Correspondence

Excess risk of maternal mortality in adolescent mothers

Authors' reply

We strongly agree with Ann Blanc, who clearly highlights the dangers of so-called accepted wisdom based on limited or flawed evidence, and the need to question and probe the provenance of data used to direct resources and plan policies. This is indeed an important lesson for the maternal health community as we move forward with setting priorities for national and global maternal health agendas.

We would also like to emphasise that we do not see our findings

as negating the need to focus on reducing adolescent births in some contexts. Increased risk of mortality is only one of the potential negative outcomes that can result from early motherhood, and a holistic approach that assesses evidence of potential adverse effects on education, opportunities, and general wellbeing, as well as health (for mother and baby) should be used to guide policy in this area. We were also unable in our study to estimate whether younger adolescents (eg, aged 12-15 years)1 experienced higher mortality than their older adolescent counterparts, and this is an area we will be researching in future to further develop our understanding of risks to young mothers.

We declare that we have no competing interests.

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1 Neal S, Matthews Z, Frost M, Fogstad H, Camacho AV, Laski L. Childbearing in adolescents aged 12–15 in developing countries: a neglected issue. New estimates from demographic and household surveys in 42 countries. Acta Obstet Gynecol Scand 2012; 21,111,113

