

Maternal Emergencies and Mortality

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DEPARTMENT OF
**PUBLIC HEALTH &
HUMAN SERVICES**

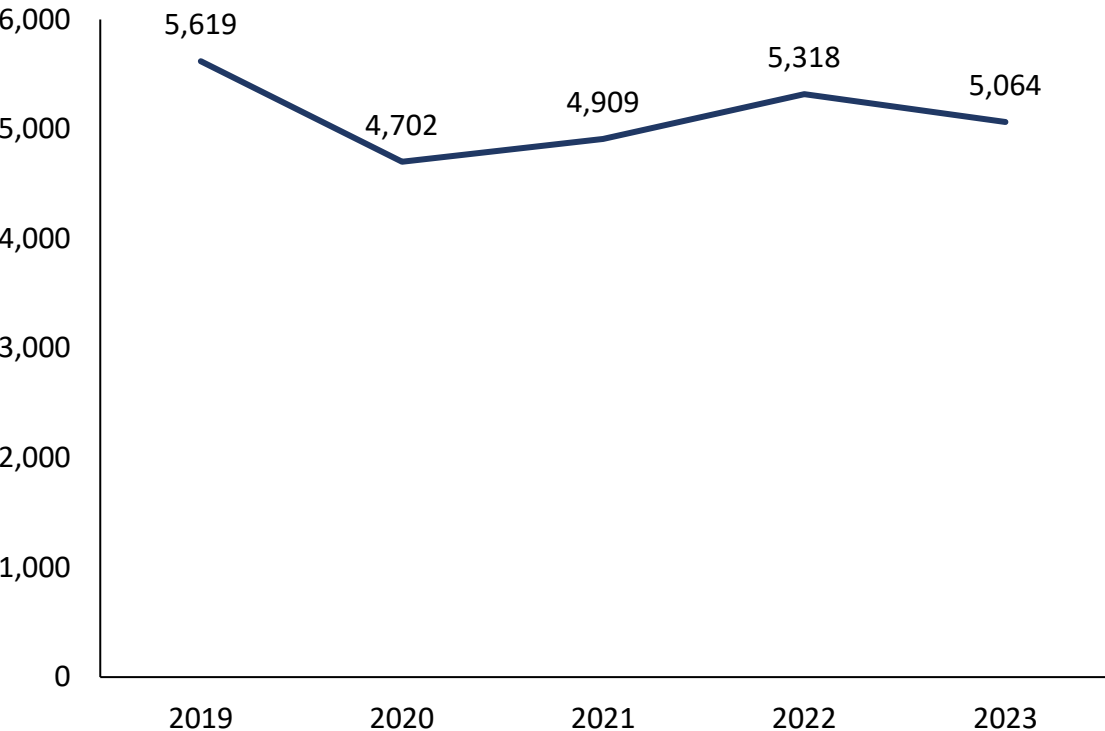
Available Data

- Montana Emergency Department visits/Hospitalizations
- PRAMS
- MMRC
- Medicaid Claims
- YRBS
- BRFSS
- Vital Statistics

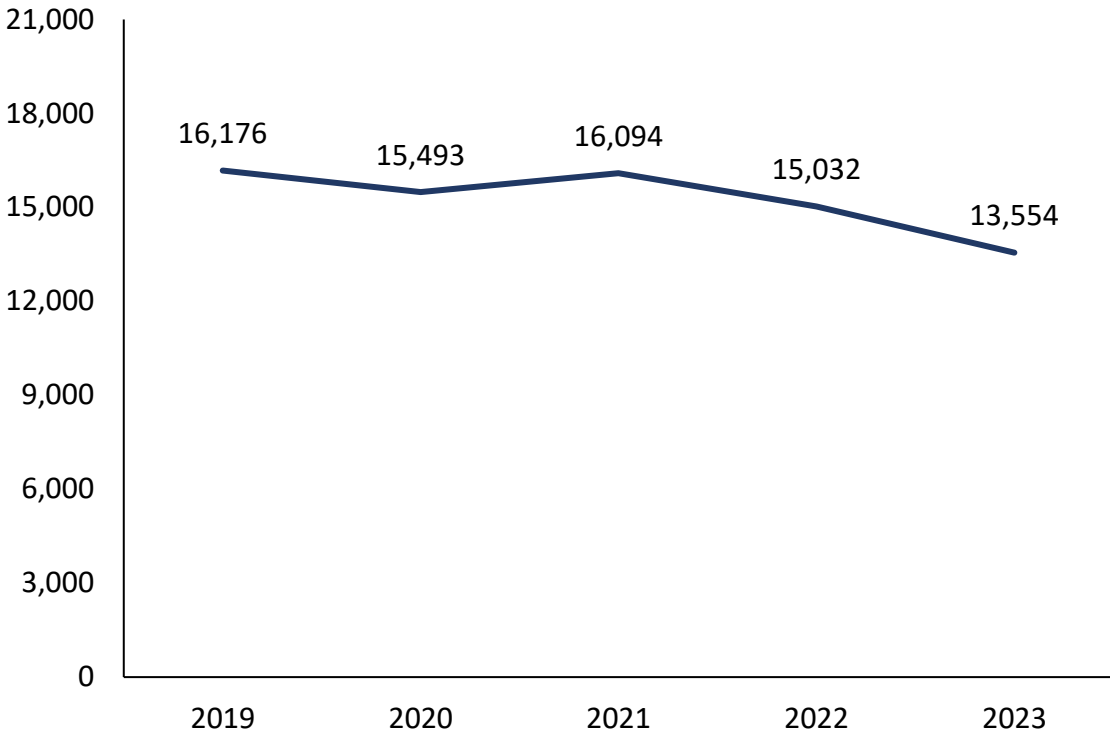


Pregnancy-Related Emergency Department Visits and Hospitalizations

Pregnancy-Related Emergency Department Visits, 2019 - 2023



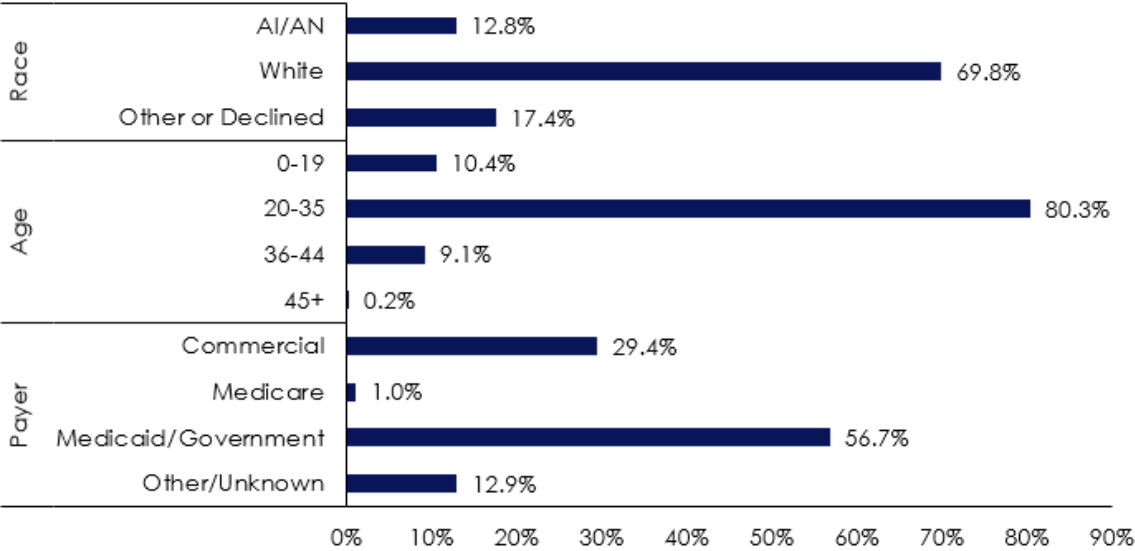
Pregnancy-Related Hospital Stays, 2019 - 2023



Pregnancy-Related Emergency Department Visits and Hospitalizations

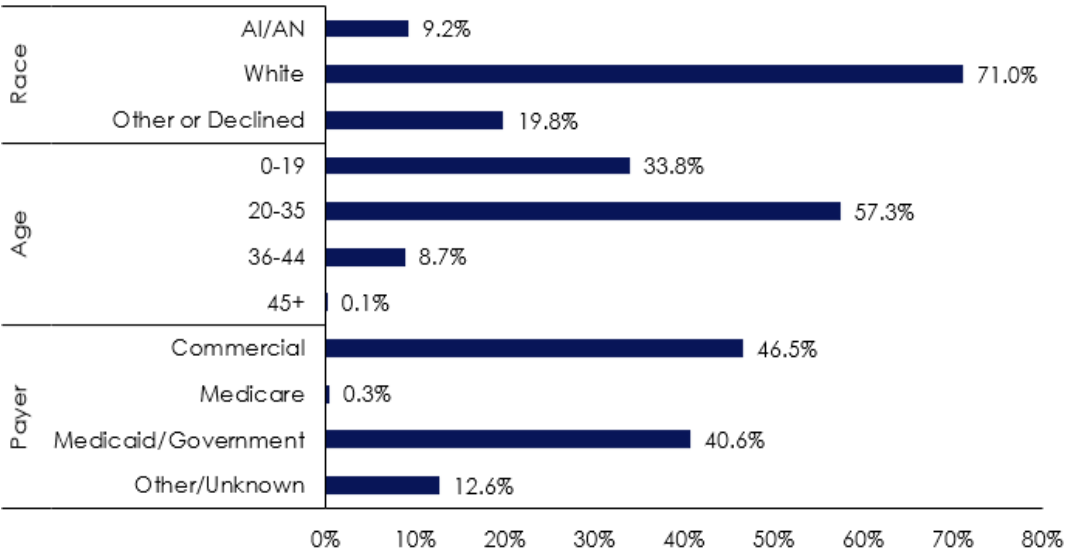
Demographics of Pregnancy-Related Emergency Department Visits

Figure 3: Demographics of Pregnancy-Related Emergency Department Visits, Montana ED/Hospitalizations, 2019 - 2023



Demographics of Pregnancy-Related Hospital Stays

Figure 4: Demographics of Pregnancy-Related Hospital Stays, Montana ED/Hospitalizations, 2019 - 2023



Pregnancy-Related Emergency Department Visits and Hospitalizations

Type of ED Visit	N	%
Pregnancy with abortive outcome	3,146	12.3%
Supervision of high-risk pregnancy	78	0.3%
Edema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium	364	1.4%
Other maternal disorders predominantly related to pregnancy	12,910	50.4%
Maternal care related to the fetus and amniotic cavity and possible delivery problems	1,231	4.8%
Complications of labor and delivery	706	2.8%
Encounter for delivery	2	0.0%
Complications predominantly related to the puerperium	1,079	4.2%
Other obstetric conditions, not elsewhere classified	5,837	22.8%
Encounter for suspected maternal and fetal conditions ruled out	13	0.01%
Persons encountering health services in circumstances related to reproduction	227	0.9%
Weeks of gestation	16	0.1%

Type of Hospital Stay	N	%
Pregnancy with abortive outcome	275	0.4%
Edema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium	5,464	7.2%
Other maternal disorders predominantly related to pregnancy	3,274	4.3%
Maternal care related to the fetus and amniotic cavity and possible delivery problems	19,418	25.4%
Complications of labor and delivery	14,439	18.9%
Encounter for delivery	1,308	1.7%
Complications predominantly related to the puerperium	408	0.5%
Other obstetric conditions, not elsewhere classified	7,923	10.4%
Persons encountering health services in circumstances related to reproduction	23,840	31.2%



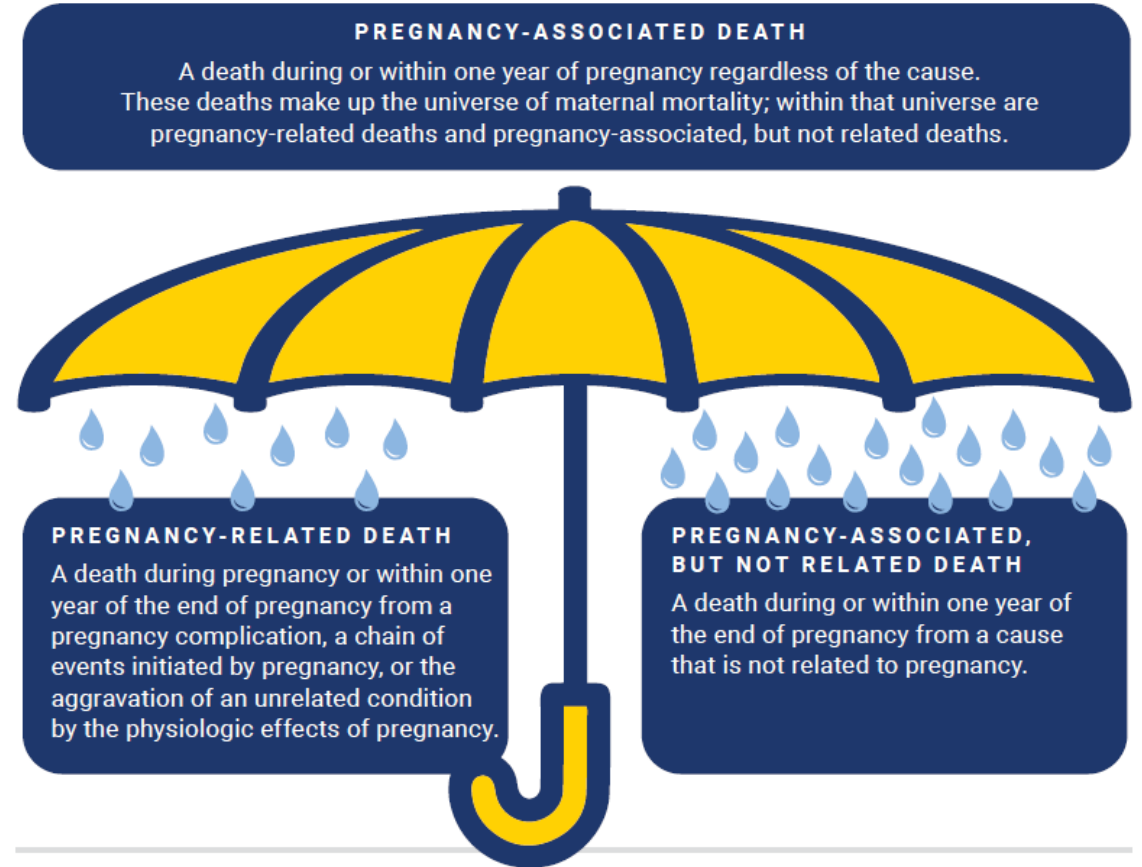
Summary

- The number of visits in the emergency department or hospital for pregnancy-related concerns has been relatively stable for the past five years
- Patients who use Medicaid or other government insurance are more common in an emergency department visit as opposed to hospitalizations
- More immediate or “emergency” visits were handled by the emergency departments
- Labor and delivery were handled by hospital care

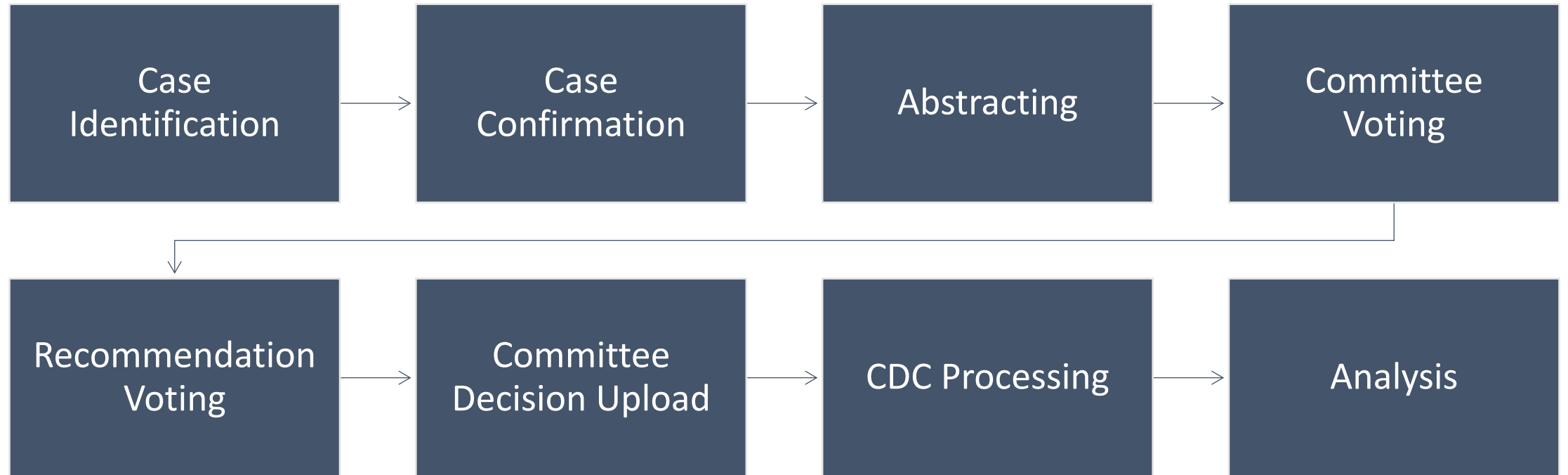


What is Maternal Mortality?

- WHO Definition: “a female death from any cause related to or aggravated by pregnancy or its management (excluding accidental or incidental causes) during pregnancy or childbirth or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy”

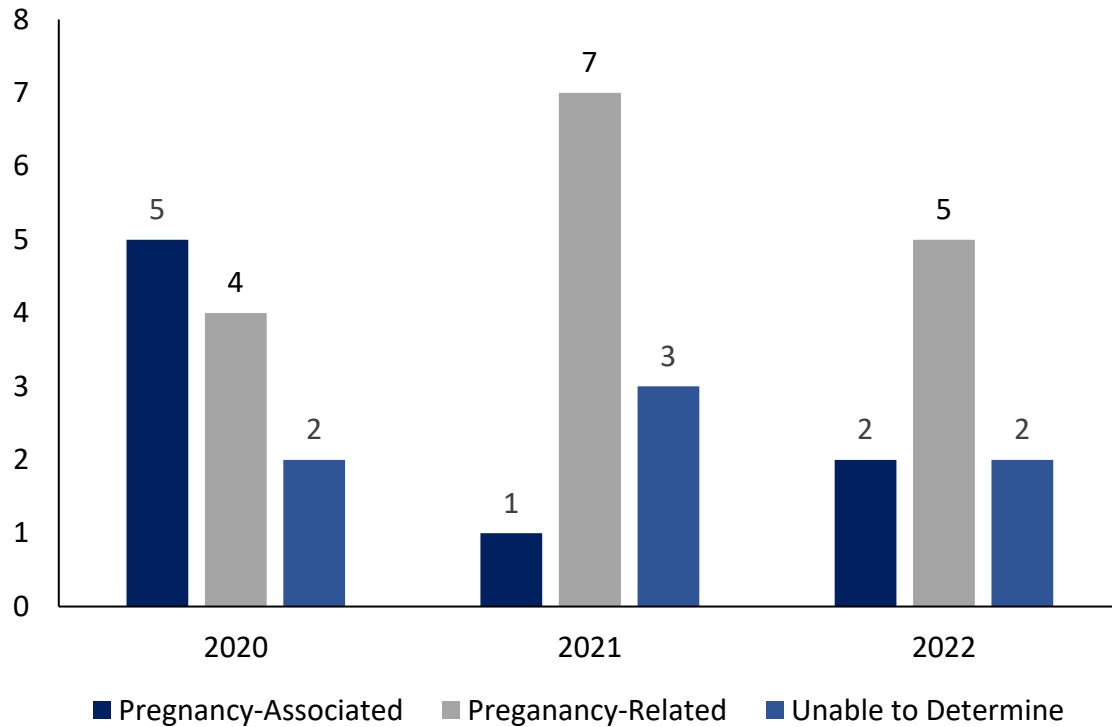


MMRC Timeline



Data Overview

Pregnancy-Related Status by Year

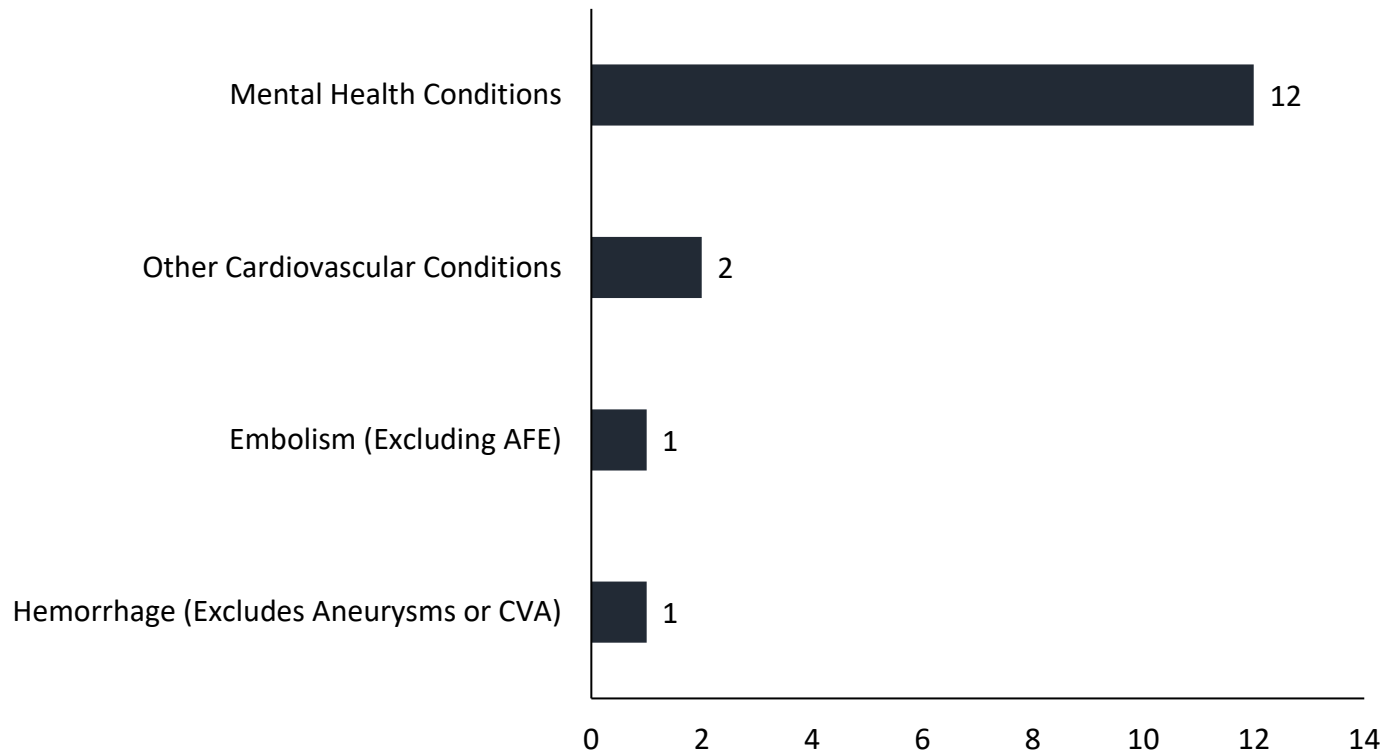


Timing of Death

	Frequency (N)	Percent (%)
Pregnant at Time of Death	6	40%
7 – 42 Days After End of Pregnancy	2	13%
43 Days – 1 Year After End of Pregnancy	7	47%

Data Overview

Underlying Causes of Deaths



In 13 cases, **mental health** contributed to the death



In 9 cases, **substance use disorder** contributed to the death



In 6 cases, the death was a **suicide**

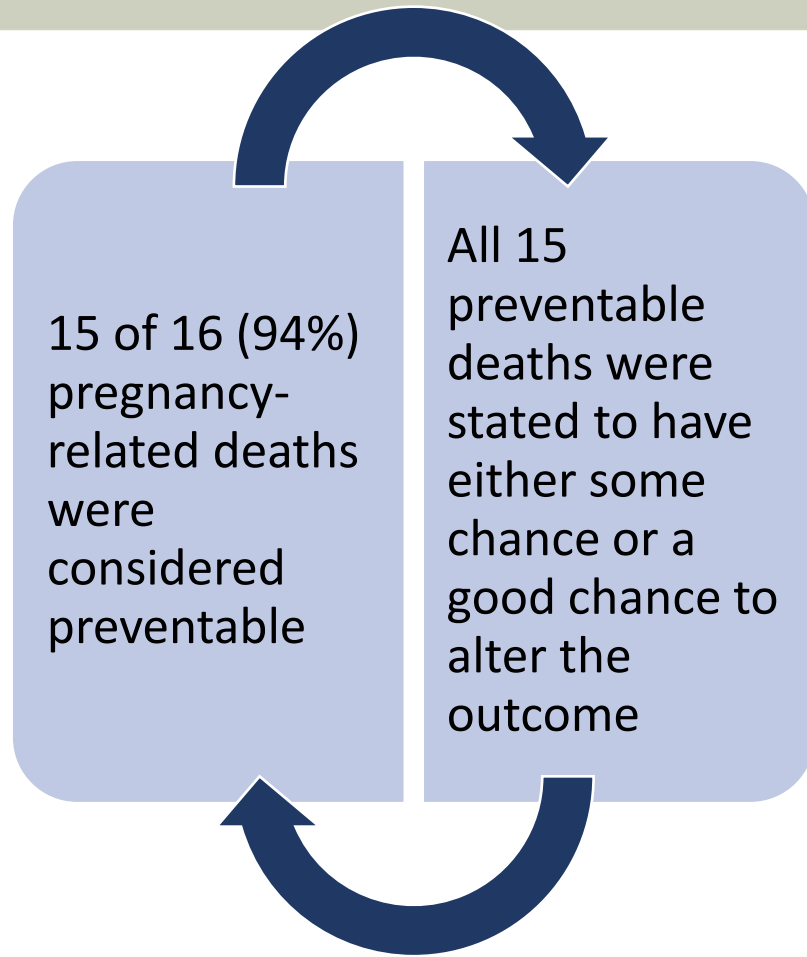


In 8 cases, **discrimination** contributed to the death



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Data Overview



52
Recommendations
written

Summary

- As of January 29th, 2025, there have been 36 cases reviewed by the MMRC
- Of those cases, 16 were considered pregnancy related
- Half of these deaths occurred between 43 days and one year after the end of pregnancy
- Nearly three-quarters of the deaths were mental health related
- Almost all (15/16) were considered preventable by the committee

