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## Letters

# A theme issue by, for, and about Africa

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## Maternal mortality in rural Burkina Faso

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EDITOR—Volmink et al identify maternal mortality as an important health challenge in Africa.<sup>1</sup> Using a census approach with one year recall we estimated the maternal mortality ratio in a population of 44 000 women of childbearing age in Houndé, a rural district in Burkina Faso, to be 406 maternal deaths per 100 000 live births (95% confidence interval 281 to 566). This is probably an underestimate, based as it is on recall and verbal autopsy. We probably missed some deaths altogether and may have misclassified some maternal deaths as not maternal because only 15% of all deaths among women of childbearing age were classified as maternal—a low percentage compared with other reports from similar settings.<sup>2</sup>

Nevertheless this **figure** is 40 times higher than in Europe or north America. With a total fertility rate estimated at 6, the lifetime risk of maternal death for a woman in this population entering the reproductive period is one in 35.<sup>3</sup> Many of these deaths could be prevented with simple interventions: of the 34 maternal deaths identified, 10 were due to haemorrhage, seven to sepsis, and four to prolonged labour.



Credit: GIACOMO PIROZZI/PANOS

Overall 58.8% of the families commonly reported delays in making the decision to seek care, obtain transport, or receive care. The district hospital does not have the facilities for blood transfusion, and the cost to a family

of a caesarean section is \$100-200, against an average monthly household income of \$4.4 Poverty is thus a real barrier to progress in reducing maternal mortality.<sup>1</sup>

## Footnotes

- Competing interests None declared.

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