Information about deaths of babies and mothers in New Zealand in 2015



He matenga ohorere, he wairua uiui, wairua mutunga-kore. The grief of a sudden, untimely death will never be forgotten.

This is the most recent information about the risks of pregnancy and childbirth in New Zealand.

Sadly, sometimes a baby or a mother dies during pregnancy or shortly after birth.

In New Zealand the risk of death for babies or mothers is guite low.

If your baby has died, we hope that this information helps you to understand that you are not alone.

Where did this information come from?

This information comes from the 11th report of the Perinatal and Maternal Mortality Review Committee (the PMMRC). The information is about New Zealand babies and mothers who died during pregnancy or shortly after childbirth.

What does the PMMRC do?

The PMMRC believes that every baby's life, no matter how short, should be investigated.

The PMMRC:

- investigates the deaths of babies born from 20 weeks of pregnancy up until 28 days after birth
- investigates the deaths of all mothers who die at any stage during pregnancy, or in the six weeks after childbirth
- looks at information about the pregnancy and birth, and findings of medical tests to try and understand why a baby or mother died.

The PMMRC has been investigating the deaths of babies and mothers since 2006 to see if anything has changed over this time.

Why do babies die during pregnancy or childbirth?

Birth defects were the most common cause of death for babies born in 2015.

Over **60,000 births** were registered in New Zealand in 2015. In 2015 **578 babies** died after 20 weeks of pregnancy or within the first four weeks after birth. This means that 10 babies died for every 1000 registered births. This is very similar for babies born in the UK and Australia. The PMMRC plans to further investigate neonatal deaths in the next report.



Birth defects (also known as congenital abnormalities) are caused by the baby's genes or something in the baby's environment that prevented the baby from developing normally. Birth defects are the most common cause of death for babies during pregnancy or in the first month of life. In 2015, **158 babies** died because of birth defects.

Unexplained causes of death mean that there were no obvious medical problems with the baby or the mother that could explain why the baby died, or there were no investigations done to try and find a cause of death. In 2015, **87 babies** from unexplained causes.

Bleeding (also known as haemorrhage) from the vagina shows that something might be wrong with the pregnancy. Bleeding from the vagina was common among women who lost a baby, even if the bleeding was not the direct cause of death. In 2015, **79 babies** died because of bleeding from the vagina.

Premature birth is when a baby is born too early, before their lungs and other parts of their body are fully developed. In 2015, **65 babies** died due to premature birth.

Specific pregnancy complications are a group of conditions that includes complications of twin pregnancy. In 2015, **60 babies** died from specific pregnancy complications.

Why do mothers die during pregnancy and childbirth?

The risk of death for mothers during pregnancy is very low.

As the risk is so low, it can be difficult to measure whether there have been any changes over time. On average, 10 women in New Zealand die every year from pregnancy-related causes. Usually these women were suffering from pre-existing medical problems that contributed to their deaths.

Since the PMMRC began investigations in 2006:

- 29 women died from pre-existing medical problems that were made worse by the woman's pregnancy.
- 27 women died from suicide.
- 13 women died from an amniotic fluid embolism around the time of childbirth. This is a rare pregnancy complication that occurs when the fluid that surrounded the baby during pregnancy enters the mother's bloodstream and causes an allergic reaction.

More information

Sands New Zealand are an organisation that offers support for families and whānau whose baby has died. They have a lot of helpful information on their website: www.sands.org.nz.

If you had a miscarriage before 20 weeks there is useful information about miscarriage on the Ministry of Health's website: www.health.govt.nz/your-health/pregnancy-and-kids/services-and-support-during-pregnancy/miscarriage-and-stillbirth.

You can access the PMMRC's full report here: www.hqsc.govt.nz/our-programmes/mrc/pmmrc.

Thinking of having a baby?

Advice on how to keep you and your baby safe during pregnancy:

Prepare before you get pregnant. Talk to your doctor if you a have a health condition. Stop smoking and drinking alcohol. Eat healthy food and exercise to achieve a healthy weight. Take folic acid and iodine. If you are already pregnant, find a lead maternity carer (LMC), usually a midwife, as soon as you can. Your LMC will answer all your questions and help you through your pregnancy and childbirth.

What are the *Risks?* Ask your LMC what tests you can have to check that your baby and you are well. Your LMC also needs to know if you already have a health condition or had problems with a previous pregnancy. Your LMC will be able to arrange medical care to reduce the risks to your baby and you.

Is this an *Emergency?* Talk to your LMC, doctor or nurse straight away if you have any bleeding from your vagina, you notice your baby does not move as much or if you feel unwell.

Gestational diabetes is a type of diabetes some women get when they are pregnant. Your LMC will talk to you about getting tested for diabetes and tell you what you need to do if you have it.

Say *No.* Stop smoking, drinking alcohol and taking drugs before you are pregnant or as soon as you think you may be pregnant. This will reduce the risk of your baby being stillborn, being born prematurely or having birth defects.

Physical Activity helps keep your baby and you healthy.

Nutrition. Eat healthy food for your baby and you. Talk to your LMC about how much weight gain is healthy for you.

Have regular *Check-ups* with your LMC so you can find any problems early.

You are just as important as your baby. Ask your LMC, doctor or nurse where you can get help if you are feeling depressed or having problems in your relationship.

Ask for help. Whānau and friends can help during pregnancy and after birth by providing emotional support and practical help.

