancy and asthma in children at age 3 years. Letter. *J Allergy Clin Immunol* 2011;127(1):262-4, 264.e1. <http://www.ncbi.nlm.nih.gov/pubmed/21094522>

Jugessur A, Shi M, Gjessing HK, Lie RT, Wilcox AJ, Weinberg CR, Christensen K, Boyles AL, Daack-Hirsch S, Nguyen TT, Christiansen L, Lidral AC, Murray JC. Fetal genetic risk of isolated cleft lip only versus isolated cleft lip and palate: A subphenotype analysis using two population-based studies of orofacial clefts in Scandinavia. *Birth Defects Res A Clin Mol Teratol* 2011;91(2):85-92. <http://www.ncbi.nlm.nih.gov/pubmed/21319277>

Khoshnood B, Greenlees R, Loane M, Dolk H; EUROCAT Project Management Committee; EUROCAT Working Group (...Melve KK...). Paper 2: EUROCAT public health indicators for congenital anomalies in Europe. *Birth Defects Res A Clin Mol Teratol* 2011;91 Suppl 1:S16-22. <http://www.ncbi.nlm.nih.gov/pubmed/21381186>

Leversen KT, Sommerfelt K, Rønnestad A, Kaaresen PI, Farstad T, Skranes J, Støen R, Elgen IB, Rettedal S, Eide GE, Irgens LM, Markestad T. Prediction of Neurodevelopmental and Sensory Outcome At 5 Years in Norwegian Children Born Extremely Preterm. *Pediatrics* 2011;127(3):e630-8. <http://www.ncbi.nlm.nih.gov/pubmed/21321031>

Loane M, Dolk H, Garne E, Greenlees R; EUROCAT Working Group (... Melve KK,...). Paper 3: EUROCAT data quality indicators for population-based registries of congenital anomalies. *Birth Defects Res A Clin Mol Teratol* 2011;91(Suppl 1):S23-30. <http://www.ncbi.nlm.nih.gov/pubmed/21384530>

Loane M, Dolk H, Kelly A, Teljeur C, Greenlees R, Densem J; EUROCAT Working Group (... Melve KK,...). Paper 4: EUROCAT statistical monitoring: identification and investigation of ten year trends of congenital anomalies in Europe. *Birth Defects Res A Clin Mol Teratol* 2011;91 Suppl 1:S31-43. <http://www.ncbi.nlm.nih.gov/pubmed/21381187>

Markhus VH, Rasmussen S, Lie SA, Irgens LM. Placental abruption and premature rupture of membranes. *Acta Obstet Gynecol Scand* 2011;90(9):1024-9. <http://www.ncbi.nlm.nih.gov/pubmed/21692757>

Mohangoo AD, Buitendijk SE, Szamotulska K, Chalmers J, Irgens LM, Bolumar F, Nijhuis JG, Zeitlin J and the Euro-peristat project committee: Gestational age and Neonatal Mortality in Europe. Results from the Euro-peristat project. *PLoS One* 2011;11:e24727. <http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0024727>

Monasta L, Irgens LM, Daltveit AK, Bjørstad AR, Irgens-Hansen K. Maternal height should be considered in the evaluation of macrosomia related risk of infant injuries at birth (Letter to the Editor). *Macrosomia and adverse pregnancy outcome: the role of maternal height (Reply)*. *Acta Obstet Gynecol Scand* 2011;90(2):198-9. <http://www.ncbi.nlm.nih.gov/pubmed/21241269>

Morken NH, Melve K, Skjærven R. Recurrence of prolonged and post-term gestational age across generations: maternal and paternal contribution. *BJOG* 2011;118(13):1630-5. <http://www.ncbi.nlm.nih.gov/pubmed/21985579>

Roberts CL, Ford JB, Algert CS, Antonsen S, Chalmers J, Cnattingius S, Gokhale M, Kotelchuck M, Melve KK, Langridge A, Morris C, Morris JM, Nassar N, Norman JE, Norrie J, Sørensen HT, Walker R, Weir CJ. Population-based trends in pregnancy hypertension and pre-eclampsia: an international comparative study. *BMJ Open* 2011;1(1):e000101. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3191437/?tool=pubmed>

Tandberg A, Melve KK, Nordtveit TI, Bjørge T, Skjærven R. Maternal birth characteristics and perinatal mortality in twin offspring. An intergenerational population-based study in Norway 1967-2008. *BJOG* 2011;118(6):698-705. <http://www.ncbi.nlm.nih.gov/pubmed/21291511>

Wallenius M, Skomsvoll JF, Irgens LM, Salvesen KA, Nordvåg BY, Koldingsnes W, Mikkelsen K, Kaufmann C, Kvien TK. Pregnancy and delivery in women with chronic inflammatory arthritides with a specific focus on first birth. *Arthritis Rheum* 2011;63(6):1534-42. <http://www.ncbi.nlm.nih.gov/pubmed/21630243>

Wallenius M, Skomsvoll JF, Irgens LM, Salvesen KA, Nordvåg BY, Koldingsnes W, Mikkelsen K, Kaufmann C, Kvien TK. Fertility in women with chronic inflammatory arthritides. *Rheumatology*

(Oxford) 2011;50(6):1162-7. <http://www.ncbi.nlm.nih.gov/pubmed/21292737>

Wehby GL, Fletcher JM, Lehrer SF, Moreno LM, Murray JC, Wilcox A, Lie RT. A genetic instrumental variables analysis of the effects of prenatal smoking on birth weight: evidence from two samples. *Biodemography Soc Biol* 2011;57(1):3-32. <http://www.ncbi.nlm.nih.gov/pubmed/21845925>

Wehby G, Jugessur A, Murray JC, Moreno L, Wilcox A, Lie RT. Genes as instruments for studying risk behavior effects: An application to maternal smoking and orofacial clefts. *Health Serv Outcomes Res Methodol* 2011;11(1-2):54-78. <http://www.ncbi.nlm.nih.gov/pubmed/22102793>

Whitworth KW, Baird DD, Stene LC, Skjærven R, Longnecker MP. Fecundability among women with type 1 and type 2 diabetes in the Norwegian Mother and Child Cohort Study. *Diabetologia* 2011;54(3):516-22. <http://www.ncbi.nlm.nih.gov/pubmed/21170514>

South America: ECLAMC

Beaty TH, Murray JC, Marazita ML, Munger RG, Ruczinski I, Helmanski JB, Liang KY, Wu T, Murray T, Fallin MD, Redett RA, Raymond G, Schwender H, Jin SC, Cooper ME, Dunnwald M, Mansilla MA, Leslie E, Bullard S, Lidral AC, Moreno LM, Menezes R, Vieira AR, Petrin A, Wilcox AJ, Lie RT, Jabs EW, Wu-Chou YH, Chen PK, Wang H, Ye X, Huang S, Yeow V, Chong Samuel S, Jee SH, Shi B, Christensen K, Melbye M, Doheny KF, Pugh EW, Ling H, Castilla EE, Czeizel AE, Ma L, Field LL, Brody L, Pangilinan F, Mills JL, Molloy AM, Kirke PN, Scott JM, Arcos-Burgos M, Scott AF. A genome-wide association study of cleft lip with and without cleft palate identifies risk variants near MAFB and ABCA4. *Nature Genetics*. 42: 525-529; 2010.

Bronberg R, Alfaro E, Chaves E, Andrade A, Gili J, López Camelo J, Dipierrí J. Anencephaly related infant mortality in Argentina: spatial and temporal analysis (1998-2007). *Arch Argent Pediatr*. 2011 Apr;109 (2):117-23. [Article in Spanish]. Campaña H, Ermini M, Aiello HA, Krupitzki H, Castilla EE, López-Camelo JS; Latin American Collaborative Study of Congenital Malformations Study Group. Prenatal sonographic detection of birth defects in 18 hospitals from South America. *J Ultrasound Med*. 29:203-212; 2010.

Campaña H, Pawluk MS, López Camelo JS; Grupo de Estudio del ECLAMC. Births prevalence of 27 selected congenital anomalies in 7 geographic regions of Argentina. *Arch Argent Pediatr*. 2010 Oct;108(5):409-17. [Article in Spanish]

Jindal A, McMeans M, Narayanan S, Rose E, Jain S, Marazita ML, Menezes R, Letra A, Martinez de Carvalho F, Brandon CA, Resick JM, Mereb JC, Poletta FA, Camelo J, Castilla EE, Orioli IM, Vieira AR. Women are more susceptible to caries but individuals born with clefts are not. *Int J of Dentistry* Volume 2011, Article ID 454532, 6 pages

Letra A, Menezes R, Fonseca RF, Govil M, McHenry T, Murphy MJ, Hennebold JD, Granjeiro JM, Castilla EE, Orioli IM, Martin R, Marazita ML, Bjork BC, Vieira AR. Novel Cleft Susceptibility Genes in Chromosome 6q. *J Dent Res* 89: 927–932. 2010.

Letra A, Menezes R, Govil M, Fonseca RF, McHenry T, Granjeiro JM, Castilla EE, Orioli IM, Marazita ML, Vieira AR. Follow-Up Association Studies of Chromosome Region 9q and Nonsyndromic Cleft Lip/Palate. *Am J Med Genet A*, 152A:1701-1710; 2010.

Letra AM, Menezes R, Cooper ME, Fonseca RF, Tropp S, Govil M, Granjeiro JM, Imoehl SR, Mansilla MA, Murray JC, Castilla EE, Orioli IM, Czeizel AE, Ma L, Chiquet BT, Hecht JT, Vieira AR, Marazita ML. CRISPLD2 variants including a C471T silent mutation may contribute to nonsyndromic cleft lip with or without cleft palate. *Cleft Palate Craniofac J*. 48:363-370, 2010.

López-Camelo, J. S., Castilla, E. E. and Orioli, I. M. , Folic acid flour fortification: Impact on the frequencies of 52 congenital anomaly types in three South American countries. *Am J Med Genet A*, 152A: 2444-2458; 2010.

McCarthy AM, Wehby GL, Barron S, Aylward GP, Castilla EE, Javois L, Goco N, Murray JC. Application of Neurodevelopmental Screening to a Sample of South American Infants: The Bayley Infant Neurodevelopmental Screener (BINS). *Infant Behavior and Development*, in press [Accepted 12.Dec.2011].

Orioli IM and Castilla EE. Epidemiology of Holoprosencephaly: Prevalence and Risk Factors. *Am J Med Genet-C*, 154C: 13-21; 2010.

Orioli IM, Camelo JL, Rittler M, Castilla EE. Sentinel phenotype for rubella embryopathy: time-space distribution in Brazil. *Cad Saude Publica* 10:1961-1968; 2011.

Orioli IM, Lima do Nascimento R, López-Camelo JS, Castilla EE. Effects of folic acid fortification on spina bifida prevalence in Brazil. *Birth Defects Research-A* 91: 831-835, 2011.

Poletta, FA; López-Camelo JS; Gili, JA; Montalvo G; Castilla EE, Red del Estudio Colaborativo

Latinoamericano de Malformaciones Congénitas en Ecuador. Consumo y exposición al humo de tabaco en mujeres embarazadas de Ecuador. *Rev Panam Salud Publica* 27: 56–65; 2010.

Rittler M, Cosentino V, López-Camelo JS, Murray JC, Wehby G, Castilla EE. Associated anomalies among infants with oral clefts at birth and during a 1-year follow-up. *Am J Med Genet A* 155:1588-1596; 2011. 1582011

Vianna FSL, López-Camelo, JS, Leite JCL, Sanseverino MTV, Dutra MG, Castilla EE, Schüler-Faccini L. Epidemiological surveillance of birth defects compatible with thalidomide embryopathy in Brazil. *PLoS one*, 2011; 6 (7): e 21735. Epub 2011 Jul 6. doi:10.1371/journal.pone.0021735.

Vieira AR, Deeley KB, Callahan NF, Noel JB, Anjomshoa I, Carricato WM, Schulhof LP, DeSensi RS, Gandhi P, Resick JM, Brandon CA, Rozhon C, Patir A, Yildirim M, Poletta FA, Mereb JC, Letra A, Menezes R, Wendell S, Lopez-Camelo JS, Castilla EE, Orioli IM, Seymen F, Weyant RJ, Crout R, McNeil DW, Modesto A, Marazita ML. Detection of Streptococcus mutans Infection in Human DNA Samples Extracted from Saliva and Blood. *International Scholarly Research Network Dentistry* 2011: Article ID 543561; 2011.

Wehby G, Castilla EE, Lopez-Camelo JS. The Impact of Altitude on Infant Health in South America. *Economics and Human Biology*. 8: 197-211; 2010.

Wehby G, Murray JC, McCarthy AM, Castilla EE. Racial gaps in child health insurance coverage in four South American countries: The role of wealth, human capital and other household characteristics. *Health Serv Res* 2011 Jan 6

Wehby GL, Castilla EE, Goco N, Rittler N, Cosentino V, Javois L, Kindem M, Chakraborty H, Dutra G, López-Camelo JS, Orioli IM, Murray JC. The effect of systematic pediatric care on neonatal mortality and hospitalizations of infants born with oral clefts. *BMC Pediatr* 11: 121,@, 2011.

Wehby GL, McCarthy AM, Castilla EE, Murray JC. The impact of household investments on early child neurodevelopment and on racial and socioeconomic developmental gaps: evidence from South America. *Forum for Health Economics & Policy*. Vol.14; Iss.2; Art 11. Pp.1-58; 2011.

Spain: ECEMC

Aceña I, MacDonald A, Martínez-Fernández ML, Bermejo E, Martínez-Frías ML. Análisis clínico-epidemiológico de las niñas recién nacidas con síndrome de Turner y de aquellas con tres cromosomas X. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:55-66. [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Bermejo E. Valoración de teratógenos y pautas a seguir ante el niño prenatalmente expuesto a un teratógeno. In: *Protocolos diagnósticos y terapéuticos en Pediatría*. Tomo 1: Genética Clínica, Dismorfología y Neurología. 2nd. ed. Ed. Exlibris, 2010. pp. 107-115 (ISSN: 2171-8172) [Article in Spanish]

Bermejo Sánchez E. Frecuencias de defectos congénitos al nacimiento en España y su comportamiento temporal y por comunidades autónomas. Causas de las variaciones de las frecuencias. *Semergen* 2010;36,8: 449-455 [Article in Spanish, Abstract in English]

Bermejo E, Cuevas L, Grupo Periférico del ECEMC, Martínez-Frías ML. Informe de Vigilancia Epidemiológica de anomalías congénitas en España: Datos registrados por el ECEMC en el período 1980-2009. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:68-100. [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Bermejo E, Martínez-Frías ML. Prevention, diagnosis and services. *Adv Exp Med Biol* 2010; 686:55-75.

Bermejo E, Martínez-Frías ML. Prevention, Diagnosis and Services. Book: "Rare Diseases Epidemiology Book". *Advances in Experimental Medicine and Biology Series*. Ed. M. Posada and SC Groff. Springer Science & Business Media B.V. Dordrecht, Heidelberg, London, New York, 2010. pp. 55-76 (ISBN: 978-90-481-9484-1; e-ISBN: 978-90-481-9485-8).

Climent Alcalá FJ, Molina Rodríguez MA, González Casado I, Osona Brís L, Salamanca Fresno L, Guerrero-Fernández J, Martínez-Frías ML, Gracia Bouthelier R. Deleción del cromosoma 9p-. Disgenesia gonadal asociada a retraso mental e hipoplasia del cuerpo calloso. ¿Síndrome de genes contiguos? *An Pediatr (Barc)* 2010;72,3:210-214. [Article in Spanish, Abstract in English]

Cid Galache P, Gómez Vida JM, Olivares Sánchez L, Pérez lañez R, Casas Gómez J, Broncano Lupiáñez S, Rodríguez Leal A. Fosa nasal supernumeraria, una extraña malformación congénita. Primer

caso registrado por el ECEMC. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:15-19 [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Fernández-Toral J, Rodríguez L, Plasencia A, Martínez-Frías ML, Ewers E, Hamid AB, Ziegler M, Liehr T. Four small supernumerary marker chromosomes derived from chromosomes 6, 8, 11 and 12 in a patient with minimal clinical abnormalities: a case report. *J Med Case Reports* 2010;4:239.

González de Dios J, Bermejo E, Mestre J, Ruipérez C, Moya M, Cuevas L, Martínez-Frías ML. Síndrome de Desorganización: Características y descripción del primer caso registrado en el ECEMC. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:9-14. [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

MacDonald AH, Rodríguez L, Aceña I, Martínez-Fernández ML, Sánchez-Izquierdo D, Zuazo E, Martínez-Frías ML. Subtelomeric deletion of 12p: Description of a third case and review. *Am J Med Genet Part A* 2010;152A:1561-1566.

Martínez-Fernández ML, Bermejo E, Martínez-Frías ML. Ejemplos clínicos de alteraciones crípticas del ADN, y guías para sospechar que un niño pueda tener alguna alteración críptica o molecular. *Semergen* 2010;36,10:573-578. [Article in Spanish, Abstract in English]

Martínez-Fernández ML, Sánchez-Izquierdo MD, Martínez-Frías ML. Resumen de la evolución de las técnicas de citogenética y genética molecular para la identificación de las alteraciones genéticas del desarrollo embrionario. *Semergen* 2010;36,9:520-525 [Article in Spanish, Abstract in English]

Martínez-Frías ML. Editorial: La prevención de defectos congénitos en Atención Primaria. *Semergen* 2010;36,3:119-120. [Article in Spanish, Abstract in English]

Martínez-Frías ML. Características generales de los defectos congénitos, terminología y causas. *Semergen* 2010;36,3:135-139. [Article in Spanish, Abstract in English]

Martínez-Frías ML. Actualización de conocimientos sobre formación de los gametos. Procesos de meiosis y fecundación. *Semergen* 2010;36,4:216-220. (In Spanish. Abstract in English)

Martínez-Frías ML. Estructura y función del ADN y de los genes. I Tipos de alteraciones de la función

del gen por mutaciones. *Semergen* 2010;36,5:273-277. [Article in Spanish, Abstract in English]

Martínez-Frías ML. Estructura y función del ADN y de los genes. II Tipos de alteraciones de la función del gen por procesos epigenéticos. *Semergen* 2010;36,6:332-335. [Article in Spanish, Abstract in English]

Martínez-Frías ML. Can our understanding of epigenetics assist with primary prevention of congenital defects? *J Med Genet* 2010;47:73-80.

Martínez-Frías ML, Bermejo E, Cuevas L, Grupo Periférico del ECEMC. Análisis clínico-epidemiológico de los recién nacidos con defectos congénitos registrados en el ECEMC: Distribución por etiología y por grupos étnicos. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:20-42. [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Martínez-Frías ML, de Frutos CA, Bermejo E, ECEMC Working Group, Nieto MA. Review of the recently defined molecular mechanisms underlying Thanatophoric Dysplasia and their potential therapeutic implications for Achondroplasia. *Am J Med Genet Part A* 2010;152A:245-255.

Mejías Pavón C, Rodríguez-Pinilla E, Fernández Martín P, Real Ferrero MM, García Benítez MR, Martínez-Frías ML. Actividad de los Servicios de Información sobre Teratógenos (SITTE y SITE) durante el año 2009. Análisis de la utilización del SITTE por los distintos especialistas médicos. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:112-117. [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Orrico A, Galli L, Faivre L, Clayton-Smith J, Azzarello-Burri SM, Hertz JM, Jacquemont S, Taurisano R, Arroyo Carrera I, Tarantino E, Devriendt K, Melis D, Thelle T, Meinhardt U, Sorrentino V. Aarskog-Scott syndrome: clinical update and report of nine novel mutations of the FGD1 gene. *Am J Med Genet A* 2010; 152A:313-318.

Rodríguez-Pinilla E, Martínez-Frías ML. Tratamiento farmacológico de la mujer embarazada: fármacos contraindicados durante el embarazo. *Semergen* 2010; 36,10:579-585. [Article in Spanish, Abstract in English]

Rodríguez-Pinilla E, Real Ferrero MM, Mejías C, García Benítez MR, Fernández P, Grupo Periférico del ECEMC y Martínez-Frías ML. Consumo de Cafeína en el Embarazo en Nuestro Medio y Riesgo para el Desarrollo Embrionario/Fetal. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:102-110.

[Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Romanelli V, Belinchón A, Benito-Sanz S, Martínez-Glez V, Gracia-Bouthelier R, Heath KE, Campos-Barros A, García-Miñaur S, Fernández L, Meneses H, López-Siguero JP, Guillén-Navarro E, Gómez-Puertas P, Wesselink J-J, Mercado G, Esteban-Marfil V, Palomo R, Mena R, Sánchez A, del Campo M, Lapunzina P. CDKN1C (p57Kip2) analysis in Beckwith-Wiedemann syndrome (BWS) patients: Genotype-phenotype correlations, novel mutations, and polymorphisms. *Am J Med Genet Part A* 2010;152A,6:1390-1397.

Sánchez-Izquierdo MD, Martínez-Fernández ML, Martínez-Frías ML. ¿Qué son los Microarrays? Aplicación al diagnóstico de anomalías congénitas. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:48-54. [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Sanchis A, Martínez Castellano F, Aleu M, Pí G, Ballester E. Síndrome de Coffin-Lowry: Presentación de un caso y Guías Diagnóstico-evolutivas y Anticipatorias. *Bol ECEMC: Rev Dismor Epidemiol*; 2010,V,9:2-8. [Article in Spanish, Abstract in English] http://www.ciberer.es/documentos/ECEMC_2010_AF.pdf

Aldea Romero AE, López Dueñas A, Rubio Jiménez ME, Hernández Bejarano MJ, García García A, Martínez-Fernández ML, Bermejo-Sánchez E, Martínez-Frías ML. Descripción de un nuevo caso de síndrome de Bohring-Opitz (o de Oberklaid-Danks). *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI,1: pp.:xx-xx. [Article in Spanish, Abstract in English] (In press). <http://publicaciones.isciii.es>

Arias-Rico J, Bermejo-Sánchez E, Grupo Periférico del ECEMC, Martínez-Frías ML. Consumo de antihistamínicos-H1 por la mujer embarazada en España y riesgo para defectos congénitos en el recién nacido. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI, 1: pp.:xx-xx. [Article in Spanish, Abstract in English]. (In press) <http://publicaciones.isciii.es>

Arroyo Carrera I, García García MJ, Izquierdo Martín A, Martín Fernández R, Lapunzina Badía P, Orrico A. First reported splice site mutation (c.1935+3A>C) of the FGD1 gene in a patient with Aarskog-Scott syndrome. *Eur J Hum Genet* 2011; 19 Suppl 2:453. (Abstract European Human Genetics Conference 2011. Amsterdam, 2011)

Arroyo Carrera I, García García MJ, Lozano Rodríguez JA, Polo Antúnez A, Zunzunegui JL, Alvarez T, Martínez-Fernández ML, Bermejo-

Sánchez E. Síndrome de Sörsby: Descripción de un caso que representa la segunda familia descrita. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI,1: pp.:xx-xx. (In Spanish. Abstract in English). (In press). Access: <http://publicaciones.isciii.es>

Bermejo-Sánchez E, Cuevas L, Grupo Periférico del ECEMC, Martínez-Frías ML. Vigilancia Epidemiológica de anomalías congénitas en España en el período 1980-2010. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI, 1: pp.:xx-xx [Article in Spanish, Abstract in English] (In press). <http://publicaciones.isciii.es>

Bonaglia MC, Giorda R, Beri S, De Agostini C, Novara F, Fichera M, Grillo L, Galesi O, Vetro A, Ciccone R, Bonati MT, Giglio S, Guerrini R, Osimani S, Marelli S, Zucca C, Grasso R, Borgatti R, Mani E, Motta C, Molteni M, Romano C, Greco D, Reitano S, Baroncini A, Lapi E, Cecconi A, Arrigo G, Patricelli MG, Pantaleoni C, D'Arrigo S, Riva D, Sciacca F, Dalla Bernardina B, Zoccante L, Darra F, Termine C, Maserati E, Bigoni S, Priolo E, Bottani A, Gimelli S, Bena F, Brusco A, di Gregorio E, Bagnasco I, Giussani U, Nitsch L, Politi P, Martínez-Frías ML, Martínez-Fernández ML, Martínez Guardia N, Bremer A, Anderlid BM, Zuffardi O. Molecular Mechanisms Generating and Stabilizing Terminal 22q13 Deletions in 44 Subjects with Phelan/McDermid Syndrome. *PLoS Genet* 2011 Jul;7(7):e1002173. Epub 2011 Jul 14.

Fernández Martín P, García Benítez MR, Real Ferrero MM, Bermejo-Sánchez E, Martínez-Frías ML. Actividad de los Servicios de Información Telefónica sobre Teratógenos (SITE y SITE) durante el año 2010. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI, 1: pp.:xx-xx. [Article in Spanish, Abstract in English] (In press) <http://publicaciones.isciii.es>

García-Benítez MR, Real MM, Fernández P, Grupo Periférico del ECEMC, Bermejo-Sánchez E, Martínez-Frías ML. Análisis de las infecciones urinarias y la exposición a Fosfomicina durante el embarazo en madres de niños con y sin defectos congénitos. Distribución por años y por Comunidades Autónomas. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI, 1: pp.:xx-xx. [Article in Spanish, Abstract in English] (In press). <http://publicaciones.isciii.es>

Garrido-Allepuz C, Haro E, González-Lamuño D, Martínez-Frías ML, Bertocchini F, Ros MA. A clinical and experimental overview of sirenomelia: insight into the mechanisms of congenital limb malformations. *Dis Model Mech* 2011; 4,3:289-299.

Greenlees R, Neville A, Addor MC, Amar E, Arriola L, Bakker M, Barisic I, Boyd PA, Calzolari E, Doray

B, Draper E, Emil Vollset S, Garne E, Gatt M, Haeusler M, Kallen K, Khoshnood B, Latos-Bielenska A, Martínez-Frías ML, Materna-Kiryuk A, Matias Dias C, McDonnell B, Mullaney C, Nelen V, O'Mahony M, Pierini A, Queisser-Luft A, Randrianaivo-Ranjatoélina H, Rankin J, Rissmann A, Ritvanen A, Salvador J, Sipek A, Tucker D, Verellen-Dumoulin C, Wellesley D, Wertelecki W. Paper 6: EUROCAT member registries: Organization and activities. *Birth Defects Res A Clin Mol Teratol* 2011; 91:S51-S100.

Martínez-Frías ML. Talidomida: 50 años después. *Med Clin (Barc)*.2011.doi: 10.1016/j.medcli.2011.10.011. [Article in Spanish, Abstract in English]

Martínez-Frías ML, Bermejo-Sánchez E. Otros aspectos de vigilancia epidemiológica del ECEMC: Evolución temporal y por Comunidades Autónomas, de los nacimientos de la población inmigrante. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI, 1: pp.:xx-xx. [Article in Spanish, Abstract in English] (In press). <http://publicaciones.isciii.es>

Martínez-Frías ML, Cuevas L, Grupo Periférico del ECEMC, Bermejo-Sánchez E. Análisis clínico-epidemiológico de los recién nacidos con defectos congénitos registrados en el ECEMC: Distribución por etiología y por grupos étnicos. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI, 1: pp.:xx-xx.[Article in Spanish, Abstract in English] (In press) <http://publicaciones.isciii.es>

Martínez-Frías ML, Egüés X, Puras A, Hualde J, de Frutos CA, Bermejo E, Nieto MA, Martínez S. Thanatophoric dysplasia type II with encephalocele and semilobar holoprosencephaly: Insights into its pathogenesis. *Am J Med Genet Part A* 2011;155:197-202.

Martínez-Frías ML, Rodríguez-Pinilla E, Bermejo E, Martínez-Fernández ML. Pautas de prevención de defectos congénitos con especial referencia a los niveles primario y secundario. Guías de actuación preventiva desde la atención primaria. *Semergen* 2011;37,8:412-417 [Article in Spanish, Abstract in English].

Martínez-Fernández ML, MacDonald A, Aceña I, Bermejo-Sánchez E, Grupo Periférico del ECEMC, Martínez-Frías ML. Análisis de alteraciones cromosómicas estructurales y su distribución por cromosomas en la serie de recién nacidos con defectos congénitos del ECEMC. *Bol ECEMC: Rev Dismor Epidemiol*; 2011, VI, 1: pp.:xx-xx. [Article in Spanish, Abstract in English] (In press). <http://publicaciones.isciii.es>

Palomares M, Delicado A, Mansilla E, de Torres ML, Vallespín E, Fernández L, Martínez-Glez V,

García-Miñaur S, Nevado J, Simarro FS, Ruiz-Perez VL, Lynch SA, Sharkey FH, Thuresson AC, Annerén G, Belligni EF, Martínez-Fernández ML, Bermejo E, Nowakowska B, Kutkowska-Kazmierczak A, Bocian E, Obersztyn E, Martínez-Frías ML, Hennekam RC, Lapunzina P. Characterization of a 8q21.11 Microdeletion Syndrome Associated with Intellectual Disability and a Recognizable Phenotype. *Am J Hum Genet.* 2011; 89,2:295-301.

Romanelli V, Meneses HN, Fernández L, Martínez-Glez V, Gracia-Bouthelier R, F Fraga M, Guillén E, Nevado J, Gean E, Martorell L, Esteban Marfil V, García-Miñaur S, Lapunzina P. Beckwith-Wiedemann syndrome and uniparental disomy 11p: fine mapping of the recombination breakpoints and evaluation of several techniques. *Eur J Hum Genet* 2011;19,4:416-21.

Ukraine: OMNI-Net

Bakhireva LN, Wilsnack SC, Kristjanson A, Yevtushok L, Onishenko S, Wertelecki W, Chambers CD. Paternal drinking, intimate relationship quality, and alcohol consumption in pregnant ukrainian women. *Journal of Studies of Alcohol and Drugs.* 2011 Jul;72(4):536-44.

Chambers C, Keen C, Uriu-Adams J, Yevtushok L, Zymak N, Wertelecki W, Coles C, Cable J, Jones K. The Epidemiology of Alcohol-Exposed Pregnancies in Ukraine – An Update. 2011 [In Press].

Dancause KN, Yevtushok L, Lapchenko S, Shumlyansky I, Shevchenko G, Wertelecki W, Garruto RM. Chronic radiation exposure in the Rivne-Polissia region of Ukraine: implications for Birth Defects. *Am J Hum Biol.* 2010 Sep-Oct; 22(5):667-74.

Dolk H, Barisic I, Bianca S, Boyd P, Calzolari E, Doray B, Haeusler M, Latos-Bielenska A, Pierini A, Wellesley D, Wertelecki W, et al. Congenital Heart Defects in Europe: Prevalence and Perinatal Mortality, 2000 to 2005. *Circulation.* 2011 Mar 1;123(8):841-9.

Greenlees R, Neville A, Addor MC, Amar E, Arriola L, Bakker M, Barisic I, Boyd PA, Calzolari E, Doray B, Draper E, Vollset SE, Garne E, Gatt M, Haeusler M, Kallen K, Khoshnood B, Latos-Bielenska A, Martinez-Frias ML, Materna-Kiryluk A, Dias CM, McDonnell B, Mullaney C, Nelen V, O'Mahony M, Pierini A, Queisser-Luft A, Randrianaivo-Ranjatoélina H, Rankin J, Rissmann A, Ritvanen A, Salvador J, Sipek A, Tucker D, Verellen-Dumoulin C, Wellesley D, Wertelecki W. EUROCAT member registries: organization and activities. *Birth Defects Res A Clin Mol Teratol.* 2011 Mar;91 Suppl 1:S51-S100.

Keen CL, Uriu-Adams JY, Skalny A, Grabeklis A, Grabeklis S, Green K, Yevtushok L, Wertelecki W, Chambers CD. The Plausibility of Maternal Nutritional Status Being a Contributing Factor to the Risk for Fetal Alcohol Spectrum Disorders: the Potential Influence of Zinc Status as an Example. *Biofactors.* 2010 Mar;36(2):125-35. Review. Khoshnood B, Loane M, Garne E, Dolk H, Barisic I, Bianca S, Boyd P, Calzolari E, Doray B, Haeusler M, Latos-Bielenska A, Pierini A, Wellesley D, Zymak-Zakutnya N, et al. Recent Decrease in the Prevalence of Congenital Heart Defects in Europe in the Absence of Mandatory Folic Acid Fortification Programs. *Eurocat*, 2010 [In Press].

Wertelecki W. Malformations in a Chernobyl-Impacted Region. *Pediatrics.* 2010 Apr;125(4): e836-43.

Wijers CHW, van Rooij IALM, Bakker MK, Marcelis CILM, de Blaauw I, Roeleveld N, de Walle HEK, Addor M-C, Barisic I, Beres J, Bianca S, Bianchi F, Calzolari E, Khoshnood B, Latos-Bielenska A, Dias CM, McDonnell B, Mullaney C, Nelen V, O'Mahony M, Queisser-Luft A, Rankin J, Wertelecki W. Eurocat Working Group. Pregnancy-related disorders and anorectal malformations: a registry-based case-control study in 17 European regions. *Eurocat Working Group.* 2011. [In press].

Abstracts and Presentations

Chambers CD, Uriu-Adams JY, Gross HB, Ensuna JL, Green K, Le A, Yevtushok L, Zymak N, Wertelecki W, Keen CL. Altered Maternal Nutritional Factors May Confer Risk of Fetal Alcohol Spectrum Disorders (FASD). *ACER 2010 June;34 Supp:293A.*

Uriu-Adams JY, Chambers CD, Gross HB, Ensuna JL, Green K, Le A, Yevtushok L, Zymak-Zakutnya N, Wertelecki W. Alcohol Drinking Patterns and Nutrient Status in Ukrainian Pregnant Women. *Birth Defects Research (Part A): Clinical and Molecular Teratology.* 2010;88:382.

Wertelecki W, Yevtushok L, Zymak-Zakutnya N, Lapchenko S. Persistent Elevated NTD Rates in Ukraine - Highest in Chernobyl Impacted Regions. Abstract submitted to the 55th Annual Society for Research into Hydrocephalus and Spina Bifida (SRHSB) Scientific Meeting, June 2011, Nottingham, UK.

Yevtushok L, Zymak-Zakutnya N, Wertelecki W. High Neural Malformations Rates in Rivne Oblast, Ukraine. Highest in Rivne-Polissia. Abstract submitted the 11th European EUROCAT symposium on congenital anomalies, Antwerp, June 2011, Belgium.

References by ICBDSR Members, 2010-2011

USA-Atlanta: MACDP

- Ahluwalia IB, Jamieson DJ, Rasmussen SA, D'Angelo D, Goodman D, & Kim H. Correlates of Seasonal Influenza Vaccine Coverage Among Pregnant Women in Georgia and Rhode Island. *Obstet Gynecol.* 2010;116(4):949-55.
- Ahluwalia IB, Singleton JA, Jamieson DJ, Rasmussen SA, and Harrison, L. Seasonal Influenza Vaccine Coverage Among Pregnant Women: Pregnancy Risk Assessment Monitoring System. *J Womens Health (Larchmt).* 2011;20(5):649-51.
- Alwan S, Reefhuis J, Botto LD, Rasmussen SA, Correa A, Friedman JM, and the National Birth Defects Prevention Study. Maternal use of bupropion and risk for congenital heart defects. *Am J Obstet Gynecol.* 2010;203(1):52.e1-6.
- Alwan S, Reefhuis J, Rasmussen SA, Friedman JM; National Birth Defects Prevention Study. Patterns of antidepressant medication use among pregnant women in a United States population. *J Clin Pharmacol.* 2011;51(2):264-70.
- Bean LJ, Allen EG, Tinker SW, Hollis ND, Locke AE, Druschel C, Hobbs CA, O'Leary L, Romitti PA, Royle MH, Torfs CP, Dooley KJ, Freeman SB, Sherman SL. Lack of Maternal Folic Acid Supplementation is Associated with Heart Defects in Down Syndrome: A Report from the National Down Syndrome Project. *Birth Defects Res A Clin Mol Teratol.* 2011;91:885-93.
- Boulet SL, Rasmussen SA, Honein MA; National Birth Defects Prevention Study. Maternal body mass index as a risk factor for craniosynostosis (research letter). *Am J Med Genet A.* 2010;152A(11):2895-7.
- Boulet SL, Shin M, Kirby RS, Goodman D, Correa A. Sensitivity of Birth Certificate Reports of Birth Defects in Atlanta, 1995-2005: Effects of Maternal, Infant, and Hospital Characteristics. *Public Health Reports.* 2011;126(2):186-94.
- Broussard CS, Louik C, Honein MA, Mitchell AA. Herbal use before and during pregnancy. *Am J Obstet Gynecol.* 2010;202:443.e1-6.
- Broussard CS, Rasmussen SA, Friedman JM. Maternal treatment with opioid analgesics and risk for birth defects: additional considerations REPLY. *Am J Obstet Gynecol.* 2011; javascript:AL_get(this, 'jour', 'Am J Obstet Gynecol. ');205(3):e12-3.
- Broussard CS, Rasmussen SA, Reefhuis J, Friedman JM, Jann MW, Riehle-Colarusso T, Honein MA. National Birth Defects Prevention Study. Maternal treatment with opioid analgesics and risk for birth defects. *Am J Obstet Gynecol.* 2011;204(4):314.e1-11.
- Broussard CS, Reefhuis J, Honein MA. Maternal treatment with opioid analgesics and risk for birth defects REPLY. *Am J Obstet Gynecol.* 2011;205(3):e10-11.
- Browne ML, Hoyt AT, Feldkamp ML, Rasmussen SA, Marshall EG, Romitti PA, Druschel CM, and the National Birth Defects Prevention Study. Maternal caffeine intake and risk of selected birth defects in the National Birth Defects Prevention Study. *Birth Defects Res Part A Clin Mol Teratol.* 2011;91(2):93-101.
- Carmichael SL, Rasmussen SA, Lammer EJ, Ma C, Shaw GM, and the National Birth Defects Prevention Study. Craniosynostosis and nutrient intake during pregnancy. *Birth Defects Res Part A Clin Mol Teratol.* 2010;88:1032-9.
- Carmichael SL, Rasmussen SA, Shaw GM. Prepregnancy obesity: a complex risk factor for selected birth defects. *Birth Defects Res A Clin Mol Teratol.* 2010;88(10):804-10.
- Caspers KM, Oltean C, Romitti PA, Sun L, Pober BR, Rasmussen SA, Yang W, Druschel C, and the National Birth Defects Prevention Study. Maternal periconceptional exposure to cigarette smoking and alcohol consumption and congenital diaphragmatic hernia. *Birth Defects Res Part A Clin Mol Teratol.* 2010;88:1040-9.
- Cassell CH, Grosse SD, Thorpe PG, Howell EE, Meyer RE. Health care expenditures among children with and those without spina bifida enrolled in Medicaid in North Carolina. *Birth Defects Res A Clin Mol Teratol.* 2011;91(12):1019-27.
- Cassell CH, Mendez DD, Strauss RP. Maternal perspectives on barriers to care among children with orofacial clefts in North Carolina. *Cleft Palate Craniofac J.* 2011. [Epub ahead of print]
- Cogswell ME, Power ML, Sharma A, Schulkin J. Prevention and Management of Obesity in Non-Pregnant Women and Adolescents, Beliefs and Practices of US Obstetricians and Gynecologists, 2005 to 2007. *J Womens Health (Larchmt).* 2010;19(9):1625-34.
- Correa A, Kirby RS. An expanded public health role for birth defects surveillance. *Birth Defects Res A Clin Mol Teratol.* 2010;88(12):1004-7.
- Creanga AA, Johnson T, Graitcer S, Hartman

L, Al-Samarrai T, Schwarz AG, Chu SY, Sackoff J, Jamieson DJ, Fine AD, Shapiro-Mendoza CK, Jones LE, Uyeki TM, Balter S, Bish CL, Finelli L, Honein MA. Severity of pandemic 2009 H1N1 influenza infection in pregnant women: New York City, May-June 2009. *Obstet Gynecol.* 2010;115(4):717-26.

Creanga AA, Kamimoto L, Newsome K, D'mello T, Jamieson DJ, Zotti ME, Arnold KE, Baumbach J, Bennett NM, Farley MM, Gershman K, Kirschke D, Lynfield R, Meek J, Morin C, Reingold A, Ryan P, Schaffner W, Thomas A, Zansky S, Finelli L, Honein MA. Seasonal and 2009 Pandemic Influenza A (H1N1) Virus Infection during Pregnancy: a Population-based Study of Hospitalized Cases. *Am J Obstet Gynecol.* 2011;204(6 Suppl 1):S38-45.

Dott M, Rasmussen SA, Hogue CJ, Reefhuis J; National Birth Defects Prevention Study. Association Between Pregnancy Intention and Reproductive-health Related Behaviors Before and After Pregnancy Recognition, National Birth Defects Prevention Study, 1997-2002. *Matern Child Health J.* 2010;14(3):373-81.

Duke W, Shin M, Correa A, Alverson CJ. Survey of knowledge, attitudes, and practice management patterns of Atlanta-area obstetricians regarding stillbirth, *Women's Health Issues.* 2010;20(5):366-70.

Duwe K, Reefhuis J, Honein MA, Schieve L, Rasmussen SA, and the National Birth Defects Prevention Study. Epidemiology of fertility treatment use among women with live-born infants, 1997-2003. *J Womens Health (Larchmt).* 2010;19(3):407-16.

Fine A, Dentinger C, Johnson TF, Kossowski A, Steiner-Sichel L, Schwarz AG, Hartman LK, Honein MA, Jamieson D, Uyeki T, Al-Samarrai T, AA Creanga, SB Graitcer. 2009 Pandemic Influenza A (H1N1) in Pregnant Women Requiring Intensive Care – New York City, 2009. *MMWR Morb Mortal Wkly Rep.* 2010;59(11):321-6.

Flenady V, Middleton P, Smith GC, Duke W, Erwich JJ, Khong TY, Neilson J, Ezzati M, Koopmans L, Ellwood D, Fretts R, Frøen JF; for The Lancet's Stillbirths Series steering committee. Stillbirths: the way forward in high-income countries. *Lancet.* 2011;377(9778):1703-17.

Gallagher ML, Sturchio C, Smith A, Koontz D, Jenkins MM, Honein MA, Rasmussen SA. Evaluation of mailed pediatric buccal cytobrushes for use in a case-control study of birth defects. *Birth Defects Res A Clin Mol Teratol.* 2011;91(7):642-8.

Gilboa SM, Broussard CS, Devine OJ, Duwe KN,

Flak AL, Boulet SL, Moore CA, Werler MM, Honein MA. Influencing clinical practice regarding the use of antiepileptic medications during pregnancy: Modeling the potential impact on the prevalences of spina bifida and cleft palate in the United States. *Am J Med Genet C Semin Med Genet.* 2011;157(3):234-46.

Gilboa SM, Correa A, Botto LD, Rasmussen SA, Waller DK, Hobbs CA, Cleves MA, Riehle-Colarusso TJ, and the National Birth Defects Prevention Study. Association between prepregnancy body mass index and congenital heart defects. *Am J Obstet Gynecol.* 2010;202:51.e1-51.e10.

Gilboa SM, Salemi JL, Nembhard WN, Fixler DE, Correa A. Mortality due to congenital heart disease among children and adults in the United States, 1999-2006. *Circulation.* 2010;122(22):2254-63.

Hamrick SE, Strickland MJ, Shapira SK, Autry A, Schendel D. Use of special education services among children with and without congenital gastrointestinal anomalies. *Am J Intellect Dev Disabil.* 2010;115(5):421-32.

Hartman RJ, Rasmussen SA, Botto LD, Riehle-Colarusso T, Martin CL, Cragan JD, Shin M, Correa A. (2011). The Contribution of Chromosomal Abnormalities to Congenital Heart Defects: A Population-Based Study. *Pediatr Cardiol.* 2011;32(8):1147-57.

Hartman RJ, Riehle-Colarusso T, Lin A, Frias JL, Patel SS, Duwe K, Correa A, Rasmussen SA; The National Birth Defects Prevention Study. Descriptive study of nonsyndromic atrioventricular septal defects in the National Birth Defects Prevention Study, 1997-2005. *Am J Med Genet A.* 2011;155(3):555-64.

Hinton CF, Ojodu JA, Fernhoff PM, Rasmussen SA, Scanlon KS, Hannon WH. Maternal and Neonatal Vitamin B12 Deficiency Detected through Expanded Newborn Screening-United States, 2003-2007. *J Pediatr.* 2010;157(1):162-3.

Honein MA, Rasmussen SA. Epidemiological Studies of Congenital Heart Defects: Challenges and Opportunities. *Congenital Heart Defects: From Origin to Treatment.* Edited by Wyszynski DF, Graham TP, Correa-Villasenor A. Oxford University Press, New York, 2010;p. 401-14.

Jamieson DJ, Rasmussen SA, Uyeki T, Weinbaum C. Pandemic influenza and pregnancy revisited: Lessons learned from 2009 pandemic influenza A (H1N1). *Am J Obstet Gynecol.* 2011;204(6 Suppl 1):S1-3.

References by ICBSR Members, 2010-2011

- Jenkins MM, Reed-Gross E, Barfield WD, Prue CE, Gallagher ML, Rasmussen SA, Honein MA. Qualitative assessment of study materials and communication strategies used in studies that include DNA collection. *Am J Med Genet Part A*. 2011;155:2721-31.
- Jin L, Yeung LF, Cogswell ME, Ye R, Berry RJ, Liu J, Hu DJ, Zhu L. Prevalence of anaemia among pregnant women in south-east China, 1993-2005. *Public Health Nutr*. 2010;13(10):1511-8.
- Johnson CY, Rasmussen SA. Non-genetic risk factors for holoprosencephaly. *Am J Med Genet C Semin Med Genet*. 2010;154C(1):73-85.
- Kitzmler JL, Wallerstein R, Correa A, Kwan S. Preconception care for women with diabetes and prevention of major congenital malformations. *Birth Defects Res A Clin Mol Teratol*. 2010;88(10):791-803.
- Louie JK, Acosta M, Jamieson DJ, Honein MA; the California Pandemic (H1N1) Working Group. Severe 2009 H1N1 Influenza in Pregnant and Postpartum Women in California. *N Engl J Med*. 2010;362(1):27-35.
- Louie JK, Jamieson DJ, Rasmussen SA. 2009 pandemic influenza A (H1N1) virus infection in postpartum women in California. *Am J Obstet Gynecol*. 2011;204(2):144.e1-6.
- Mei JV, Li L, Rasmussen SA, Collier S, Frías JL, Honein MA, Shaw GM, Lorey F, Meyer R, Chaing S, Canfield MA, Jones J, Hannon WH. (2010). Effect of specimen storage conditions on newborn dried blood spots used to assess *Toxoplasma gondii* Immunoglobulin M (IgM). *Clin Chim Acta*. 2010;412(5-6):455-9.
- Miller A, Riehle-Colarusso T, Alverson CJ, Frías JL, Correa A. Congenital Heart Defects and Major Structural Noncardiac Anomalies, Atlanta, Georgia, 1968 to 2005. *J Pediatr*. 2011;159(1):70-78.e2.
- Miller A, Riehle-Colarusso T, Siffel C, Frías JL, Correa A. Maternal age and prevalence of isolated congenital heart defects in an urban area of the United States. *Am J Med Genet A*. 2011;155(9):2137-45.
- Miller A, Siffel C, Correa A. Residential mobility during pregnancy: patterns and correlates. *Matern Child Health J*. 2010;14(4):625-34.
- Miller A, Siffel C, Lu C, Riehle-Colarusso T, Frías JL, Correa A. Long-term survival of infants with atrioventricular septal defects. *J Pediatr*. 2010;156(6):994-1000.
- Miller EA, Rasmussen SA, Siega-Riz AM, Frías JL, Honein MA, and the National Birth Defects Prevention Study. Risk factors for non-syndromic holoprosencephaly. *Am J Med Genet C Semin Med Genet*. 2010;154C(1):62-72.
- Mitchell AA, Gilboa SM, Werler MM, Kelley KE, Louik C, Hernández-Díaz S; National Birth Defects Prevention Study. Medication use during pregnancy, with particular focus on prescription drugs: 1976-2008. *Am J Obstet Gynecol*. 2011;205(1):51.e1-8.
- Mokdad AH, Annett JL, Ikeda RM, Mai CT. Public Health Surveillance for Chronic Diseases, Injuries, and Birth Defects. Principles and Practice of Public Health Surveillance, Third Edition. Edited by Lee LM, Teutsch SM, Thacker SB, St. Louis ME. Oxford University Press, New York. 2010;p. 255-74.
- Morgan MA, Cragan JD, Goldenberg RL, Rasmussen SA, Schulkin J. Management of prescription and nonprescription drug use during pregnancy. *J Matern Fetal Neonatal Med*. 2010;23(8):813-9.
- Morgan MA, Cragan JD, Goldenberg RL, Rasmussen SA, Schulkin J. Obstetrician-Gynecologist Knowledge of and Access to Information About the Risks of Medication Use During Pregnancy. *J Matern Fetal Neonatal Med*. 2010;23(10):1143-50.
- Mosby LG, Rasmussen SA, Jamieson DJ. 2009 Pandemic influenza A (H1N1) in pregnancy: a systematic review of the literature. *Am J Obstet Gynecol*. 2011;205(1):10-8.
- Munsie JW, Lin S, Browne ML, Campbell KA, Caton AR, Bell EM, Rasmussen SA, Romitti PA, Druschel CM, and the National Birth Defects Prevention Study. Maternal bronchodilator use and the risk of orofacial clefts. *Hum Reprod*. 2011;26(11):3147-54.
- Oster ME, Riehle-Colarusso T, Alverson CJ, Correa A. Associations Between Maternal Fever and Influenza and Congenital Heart Defects. *J Pediatr*. 2011;158(6):990-5.
- Oster ME, Riehle-Colarusso T, Correa A. An update on cardiovascular malformations in congenital rubella syndrome. *Birth Defects Res A Clin Mol Teratol*. 2010;88(1):1-8.
- Pace JE, Shin M, Rasmussen SA. Understanding Attitudes toward Persons with Down Syndrome. *Am J Med Genet A*. 2010;152A(9):2185-92.
- Parker SE, Mai CT, Canfield MA, Rickard R, Wang Y,

Meyer RE, Anderson P, Mason CA, Collins JS, Kirby RS, and Correa A for the National Birth Defects Prevention Network. Updated National Birth Prevalence Estimates for Selected Birth Defects in the United States, 2004-2006. *Birth Defects Res A Clin Mol Teratol.* 2010;88(12):1008-16.

Petrini JR, Broussard CS, Gilboa SM, Lee KA, Oster M, Honein MA. Racial differences in neonatal mortality attributable to congenital heart defects by gestational age – United States, 2003–2006. *MMWR Morb Mortal Wkly Rep.* 2010;59(37):1208-11.

Petrini JR, Broussard CS, Gilboa SM, Lee KA, Oster M, Honein MA. From the Centers for Disease Control and Prevention: Racial differences by gestational age in neonatal deaths attributable to congenital heart defects – United States, 2003-2006. *JAMA.* 2010;304(18):2006-8.

Prakalapakorn SG, Rasmussen SA, Lambert SR, Honein MA, and the National Birth Defects Prevention Study. Assessment of risk factors for infantile cataracts using a case-control study, National Birth Defects Prevention Study, 2000-2004. *Ophthalmology.* 2010;117(8):1500-5.

Ramadhani TA, Canfield MA, Farag NH, Royle M, Correa A, Waller DK, Scheuerle A; the National Birth Defects Prevention Study. Do foreign- and U.S.-born mothers across racial/ethnic groups have a similar risk profile for selected sociodemographic and periconceptional factors? *Birth Defects Res A Clin Mol Teratol.* 2011;91(9):823-30.

Rasmussen SA, Chambers C, Hales B. 50 years of the Teratology Society: Honoring past accomplishments and a view to a promising future. *Birth Defects Res Part A Clin Mol Teratol.* 2010;88(10):763-5.

Rasmussen SA, Galuska DA. Prepregnancy obesity and birth defects: what's next? *Am J Clin Nutr.* 2010;91(6):1539-40.

Rasmussen SA, Shaw GM. How do Epidemiologic Studies Contribute to the Identification of Teratogenic Exposures? *Teratology Primer.* 2nd edition. Edited by Hales B, Scialli A, Tassinari M. Teratology Society (online), 2010;p.30-2.

Rasmussen SA. Does Maternal Diabetes or Obesity Increase the Risk of Having a Child with a Birth Defect. *Teratology Primer.* 2nd edition. Edited by Hales B, Scialli A, Tassinari M. Teratology Society (online), 2010;p.75-6.

Reefhuis J, Honein MA, Schieve LA, Rasmussen SA, and the National Birth Defects Prevention Study.

Use of clomiphene citrate and birth defects, National Birth Defects Prevention Study, 1997-2005. *Hum Reprod.* 2011;26(2):451-7.

Reefhuis J, Rasmussen SA, Honein MA; National Birth Defects Prevention Study. Prenatal versus postnatal repair of myelomeningocele. *N Engl J Med.* 2011;364(26):2555; author reply 2556.

Reefhuis J, Whitney CG, Mann EA. A Public Health Perspective on Cochlear Implants and Meningitis in Children. *Otol Neurotol.* 2010;31(8):1329-30.

Richardson S, Browne ML, Rasmussen SA, Druschel CM, Sun L, Jabs EW, Romitti PA. Associations between periconceptional alcohol consumption and craniosynostosis, omphalocele, and gastroschisis. *Birth Defects Res A Clin Mol Teratol.* 2011;91(7):623-30.

Rocheleau CM, Lawson CC, Waters MA, Hein MJ, Stewart PA, Correa A, Echeverria D, Reefhuis J. Inter-rater reliability of assessed prenatal maternal occupational exposures to solvents, polycyclic aromatic hydrocarbons, and heavy metals. *J Occup Environ Hyg.* 2011;8(12):718-28.

Rocheleau CM, Romitti P A, Sanderson WT, Sun L, Lawson CC, Waters MA, Stewart PA, Olney RS, and Reefhuis J. Maternal Occupational Pesticide Exposure and Risk of Hypospadias in the National Birth Defects Prevention Study. *Birth Defects Res A Clin Mol Teratol.* 2011;91(11):927-36.

Sadler TW, Rasmussen SA. Examining the evidence for vascular pathogenesis of selected birth defects. *Am J Med Genet A.* 2010;152A(10):2426-36.

Sanchez-Lara PA, Carmichael SL, Graham JM, Lammer EJ, Shaw GM, Ma C, Rasmussen SA, and the National Birth Defects Prevention Study. Fetal constraint as a potential risk factor for craniosynostosis. *Am J Med Genet A.* 2010;152A:394-400.

Shin M, Besser LM, Siffel C, Kucik, JE, Shaw GM, Lu C, Correa A and the CAMPS collaborative. Prevalence of children and adolescents with spina bifida in 10 regions of the United States. *Pediatrics.* 2010;126(2):274-9.

Shin M, Siffel C, Correa A. Survival of Children With Mosaic Down Syndrome. *Am J Med Genet A.* 2010;152A(3):800-1.

Siston AM, Rasmussen SA, Honein MA, Fry AM, Seib K, Callaghan WM, Louie J, Doyle TJ, Crockett M, Lynfield R, Moore Z, Wiedeman C, Anand M, Tabony L, Nielsen CF, Waller K, Page S, Thompson

References by ICBSR Members, 2009-2010

JM, Avery C, Springs CB, Jones T, Williams JL, Newsome K, Finelli L, Jamieson DJ; Pandemic H1N1 Influenza in Pregnancy Working Group. Pandemic 2009 Influenza A(H1N1) Virus Illness among Pregnant Women in the United States. *JAMA*. 2010;303(15):1517-25.

Steenland K, Tinker SC, Shankar A, Ducatman A. Association of perfluorooctanoic acid (PFOA) and perfluorooctanesulfonate (PFOS) with uric acid among adults with elevated community exposure to PFOA. *Environ Health Perspect*. 2010;118(2):229-33.

Strauss RP, van Aalst JA, Fox LM, Stein M, Cassell CH. Flood, Disaster and Turmoil: Social Issues in Cleft and Craniofacial Care and Crisis Relief. *Cleft Palate Craniofac J*. 2011;48(6):750-6.

Thompson M, Williams J, Naleway A, Li D-K, Chu S, Bozeman S, Hill HA, Cragan J, Shay DK on behalf of the Pregnancy and Influenza Project Workgroup. The pregnancy and influenza project: design of an observational case-cohort study to evaluate influenza burden and vaccine effectiveness among pregnant women and their infants. *Am J Obstet Gynecol*. 2011;204:569-76.

Tinker SC, Cogswell ME, Devine O, Berry RJ. Folic acid intake among U.S. women aged 15-44 years, National Health and Nutrition Examination Survey, 2003-2006. *Am J Prev Med*. 2010;38(5):534-42.

Tinker SC, Moe CL, Klein M, Flanders WD, Uber J, Amirtharajah A, Singer P, Tolbert PE. Drinking water turbidity and emergency department visits for gastrointestinal illness in Atlanta, 1993-2004. *J Expo Sci Environ Epidemiol*. 2010;20(1):19-28.

Tinker SC, Reefhuis J, Dellinger AM, Jamieson DJ. Maternal injuries during the periconceptional period and the risk of birth defects, National Birth Defects Prevention Study, 1997-2005. *Paediatr Perinat Epidemiol*. 2011;25(5):487-96.

Tinker SC, Reefhuis J, Dellinger AM, and Jamieson DJ. Epidemiology of maternal injuries during pregnancy in a population-based study, 1997-2005. *J Womens Health (Larchmt)*. 2010;19(12):2211-8.

van Gelder MM, Reefhuis J, Caton AR, Werler MM, Druschel CM, Roeleveld N; the National Birth Defects Prevention Study. Characteristics of pregnant illicit drug users and associations between cannabis use and perinatal outcome in a population-based study. *Drug Alcohol Depend*. 2010;109(1-3):243-7.

van Gelder MM, Reefhuis J, Herron AM, Williams ML, Roeleveld N. Reproductive Health Characteristics of Marijuana And Cocaine Users: Results from the 2002 National Survey of Family Growth. *Perspectives on Sexual and Reproductive Health*. 2011;43(3):164-72.

Voyiaziakis E, Evgrafov O, Li D, Yoon HJ, Tabares P, Samuels J, Wang Y, Riddle MA, Grados MA, Bienvenu OJ, Shugart YY, Liang KY, Greenberg BD, Rasmussen SA, Murphy DL, Wendland JR, McCracken JT, Piacentini J, Rauch SL, Pauls DL, Nestadt G, Fyer AJ, Knowles JA. Association of SLC6A4 variants with obsessive-compulsive disorder in a large multicenter US family study. *Mol Psychiatry*. 2011;16(1):108-20.

Wang Y, O'Leary LA, Rickard RS, Mason CA for the National Birth Defects Prevention Network. Geocoding Capacity of Birth Defects Surveillance Programs: Results from the National Birth Defects Prevention Network Geocoding Survey. *Journal of Registry Management*. 2010;37(1):22-6.

Werler MM, Ahrens KA, Bosco JLF, Mitchell AA, Anderka MT, Gilboa SM, Holmes LB. Use of Antiepileptic Medications in Pregnancy in Relation to Risks of Birth Defects. *Annals of Epidemiology*. 2011;21(11):842-50.

Yang Q, Cogswell ME, Hamner HC, Carriquiry A, Bailey LB, Pfeiffer CM, Berry RJ. Folic acid source, usual intake, and folate and vitamin B-12 status in US adults, 2003-2006. *Am J Clin Nutr*. 2010;91(1):64-72.

Yeung LF, Cogswell ME, Carriquiry AL, Bailey LB, Pfeiffer CM, Berry RJ. Contributions of enriched cereal-grain products, ready-to-eat cereals, and supplements to folic acid and vitamin B-12 usual intake and folate and vitamin B-12 status in US children: National Health and Nutrition Examination Survey, 2003-2006. *Am J Clin Nutr*. 2010;93(1):172-85.

Zhang Y, Riehle-Colarusso T, Correa A, Li S, Feng X, Gindler J, Lin H, Webb C, Li W, Trines J, Berry RJ, Yeung L, Luo Y, Jiang M, Chen H, Sun X, Li Z. Observed prevalence of congenital heart defects from a surveillance study in china. *J Ultrasound Med*. 2011;30(7):989-95.

Zhu JH, Hu DJ, Hao L, Zhang BL, Cogswell ME, Bailey LB, Li Z, Berry RJ. Iron, folate, and B(12) deficiencies and their associations with anemia among women of childbearing age in a rural area in Northern China. *Int J Vitam Nutr Res*. 2010;80(2):144-54.

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