

Eliminating maternal mortality could extend life expectancy in reproductive ages

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Maternal death rates represent the single largest health discrepancy between developed and developing populations, with nearly all - over 99%—maternal deaths worldwide occurring in developing countries and over half of them in sub-Saharan Africa countries. Eliminating maternal mortality, which is defined as the deaths related to pregnancy, would result in a gain of over a half year (0.6 years) in life expectancy worldwide, according to a new study by researchers at Johns Hopkins Bloomberg School of Public Health. The study is published February 13 in *PLOS ONE*.

Over the twentieth century, women's life expectancy in developed countries increased by 0.5 years due to a near elimination of maternal mortality. In sub-Saharan African countries, the possible achievable gains from eliminating maternal mortality fluctuate between 0.24 and 1.47 years, or 6% and 44% of potential gains.

"This gain in life expectancy may seem a small increase at a first glance, but the added survival time takes place during the most productive ages of human life and carries with it non-trivial socio-economic implications for families, workforces, and communities," says Vladimir Canudas-Romo, lead author.

The study focuses on women's Reproductive-Age Life Expectancy, which covers the ages of 15 to 49. While maternal deaths are a rare event, eliminating them yields important benefits, including a significant increase to what many consider the most productive ages of human life.



Another benefit would be improved health care, since one underlying assumption of maternal mortality is that it stems from insufficient health services. This would be a bonus to continuing along the trajectory of Millennium Development Goal 5, a reduction in maternal mortality of 75% by 2015.

"If programs that help promote female education, increase access to skilled birth attendants, expand access to family planning care, and collect health information properly all continue to work together to reduce maternal mortality, the increase [in life expectancy] suggested in our results will be eventually achieved." Monitoring levels and trends in maternal mortality and causes of death in these critical ages for both women and men should be a top priority among health system strengthening efforts in all countries, and particularly in those that are lagging in their achievement of the MDG 5.

The United Nations estimates that 287,000 <u>maternal deaths</u> occurred worldwide in 2010, with over half in sub-Saharan Africa. The estimated MMR (maternal mortality ratio) in sub-Saharan Africa is 500 deaths per live births, more than double the estimated 210 deaths per 100,000 live births worldwide. The two countries with the highest MMR's, Chad and Somalia, respectively with an MMR of 1,100 and 1,000, are located in this region.

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