Birth rate drops when obstetricians leave town

by Roger Dobson

AIMS Journal 2007, Vol 19, No 3

First printed in BMJ 2007; 335:66-67 (14 July), doi:10.1136/bmj.39269.598079.DB

New research shows that when obstetricians and gynaecologists are away at national conferences the number of births drop (Social Science and Medicine 2007 Jun 27 doi: 10.1016/j.socscimed.2007.05.034).

Researchers found that the number of births dropped by up to 4% during five day key annual conferences in the United States and Australia, with nearly 1000 births affected.

'Since it is unlikely that parents take these conferences into account when conceiving their child, this suggests that medical professionals are timing births to suit their conference schedule,' say Joshua Gans from the University of Melbourne and coauthors from the Australian National University, in Canberra.

They say that although medical conferences have become a normal part of the career of many doctors, little has been written about how hospitals and others manage the effects on the supply of available staff.

In the study the authors looked at daily birth rates in the two countries and matched them with the annual meetings of the largest conferences of obstetricians and gynaecologists in each country, the annual scientific meetings of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the American College of Obstetricians and Gynecologists, over a 12 year period.

In Australia conferences were associated with a 3.8% fall in births and in the US with a 1.5% fall in births. 'To give some sense of the magnitude of these effects, the results suggest that the average obstetrics conference in Australia leads to 126 babies being born on a different date than if the conference had not taken place, while the average obstetrics conference in the United States leads to 864 babies being born on a different date than if the conference had not taken place,' says the report.

The authors say that although little is known about the effects on infant health of moving the timing of a birth for non-medical reasons, it's plausible that such changes may raise the chance of complications during birth.

'In this instance, the increased risk to infant health is likely to be small, since most movements are likely to be small, one week or less, and appear to have been anticipated - as evidenced by the rise in births prior to the conference,' the authors say.

They say that professional obstetrics societies should reconsider the timing of annual conferences and
hold them at times of the year when the natural birth rate is at a minimum. For the Australian conference that would mean dates in the last week in November or the first week in December, and for the US the last week in November or the first week in January.