



The Royal College of **Pathologists**

Pathology: the science behind the cure

## **Response from the Royal College of Pathologists to the Consultation on Infant Mortality Outputs Review from the Office for National Statistics**

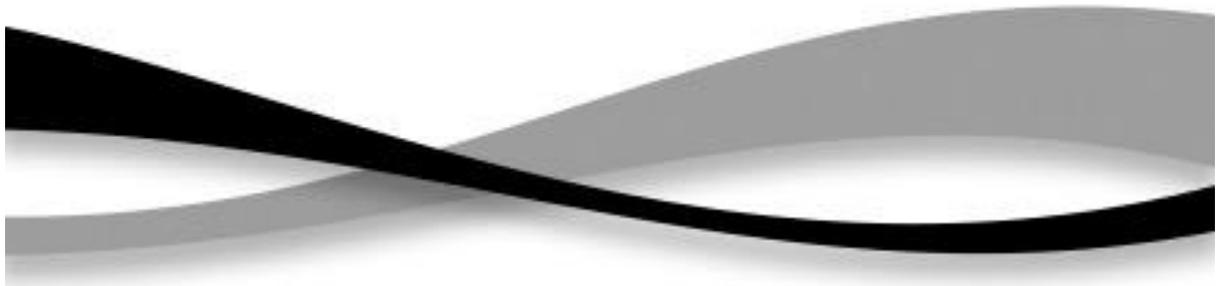
**The Royal College of Pathologists' written submission**

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## **1 About the Royal College of Pathologists**

**1.1** The Royal College of Pathologists (RCPATH) is a professional membership organisation with charitable status. It is committed to setting and maintaining professional standards and to promoting excellence in the teaching and practice of pathology. Pathology is the science at the heart of modern medicine and is involved in 70 per cent of all diagnoses made within the National Health Service. The College aims to advance the science and practice of pathology, to provide public education, to promote research in pathology and to disseminate the results. We have over 10,000 members across 19 specialties working in hospital laboratories, universities and industry worldwide to diagnose, treat and prevent illness.

**1.2** The Royal College of Pathologists response reflects comments made by Fellows and members of the College Committee during the consultation, which ran from 24th April 2017 until the 29th June 2017 and collated by Dr Jo McPartland, Chair of the Prenatal, Perinatal and Paediatric Pathology Specialty Advisory Committee.

## **2 CONTENTS**

### **2.1 Use of childhood mortality statistics**

**2.1.1** In response to the question: What do you use ONS childhood mortality statistics for?

Answer: Monitoring or formulating policy, Influencing policy, Planning services, Academic purposes

**2.1.2** In response to the question: Which of the following childhood mortality tables from the annual release do you use, if any?

Answer: All

**2.1.3** In response to the question: Which geography level(s) do you require the childhood mortality tables for?

Answer: UK, England (only), Wales (only), Regions in England, Local authority level.

**2.1.4** Which, if any, statistics from these tables are important to you and what do you use them for? E.g. rates, numbers.

Answer: Detailed statistics concerning stillbirths, livebirths and infant deaths are required for service planning, evaluation and research. Variations between different regions, and within the same region over time, are vital to inform research into possible aetiological factors, and to design interventions to reduce death rates. Therefore this will be required down to local

authority level. The same data can help the Royal College of Pathologists to plan workforce requirements in relevant specialties, such as Perinatal and Paediatric Pathology and Genetics. Although rates allow comparison between different groups and time periods, absolute numbers are important for workforce planning, as this will determine, for example, the number of perinatal or paediatric autopsies required.

## **2.2 Use of birth cohort for infant death statistics**

**2.2.1** In response to the question: What do you use ONS birth cohort for infant death statistics for?

Answer: Monitoring or formulating policy, Influencing policy, Planning services, Academic purposes

**2.2.2** In response to the question: Which of the following birth cohort for infant death tables from the annual release do you use, if any?

Answer: All

**2.2.3** Which geography level(s) do you require the birth cohort for infant death tables for?

UK, England (only), Wales (only), Regions in England, Local authority level

**2.2.4** In response to the question: Which, if any, statistics from these tables are important to you and what do you use them for? E.g. rates, numbers.

Answer: All statistics listed, down to detailed geographical regions, are important, for the same reasons as given in response to question 2.1.4 above. Birth cohorts allow comparison between groups of babies born in the same year. Due to varying ages at which infant deaths occur, annual rates will compare different cohorts of babies. This may make it more difficult to compare death rates with any variations in factors such as health and social care or economic factors.

## **2.3 Use of pregnancy and ethnic factors influencing births and infant mortality statistics**

**2.3.1** In response to the question: What do you use ONS pregnancy and ethnic factors influencing births and infant mortality statistics for?

Answer: Monitoring or formulating policy, Influencing policy, Planning services, Academic purposes

**2.3.2** In response to the question: Which of the following pregnancy and ethnic factors influencing births and infant mortality tables from the annual release do you use, if any?

Answer: All

**2.3.3** In response to the question: Which geography level(s) do you require the pregnancy and ethnic factors influencing births and infant mortality tables for?

Answer: UK, England (only), Wales (only), Regions in England, Local authority level

**2.3.4** In response to the question: Which, if any, statistics from these tables are important to you and what do you use them for? E.g. rates, numbers.

Answer: The same principles apply as for question 2.1.4 above. Details of variations in rates between different socioeconomic and ethnic groups is important to inform service planning, evaluation and research. Absolute numbers are important for service and workforce planning, nationally and in different regions.

## **2.4 Requirements of cause of death for perinatal deaths (infants and stillbirths)**

**2.4.1** In response to the question: Do you use the ONS hierarchical cause groups for neonatal deaths?

Answer: No

**2.4.2** In response to the question: Do you use the ONS hierarchical cause groups for stillbirths?

Answer: No

**2.4.3** In response to the question: If you have answered yes to either of the above, do you find this grouping useful?

Not Answered

**2.4.4** In response to the question: Would you prefer a grouping based on underlying cause of death?

Answer: Yes

**2.4.5** In response to the question: If we were able to provide a single underlying cause of death for perinatal deaths would this be useful to you?

Answer: Yes

**2.4.6** In response to the question: Both maternal and foetal causes are mentioned on the perinatal certificate, which would you deem more important in assigning an underlying cause of death?

Answer: Both

**2.4.7** In response to the question: Both maternal and foetal causes are mentioned on the perinatal certificate, the World Health Organization (WHO) recommends using the foetal cause. To what extent do you agree or disagree?

Answer: Agree

**2.4.8** In response to the question: There can be up to 15 conditions mentioned on a death certificate, do you require data based on these?

Answer: Yes

If yes, please specify specific causes or groups of causes of interest:

- Congenital anomalies.
- Complications of prematurity.
- Specific details on infections.
- Placental disorders.
- Intrauterine growth restriction.
- Maternal disorders.

**2.4.9** In response to the question: Would you prefer data based on the number of deaths that have been registered in a calendar year or number of deaths that have occurred in a calendar year?

Answer: No opinion

**2.4.10** In response to the question: Would you prefer deaths based on the death cohort or birth cohort?

Answer: Both

**2.4.11** In response to the question: characteristics would you like to see included in the child mortality tables?

Answer: Sex, Birthweight (grouped), Region of usual residence of mother, Country of usual residence of mother, Mother's age, National Statistics-Socio Economic Classification, Marital status, Type of registration, ONS cause groups, Underlying cause of death (ICD-10), Gestation (weeks), Mother's country of birth, Infant deaths, Childhood deaths, Number of previous children, Place of delivery, Ethnicity, Singleton and multiple birth, Causes mentioned on the death certificate

**2.4.12** In response to the question: What characteristics would you like to see included in the birth cohort/pregnancy and ethnic factors influencing births and infant mortality tables?

Answer: Sex, Birthweight (grouped), Region of usual residence of mother, Country of usual residence of mother, Mother's age, National Statistics-Socio Economic Classification, Marital status, Type of registration, ONS cause groups, Underlying cause of death (ICD-10), Gestation (weeks), Mother's country of birth, Infant deaths, Number of previous children, Place of delivery, Ethnicity, Singleton and multiple birth, Causes mentioned on the death certificate

**2.4.13** In response to the question: Annex E, in the consultation document lists variables available from birth registrations, death registrations and birth notifications. Are there any other variables not listed in Q23 and Q24 that you require data on?

- Birth registrations:
  
- Death registrations:
  
- Stillbirth indicator
  
- Death in labour indicator