

Causes of Perinatal Mortality and Maternal Mortality

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DESCRIPTION

New-born's death serves as the foundation for calculating the perinatal mortality rate. There are differences in how early fetal and late neonatal fatalities are included or excluded from the precise definition of perinatal mortality. The World Health Organization defines it as the "number of stillbirths and deaths in the first week of life per 1,000 total births; the perinatal period commences at 22 completed weeks (154 days) of gestation and ends seven completed days after birth." The rate in the UK is at 8 per 1,000, and it differs significantly by social class, with Asian women experiencing the highest rates. Globally, 2.6 million newborns are projected to have died before turning one month old in 2013, down from 4.5 million in 1990.

Unacceptably high maternal death rates exist. In 2017, almost 295 000 women lost their lives immediately after the child birth. The vast majority of these fatalities (94%) happened in areas with less resources, and the majority of them could have been avoided.

Causes of perinatal mortality

Preterm birth: Commonly referred to as premature birth, is the birth of a child before 37 weeks of pregnancy, as opposed to full-term delivery, which occurs at around 40 weeks. Extreme preterm birth happens between 28 and 32 weeks of pregnancy, very early preterm birth occurs between 32 and 36 weeks, and early preterm birth occurs between 34 and 36 weeks of pregnancy. Preterm labour symptoms include uterine contractions that occur more frequently than every ten minutes and/or the leaking of fluid from the vagina before 37 weeks; these babies are also referred to as premature babies, colloquially preemies (American English), or preemies (Australian English). Premature infants are more likely to experience cerebral palsy, developmental delays, hearing issues, and other health issues.

Infantile Respiratory Distress Syndrome (IRDS): Is a syndrome in premature infants brought on by developmental insufficiency

of pulmonary surfactant production and structural immaturity in the lungs. It is also known as Respiratory Distress Syndrome of Newborn (RDSN), Surfactant Deficiency Disorder (SDD), and previously as Hyaline Membrane Disease (HMD). It may also occur from a neonatal infection or a genetic issue with the generation of proteins related with surfactants.

Birth defect: Commonly referred to as a congenital disorder, is an abnormality that exists at birth regardless of its underlying etiology. Birth defects can cause developmental, intellectual, or physical problems. Mild to severe impairments are possible. Birth defects can be categorized into two categories: structural disorders, which affect a body part's shape, and functional disorders, which affect a body part's ability to function. Degenerative and metabolic illnesses are examples of functional disorders. Structure- and function-related issues are both present in some birth abnormalities.

Causes of maternity mortality

Complications during, after and after pregnancy and childbirth claim the lives of women. The majority of these issues occurs during pregnancy and can usually be avoided or treated. Other issues may already present prior to conception, but they exacerbate themselves throughout pregnancy, especially if they are not treated as part of the woman's care.

Nearly 75% of all maternal deaths are caused by serious complications, which are:

- Profound bleeding (mostly bleeding after childbirth)
- Infections (usually after childbirth)
- Elevated blood pressure while pregnant (pre-eclampsia and eclampsia)
- Difficulties with childbirth
- A risky abortion.

The remaining ones are brought on by or linked to chronic illnesses like diabetes or heart disease, as well as infections like malaria.

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