Statistics on Pregnancies, Deliveries and Newborn Infants 2020

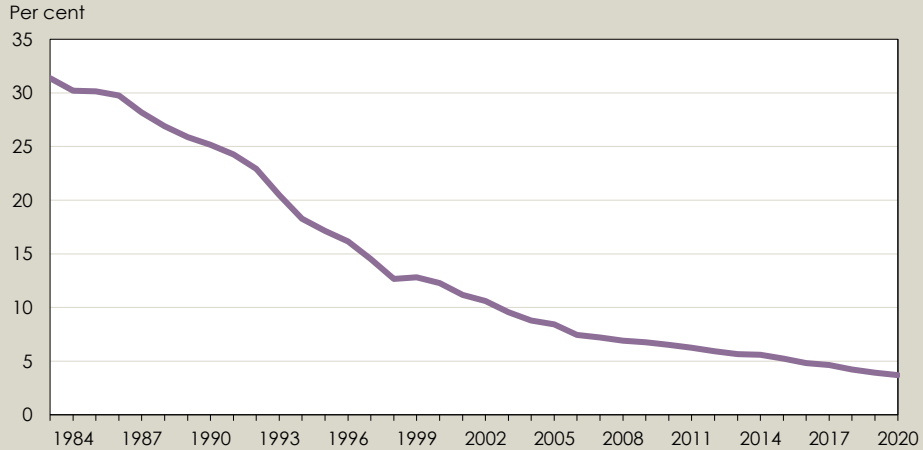
In 2020, about 114 500 infants were born in Sweden. The proportion of deliveries at week 41 of pregnancy that began with induction increased significantly, although there were major differences between regions. The proportion of pregnant women who smoke decreased further in 2020, while the proportion of overweight and obese women in early pregnancy continued to increase.

In 2020, about 112 900 births occurred in Sweden. About 1.4 per cent of births were multiple births, and about 114 500 infants were born in total. 43.1 per cent of infants were born to primiparas. The mean maternal age has increased over time, and in 2020 was just over 29 years for primiparas and 32 years for multiparas. The proportion of births that ended with a caesarean section was 17.9 per cent. The proportion of women who suffered severe perineal laceration (third or fourth degree) in vaginal delivery was 4.5 per cent for primiparas and 1 per cent for multiparas. This is slightly lower than the previous year and a continuation of a decline that has been ongoing for the past few years.

Smoking among pregnant women decreases

Smoking at the time of registration to antenatal care, i.e. in early pregnancy, has been declining steadily for many years (see Figure 1). Just under 4 per cent of women who gave birth in 2020 reported to smoke in early pregnancy, compared to 30 per cent of women who gave birth in the mid-1980s.

Figure 1. Percentage of smokers at the time of registration to antenatal care, 1983–2020



Source: the Medical Birth Register, National Board of Health and Welfare

The decline in smoking in early pregnancy has occurred in all age groups, but the proportion of smokers is still higher among younger women. In 2020, 12 per cent of mothers under the age of 19 reported to smoke in early pregnancy, compared to 3 per cent of mothers over 30. There are also differences between women with different levels of education. In 2020, 12 per cent of mothers with pre-secondary education reported to smoke in early pregnancy, compared to less than 1 per cent of women with post-secondary education.

Smoking during pregnancy increases the risk of miscarriage, stillbirth and mortality during the neonatal period and up to one year of age. Growth retardation, premature labour, ectopic pregnancy, placenta previa (where the placenta covers the cervix) and placental abruption are other risks associated with smoking during pregnancy. [1]

The opposite trend can be seen for overweight and obese mothers, another important and preventable risk factor for adverse birth outcomes. A high BMI is associated with an increased risk of gestational diabetes, hypertension, pre-eclampsia and venous blood clots during and after pregnancy. There is a strong link between overweight and obese mothers and the risk of the infant being large for gestational age, i.e. weighing more than usual for the number of weeks of pregnancy. A high BMI is also associated with difficulties in becoming pregnant, premature delivery and caesarean section. A high BMI also increases the risk of miscarriage and certain types of birth defects. [2-3]

The proportion of overweight or obese women at the time of registration to antenatal care (BMI of 25 or more) has increased year on year, from 25 per cent in 1992 to 44 per cent in 2020. In 2020, the proportion varied between 37 per cent in Stockholm and 51 per cent in Södermanland. As with smoking, women with different levels of education are overweight and obese to varying degrees. Among women with pre-secondary education, 27 per cent were obese at the time of registration to antenatal care in 2020. The corresponding proportion for women with post-secondary education was 12 per cent.

Increased use of spinal anaesthesia

Epidural anaesthesia is a type of spinal anaesthesia that is effective at relieving pain during labour. Except in the latter half of the 1980s, when its use temporarily declined, its use has increased year on year since the early 1970s, when about 1 per cent of women in labour had an epidural for pain relief. In 2020, the use of epidural anaesthesia was 43 per cent. Epidural anaesthesia is about twice as common among primiparas as among multiparas. In 2020, 64 per cent of primiparas had an epidural, compared to 28 per cent of multiparas. There are major differences between regions as regards the proportion of women who have an epidural when giving birth: see Figure 2. The highest proportion was in Uppsala, where 63 per cent had an epidural when giving birth in 2020. At 25 per cent, the corresponding proportion in Värmland was less than half that. There are also differences between women with different levels of education. In 2020, 31 per cent of women with pre-secondary education had an epidural when giving birth, compared to 45 per cent of women with post-secondary education.

Figure 2. Epidural anaesthetic in vaginal delivery, per region, 2020

Source: the Medical Birth Register, National Board of Health and Welfare

Increase in inductions

There has been a steady increase in the proportion of induced births, i.e. artificially induced births (usually with drug treatment), since records began in 1993 (see Figure 3). At that time, 8 per cent of singleton deliveries at full term (at least 37 weeks of gestation) were induced. In 2019 and 2020, the proportion of induced deliveries increased significantly more compared to trends in previous years, from 19 per cent in 2018 to 25 per cent in 2020. The biggest increase occurred in week 41 of pregnancy in 2020, where the proportion of deliveries starting with induction doubled, from 21 per cent in 2019 to 42 per cent in 2020.

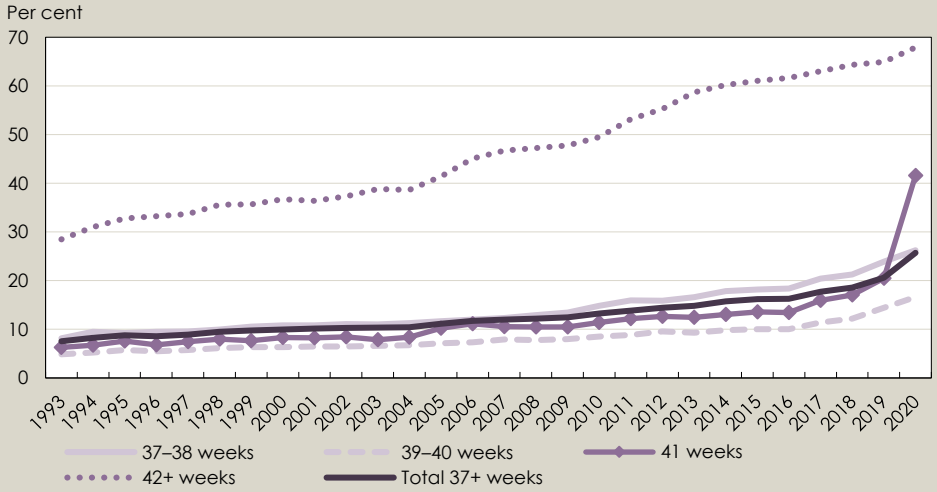
Causes of induced labour may include post-term pregnancy, multiple pregnancy, unexplained bleeding during pregnancy, fetal growth restriction, and maternal conditions such as pre-eclampsia or diabetes.

The large increase in week 41 can be explained by the fact that in some regions, the practice of induction in post-term pregnancy has changed in recent years, so labour is induced in week 41 instead of at 42 weeks of gestation. Significantly more regions switched to this new practice in 2020. As a result, the rate of post-term deliveries (infants born after 42 or more weeks of gestation) – a figure that had previously stood at 6 to 8 per cent since the mid-1980s – was just 3 per cent in 2020. However, the proportion of labours induced in week 41 in 2020 varied widely between regions, from 16 per cent of births in Östergötland to 72 per cent of births in Uppsala.

New recommendations have emerged in recent years for the management of complicated pregnancies, such as diabetes and hypertensive disorders, which in many cases recommend that labour should be induced no later than the expected

date of delivery. This is probably also one reason why the proportion of inductions has increased more in recent years.

Figure 3. Induction of labour at full term (37+ weeks) and singleton births, by length of pregnancy, 1993–2020



Source: the Medical Birth Register, National Board of Health and Welfare

References

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2. Euro-Peristat. European Perinatal Health Report. Core indicators of the health and care of pregnant women and babies in Europe in 2015 Euro-Peristat Project; 2018.
3. Poston et al. Preconceptional and maternal obesity: epidemiology and health consequences. Lancet Diabetes Endocrinol 2016; 4: 1025–36

Further information

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