

MATERNAL MORTALITY RATE

- Maternal death
 - death of a woman while pregnant or during delivery or within 42 days (6 weeks) of termination of pregnancy, irrespective of duration & site of pregnancy, from any cause related / aggravated by pregnancy or its management (but not accidental or incidental)
- ICD classified maternal death into
 - I. Direct obstetric deaths-

Those resulting from obstetric complication of the pregnancy, labour & puerperium intervention Eclampsia,

abortion, hemorrhage

- II. Indirect obstetric deaths- Those resulting from previous existing disease or disease that developed during pregnancy & which was aggravated by physiological effect of pregnancy

- Statistical measure of maternal mortality

- 1. Maternal Mortality Ratio (MMR) - Number of maternal deaths, per lakh live birth during a year

- $MMR = \text{Number of Maternal death in a period}$

- * 1 lakh / Total number of Live Birth in same period

- 2. Maternal Mortality Rate-- Number

of maternal deaths, per lakh woman of reproductive age group during a year

- $MMR_t = \text{Number of Maternal death in a period}$

- $\times 1 \text{ lakh} / \text{Total number of Women of Reproductive age group}$

- 3. Proportion of maternal deaths of woman of reproductive age

- $\text{Proportion of Maternal Death} = \frac{\text{Number of maternal deaths in a given time period} \times 1000}{\text{total deaths of women of reproductive age group}}$

- Approach for measuring maternal mortality

- i. Civil registration system-
Registration of births &

deaths

- ii. Household survey- Where civil registration data is not available
- iii. Sisterhood method
 - Interviewing a representative sample about survival of all their adult sister
- iv. RAMOS Reproductive Age Mortality Studies (RAMOS) Identifying the cause of death of a women of reproductive age group in a defined area
- v. Verbal autopsy- Interview with family or community members where the cause of death is not available
- vi. RHIME Representative/re-sampled/

routine, Household Interview of mortality, with Medical Evaluation enhanced form of verbal autopsy

- vii. Censes- This approach eliminates sampling error
- Determinants of maternal mortality in India
 - I. Medical causes
 - 1. Obstetric causes [Hyper He Obstructed In Unsafe Toxic OBG]
 - i. Hypertension
 - ii. Hemorrhage
 - iii. Obstructed labour
 - iv.

Infection

- v. Unsafe abortion
- vi. Toxemia of pregnancy (most rare cause }
- 2 .Non-obstetric causes
 - i . Anemia
 - ii. Associated diseases
 - iii. Accidents
 - iv. Malignancy
- II. Social factors -
 - Age at childbirth
 - Too close

pregnancies

- Parity
- Family size
- Poverty
- Illiteracy

CAUSES OF MATERNAL DEATHS

- Maternal death mostly occurs from 3rd trimester to 1st week after birth
- Mortality risks for mothers are elevated within 2 days after birth

Majority i.e., 70% maternal death occur in postpartum period of which 45%

deaths occur in first 24 hours of delivery

- 1. Hemorrhage
- 2. Other conditions
- 3. Sepsis
- 4. Abortion
- 5. Obstructed labour
- 6. Hypertensive disorders (preeclampsia) (5%)

• Preventive measure

s • Early registration of pregnancies

- At least 4 antenatal

checkups

- Correction of anemia
- Tetanus prophylaxis
- Institutional deliveries or home delivery by trained Local Dais (LD)
-) • Prevention of complications
- Eclampsia hemorrhage & infections
- Treatment of medical conditions- hypertension, diabetes etc.
- Promotion of family planning
- Safe abortion

services

- LaQshya (Labour Room Quality Improvement Initiative)

- To improve the quality of care, provided in labour room & maternity OT (for safe delivery & newborn care)

- PMSMA (Pradhan Mantri Surakshit Matritva Abhiyan)

- To provide quality & free of cost ANC services to women in 2nd/3rd trimester in designated government hospitals 9th of every month

- Dakshata Training of health care providers to improve MCH care during institutional