Pediatrics International (2013) 55, 219-222

# doi: 10.1111/ped.12063

# Original Article

# Secular trends and latitude gradients in sex ratio at birth in Asia during the past 60 years

Victor Grech

Department of Paediatrics, Mater Dei Hospital, Msida, Malta

## **Abstract**

**Background**: Latitude gradients and secular trends in Europe and North America have been found in the male–female ratio at birth (M/F: male births divided by total births), which is anticipated to approximate 0.515.

*Methods*: Annual national data for Asian countries for male and female live births were obtained from the World Health Organization and analyzed with contingency tables.

**Results**: A total of 245 938 211 live births were analyzed. An overall increasing trend in M/F was found (P < 0.0001). A latitude gradient was also noted, with more boys being born in southern, warmer latitudes (P < 0.0001). There was an overall deficit of 1 351 757 male births based on an anticipated M/F of approximately 0.515.

Conclusion: M/F is increasing overall in Asia, unlike the decline previously noted in Europe and North America. Moreover, it had been shown that there is a higher incidence of male births in southern Europe than in the north, with the opposite gradient in North America. This paper shows that M/F latitude gradients in Asia are in keeping with those of Europe. The overall M/F in Asia may be rising due to improving socioeconomic conditions, and the interplay of several poorly understood factors is likely.

**Key words** Asia, birth rate, infant, newborn, sex ratio, Southeastern Far East, trends.

Gender is determined at conception in mammals, and male births occur slightly in excess. The male to female ratio of live births is expressed as the ratio of male live births divided by total live births (M/F), and for humans this is expected to approximate 0.515. The reason for this discrepancy is uncertain but a plethora of factors have been proposed. Indeed, the study of M/F has become a subspecialty in its own right, with numerous and ongoing studies in this field. Findings from this research may be relevant in a wider sense because M/F has been proposed to function as a surrogate health indicator, as will be outlined.

# Latitude variation in M/F

M/F varies in geographical space, with a latitude gradient that is different in Europe and North America. More boys are born towards the south of Europe, in contrast with the North American continent, where more boys are born towards the north of that continent. <sup>4,5</sup>

## Secular variation in M/F

Several studies have also shown that M/F varies in temporal fashion, mostly declining in the aforementioned two continents.<sup>6</sup>

This study identifies secular trends in M/F in Asia from a World Health Organization (WHO) dataset that includes the past 60 years. Secular trends and trends by geographical latitude are

Correspondence: Victor Grech, PhD, Department of Paediatrics, Mater Dei Hospital, Tal-Qroqq, Msida MSD 2092, Malta. Email: victor.e.grech@gov.mt

Received 6 June 2012; revised 11 September 2012; accepted 5 November 2012.

also analyzed. The null hypothesis is that there were no significant geographical or secular differences in M/F.

# Methods

#### Data sources

Annual male and female live births were obtained directly from WHO. Asia is conventionally divided into the low latitudes  $(0-23^{\circ}N)$ , the middle latitudes  $(24^{\circ}N-40^{\circ}N)$  and the high latitudes  $(\ge 41^{\circ}N)$ , and this categorization was applied.

# Statistics

Excel was used for data entry, overall analysis and charting. The quadratic equations of Fleiss were used for exact calculation of 95% confidence intervals for ratios. Chi-squared tests and chi-squared tests for trends for annual male and female births were used throughout. Statistical significance was set at  $P \le 0.05$ .

#### Results

There were 245 938 211 live births available for analysis.

## Secular trends

Five year total live births and sex ratios at birth, in 5 year intervals, are listed in Table 1. There have been significant increases and also decreases in M/F in different countries (Table 2), as well as in available births by year for each country.

An overall increasing trend in M/F was found in all regions (P < 0.0001; Table 3).

3 234 836 6 295 789 4 125 080 8 022 769 3 060 953 3 897 689 2005-09 288 232 260 832 549 064 0.51417 0.52627 0.51452 0.52495 0.52363 0.51420 0.51381 0.51342 3 359 365 4 340 219 8 407 551 3 568 010 6 927 375 4 067 332 2000-04 234 258 217 190 451 448 0.52036 0.518900.51543 0.51744 0.51657 0.51623 0.51589 0.51506 4 497 248 9 322 230 3 119 561 6 426 368 3 306 807 4 824 982 1995-99 254 278 528 760 0.51790 0.51758 0.52045 0.51726 0.51496 0.51457 0.51911 0.51776 274 482 5 018 513 4 604 455 9 622 968 4 169 305 3 939 199 8 108 504 1990-94 312 951 292 115 605 066 0.51848 0.51722 0.51596 0.51453 0.52183 0.52120 0.51419 0.52151 10 101 106 11 870 089 2 255 313 4 622 409 4 883 652 6 089 469 5 780 620 2 367 096 5 217 454 0.51255 0.51209 0.51164 0.51683 0.51652 0.51329 0.51301 0.51621 15 970 441 11 655 367 5 687 630 7 780 775 8 189 666 7 620 203 3 915 672 3 704 531 5 967 737 0.51305 0.51280 0.51256 0.51385 0.51421 0.51230 0.51350 0.51202 6 964 218 14 388 346 4 289 047 1975-79 4 551 335 8 840 382 7 424 128 0.51598 0.51572 0.51483 0.51516 0.51624 0.51451 12 492 588 10 067 883 999 800 9 4 873 524 5 194 359 1970-74 6 483 922 0.51930 0.519020.51874 0.51593 0.51624 0.51562 6 105 124 12 692 097 4 283 299 8 841 767 1965-69 6 586 973 0.51926 0.518984 558 468 0.51589 0.51556 0.51523 0.51871 11 427 562 5 466 644 5 960 918 3 979 197 4 211 114 8 190 311 0.52163 0.52134 0.51450 Five year total live births and sex ratios at birth 0.52192 0.51416 0.51382 8 242 240 8 806 279 4 235 529 4 206 522 4 006 711 4 599 757 0.52266 0.52233 0.51422 0.51388 0.52200 0.51354 10 117 978 4 184 253 3 862 670 5 194 549 4 923 429 1950-54 8 046 923 0.51964 0.52033 0.51998 0.51371 0.51340 0.51309 Total Total Total UCI M/F LCI M/F LCI UCI M/F Year UCI Hong Kong, Philippines, Singapore, Federation Korea and Thailand, Sri Lanka 24°N-40°N 41°N-82°N Russian South Table 1

105 670 408

0.51573 0.51563

0.51582

0.51374 0.51360

0.51347

0.51383

0.51469

0.51418

0.51385

0.51273

0.51173

0.51784

0.51794 0.51774

LCI, lower confidence interval; M/F, male births divided by total births; UCI, upper confidence interval.

LCI

**Table 2** Temporal trend vs latitude in M/F for Asian countries

	Country	Years	Total boys	Total girls	$\chi^2$ trend	P	M/F	Overall trend
0-23°N	Singapore	1950-2009	1 478 771	1 384 428	1.3	0.262	0.51648	NS
	Thailand	1950-88	19 677 284	18 213 388	1960.4	< 0.0001	0.51932	Decreasing
	Philippines	1950-84	18 026 727	16 702 669	88.7	< 0.0001	0.51906	Decreasing
	Hong Kong	1960-09	1 982 156	1 845 191	14.6	< 0.0001	0.51789	Increasing
	Sri Lanka	1950-71, 1977-86	5 741 698	5 528 671	4.1	0.044	0.50945	Increasing
24°N-40°N	South Korea	1985-2006	7 270 392	6 555 126	147.0	< 0.0001	0.52587	Increasing
	Japan	1950-2009	47 226 638	44 618 252	15.6	< 0.0001	0.51420	Decreasing
41°N-82°N	Russian Federation	1980-2009	27 226 408	25 784 064	107.7	< 0.0001	0.51360	Increasing

M/F, male births divided by total births.

# Latitude gradients

A clear latitude gradient for M/F is seen in Table 3, which is highly significant (chi-squared test for trend: 8399, P < 0.0001). More boys are born at southern, warmer latitudes.

There was an overall deficit of 1 351 757 male births based on an anticipated M/F of approximately 0.515.

#### Discussion

#### Latitude variation in M/F

M/F exhibits a variable latitude gradient. More boys are born towards the south of Europe while more boys are born toward the north of the North American continent. 4.5.8 The present Asian dataset supports the former latitude gradient, with more boys born at the southern and warmer latitudes.

# Secular variation in M/F

M/F has been shown to be declining in Europe and in North America,6 but these Asian results show the converse, with a temporally increasing M/F. Studies that have analyzed data from before 1950 have noted generally increasing trends in M/F before this period, with a decreasing trend thereafter, but these data were not available for analysis from the available data source.

M/F declines when adverse environmental factors are present. It has been shown, for example, that M/F declines after traumatic events such as after warfare, 10 earthquakes, 11 and a miscellanea of environmental disasters.<sup>12</sup> Such events appear to encourage stressed females to spontaneously abort male fetuses in excess of female fetuses.<sup>13</sup> And it is for this reason that M/F has been proposed as a surrogate sentinel health indicator.3

It may well be for a similar reason that societies that are socioeconomically contracting also exhibit a decline in M/F.14 Conversely, it has been shown that caloric availability per capita correlates positively with M/F.15 Moreover, in countries with good standards of antenatal care, such as in developed countries, wherein prenatal losses are low, M/F tends to be increased, with the converse finding, a lowering of M/F in areas of lower health and antenatal care standards.16

Asian economies are generally in expansion and these macroeconomic circumstances may explain, in part or in whole, the observed overall rise in M/F. But even as early as 1967, data on fetal mortality rates only weakly supported this hypothesis, leading to the conclusion that there may be inherent racial differences that may influence M/F.<sup>17</sup> If economic and health status play a significant role in M/F, varying rates of implementation of socioeconomic and health improvements across different countries in this region may also have played a role in the latitude gradient noted.

James has suggested a 30 year M/F cycle, with a homeostatic mechanism that negatively correlates M/F with the adult sex ratio at the time of conception. 18 The Asian data may partially support this hypothesis only for countries in latitudes 0-23°N, because these exhibit a peak of 0.52233 in 1955–59, dipping to 0.51209 in 1985-89 (20 years later), and rising to 0.52495 in 2005-09 (Table 1). No evident peaks are noted for the other regions.

#### Conclusion

While this study further extends understanding of M/F gradients with latitude, several factors may be interacting to not only produce these gradients, but also to produce differing secular trends in M/F, with, on the one hand, more boys born in cooler latitudes in North America, while more boys are born in warmer latitudes in Asia and Europe. In Asia, these trends produce significant demographic shifts, resulting in a male excess of 1 351 757 births over the period studied.

# Acknowledgments

Mie Inoue and Gauden Galea from the World Health Organization.

**Table 3** Summary statistics and significance testing

	Total boys	Total girls	$\chi^2$ trend	P	UCI	M/F	LCI	Overall trend
0-23°N	46 906 636	43 674 347	291.7	< 0.0001	0.51794	0.51784	0.51774	Increasing
24°N-40°N	51 173 378	51 173 378	187.9	< 0.0001	0.51582	0.51573	0.51563	Increasing
41°N-82°N	27 226 408	25 784 064	107.7	< 0.0001	0.51374	0.51360	0.51347	Increasing

LCI, lower confidence interval; M/F, male births divided by total births; UCI, upper confidence interval.

# References

- 1 James WH. The human sex ratio. Part 1: A review of the literature. *Hum. Biol.* 1987; **59**: 721–52.
- 2 James WH. Evidence that mammalian sex ratios at birth are partially controlled by parental hormone levels around the time of conception. *J. Endocrinol.* 2008; 198: 3–15.
- 3 Davis DL, Gottlieb MB, Stampnitzky JR. Reduced ratio of male to female births in several industrial countries: A sentinel health indicator? *JAMA* 1998; **279**: 1018–23.
- 4 Grech V, Vassallo-Agius P, Savona-Ventura C. Declining male births with increasing geographical latitude in Europe. *J. Epidemiol. Community Health* 2000; **54**: 244–6.
- 5 Grech V, Savona-Ventura C, Vassallo-Agius P. Unexplained differences in the sex ratio at birth in Europe and North America. *Br. Med. J.* 2002; 324: 1010–11.
- 6 Grech V, Vassallo-Agius P, Savona-Ventura C. Secular trends in sex ratios at birth in North America and Europe over the second half of the 20th century. *J. Epidemiol. Community Health* 2003; 57: 612–15.
- 7 Fleiss JL. Statistical Methods for Rates and Proportions, 2nd edn. John Wiley and Sons, New York, 1981; 14–15.
- 8 Navara KJ. Humans at tropical latitudes produce more females. *Biol. Lett.* 2009; **5**: 524–7.
- 9 Fellman J, Eriksson AW. Temporal trends in the secondary sex ratio in Nordic countries. Biodemography. Soc. Biol. 2011; 57: 143–54.

- 10 Zorn B, Sucur V, Stare J, Meden-Vrtovec H. Decline in sex ratio at birth after 10-day war in Slovenia: Brief communication. *Hum. Reprod.* 2002; 17: 3173–7.
- 11 Fukuda M, Fukuda K, Shimizu T, Møller H. Decline in sex ratio at birth after Kobe earthquake. *Hum. Reprod.* 1998; **13**: 2321–2.
- 12 Lyster WR. Altered sex ratio after the London smog of 1952 and the Brisbane flood of 1965. J. Obstet. Gynaecol. Br. Commonw. 1974; 81: 626–31.
- 13 Byrne J, Warburton D. Male excess among anatomically normal fetuses in spontaneous abortions. Am. J. Med. Genet. 1987; 26: 605–11.
- 14 Catalano RA. Sex ratios in the two Germanies: A test of the economic stress hypothesis. *Hum. Reprod.* 2003; **18**: 1972–5.
- 15 Williams RJ, Gloster SP. Human sex ratio as it relates to caloric availability. *Soc. Biol.* 1992; **39**: 285–91.
- 16 Hawley AH. Population composition. In: Hauser PM, Duncan OD (eds). *The Study of Population: An Inventory and Appraisal*. University of Chicago Press, Chicago, 1959; 76–105.
- 17 Visaria PM. Sex ratio at birth in territories with a relatively complete registration. *Eugen. Q.* 1967; **14**: 132–42.
- 18 James WH. What stabilizes the sex ratio? *Ann. Hum. Genet.* 1995; **59** (Pt 2): 243–9.