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Obstetric and neonatal emergencies are still global health issues

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The first and most important right of every human being is to be born healthy and for the mother not to suffer from complications or sequelae due to childbearing. Pregnancy-related maternal mortality persists as a global public health concern, especially in locations where obstetric facilities and resources are poor and access to technology is difficult or nonexistent.

In 2020, about 287,000 women died during and following pregnancy and childbirth. Almost 95 % of all maternal deaths occurred in low-income and lower middle-income countries, and most could have been prevented [1]. Complications during pregnancy, childbirth and postpartum are the main causes of maternal mortality. They are mostly related to hemorrhage, preeclampsia, and infection. Preventing these tragedies requires a comprehensive approach that includes improving quality of antenatal care, access to emergency obstetric services and education in reproductive health. Addressing socioeconomic disparities and improving access to healthcare is critical to reduce maternal mortality and ensure the well-being of mothers and their families.

Delivery and postpartum emergencies are still a major worldwide concern that impact women's health and that of their children. Maternal morbidity and mortality and pregnancy loss may be due to unexpected, difficult-to-manage obstetric problems. But women may not receive adequate healthcare, especially in low-resource settings. Factors that prevent women from receiving or seeking care include healthcare system failures, social determinants (income, access to education), low prioritization of the rights of women, family size, climate and humanitarian crises.

In 2019, there were approximately 42.39 million cases of pregnancy loss worldwide [2]. Data from the Global Burden of Disease 2019 identified that factors such as poor health, smoking, sedentary behavior, lower levels of education and lower maternal birthweight may significantly increase the risk of pregnancy loss. However, there are different factors related to the uncertainty of clinical prediction models that may bias the final risk estimates [3].

Obstetric care in rural areas is an additional maternal-fetal risk during delivery, and this problem is present not only in low-income countries, but also in those in higher-income groups. Therefore, bridging the gap between urban and rural areas in maternal healthcare services is essential [4]. Advances in global communication provide new avenues to educate and support healthcare providers in remote locations dealing with obstetric emergencies [5–7].

Now is the time to transform reproductive health and improve maternal and neonatal health worldwide.

Contributors

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Conflict of interest statement

The authors declare that they have no conflict of interest regarding the publication of this editorial.

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