MATERNAL MORTALITY

Maternal mortality, or death due to maternal causes, includes deaths due to causes related to or aggravated by pregnancy or pregnancy management, and excludes deaths occurring more than 42 days after the end of the pregnancy and deaths of pregnant women due to external causes (such as injury). The rate of maternal mortality in the United States declined dramatically over the last century; however, this trend has reversed somewhat in the last several decades and racial and ethnic disparities persist.

In 2007, the latest year for which data are available, the maternal mortality rate was 12.7 deaths per 100,000 live births, compared to a low of 6.6 per 100,000 in 1987. This represents a total of 548 women who died due to maternal causes in 2007. Some of this increase observed over the past decades may be due to changes in the coding and classification of maternal deaths.

The maternal mortality rate among non-Hispanic Black women was approximately 2.7 times the rate for non-Hispanic White women (28.4 versus 10.5 per 100,000), while the maternal mortality rate among Hispanic women was 8.9 deaths per 100,000 live births.

Causes of maternal death are classified as direct, indirect, or unspecified. Some of the most common direct causes are complications related to the puerperium, or period immediately after delivery (2.2 per 100,000), eclampsia and pre-eclampsia (1.5 per 100,000), hemorrhage of pregnancy, childbirth, and placenta previa (0.9 per 100,000), and pregnancy with abortive outcome (0.7 per 100,000). Indirect causes occurred at a rate of 3.1 per 100,000, and comprised deaths from pre-existing conditions complicated by pregnancy. The rate of maternal deaths from unspecified causes was 0.5 per 100,000.

For more information on maternal morbidity, please see Women’s Health USA 2011 available at: http://www.mchb.hrsa.gov/publications/index.html.
