What’s going on regarding birth defects

- JAMA has just published the results of a registry-based study from Ontario (Canada), in which there was an increasing temporal trend of some potential or recognized risk factors for congenital heart disease (CHD) from 1990 through 2011, namely an increase in parental age at conception, maternal prepregnancy body mass index, maternal urinary tract infections, type 1 diabetes, and exposure to nonfertility medications during pregnancy. It is remarkable that only 9.5% of cases with CHD had a confirmed genetic diagnosis. Access: http://jaha.ahajournals.org/content/2/3/e000064.full
- An interesting study on hypospadias and maternal intake of phytoestrogens, performed with data from the NBDPN (http://aje.oxfordjournals.org/content/early/2013/06/07/aje.kws591.full.pdf+html) has just been published on-line in the American Journal of Epidemiology. This study represents the first large-scale analysis of phytoestrogen intake and hypospadias. After adjustment for several covariates, high intakes of daidzein, genistein, glyce tin, secosolariciresinol, total isoflavones, total lignans, and total phytoestrogens were associated with reduced risks; odds ratios comparing intakes ≥90th percentile with intakes between the 11th and 89th percentiles ranged from 0.6 to 0.8. The observed associations merit investigation in additional populations before firm conclusions can be reached.
- This National Institutes of Health (NIH) Office of Disease Prevention convened an independent panel to assess the available evidence on Diagnosing Gestational Diabetes Mellitus (GDM). The panel found that despite potential advantages of adopting a new diagnostic approach for GDM, more evidence is needed to ensure that the benefits outweigh the harms. The final statement recommended following the current two-step diagnostic approach and concluded that more research is needed to fully understand the implications of changing diagnostic protocols for GDM.

News from the Headquarter and Executive Committee

- The 3rd Training Program on Surveillance and Prevention of Birth Defects (Geneve, 27 to 31 May 2013) was successfully completed. The course was completely full, with 24 trainees, three observers, and nine faculty members (five from the Clearinghouse, four from CDC). Compared to previous years, there was a particularly strong representation from African countries (Rwanda, Kenya, Tanzania, Malawi, Mozambique, Uganda), with additional representation from Latin America (Chile, Uruguay), Asia (China, Thailand, Philippines), Canada, and Norway. We look forward to a blossoming network of programs, committed professionals, and affiliate members of the Clearinghouse. A formal evaluation of the course is in progress.
- The organizing committee of the 2013 ICBDSR Annual Meeting (to be held in December 3-6, 2013, in San José, Costa Rica) continues working on the final program and other related issues.
- For the workshop on Genomics in Birth Defects Research, for next Annual Meeting, a questionnaire has been developed by Osvaldo Mutchinick and Gioacchino Scarano, together with the Executive Committee and the organizing committee. This was distributed among Program Directors and some responses have already been received. Other Program Directors are encouraged to send their responses in order to better know the scenario for this challenging possible project in our organization.
- The Executive Committee will have its next meeting at the Clearinghouse Headquarter in Rome on June 27 and 28, 2013.

Upcoming deadlines

- 10 July 2013: Application for travel support to attend the Annual Meeting.
- 15 July 2013: Payment of annual dues.
- 20 August 2013: Data for the 3rd quarter 2012, to be published in the Quarterly Report/Krystalos.
- 31 August 2013: Abstracts for 2013 Annual Meeting (details to be made available in the near future).

Would you like to contribute with any news from your program for next Monthly Newsletter?
Please send contributions, comments or questions to centre@icbdsr.org