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**INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES**<http://doi.org/10.5281/zenodo.1561890>Available online at: <http://www.iajps.com>**Research Article****MATERNAL MORTALITY RATE (MMR) IN LGH LAHORE****¹Dr. Rohma Akhtar, ²Dr. Hannana Akhtar, ³Dr. Sehrish Mansoor, ⁴Dr. Moshayyadah Akhtar, ⁵Dr. Rana Muhammad Akhtar Khan**¹Lahore General Hospital, Lahore. rohmaakhtar1@gmail.com²Services Hospital, Lahore. Hannanaakhtar@gmail.com³Lahore General Hospital, Lahore. sehrish.mansoor@gmail.com⁴Demonstrator, Avicenna Medical College, Lahore. moshayyadah04@gmail.com⁵Prof/HOD Community Medicine Dptt, Avicenna Medical College, Lahore.
ranakhtar@gmail.com**Abstract:****Objective;** To determine the frequency of maternal mortality rate (MMR) in LGH Lahore**Methodology:** This was a retrospective analysis done at LGH Lahore during January 2017 to December 2017. In this study all the females of any age presented with any length of pregnancy either booked or unbooked were included. The cases with any accident or other medical causes like end stage liver, renal or heart failure were excluded. Detailed sociodemographic and clinical data was assessed and they were looked for the cause of death through their hospital data analysis.**Results:** In the present study there were total 4730 deliveries at LGH hospital and out of these 21 deaths occurred due to various causes and the MMR was 444/100,000 liver births. Majority of deaths occurred between age group 21 to 30 years affecting 13 (61.90%) of cases. Mortality was also high in cases that were uneducated (76.19%), had rural residence (80.95%), belonged to poor socioeconomic status (90.47%) and were multiparous (66.67%). PPH was the most common cause seen in 7 (33.33%) of cases followed by sepsis seen in 5 (23.81%) of cases.**Conclusion:** Maternal mortality rate is still high in Pakistan and is more in cases with poor socioeconomic status, rural residence, un booked cases and PPH is the leading cause to death.**Key words:** MMR, PPH**Corresponding author:****Dr. Rohma Akhtar,**
Lahore General Hospital,
Lahore.
rohmaakhtar1@gmail.com

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INTRODUCTION:

Maternal mortality is one of the burning topics in the health care system not only in Pakistan but also worldwide. It is defined as the death that occurs in a female while she is pregnant or within six weeks of termination of pregnancy without any accidental causes. World health organization has put a great stress on documentation of the incidence and the variety of causes leading to it. According to a survey there were around 50,000 maternal deaths and the global incidence was around 400 per 100000 live births [1,2].

Pakistan is one of the developing countries and is also affected by these issues and it is states that in Pakistan around 15% of all pregnancies encounter medical or some obstetrical complications during their whole course. Despite the advancement in medical sciences, diagnostic facilities and early managements, the rate is still high in Pakistan and around 30 thousand women die each year during this period [2,3].

There are wide range of etiologies that can lead to maternal mortality and include, hypertensive disorders of pregnancy, intra and post partum hemorrhages, sepsis, complicated labor, abortion and anemia etc. The major steps to decrease such mortalities can be a planned pregnancy, regular follow ups and early anticipation of the complications and then due management [4-6].

Objectives:

To determine the frequency of maternal mortality in LGH Lahore

Study Design:

Retrospective analysis.

Study setting:

Lahore General Hospital, Lahore

Duration of Study:

January to December 2017

Sampling Technique:

Non-probability, consecutive sampling.

In this study all the females of any age presented with any length of pregnancy either booked or unbooked were included. The cases with any accident or other medical causes like end stage liver, renal or heart failure were excluded. Detailed sociodemographic and clinical data was assessed and they were looked for the cause of death through their hospital data analysis.

Statistical analysis;

The data was entered and analyzed by using SPSS-version 23. Frequency and percentages were calculated for qualitative data and mean and standard deviation for quantitative data.

RESULTS:

In the present study there were total 4730 deliveries at LGH hospital and out of these 21 deaths occurred due to various causes and the MMR was 444/100,000 live births. Majority of deaths occurred between age group 21 to 30 years affecting 13 (61.90%) of cases (table 1). Mortality was also high in cases that were uneducated (76.19%), had rural residence (80.95%), belonged to poor socioeconomic status (90.47%) and were multiparous (66.67%) as in table 02. PPH was the most common cause seen in 7 (33.33%) of cases followed by sepsis seen in 5 (23.81%) of cases as in table 03.

Table No. 1. Age groups (n=21)

Age Groups (Years)	Numbers	%
< 20	4	19.05
21-30	13	61.90
> 30	4	19.05

Table No. 2. Effect Modifiers (n=21)

Variables	Number	Percentage
Educational status		
Educated	5	23.81
Uneducated	16	76.19
Residence		
Rural	17	80.95
Urban	4	19.05
Socioeconomic status		
Good	2	9.53
Poor	19	90.47
Booking		
Un-booked	17	80.95
Booked	4	19.05
Parity		
Single	7	33.33
Multiple	14	66.67

Table No. 3. Cause of death (n=21)

Cause of death	Numbers	%
PPH	7	33.33
Sepsis	5	23.81
Hypertensive disorders	3	14.28
IPH	2	9.52
DIC	2	9.52
Uterine rupture	1	4.76
PE	1	4.76

DISCUSSION:

Maternal mortality i.e. pregnancy related mortality is one of the formidable conditions that are truly controllable and can be reversed by prompt steps taken in the right direction. More than 5 lac people die each year worldwide and majority of them to belong to the under developed countries including Pakistan. In Pakistan the the incidence of maternal mortality rate is found to be around 327 to 1300 per 100,000 live births [7]. In other studies hemorrhage and DIC were thought to be the most common causes as well and were seen to account for more than 60% of the total deaths [8].

In the present study. This was similar to the studies done in the past where hemorrhages were the most common cause of death and was seen in 21% of the

cases, followed by hypertensive disorders like eclampsia and pre eclampsia seen in 18.6% of the cases and sepsis in 13.3% of cases. Abortion was seen as cause of MMR in 11% if the cases in SOGP surgery [9].

Maternal mortality rate was seen as 430 per 100,000 live births, which was lower than the previous studies done in the same region; however, it was higher as compared to the other areas.¹⁰⁻¹² The reason of this higher results can be explained by the fact that this is a tertiary care centre and hence all the complex cases are presented here. This was also strengthened by the results that the majority of the death occurred were in un booked cases and also from the rural population which were referred due to some complication.

CONCLUSION:

Maternal mortality rate is still high in Pakistan and is more in cases with poor socioeconomic status, rural residence, un booked cases and PPH is the leading cause to death.

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