Magnitude and pattern of maternal near-miss cases admitted to Women’s Health Hospital, Assiut University

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Abstract:

Introduction Maternal near-miss (MNM) is one of the related concepts to maternal mortality. MNM is a special category of survivors, whose stories provide unique insights and valuable information on maternal mortality. Measuring MNM beside maternal mortality and identifying its causes is essential, and should be calculated regularly for the purpose of planning, monitoring, and evaluation of provided maternal healthcare. Objectives The objectives of the study were to determine the magnitude and to identify the patterns of MNM among cases admitted to Women’s Health Hospital, Assiut University, Egypt. Methodology This paper is a part of a larger case-control prospective study; however, for this analysis, we are presenting only the findings of the MNM cases. (The full profile of the cases and controls was presented in another paper.) The study was conducted at Women’s Health Hospital, Assiut University and included 342 MNM cases by total coverage of all eligible cases who met the criteria of MNM identification published in WHO bulletin (2011) throughout the 12 months period of the study. A checklist was used to collect data from the hospital records of eligible respondents. Results During the 12 months period of the study, there were 17,503 deliveries and 16,972 live births. The maternal mortality ratio was 276 per 100,000 live births and the MNM incidence ratio was 20 per 1000 live births. This means that there was one maternal death for every seven cases of MNM. The mean age of MNM cases was 28.4 ± 8.5, whereas the mean gestational age of MNM was 35.66 ± 8.6 weeks. The main direct obstetric causes of MNM were hypertensive disorders of pregnancy (49.8%), obstetric hemorrhage (38.3%) and dystocia (32.5%). On the other hand, cardiovascular disorder was the most prevalent nonobstetric cause among MNM cases (48.8%). The peak frequency of the cases occurred during the summer season. Conclusions and recommendations MNM and maternal mortality are alarmingly high. Hypertensive disorders of pregnancy and obstetric hemorrhage were the two main direct obstetric causes of near misses that require strict and quick management protocols.

Keywords:

maternal near-miss, pregnancy complications, Severe maternal morbidity, WHO

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