

Mortality in acute gynecology: a developing country perspective.

Abstract:

Over a 20-month period 109 deaths were recorded in the Acute Gynecology Ward, Kenyatta National Hospital, Nairobi; a rate of 5 deaths per month. Forty-one percent of the deaths were directly attributable to pregnancy and 46% were due to malignancy (mainly cervical carcinoma). Of the dead, 12.4% were teenagers and 63% below 35 years in age. They were generally of low parity. A tragic picture is presented of death of young women in their prime from almost entirely preventable causes. The need for improved maternal care, including family planning and cytological screening for cervical carcinoma is discussed and emphasized. PIP:Over a 20-month period, 109 deaths were recorded in the Acute Gynecology Ward, Kenyatta National Hospital, Nairobi; a rate of 5 deaths per month. 41% of the deaths were directly attributable to pregnancy and 46% were due to malignancy (mainly cervical carcinoma). Of the dead, 12.4% were teenagers and 63% below 35 years in age. They were generally of low parity. A tragic picture is presented of death of young women in their prime from almost entirely preventable causes. Improved maternal care to prevent these deaths may be achieved through better family planning and cytological screening facilities. Other approaches include stronger community-based health care, stronger referral systems, and a better transport infrastructure. Improved education among women has been shown to increase utilization of these services.