**CDC MMR Definitions**

Understanding maternal mortality in the United States is more difficult when words with different definitions are used interchangeably. Definitions in maternal mortality are generally grouped into three categories: pregnancy-associated deaths, pregnancy-associated, but not related deaths, and pregnancy-related deaths.

1. **Pregnancy-associated death** - The death of a woman while pregnant or within one year of the termination of pregnancy, regardless of the cause. These deaths make up the universe of maternal mortality; within that universe are pregnancy-related deaths and pregnancy-associated, but not related deaths.

2. **Pregnancy-associated, but not related death** - The death of a woman during pregnancy or within one year of the end of pregnancy, from a cause that is not related to pregnancy (e.g.. a pregnant woman dies in an earthquake).

3.  **Pregnancy-related death** - The death of a woman during pregnancy or within one year of the end of pregnancy, from a pregnancy complication, a chain of events initiated by pregnancy, or the aggravation of an unrelated condition by the physiologic effects of pregnancy.

Another term occasionally used in maternal mortality surveillance is “maternal death,” which is used by the National Center for Health Statistics (NCHS) and the World Health Organization (WHO). NCHS and WHO define maternal death as the death of a woman while pregnant or within 42 days of termination of pregnancy, regardless of the duration and the site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes.

This site uses the term **“maternal mortality” to encompass the topic of deaths during pregnancy, childbirth, and the postpartum period (up to 365 days from the end of pregnancy)**. This site always uses the terms **pregnancy-associated, pregnancy-related,** and **pregnancy-associated, but not related death** (consistent with the CDC Pregnancy Mortality Surveillance System). This site also uses the term “pregnancy-related mortality ratio” wherever possible, instead of rate, recognizing that the statistic is the number of pregnancy-related deaths per 100,000 live births (the numerator is not a subset of the denominator). The use of these terms is important because they point to the importance of first identifying all deaths associated in time to pregnancy, and then identifying from those deaths those that were caused by or aggravated by her pregnancy or its management (essentially, if she had not been pregnant, would she have died?)