

Beyond maternal death: improving the quality of maternal care through national studies of 'near-miss' maternal morbidity

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Plain English summary

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Plain English summary

Studies of maternal mortality have been shown to result in important improvements to women's health. It is now recognised that in countries such as the UK, where maternal deaths are rare, the study of severe complications of pregnancy, so called 'near-misses', provides additional information to help disease prevention and treatment. The objectives of this programme were to investigate risk factors, management and associated outcomes of 'near-misses' and explore methods for reviewing the quality of care. We conducted an interview study of women and their partners and identified that having a 'near-miss' can have long-lasting effects on the health, particularly the mental health, of both women and their partners. We investigated reviewing women's care using two different approaches: external review ('confidential enquiry') and local hospital internal reviews. We found that the local reviews were less likely to report detailed clinical messages for care and less likely to involve a range of different specialist doctors and midwives. We collected anonymous information nationally on all women who had specific severe pregnancy complications, from which we were able to determine that older women and women with previous caesarean deliveries, particularly those that underwent induction of labour, were at a 1.5- to 14-fold higher risk of complications. When we investigated further, women who had a medical or mental health problem before they became pregnant were at higher risk of dying from a severe pregnancy complication. Further research is needed into care for women who have pre-existing medical and mental health problems before, during and after pregnancy.

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