## **Patient Confidentiality: Live and Dead**

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## Abstract

Trained social workers interviewed the families of 385 women of reproductive age who died during 1981-1983 in Menoufia Governorate, Egypt, to examine the women's characteristics, the causes of their deaths, and the proportion of maternal deaths due to pregnancy, delivery, and indirect obstetric factors. Maternal mortality accounted for 22.8% of all deaths to women in the reproductive age group. The dead women tended to be illiterate (76.3%), to have more than four children (51.9%), and to have died at home (53%) during the postpartum period (59%). 24% of the women died within six hours after the onset of complications. The leading cause of death in the reproductive age group was diseases of the circulatory system. The maternal mortality rate was 190/100,000 live births. There were 45 maternal deaths per 100,000 married women aged 15-49. 62.6% of the maternal deaths were attributed to direct obstetric causes, particularly hemorrhaging (51.9%). Indirect obstetric causes comprised 26.5% of the causes of death. The leading indirect obstetric cause of maternal death was diseases of the circulatory system (63.7%). In fact, rheumatic heart disease was the single leading indirect obstetric cause of maternal death, accounting for 35% of all maternal deaths. Abortion contributed to maternal mortality in 5.5% of cases. The study found various obstacles to improving maternal outcomes: late referral of patients, inadequate hospital facilities, and physicians inexperienced in the management of obstetric emergencies. Based on these findings, the researchers identified various recommendations: improve utilization of existing health facilities, increase the proportion of hospital deliveries, improve hospital care, develop a feasible system of confidential enquiries, and integrate maternal-child health centers with birth attendant teams, rural health units, family planning clinics, and local and district hospitals.