

Maternal Morbidity and Mortality Reporting

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Dear Editor,

Maternal Morbidity and Mortality reporting standards in the Republic of Ireland are unparalleled internationally, and we must ensure that this trend is maintained and supported by healthcare professionals, the healthcare system and Oireachtas Éireann.

Since its' establishment in 2007, the National Perinatal Epidemiology Centre, based in University College Cork has been providing a perinatal epidemiological monitoring service, with the aim of translating epidemiological data and evidence-based practise into improved clinical services for women and babies.¹

Recent reports have looked at rolling triennial data to allow continuous longitudinal comparison of rates here nationally, and also contribute to international data published by the National Perinatal Epidemiology Unit in the MBRRACE-UK reports.² However, looking further internationally, there are inconsistencies with and untimely reporting of similar information from other countries with developed obstetric services. For example, in the United States, the Centers for Disease Control and Prevention reports differing parameters than their European counterparts, and most recent publications are for 2014, over 6 years ago. Additionally, maternal mortality reporting in the United States had been paused for ten years due to concerns regarding inaccurate reporting. In Australia, there are comprehensive maternal mortality reporting systems, yet maternal morbidity reporting is inconsistent between states and does not allow for comparison nationally or internationally. Closer to home, from a European perspective, the Euro-Peristat was last published with 2015 data, also noting differences in reporting between countries which can limit the applicability of findings and thus recommendations.

The Sustainable Development Goals of the World Health Organisation³ encompass an aim to reduce maternal mortality ratio to fewer than 70 maternal deaths per 100,000 and aim for national reductions of 2/3 from 2010 rates.

There must be a consistency in the reporting of these ratios, as well as expansion of these to include maternal morbidity reporting, given that rates of morbidity are increasing internationally, with reasonably static levels of maternal mortality in developed countries.

In order to maintain the high quality and standard of reporting here in Ireland to inform us nationally but allow us to contribute nationally, we must ensure that there is maternal morbidity and mortality reporting from within the healthcare services, not just limited to our maternity hospitals, but also morbidities and mortalities that occur in the community and acute hospital settings. Funding, strategic support and political support must be provided to ensure our contributions can continue to make us one of the internationally leading countries in the publication of this data, but also the provision of solutions to improve rates.

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References:

1. National Perinatal Epidemiology Centre | University College Cork [Internet]. University College Cork [cited 12 February 2021]. Available from: <https://www.ucc.ie/en/npec/>
2. Knight M, Bunch K, Tuffnell D, Shakespeare J, Kotnis R, Kenyon S et al (Eds.) on behalf of MBRRACE-UK. Saving Lives, Improving Mothers' Care - Lessons learned to inform maternity care from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity 2016-18. Oxford: National Perinatal Epidemiology Unit, University of Oxford 2020.
3. Sustainable Development Goals [Internet]. World Health Organisation [cited 12 February 2021]. Available from: https://www.who.int/health-topics/sustainable-development-goals#tab=tab_1