

A study on maternal mortality in Mozambique detects a major diagnostic error in a high percentage of deaths

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An analysis of a series of maternal deaths in Maputo's central hospital, in Mozambique, reveals a major diagnostic error in almost 40% of the

deaths. The results, published in *Lancet Global Health*, show there has been scarce improvement over the last ten years. The study was led by the Barcelona Institute for Global Health (ISGlobal), an institution supported by the "la Caixa" Foundation, in collaboration with Manhica Health Research Centre (CISM) in Mozambique.

Although the number of women in low- and [middle-income countries](#) that give birth in [health](#) centers has increased over the last years, [maternal mortality](#) remains extremely high in these countries: more than 300,000 women die during pregnancy, delivery or puerperium every year worldwide, and 99% of these deaths occur in poor countries.

"It is not only about increasing access to [health services](#), but also increasing the quality of the care provided," says Clara Menéndez, director of the Maternal, Child and Reproductive Health Initiative at ISGlobal and first author of the study. "A key—and often neglected—element for improving healthcare quality is the correct diagnosis of diseases that can lead to death in pregnant women," she adds.

In this study, the team led by Jaume Ordi, ISGlobal researcher and pathologist at the Hospital Clinic, retrospectively analyzed a series of deaths that occurred in Maputo's central hospital, in southern Mozambique, between November 2013 and March 2015. They compared the [clinical diagnosis](#) with diagnosis by complete autopsy and they observed that in almost 40% of the deaths there was a major diagnostic error where, if a correct diagnosis had been made, [death](#) could possibly have been avoided.

"If we compare these results with a similar study done ten years earlier, we can see that the diagnostic capacity has barely improved and has even worsened for some pathologies such as puerperal infections," says Ordi.

These results highlight the need to improve diagnostic capacities through

the access to better diagnostic tests and strengthening clinical skills among the healthcare workers. "The practice of autopsies and the joint analysis of the diagnostic discrepancies with clinicians and pathologists could be of great help for the medical staff providing care for pregnant women," concludes Menéndez.

More information: Clara Menéndez et al, Quality of care and maternal mortality in a tertiary-level hospital in Mozambique: a retrospective study of clinicopathological discrepancies, *The Lancet Global Health* (2020). [DOI: 10.1016/S2214-109X\(20\)30236-9](https://doi.org/10.1016/S2214-109X(20)30236-9)

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