

UK sees a fall in maternal deaths

December 9 2014



Maternal deaths in the UK have dropped from 11 per 100,000 women giving birth in 2006–08 to 10 per 100,000 women giving birth in 2010–12, according to a report led by the National Perinatal Epidemiology Unit, University of Oxford.

The report, by a team of academics, clinicians and charity representatives called MBRRACE-UK, included all 357 cases of women in Britain who died during or within 6 weeks of the end of their pregnancy in those four years.

It was commissioned by the Healthcare Quality Improvement Partnership, and forms the 2009–2012 UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity.

The researchers found that the decrease in maternal deaths is statistically significant, and has been driven by a reduction in deaths due to [pregnancy complications](#) such as eclampsia, blood loss or blood clots – continuing a 10 year trend.

However, the majority of women who died during or within 6 weeks of the end of their pregnancy died from other medical conditions, such as heart disease, neurological conditions or mental health problems.

Two-thirds of mothers died from these indirect causes rather than pregnancy complications, and the rate of indirect deaths has not come down in the past 10 years.

Furthermore, three-quarters of women who died had pre-existing medical and [mental health problems](#) before they became pregnant.

The Oxford University researchers say there are key areas that the health service can look to improve in order to reduce the number of maternal deaths from these indirect causes.

The report says that women with pre-existing conditions need better pre-pregnancy advice as well as joint specialist and maternity care through pregnancy and birth.

'There is a need, above all, for coordinated and concerted action at all levels to improve the care of women with medical complications before, during and after pregnancy,' says Professor Marian Knight of the National Perinatal Epidemiology Unit at Oxford University, who led the enquiry.

She adds: 'It is important to remember that deaths are very rare. They occur in 1 in 10,000 women giving birth in the UK.'

'The fact that the maternal mortality rate continues to come down at a time when we are seeing greater numbers of births in the UK and more complex pregnancies shows the dedication of so many doctors, nurses, midwives and other health professionals to improving maternity care.'

Professor Jennifer Kurinczuk, the National Lead for the MBRRACE-UK programme at the National Perinatal Epidemiology Unit added: 'There is good news in this report: deaths are decreasing but there are still things we can do based on existing evidence-based guidelines. We owe that to the families left behind. We need to be able to say to the relatives of women who died that we are learning every lesson we can. Each woman included in this confidential enquiry was someone's mother, daughter, sister, wife or partner. You can't read all these stories and not be affected by them.'

This year's report also highlights blood poisoning, or sepsis, and flu vaccination as areas where action could make a difference in reducing [maternal deaths](#).

The researchers reviewed the care of women who died from sepsis and also women who survived an episode of septic shock. They emphasise the need for healthcare staff to 'Think Sepsis' at an early stage when seeing an unwell pregnant or recently pregnant woman. They say it is crucial that women with sepsis receive an early diagnosis, are put on antibiotics rapidly and that senior doctors and midwives are consulted quickly.

The group also states that increasing flu vaccination rates among pregnant women will save lives. One in 11 of the women who died had flu. And more than half of these deaths occurred after a flu vaccine was made available to pregnant women.

The report, called 'Saving Lives, Improving Mothers' Care: Lessons

learned to inform future [maternity care](#) from the 2009–2012 UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity', is published on Tue 9 Dec at a meeting at the Royal College of Obstetricians and Gynaecologists in London.

This is the 60th consecutive year in which the care of women who died during or after pregnancy has undergone detailed review in the UK. The aim is to learn what lessons are possible for improving care and recommend changes to reduce deaths in the future.

For the first time, the report includes the care of women in Ireland, and the care of [women](#) who survived severe illness and complications around the time of birth.

Provided by Oxford University

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