

**A comparison of birth defects
self-reported by mothers with data
provided by general practitioners -
*data from the Dutch Pregnancy Drug Register***

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Version with updated data (07-09-2023)



Birth defects



- \approx 170.000 children are born per year in the Netherlands
 - Every 3 in 100 children are born with a congenital birth defect
 - About 2-3% of these birth defects are caused by teratogenic medication use during pregnancy
- For only 1 in 5 medicines information on its safety during pregnancy is known
- The presence of a birth defect in a infant is often one of the primary outcomes in drugs-safety studies



Aim of the study

- What is the best and most efficient way to retrieve information birth defects?
- Is there a golden standard?
- Who has the most accurate information?

Aim of this study

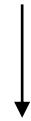
to compare self-reported information on the offspring's birth defects by mothers with the information provided by GPs.

The Dutch Pregnancy Drug Register

- Ongoing prospective population-based cohort study
 - Currently \approx 20.000 inclusions
- Aim: to obtain insight into medication use among pregnant and breastfeeding women and its potential effects on maternal and fetal/infant health
- **All** pregnant women \geq 18 years of age can participate
 - Independent of (chronic) medication use
 - Preferably enroll as early as possible in pregnancy
- Topics; obstetric history, (chronic) health conditions, vaccinations, vitamins, medication use, demographic factors, prenatal screening, pregnancy- birth outcomes, breastfeeding, biological father, etc.



The Dutch Pregnancy Drug Register



Q1

Inclusion
(as early as possible)

Q2

17 weeks of gestation

Q3

34 weeks of gestation

Q4

2 months after delivery

Q5

6 months after delivery

Q6

12 months after delivery



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Inclusion criteria

Participants enrolled between **2014 and 2019** and adhered to the following criteria were included

1. had a singleton live-birth;
2. completed at least the fifth questionnaire of the Dutch Pregnancy Register, 6-months after expected due date;
3. gave permission to contact their GP for follow-up information and
4. provided the contact information of their GP

Data collection



- **Demographics**
- **Birth defect**
 - the existence of possible birth defect
 - any other neonatal health specifics
 - reasons for a possible hospital admissions
 - final remarks



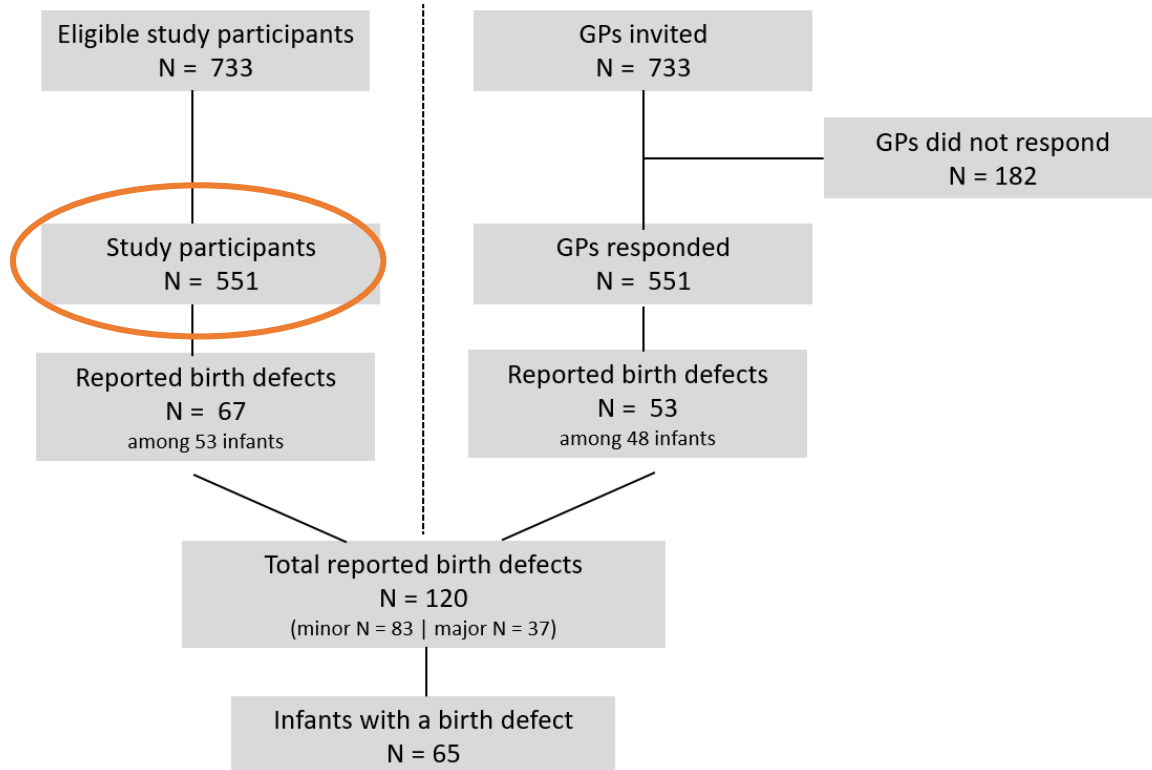
- **Birth defect**
 - the existence or suspicion of a birth defect;
 - initiation of the symptoms
 - the exact time and official diagnosis
 - if any additional diagnostic tests were performed

Data analysis

- All reported congenital birth defects were collected
- Blindly assessed by two independent researchers + clinical geneticist
 - Coded using the ICD-10 Index
 - Classified using the EUROCAT classifications
- Paired back to the same infant
- Differences in reported birth defects between the participant and their GP were assessed

Information	ICD-10 code	EUROCAT classification
Hip dysplasia	Q56.8 - Other congenital deformities of hip	Minor
Tongue tie too short	Q38.1 - Ankyloglossia	Minor
Atrial septal defect	Q21.1 - Atrial septal defect	Major
Missing a toe on his right foot	Q72.3 - Congenital absence of foot and toe(s)	Major

Study participants



Participants	N (%)
	N = 551
Age (Median (IQR))	31 (29-34)
Educational level	
High	430 (78.3)
Low/Medium	119 (21.7)
Missing	2
Self-defined ethnicity	
Dutch	524 (95.3)
Non-Dutch	26 (4.7)
Missing	1
Pre-pregnancy BMI (Median (IQR))	22.8 (20.8 – 25.7)
Underweight (≤ 19.0)	25 (5.0)
Normal weight (19.0 – 24.9)	330 (66.0)
Overweight (25.0 – 29.9)	106 (21.2)
Obese (≥ 30.0)	39 (7.8)
Missing	51
Parity	
Primipara	252 (46.4)
Multipara	291 (53.6)
Missing	8

Classifications of infants



None

≥1
Minor

≥1
Major

94%



None

≥1
Major

98%

Reported birth defects



	Both GP and participant reported a birth defect N = 78 (65.0%)		Either GP or participant reported a birth defect N = 42 (35.0%)
	ICD-10 code identical		
	Yes N = 60 (76.9%)	No N = 18 (23.1%)	
Participant			
Minor (N=48)	20 (41.7%)	4 (8.3%)	24 (50.0%)
Major (N=19)	10 (52.6%)	5 (26.3%)	4 (21.1%)
GP			
Minor (N=35)	21 (60.0%)	3 (8.6%)	11 (31.4%)
Major (N=18)	9 (50.0%)	6 (33.3%)	3 (16.7%)

Reported birth defects

ICD-10 code			ICD-10 code		
Q65.8	Q65.2	✗	Q65	Q65	✓ 56%
Q74.8	Q72.8	✗	Q74	Q72	✗

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Reported birth defects



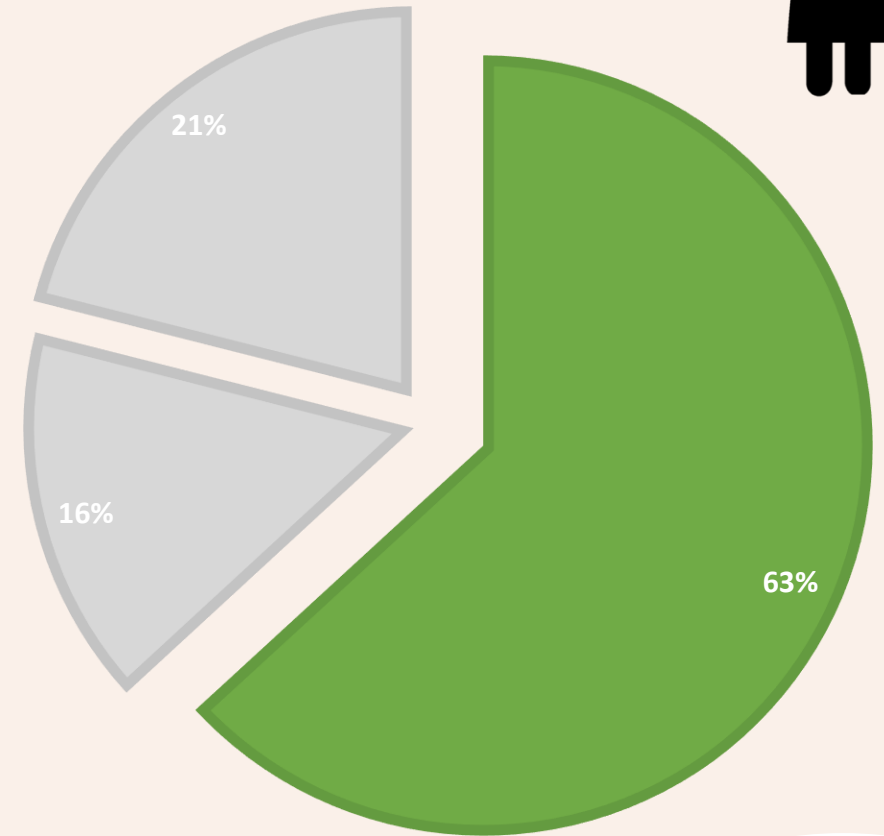
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Major birth defects

In 12 cases (63%) identical birth defects reported by GP

Participant		GP	
	EUROCAT	EUROCAT	
Pulmonary valve stenosis (mild)	Major	Major	Mild pulmonary valve stenosis
Missing a toe on his right foot	Major	Major	Missing 1 toe on right foot
Ventricular septal defect	Major	Major	VSD
Etc.			

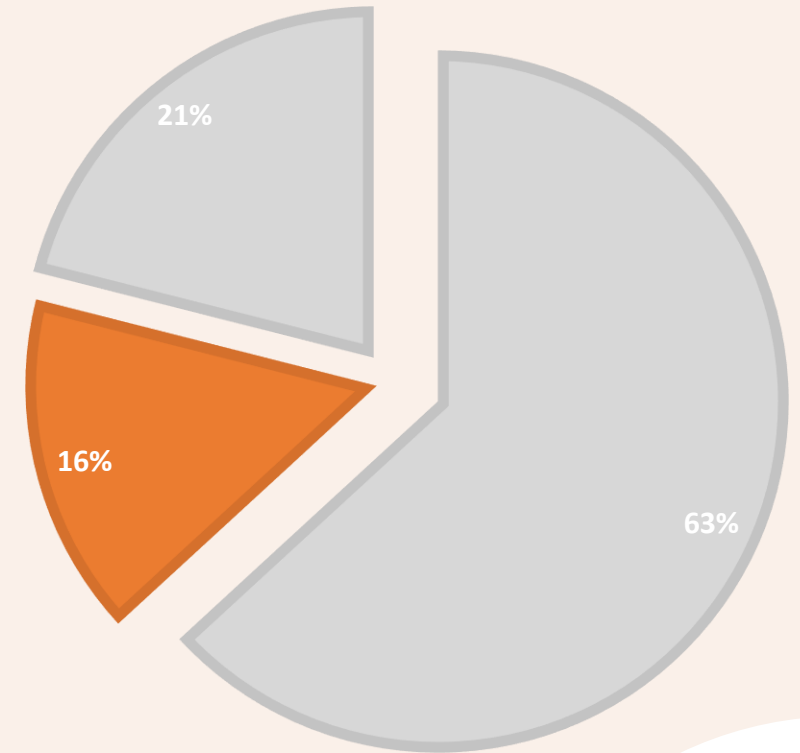




Major birth defects

In 3 cases (16%) GP reported a minor birth defect

Participant		GP	
	EUROCAT	EUROCAT	
Only 1 functioning testis	Major	Minor	Antenatal torsion testis
Atrial septal defect	Major	Minor	Open foramen oval
Hypospadias light form	Major	Minor	Congenital penile curvature

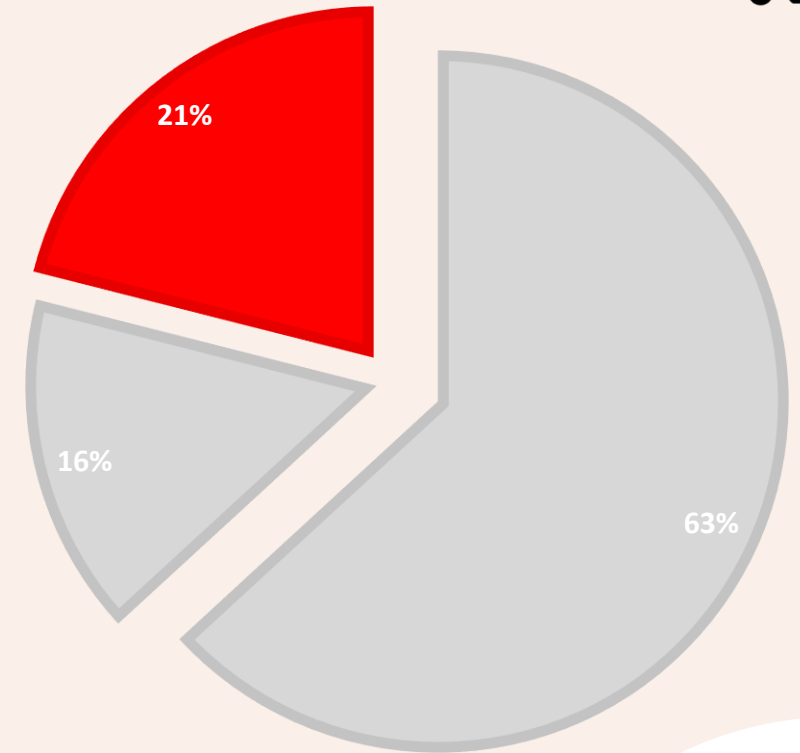


Major birth defects



In 4 cases (21%) GP reported no birth defect

Participant		GP
	EUROCAT	
Hip luxation right	Major	
Pulmonary stenosis	Major	
Ventricular septal defect	Major	
Ventricular septal defect	Major	

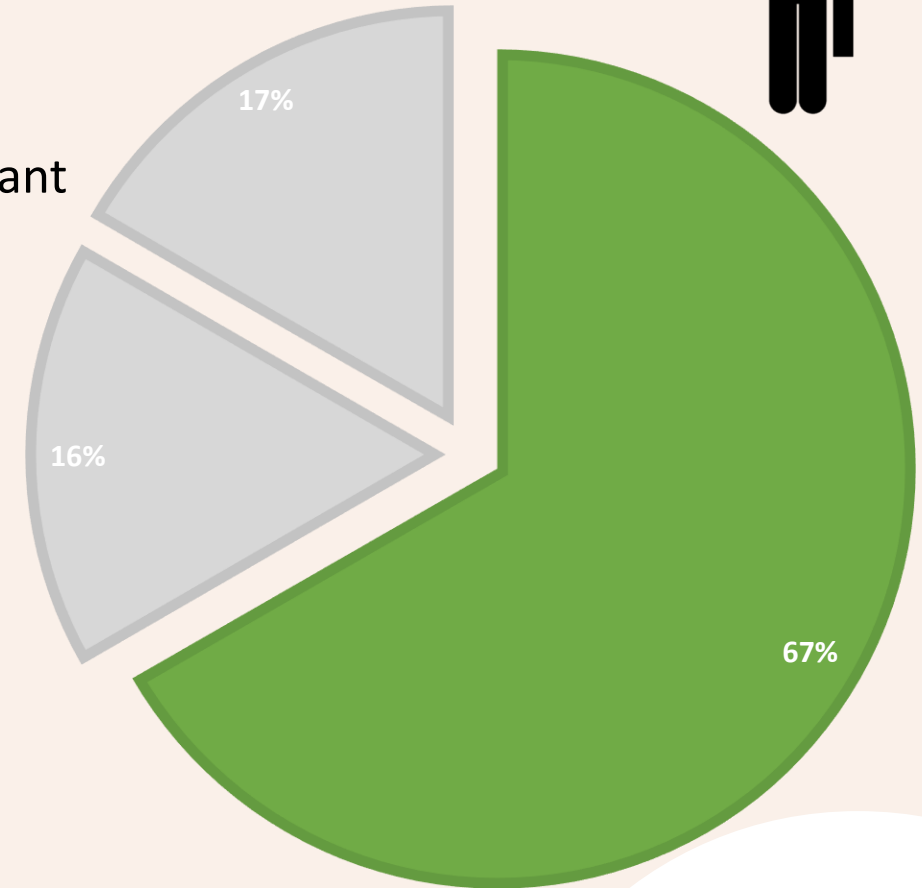


Major birth defects



In the **same** 12 cases (67%) identical birth defect reported by participant

Participant		GP	
	EUROCAT	EUROCAT	
Hypospadias	Major	Major	Glandular hypospadias
Esophageal atresia with tracheal fistula	Major	Major	Oesophageal atresia
Polydactyly	Major	Major	Polydactyly
Etc.			

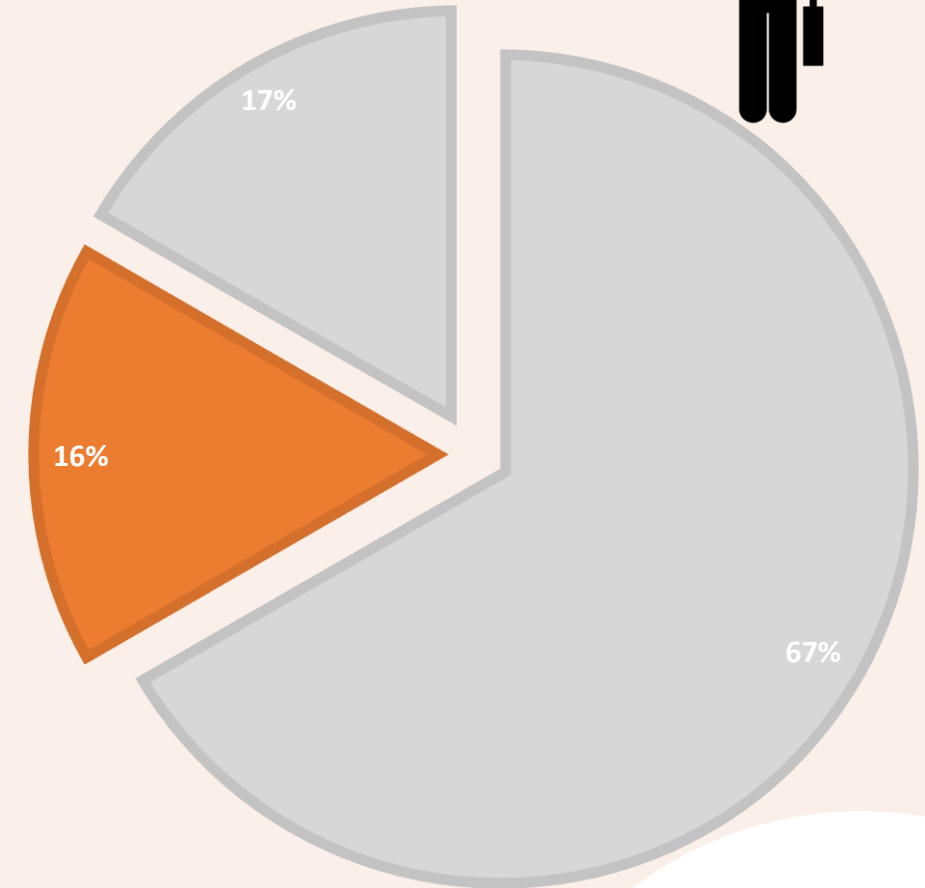


Major birth defects



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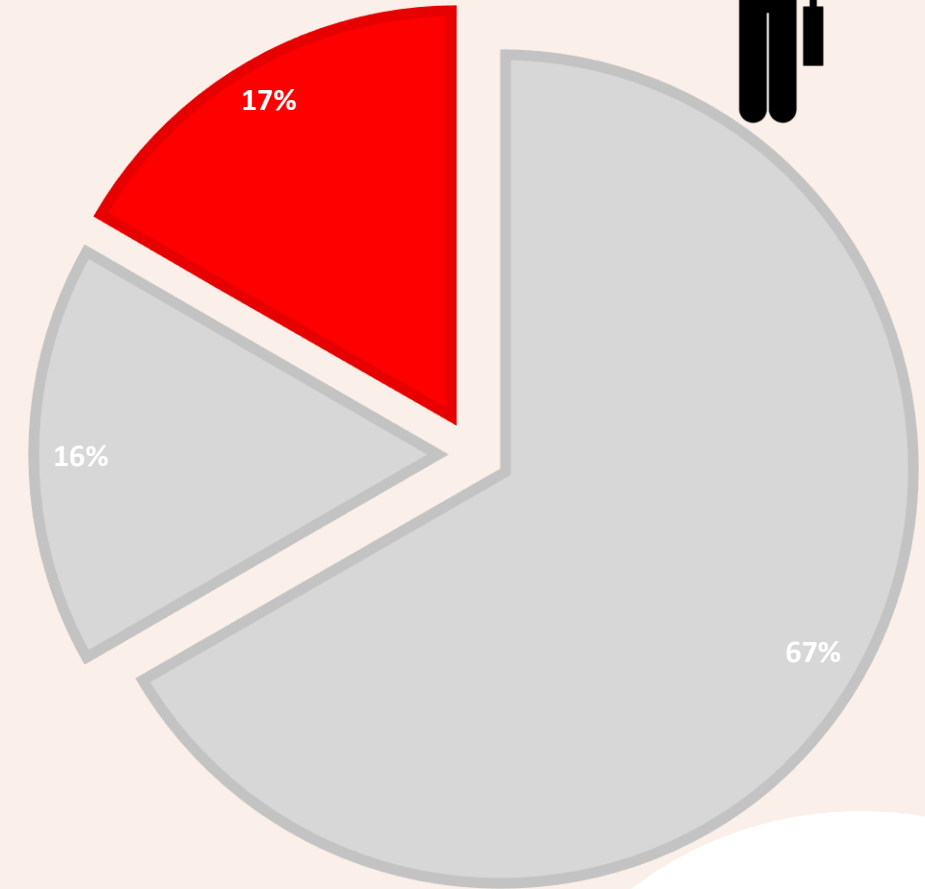
Participant		GP	
	EUROCAT	EUROCAT	
Hip dysplasia	Minor	Major	Congenital hip dislocation
A number of cysts with lymphatic fluid in the back of the neck	Minor	Major	Occipital encephalocele at the level of the cerebellum
Urine flowed back from the bladder to the kidney (vesicoureteral reflux)	Minor	Major	Congenital double system left kidney



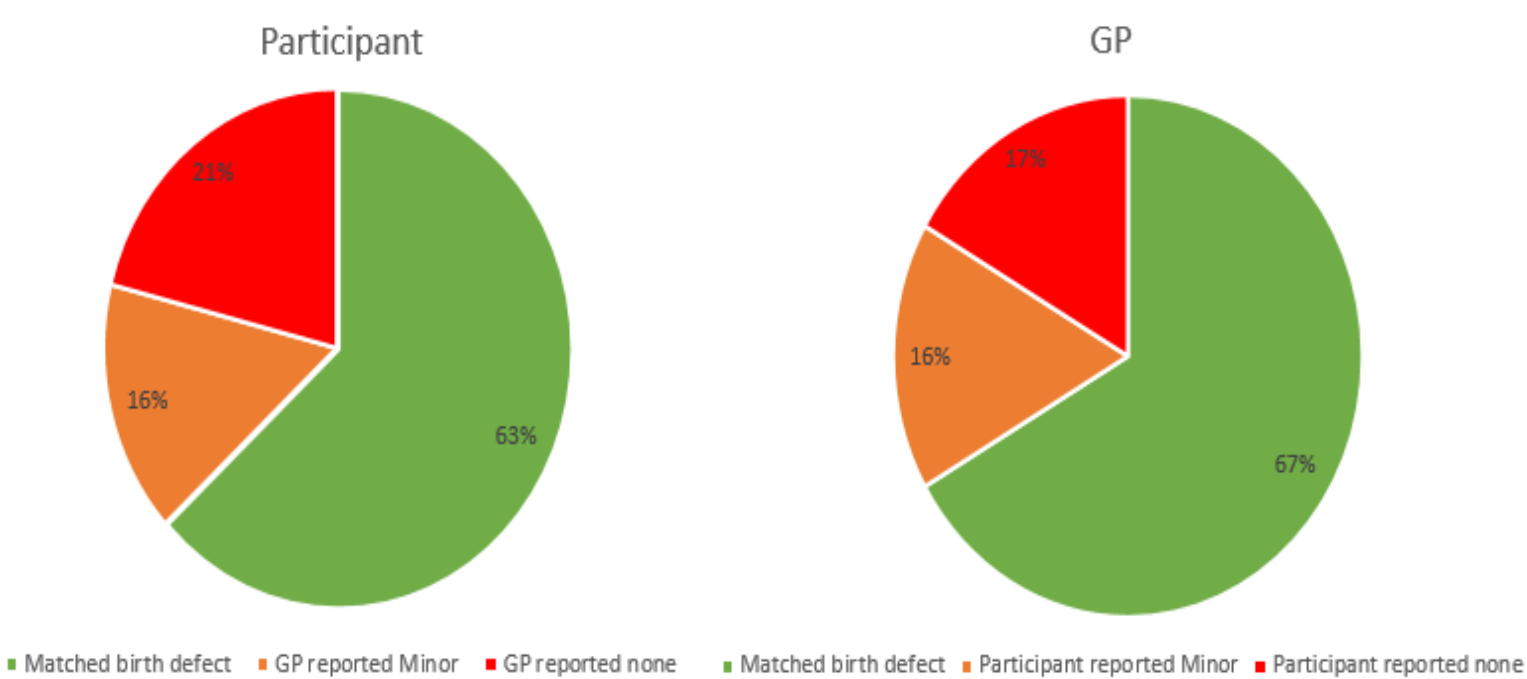
Major birth defects

In 3 cases (17%) participant reported no birth defect

Participant	GP	
	EUROCAT	
	Major	Unilateral stable right pyelum dilatation
	Major	Midseptal ventricular septal defect
	Major	Congenital syndactyly 3 toes left and right



Differences in reported Major birth defects



Conclusion

- Self-reported questionnaire data on infants' birth defects from mothers yields **similar information** compared to information obtained through GPs
- Mothers can adequately report the birth defects from their infant in detail since **3 out of 4** of their reported birth defects are ICD-10 coded identically with their GPs
- Some birth defects remain unreported by both the participants (N = 14) and GPs (N = 28), particularly **minor** birth defects.
- **≈35%** of reported major birth defects by either GP or participant remain **unreported or were classified as minor**.
- Almost all **infants (98.2%)** with at least one major or no birth defect were classified the same by the participant and GP.

Thank you for your attention!

Questions/remarks?
Contact me at v.maas@lareb.nl

