

## Message from the Director

The mission of our Center has grown considerably since its inception on April 15, 2001. This became apparent to me as I engaged with many of you over the past year to mark our 10 year anniversary with a series of events titled 10 Years of Service. Our partners have also worked with us over the past 10 years to make a difference in the lives of so many impacted by birth defects, disabilities and blood disorders. Together, we have advanced science, changed policies and systems, and most importantly given people the opportunity to live the healthiest life possible. It's been an exciting year and is an exciting time.

I've been with the Center since its creation, but serving as center director has given me a new appreciation for how the work of my colleagues has changed the conversation about the populations that we serve and where we place our priorities. What I've seen is how we have successfully reframed the context in which people live. We've helped change the way people view many of the conditions we study.



We have [six center-level priorities](#) and these fit within the context of prevention opportunities with a focus on those issues that will have a health impact. They are independent, stand-alone priorities:

- Enhancing the monitoring and tracking of autism and other developmental disabilities and advancing research into the risk factors for these conditions.
- Taking what we know about the prevention of birth defects and moving that along in terms of trying to have health impact. We've invested, over the last 13-14 years, in a fairly large research effort and through that effort have identified a number of preventable causes of birth defects. This includes things like alcohol, smoking and other lifestyle factors, a number of maternal health conditions like pre-gestational diabetes and obesity, use of medications in pregnancy, and our landmark work on folic acid.
- Addressing venous thromboembolism and the fact that we know how to prevent it, particularly those associated with hospitalization and surgery. That means working to bring groups together to coalesce around appropriate guidelines, and then working within the context of policy to implement those guidelines. We're also starting a tracking component of that by

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working with the National Health Care Safety Network to monitor real-time venous thromboembolism (VTE) events.

- Preventing and controlling complications resulting from hemoglobinopathies like sickle cell disease (SCD) and thalassemia. People who have SCD have a 20-30 year lower life expectancy than people without SCD. This gap could be significantly diminished if there was continuity of care for these individuals over time.
- Reducing health disparities among people with disabilities. People with disabilities have a higher number of lifestyle risk factors and we'd like to work within the context of the programs here at CDC and our federal partners to try make sure the many prevention efforts are reaching people with disabilities and other vulnerable populations.
- CDC promotes the health of people with disabilities by ensuring that they have access to and are included in mainstream public health programs wherever possible. To do this, it is important for CDC to incorporate disability status as a demographic variable into all relevant CDC surveys, programs, and policies.

As the director of the National Center on Birth Defects and Developmental Disabilities, I am proud to celebrate 10 years of continued progress in the pursuit of improved programs, research, and knowledge for the millions of Americans who live with birth defects, disabilities, and blood disorders. Though our work is far from over, the foundation we have built strengthens our quest for a better tomorrow. We're working across CDC to make sure that people are getting the health protection and promotion they need. No one group can do this. It has to happen with CDC and with our partners. The Center's mission and CDC's mission is not complete until the most vulnerable in our nation are also benefiting from our work.

Sincerely,



**Coleen A. Boyle, PhD, MS(Hyg)**

Director of the National Center on Birth Defects and Developmental Disabilities (NCBDDD)

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