

Maternal deaths associated with COVID-19 in the Brazilian scenario



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In late 2019, a new severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) was identified, the etiologic agent of COVID-19, which causes a predominantly respiratory, highly transmissible disease that in a short time, reached all continents and, in February 2020, Brazil had the first case diagnosed.

In the initial months of the pandemic and in an attempt to reduce the serious consequences of the disease, groups considered to be at risk were detected, but in this first moment, the pregnancy-puerperal cycle was not related to complications and mortality.

In April 2020, the Ministry of Health (MH) started to consider pregnant women, postpartum women and women

who had gestational or fetal loss for up to 15 days as a risk group for COVID-19, but the first data were only released by the MH in the end of May and accounted for 36 deaths and another 252 cases of severe acute respiratory syndrome (SARS).

After the disclosure of the first cases, Brazil emerged negatively, as the country with the highest rates of maternal deaths associated with COVID-19. In July, there was the publication of a study carried out between January and June 18, 2020 that identified the occurrence of 124 maternal deaths. It also reported that these findings were 3.5 times greater than the sum of the number of maternal deaths from COVID-19 that occurred in other countries in the same period.

The country ended the year 2020 with 544 deaths of pregnant and postpartum women related to COVID-19, with a weekly average of 12,1 deaths and in 2021, according to data from the Brazilian Obstetric Observatory Covid-19, maternal losses are already higher than the cases reported in 2020, after 20 epidemiological weeks on May 26th, 2021, Brazil had 911 deaths, with a weekly average of 47,9 deaths, that is, a worrying increase in the number of deaths among pregnant women.

The alarming number of maternal deaths in Brazil may have been due to the difficulty in accessing quality prenatal care associated with the delay in including this group in the National Immunization Plan. ■

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