RESOLUTION

Subject: Improving Maternal Health

Submitted by: Greater Louisville Medical Society

Referred to: Reference Committee

WHEREAS, maternal death is a public health crisis in the United States with a 134% increase in maternal death from 1987-2018 and an increase of 7.2 to 17.3 maternal deaths/100,000 live births¹. Conversely, maternal death has globally decreased 38% from 2000 to 2017²; and

WHEREAS, the United States has the highest maternal death rate in the world of any developed country, making it the most unsafe place in the developed world for a woman to give birth³; and

WHEREAS, in Kentucky, 79% of maternal deaths were found to be preventable. Heart disease and stroke are the leading 2 non-accidental causes, at a combined rate of 34%⁴. Mental health illness is one of the top 7 underlying causes of pregnancy-related deaths at a rate of 7%⁵. Over 50% of accidental maternal death was related to substance use⁶; and

WHEREAS, black women are more than twice as likely to die from a pregnancy-related cause as white women; and

WHEREAS, pregnancy is inherently dangerous as maternal death from abortion is 0.7/100,000⁷, while maternal death related to pregnancy is 18/100,000⁸ or 25-fold higher; and

WHEREAS, an abortion ban is estimated to lead to a 7% increase in maternal death in year one and 21% in subsequent years of the ban⁸; and

WHEREAS, non-Hispanic Black women are projected to have the greatest increase in maternal death with a 12% increase in year one of the ban and 33% in subsequent years. Hispanic women have the next greatest increase with 6% and 18%, respectively. This data does not include how the rate of unsafe abortions will increase maternal death⁹; and

WHEREAS, physicians have an obligation to protect and save lives (mentally and physically) and respect all people's privacy. Preventing the right to abortion defies this oath by increasing maternal mortality and dehumanizing women; now, therefore, be it

RESOLVED, that KMA recognize that maternal death and mental health illness are public health issues; and be it further

RESOLVED, that KMA advocate for improved reproductive healthcare and resources for women in Kentucky including preconception, prenatal and post-partum care.

References:

- ¹ https://www.cdc.gov/reproductivehealth/maternal-mortality/pregnancy-mortality-surveillance-system.htm
- ² https://www.who.int/news-room/fact-sheets/detail/maternal-mortality
- ³ https://www.ajmc.com/view/us-ranks-worst-in-maternal-care-mortality-compared-with-10-other-developed-nations
- ⁴ https://chfs.ky.gov/agencies/dms/mac/Documents/MACMaternalHealthUpdate.pdf
- https://www.cdcfoundation.org/sites/default/files/files/ReportfromNineMMRCs.pdf
 https://chfs.ky.gov/agencies/dph/dmch/Documents/MMRAnnualReport.pdf
- Zane S, Creanga AA, Berg CJ, et al. Abortion-Related Mortality in the United States:1998–2010. Obstetrics & Description of the United States:1998–2010. Gynecology. 2015;126(2):258-265. doi:10.1097/AOG.000000000000945
- Center for Disease Control. Pregnancy Mortality Surveillance System | Maternal and Infant Health | CDC. https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pregnancy-mortality-surveillance-system.htm. Published August 7, 2018. Accessed February 12, 2019
- 9 https://read.dukeupress.edu/demography/article/58/6/2019/265968/The-Pregnancy-Related-Mortality-Impact-of-a-Total