

Alternative strategies to reduce maternal mortality in India

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A study by Sue J. Goldie and colleagues from the Harvard School of Public Health published this week in *PLoS Medicine* finds that better family planning, provision of safe abortion, and improved intrapartum and emergency obstetrical care could reduce maternal mortality in India by 75% in less than a decade.

Most maternal deaths in developing countries are caused by severe bleeding after childbirth, infections soon after delivery, blood pressure disorders during pregnancy, and obstructed (difficult) labor. The authors capture the complexity of multiple factors that impact on [maternal mortality](#) using a computer-based model that simulates the progress of women through pregnancy and childbirth in rural and urban India, and estimates clinical outcomes (pregnancies, complications, live births, or deaths), costs, and cost-effectiveness (a metric that indicates the 'value' of an intervention, and is expressed as 'cost per year of life saved').

The authors find that in just 5 years, more than 150,000 maternal deaths could be prevented by reducing unmet contraceptive needs. They further find that an integrated approach (improved access to [family planning](#) and safe abortion, coupled with stepwise improvements in skilled birth attendants, improved care before and after birth, reduced home births, and improved emergency obstetrical care) could ultimately prevent more than 3 out of 4 [maternal deaths](#). For those women who deliver at home, integrated strategies include better recognition of when referral is needed and improved access to transport. All of these interventions either save money or are cost-effective.

In 2005, a woman's lifetime risk of maternal death in India was 1 in 70. These findings therefore have significant public health relevance. Moreover, these data also indicate that the fifth Millennium Development Goal (MDG 5) (that the global maternal mortality rate would be reduced to a quarter of its 1990 level by 2015), may be within reach in India.

More information: Goldie SJ, Sweet S, Carvalho N, Natchu UCM, Hu D (2010) Alternative Strategies to Reduce Maternal Mortality in India: A Cost-Effectiveness Analysis. PLoS Med 7(4): e1000264. [doi:10.1371/journal.pmed.1000264](https://doi.org/10.1371/journal.pmed.1000264)

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