Florida’s pregnancy-related mortality rate is again slowly increasing after a multi-year decrease (see Figure 1). Pregnancy-related deaths are deaths of women during pregnancy and up to a year afterward due to pregnancy complications or conditions initiated or exacerbated by pregnancy. Recently, 35% to 56% of all Florida pregnancy-related deaths have occurred to mothers after giving birth and being discharged from the hospital: postpartum discharge deaths.

**WHEN AND HOW DO THESE DEATHS HAPPEN?**

- From 2015-2019, 75% of postpartum discharge deaths happened in less than 60 days after giving birth, and an additional 13% occurred in the next 60 days.
- The most frequent causes of these deaths were:
  - Cardiomyopathy (15 deaths),
  - Other cardiovascular conditions (11),
  - Infections (10), and
  - Thrombotic embolism (10).
- The last three causes accounted for more than half of the deaths in the first 60 days. Cardiomyopathy accounted for more than half of the deaths for the remainder of the year.

**WHO IS AT RISK?**

Postpartum mothers who were Black, obese, older, and covered by Medicaid were at higher risk of dying after discharge (see Figure 2).

- **Black mothers** (13.9 deaths per 100,000 live births) were more than twice as likely to die as **White mothers** (5.7) and more than ten times as likely as **Hispanic mothers** (1.2).
- Mothers who had **category III and II obesity** were more likely to die than mothers who were **normal weight or overweight** (30.3, 10.1, 5.4 and 5.3, respectively).
- Mothers at **age 35 years and older** (11.9) were almost three times as likely to die as mothers who were **25-29 years** (4.3). These older mothers are more likely to die due to cardiomyopathy, other cardiovascular issues, and hypertension.
- Mothers covered by **Medicaid** (8.8) were twice as likely to die as mothers on **private insurance** (3.5) or self-pay (4.3).
ARE THESE DEATHS PREVENTABLE?

- More than two-thirds of postpartum deaths to women after discharge were either moderately (36%) to substantially preventable (33%) according to the Florida Maternal Mortality Review Committee (see Figure 3).
- All 10 of the infection-related deaths were preventable and represent the leading cause of preventable deaths.
- Deaths due to thrombotic embolism and cardiomyopathy were the next leading causes of preventable death. Most deaths to women 20-24 years of age were considered preventable.

REVIEW COMMITTEE RECOMMENDATIONS ON PREVENTION INCLUDE:

1. Improving management of chronic disease before and after pregnancy (33 preventable deaths)
2. Participating in postpartum visits (16 deaths)
3. Improving provider education related to postpartum management, especially higher risk mothers (11 deaths)
4. Implementing sepsis protocols with provider education (5 deaths)

WHAT CAN PROVIDERS DO TO PREVENT THESE DEATHS?

EARLY POSTPARTUM VISITS, REFERRALS, AND DISCHARGE EDUCATION

Mothers should be seen postpartum within roughly two weeks or earlier according to The American College of Obstetricians and Gynecologists (ACOG).

All medical, behavioral, and community referrals should be made prior to leaving the hospital.

Mothers should be educated on postpartum early warning signs, early postpartum visits, and where to seek urgent and routine medical services and consultation.

Providers in emergency rooms, urgent care centers, health centers, and other postpartum care providers should screen women for being postpartum and be knowledgeable on all major postpartum conditions.

Thanks to the Florida Department of Health and the Florida Maternal Mortality Review Committee for providing the data.

Email FPQC@usf.edu for more information