MATERNAL DEATHS ATTRIBUTABLE TO HYPERTENSIVE DISORDERS IN A TERTIARY HOSPITAL IN GHANA

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Background: Hypertensive disorders in pregnancy are the most common and the most difficult medical conditions of pregnancy to prevent and manage. They are associated with significant perinatal and maternal morbidity and mortality. In Ghana, data on maternal deaths attributable to hypertensive disorders of pregnancy including specific direct causes are limited.

Objective: To determine the current contribution of hypertensive disorders of pregnancy to maternal deaths at Korle Bu Teaching Hospital (KBTH) in Accra, Ghana.

Methods: The retrospective descriptive study conducted at KBTH during 2010–2011 involved a comprehensive review of all maternal deaths attributable to hypertensive disorders.

Results: There were 21,385 deliveries, 21,742 live births, and 199 maternal deaths, resulting in a maternal mortality ratio of 915.3 per 100,000 live births. In total, 63 (31.7%) maternal deaths were attributable to hypertensive disorders with a case fatality rate of 3.9%. The incidence of hypertensive disorders of pregnancy was 7.6%. Hypertensive disorders were the most common direct cause of maternal death followed by obstetric hemorrhage (26.6%), unsafe abortion (11.1%), and puerperal sepsis (3.5%). Most (38.1%) hypertension-related maternal deaths occurred within 24 hours of admission and the majority (79.4%) had been referred. Eclampsia was the leading immediate cause of hypertension-related death (23.8%), followed by acute renal failure (20.6%), intracerebral hemorrhage (15.9%), and pulmonary edema (12.7%).

Conclusion: Hypertensive diseases are the leading cause of maternal death at KBTH, having overtaken obstetric hemorrhage, with eclampsia, acute renal failure, intracerebral hemorrhage, and pulmonary edema representing the major immediate causes of hypertension-related maternal death.