

GEORGIA: MATERNAL MORTALITY

WHAT YOU SHOULD KNOW:

The Maternal Mortality Review Committee (MMRC) reviews deaths that occur during pregnancy or within a year of the end of pregnancy to determine cause, contributing factors, and to recommend interventions to prevent pregnancy-associated deaths in Georgia.

THE NUMBERS

(2015-2017)

68.9

PREGNANCY-ASSOCIATED DEATHS

PER 100,000 LIVE BIRTHS

25.1

PREGNANCY-RELATED DEATHS

PER 100,000 LIVE BIRTHS

87%

WERE PREVENTABLE

PREGNANCY-RELATED

2.3x

BLACK WOMEN
NON-HISPANIC
MORE LIKELY TO DIE FROM
PREGNANCY-RELATED CAUSES THAN
WHITE WOMEN
NON-HISPANIC

PREGNANCY-ASSOCIATED, BUT NOT RELATED:

A death during pregnancy or within one year of the end of pregnancy due to a cause that is not related to pregnancy.

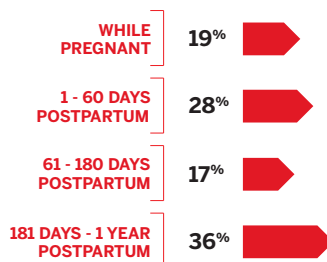
PREGNANCY-RELATED:

A death during pregnancy or within one year of the end of pregnancy from pregnancy complication, a chain of events initiated by pregnancy, or the aggravation of an unrelated condition by the physiologic effects of pregnancy.

THE LEADING CAUSE OF DEATHS (PREGNANCY-RELATED)

- Cardiovascular / Coronary • Cardiomyopathy • Hemorrhage • Infection
- Cerebrovascular Accidents

PREGNANCY ASSOCIATED DEATHS BY TIMING OF DEATH IN RELATION TO END OF PREGNANCY IN GEORGIA



THE LEADING CAUSES OF DEATH (PREGNANCY-ASSOCIATED, BUT NOT RELATED)



MATERNAL MORTALITY REVIEW COMMITTEE RECOMMENDATIONS

- Georgia should **mandate an autopsy** be performed on all pregnancy-associated deaths.
- Providers, insurance providers, and birthing hospitals **should ensure case management is provided** for women **during pregnancy and postpartum**.
- Georgia should **extend Medicaid coverage up to one year postpartum**.
- Obstetric providers should **use a validated instrument for screening perinatal mood and anxiety disorders** at the first prenatal visit, in each subsequent trimester, and at the postpartum visit.
- Providers should **initiate pre-pregnancy counseling on all women of reproductive age**, in accordance with the American College of Obstetricians and Gynecologists recommendations to optimize health, address modifiable risk factors, provide education about healthy pregnancy, and family planning counseling.