

MATERNAL MORTALITY

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INTRODUCTION

- Women die as a result of complications during and following pregnancy and childbirth. Most of these complications develop during pregnancy and most are preventable or treatable. Other complications may exist before pregnancy but are worsened during pregnancy, especially if not managed as part of the woman's care.

MATERNAL MORTALITY

Maternal death is defined as death of a woman who is pregnant or within 42 days of the termination of pregnancy irrespective of the duration and the site of pregnancy from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental cause.

MATERNAL MORTALITY RATE

Maternal mortality rate = Total number of female death due to complications of pregnancy, childbirth or within 42 days of delivery from puerperal causes in an area during a year

$$\frac{\text{Total number of female death due to complications of pregnancy, childbirth or within 42 days of delivery from puerperal causes in an area during a year}}{\text{Total number of live births in the same area and year}} \times 100$$

CLASSIFICATION

- Direct maternal death
- Indirect maternal death
- Non obstetric or unrelated deaths

CLASSIFICATION OF MATERNAL DEATHS

- Direct maternal death (75%)

This is death of mother due to complications of pregnancy, delivery or puerperium such as conditions are abortion, ectopic pregnancy, pre eclampsia, eclampsia, puerperal sepsis etc.

CLASSIFICATION OF MATERNAL DEATHS CONTD-

- Indirect maternal death

Death due to underlying medical conditions aggravated but not caused by the pregnancy

CLASSIFICATION OF MATERNAL DEATHS CONTD-

- **Non obstetric or unrelated deaths**

This death of pregnant or postpartum women that were neither caused by nor aggravated by the pregnancy

Eg. motor vehicle accidents, infectious disease such as typhoid, malaria

FACTORS ASSOCIATED WITH MATERNAL MORTALITY

1. Age
2. Parity
3. Socioeconomic strata
4. Antenatal care
5. Social factors

CAUSES OF MATERNAL DEATH

- Haemorrhage
- Sepsis
- Hypertensive disorder in pregnancy
- Anemia
- Infective hepatitis
- Thromboembolism
- Lack of assistance of trained personnel

PREVENTION

- Early pregnancy registration
- Improvement of nutrition status including correction of anaemia
- High risk cases screening and referral
- Institutional delivery
- Prevention of complications such as ruptured uterus, malpresentation
- Treatment of medical conditions

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- Promotion of family planning
 - Provide safe delivery services
 - Periodic refresher courses for continuing education of all levels of health care workers
 - Antimalaria and tetanus prophylaxis

MATERNAL MORBIDITY



DEFINITION

- Maternal morbidity originates from any cause related to pregnancy or its management any time during antepartum, intrapartum and postpartum period usually up to 42 days confinement

The parameters of maternal morbidity are

1. Fever more than 100.4 Fahrenheit and continuing more than 24hrs
2. Blood pressure more than 140/90 mm hg
3. Recurrent vaginal bleeding
4. Haemoglobin less than 10.5gm% irrespective of gestational period
5. Asymptomatic bacteriuria