



Progestogens for Prevention of Preterm Birth: Comparative Effectiveness Review Number 74

By U. S. Department of Health and Human Services

CreateSpace Independent Publishing Platform. Paperback. Book Condition: New. This item is printed on demand. Paperback. 364 pages. Dimensions: 11.0in. x 8.5in. x 0.8in. Birth before completion of 37 weeks of pregnancy is considered preterm. These early births are associated with more than 85 of all perinatal morbidity and mortality and are the leading cause of infant mortality and long-term disability. Each year in the U. S. more than 475, 000 infants are born preterm representing 12. 5 of live births. Efforts to reduce preterm birth have been largely unsuccessful, with a 20 relative increase since 1990 in the proportion of births in the U. S. that are preterm. Morbidity and mortality associated with preterm birth represent untold distress for families, as well as significant costs to patients, health care systems, and payers. Average neonatal care costs are estimated to be 17, 300 greater for preterm infants relative to term infants, amounting to more than 8. 6 billion of annual medical spending in the U. S. The ultimate goal in preventing preterm birth is to eliminate the risks of neonatal complications and death and to ensure normal development. In the last decade, accumulating evidence from randomized clinical trials (RCTs) has led professional...



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