



New medical study shows babies more likely to survive in a private hospital

A new research study has shown that Australian women, who have babies in a private hospital, actually have superior maternal and perinatal outcomes compared to women who give birth in public hospitals. This is contrary to the author's conclusions.

The findings, published in the medical research online journal *BMJ Open*, reports that low Apgar scores (this is where the baby is not in a good condition) were better in private hospitals (1.0% vs 1.3%). The number of babies **not** surviving birth in the public health system was higher than those born in a private hospital. There were 1,268 more babies with low apgars in the public system and tragically, 122 more deaths.

President of the National Association of Specialist Obstetricians and Gynaecologists (NASOG), Dr Andrew Foote, says the findings underscore the excellent safety record of obstetric care in a private hospital setting.

"There are some significant safety advantages in the private system, achieved by timely assistance by senior specialist obstetricians," says Dr Foote, a practicing Canberra-based obstetrician.

Dr Foote is critical of some aspects of the report, by midwife Hannah Dahlen, that describe these life saving interventions as 'birth traumas'.

He says inductions have been proven to reduce stillbirth and not increase assisted deliveries.¹ "To classify these as birth traumas is similar to calling a life saving appendectomy wound as "abdominal trauma", Dr Foote says.

Severe perineal trauma (tearing) was also reduced in the private hospitals group (4.7% vs 5.4%). Maternal age was higher in the private hospitals group (in the 30-34 age group - 53.9% vs 30.2%) Dr Foote says so to achieve a lower perinatal mortality rate, in this age group of older mothers, is very significant.

"It shows, again, that mothers with access to private health care are mostly likely to have a baby born well and healthy. "

Private practices can provide the continuity of care that is so important to patients undergoing obstetric and gynaecological care and is particularly important when "seventy percent of complications during birth may happen suddenly without any warning."

Dr Foote also challenged the report's conclusion about costs to the health budget. A caesarean in a private hospital costs the taxpayer an average of \$1500 compared to taxpayers footing the bill of about \$5,000 in the public system.

NASOG is continuing the fight to ensure that all mothers are provided with affordable access to high quality health care. ENDS.

For all Media Inquiries, please contact:

Dr Andrew Foote, President of NASOG: 0417 675 212.

NB: Dr Foote is a working obstetrician and may be with patients at the time of your call.

¹ Stock *BMJ* 2012, Mishanina *CMAJ* 2014.

About NASOG:

The National Association of Specialist Obstetricians and Gynaecologists (NASOG) is a not for profit professional association representing specialist obstetricians and gynaecologists, the leading providers of specialist women's health services. Australia is recognised as one of the safest countries in the world to give birth or to be born. NASOG strongly endorses our collaborative, proactive model of obstetric and midwifery care for all women giving birth in Australia. The safety of this existing model of care is confirmed by research from Australia and around the world.