

Recommendations
to reduce
Preterm Birth
in Colorado



COLORADO
Department of Public
Health & Environment

COPretermBirth.org

Executive Summary

In the United States, 25,000 infants die every year, including nearly 400 in Colorado. Prematurity and related conditions contribute to more than one-third (38%) of all infant deaths. Prematurity is a complex health problem; it is not a single disorder and does not have a single solution. Therefore, as part of Colorado's efforts to reduce infant mortality, stakeholders from across the state convened to develop a set of evidence-based medical and public health recommendations, including state system and policy changes, to prevent and reduce preterm birth in Colorado. In alignment with national, evidence-based guidelines, the work group identified the following recommendations:

Chronic stress	Reduce root causes of chronic stress, including institutional racism, poverty, trauma, and violence.
Access to services	Ensure access to culturally relevant and needed healthcare services, with emphasis on high risk populations, using a patient-centered medical home approach.
Preventive care	Provide preventive care for women of reproductive age before, during, and after pregnancy to address modifiable risk factors for preterm birth.
Planned pregnancy	Promote planned pregnancy.
Contraceptive use	Increase access to and uptake of long-acting reversible contraceptives (LARCs).
ART Risks	Increase provider and patient knowledge regarding the risks of Assisted Reproductive Technology (ART).
Tobacco use	Encourage cessation of tobacco and other substances.
Mental health	Improve access to and information on mental health and well-being.
Medical interventions	Support medical interventions to identify risk and prevent preterm birth.
Access to 17P	Promote appropriate access and use of 17 α -hydroxyprogesterone (17P) to prevent preterm birth.
Innovative technology	Promote use of technology to help healthcare providers optimally manage preterm birth risks.