Antenatal Corticosteroid Administration at a Japanese Hospital

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To the Editor

According to a report concerning the antenatal corticosteroid (ACS) administration rate among eligible patients who delivered from 24-34 weeks of gestation at a tertiary center in the United States in 2014, 81.3% of them received at least 1 dose of ACS [1]. This rate may be higher than the average ACS administration rate in Japan (about 51% in 2011) [2].

For example, in my institution, one of the major perinatal centers in Tokyo, Japan, only 60 in 135 patients (44%) who delivered from 24-32 weeks of gestation received at least 1 dose of ACS in 2008-2010. The difference in the ACS administration rates between Japan and the United States may be due to the differences in the perinatal care system. In Japan, about half of all pregnancies and deliveries are managed at private clinics without neonatologists; patients with a risk of preterm birth managed at private clinics need to be transported to perinatal centers. There may be some cases of delayed transport leading to a decreased time period for ACS administration at perinatal centers. In my institution, the ACS administration rate (27%; 21 in 79 cases) in cases following transport from private clinics was significantly lower than that in those managed in-house (70%; 39 in 56 cases, odds ratio 0.16, 95% confidence interval 0.07-0.34, P < 0.01 by the Chi-square test).

Therefore, in Japan the early transport of patients at risk of preterm delivery from private clinics to perinatal centers may improve the ACS administration rate.

References
