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### **Experts to Address Rising Maternal and Infant Mortality Despite Price Tag of \$79 Billion for Maternity Care**

*Raleigh, N.C.* (PRWEB) Feb. 26, 2008 -- The United States spends more on healthcare than any country in the world, \$79 billion in 2005. Pregnancy and delivery and newborn care are 2nd and 3rd most expensive conditions treated in U.S. hospitals and the two most expensive conditions billed to Medicaid and private insurance.

Despite these burdensome costs fewer newborns die in countries like Lithuania, Slovenia, Israel, Greece, and Portugal. One in 4,800 women in the U.S. are likely to die from pregnancy-related causes compared to 1 in 9,600 in Kuwait, 1 in 17,800 in Denmark, and 1 in 47,600 in Ireland. The CDC estimates the true level of U.S. maternal deaths may be 1.3 to 3 times higher than the reported rate. At the 2008 Mother-Friendly Childbirth Forum hosted by the Coalition for Improving Maternity Services (CIMS), March 6-8 in Kissimmee, Florida, expert speakers will address this issue and explore solutions for what can be done to reduce the maternal and infant mortality rate while enhancing care for the nation's most vulnerable populations - mothers and babies.

Among the keynote speakers are Charles S. Mahan, MD, Dean and Professor Emeritus in the College of Public Health at the University of South Florida and the Lawton and Rhea Chiles Center for Healthy Mothers and Babies. Dr. Mahan also serves as statewide chairperson for the March of Dimes Florida Prematurity Prevention Campaign.

According to the March of Dimes, the rising numbers of scheduled cesareans and medically induced labors may be contributing to the growing number of babies who are born late pre-term, between 34 and 36 weeks gestation. Nearly a half million babies are born too soon each year and late preterm babies now account for 70% of all premature births. They are the fastest growing subgroup of premature babies. Preterm babies are more likely to need care from a special care nursery (NICU), and are more likely to be re-hospitalized after discharge.

Each year, the CIMS Forum brings together research experts, professionals, advocates, and consumers of maternity care from the U.S. and abroad to learn and work side by side for three energizing days of collaborative education, networking, solution making and sharing. Participants work on innovative and creative solutions for a wellness model of maternity care that improves outcomes and lowers costs. The CIMS Forum is open to the public. For more information, log onto [www.motherfriendly.org](http://www.motherfriendly.org)

The Coalition for Improving Maternity Services (CIMS), a United Nations recognized NGO, is a collaborative effort of numerous individuals, leading researchers, and more than 50 organizations representing over 90,000 members. Promoting a wellness model of maternity care that will improve birth outcomes and substantially reduce costs; CIMS developed the Mother-Friendly Childbirth Initiative in 1996. A consensus document that has been recognized as an important model for improving the healthcare and well being of children beginning at birth, the Mother-Friendly Childbirth Initiative has been translated into several languages and is gaining support around the world.

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The *Coalition for Improving Maternity Services* (CIMS) is a coalition of individuals and national organizations with concern for the care and well-being of mothers, babies, and families. Our mission is to promote a wellness model of maternity care that will improve birth outcomes and substantially reduce costs. This evidence-based mother-, baby-, and family-friendly model focuses on prevention and wellness as the alternatives to high-cost screening, diagnosis, and treatment programs.