

Genomics & Newborn Screening Quarterly

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NEWBORN SCREENING
INDIANA

Topics included
in this issue:

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Awareness

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Birth Defects

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Birth Defects Awareness

The term birth defect is used to state that a child has a medical, anatomical, and biological difference or anomaly. Children with birth defects and their families face unique and sometimes difficult challenges. However, there are also many positive and beautiful moments parents share with their child. The most common birth defects in Indiana are heart defects, genital and urinary organ defects, and bone and muscle defects. Nationally, it is estimated that about **1 in every 33 babies is born with a birth defect each year**. In Indiana, birth defects are the second leading cause of infant mortality.



Pulse Oximetry Protocol Changes

Changes take effect July 1, 2021
Webinars begin February 2021

New exemptions to pulse oximetry screening – Guidance for newborns who will not receive screening and new MSR exception types.

Remove 2nd rescreen (3rd screen) – Initiate a clinical workup, at minimum perform an echocardiogram, after 2nd failed screen.

Document all oxygen saturations from each screen on the NBS card and EMR.

Document echocardiogram results on NBS card and EMR.



Did you know?

Indiana has a state-wide birth defects surveillance system

- The Indiana Birth Defects and Problems Registry is housed within the Genomics and Newborn Screening program at the state department of health.
- The IBDPR is a population-based surveillance system that seeks to promote fetal, infant, and child health by preventing childhood developmental disabilities and enhancing the quality of life of affected children and their families.
- The IBDPR collects data on 49 conditions; 47 of which are designated nationally by the National Birth Defects Prevention Network.



Birth Defects and Mental Health

Having a child with a birth defect can affect the entire family. It might be helpful to talk with families or other people who are affected by the same type of birth defect as you or your family member. Other people might have learned how to address some concerns and questions you may have. Often, they can give great advice about excellent resources and share what worked best for them. Engaging in those conversations with other people may provide emotional support and optimism for the future. It is also important to remember that just because one family makes a certain choice, that may not mean it is the best choice for your family. Be sure to have an open discussion with your health care provider about positive options for your family. Birth defect terms can feel like labels and may seem offensive. On the other hand, using these terms can help families access the right type of care, referral to services, and find other families with similar challenges. Mental Health and emotional well-being are critical components of one's overall quality of health.



All parents deserve the best – including the very best mental health care. Some women experience depression during pregnancy or sometimes immediately after birth which can have an impact on their partner. It is important to gather resources and plan for mental well-being during parenthood. Depression during and after pregnancy is common and treatable. If you

think you have depression, seek treatment from your health care provider as soon as possible.

Mental Health Resources

- **Aspire Indiana Health** aspireindiana.org
- **Be Well Helpline** bewellindiana.com
- **Mental Health America of Indiana** mhai.net
- **Meridian Health Services** meridianhs.org
- **National Alliance on Mental Illness** namiindiana.org

Birth Defects and COVID-19

The coronavirus pandemic may be stressful for people which can lead to fear and anxiety. An increase in stress levels while pregnant can have a negative impact on you and your baby. Be sure to cope with stress in a healthy way such as meditation and exercise. Try to avoid harmful substances such as alcohol and tobacco.

Folic Acid Use Before, Throughout, and After Pregnancy

All women of reproductive age should get 400 micrograms (mcg) of folic acid each day. **Taking folic acid before and during pregnancy is important because it protects the developing child against serious birth defects called neural tube defects.** These defects happen in the first few weeks of pregnancy, often before a woman knows she is pregnant. **Not getting enough folic acid after pregnancy can cause a decrease in healthy red blood cells, and lead to a condition called folate-deficiency anemia.** Women can get folic acid in two ways: **Through consuming foods rich in folate**, such as spinach, beans, breads, and pastas, **and by taking a vitamin that contains a minimum of 400 micrograms of folic acid.**

Contact Us!

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