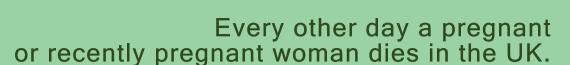
THREE P'S IN A POD



2/3 of maternal mortality is due to a medical or mental health condition, not pregnancy itself.

Remember it's ok to ask...

Working as a team will improve women's care and save lives.

Pick up the phone, pick up the problem and let's prevent maternal morbidity and mortality.



23% maternal mortality caused by CARDIAC conditions

Cardiac output increases by 50% in pregnancy and there is an increased risk of cardiac failure Search for cardiac causes of persistent breathlesness.

14% maternal mortality caused by PNEUMONIA or INFLUENZA

CXR should not be withheld. Prompt treatment with antibiotics or antivirals advised. Be aware of a pre-existing medical condition e.g. asthma or obesity as this can increase severity.

11% maternal mortality caused by VENOUS THROMBO-EMBOLISM

Risk evolves. Assess at every encounter and consider LMWH.Treat promptly with high dose LMWH if suspicious of VTE. Pregnancy is not a contraindication to thrombolysis if massive PE.

POST NATAL

"THINK HEAD"

11% maternal mortality caused by NEUROLOGICAL conditions

Never stop anti-epileptics unless discussed with an expert. First fit in pregnancy or worsening epilepsy is an urgent situation and phone referral to neurology is necessary.

9% maternal mortality caused by MENTAL HEALTH disorders

Urgent care and follow up is necessary for women who report new thoughts of self harm, sudden onset or rapidly deteriorating mental health symptoms or persistent feelings of estrangement from their baby.

PICK IT UP

"THINK HIGH RISK"

Pick up the phone Pick up the problem

Pregnant women are different and you won't always know what to do. Improvement in communication and team working with appropriate escalation to seniors, alongside prompt treatment and management is necessary if we are to reduce maternal morbidity and mortality together.

For Further information:
#threepsinapod
http://rcp.sg/maternalhealth
www.e-lfh.org.uk/programmes/medical-problems-in-pregnancy/











