

Abstract

MATERNAL DEATHS AND MATERNAL NEAR MISS CASES IN 20 SELECTED FACILITIES IN KENYA.

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Background: Globally Maternal Mortality has reduced by around 30% as a result of efforts to meet the Millennium Development Goal 5. Unfortunately in Kenya the maternal mortality stands at 488 per 100,000 live births equating to around 7,500 deaths per year which is not following the global trend. In 2011 the World Health Organization conducted a Multicountry survey on Maternal and Newborn Health (WHOMCS) in 29 counties Kenya being one of them.

Objective: The main objective of this survey was to study the incidence and the management of maternal and neonatal conditions associated with maternal and neonatal mortality in a worldwide network of health facilities.

Methods: In Kenya 20 facilities in 3 provinces –Central, Rift Valley and Nairobi participated in the survey from 18th July to 17th October 2011. The survey was facility based review of records of all women who delivered, all near miss cases and all maternal deaths in the 20 facilities within the 3 month data collection period.

Results: In Kenya of the 20,753 participants, there were 75 maternal near misses cases and 55 maternal deaths. Of the cases of maternal deaths 55% were married, 72% were Para 4 or less and only 14% had secondary education. 24% of women were antenatal less than 28 week, 13% were beyond 28 weeks and 63% were intrapartum /postpartum. 62% of the deliveries were by c/section. Of the near miss cases 89% were married, 76% were Gravida 4 or less, 58% of the deliveries were by c/section. Major causes of maternal deaths and near miss cases were Hypertensive disease and Haemorrhage

Discussion: The Near Miss Identification criteria is discussed with the aim that all facilities start incorporating this into routine data collection. The maternal near miss cases and maternal deaths will be discussed in detail with regards causes, pregnancy status; gestational age if antenatal, referral status, length of hospital status, interventions carried out and the contribution of the various facilities that participated.