
- White: 12.4
- Black: 40.7
- American Indian/Alaska Native: 30.8
- Asian/Pacific Islander: 13.7
- Hispanic: 11.5
PRMR by Race/Ethnicity and Age in the U.S. PMSS, 2006–2015

PRMR by Race/Ethnicity and Education in the U.S. PMSS, 2006–2015
State Pregnancy-Related Mortality Ratios, PMSS, 2006-2015


Disparity Ratio: 3.1 3.3 2.8

- Heart disease and stroke cause most deaths overall
- Obstetric emergencies, like severe bleeding and amniotic fluid embolism, cause most deaths at delivery
- In the week after delivery, severe bleeding, high blood pressure and infection are most common
- Cardiomyopathy causes most deaths 1 week to 1 year after delivery.

Achieving Comprehensive Surveillance: Reviewing Maternal Deaths

- Challenging to track pregnancy-related deaths with vital statistics
- Maternal Mortality Review Committees (MMRCs) review deaths within one year of pregnancy
- Gather data from multiple sources to provide a deeper understanding
Better Understand Causes and Contributing Factors, Data from 9 MMRCs

Contributing Factors & Recommendations from MMRCs

On average 3 - 4 contributing factors identified for each death

Working with MMRCs to Address Emerging Issues: Pregnancy-associated Overdose Deaths

- CDC funding comprehensive review of all pregnancy-associated overdose deaths in 5 states
- Timely and Effective Use of MMRC overdose death findings
  - TA to ensure completeness, quality and use of data
  - Development and implementation of automated report from MMRIA
- Analyzing data across MMRCs to identify and describe prevention opportunities

CDC’s Activities to Prevent Maternal Deaths

Ensure Robust Data

Better Understand and Prevent Maternal Deaths

Improve Access to Quality Care
Improving the Quality of Care for Moms and Babies: Perinatal Quality Collaboratives

CDC funds 13 multidisciplinary teams working to improve outcomes for maternal and infant health by:

- Addressing gaps by working with clinical teams, experts and stakeholders
- Reducing variation and optimizing resources to improve perinatal care and outcomes
- Spreading best practices, including efforts with states that aren’t funded through the National Network of Perinatal Quality Collaboratives

Thank you!

For more information, please contact
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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.