

Pregnancy linked to higher risk of death from traumatic injury, study finds

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Studies have found that one in six pregnant women have been abused by a partner - beaten, stabbed, shot, or even murdered. New research shows the risks to these women may be especially profound: Pregnant women

are twice as likely to be a victim of an assault-related trauma (including suicide) - and die from their injuries - than an accident-related trauma like car accidents or falls, compared to women who are not pregnant, according to a new study from researchers in the Perelman School of Medicine at the University of Pennsylvania. The findings come from a Pennsylvania statewide analysis of hospital trauma cases occurring over a decade, and will be presented Sunday at the American Congress of Obstetricians & Gynecologists' (ACOG) Annual Clinical and Scientific Meeting in San Diego (poster 36G).

"Trauma from assaults or accidents complicates 1 in 12 pregnancies and is the leading non-obstetric cause of death among [pregnant women](#). Not only is it associated with complications for the baby, but management of traumatic injuries in pregnant patients has its unique challenges, given the physiologic changes of pregnancy and restrictions doctors may face when treating pregnant patients," said the study's lead author Neha Deshpande, MD, a clinical resident of Obstetrics and Gynecology at the Perelman School of Medicine at the University of Pennsylvania.

"Despite the severity of the issue, little is known about how [trauma](#) actually impacts pregnant women since accidental and incidental causes of death are excluded in many statewide and national maternal mortality reviews. The striking results of our study suggest that widespread screening for violence and trauma during pregnancy may provide an opportunity to identify women at risk for death during pregnancy."

Previous research on the topic has shown that violence is common in pregnancy - even in relationships where previously there were no incidents - but the new study is the first large statewide analysis highlighting the effect of violent trauma on maternal mortality. For their analysis, the researchers used data from the Pennsylvania Trauma Outcomes Study database, a comprehensive and validated registry which includes records of admissions to all accredited trauma centers in the state. The analysis focused on admissions from 2005 through 2015, and

included nearly 45,000 cases of trauma among victims who were defined as women of childbearing age (14-49).

The researchers found that pregnant trauma victims, on average, suffered less severe injuries than their non-pregnant counterparts. However, despite less severe injuries, pregnant women were nearly twice as likely to be dead when they arrived at the hospital, or die in the hospital. In particular, assault-related trauma was about three times more deadly than accident-related trauma. In addition, after suffering a violent assault, pregnant women were 4.4 times more likely to be transferred to another facility for obstetric services and support.

"Since the typical definition of maternal deaths includes only those directly caused or impacted by pregnancy, it does not include accidental or incidental causes of death, making it difficult to accurately gauge the burden of trauma-related deaths on [maternal mortality](#)," said senior author Corrina M. Oxford, an assistant professor of Clinical Obstetrics and Gynecology at the Perelman School of Medicine at the University of Pennsylvania. "However, evidence presented in our study suggests this is a pervasive issue that requires further attention to ensure these women, and their babies, are being properly cared for."

Results also showed that nearly 1 in 5 pregnant women reported a psychiatric illness or arrived at the hospital following a suicide attempt. Minority and uninsured women were also significantly more likely to experience assault. The authors say the findings point to an opportunity for intervention to safeguard pregnant women, and they recommend universal screening of pregnant [women](#) at obstetric clinics for assault and mental illness, similar to screenings for postpartum depression.

Provided by Perelman School of Medicine at the University of Pennsylvania

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