1C.

FETAL, PERINATAL, AND MATERNAL DEATHS

In Arizona, reportable fetal deaths are those after 20 completed weeks of gestation or if the fetus weighs more than 350 grams (ARS 36-329; Arizona Administrative Code, R9-19-302). In addition to spontaneous stillbirths, any induced termination of pregnancy at 20 or more weeks of gestation (or, if the gestation period is unknown, when the weight of the product of human conception is more than 350 grams) also requires the filing of a fetal death certificate.
The number of all reported fetal deaths in Arizona (including late term abortions) in 2019 was 640, an 8.8 percent increase from 2018 (Figure 1C-1, Table 1C-3). The annual number of reportable spontaneous fetal losses increased 3.6 percent from 472 in 2018 to 489 in 2019. (Figure 1C-1, Table 1C-3).

The fetal mortality rate decreased slightly from a rate of 5.8 deaths at 20 or more weeks of gestation per 1,000 live births in 2018 to a rate of 6.1 deaths in 2019.

Perinatal mortality refers here to death of a fetus of at least 28 weeks gestational age, or of an infant less than 7 days old. The perinatal death rate per 1,000 live births has been below 6 deaths per 1,000 since 2009 then increased at 6.5 in 2014. The perinatal mortality rate of 5.7 in 2019 represented a decrease from the 2017 and 2018 rates (Figure 1C-2, Table 1C-3).

Early infant deaths accounted for 206 or 45.5 percent of the 453 perinatal deaths in 2019 (Figure 1C-2, Table 1C-3).
In 2019, 42 women giving birth were reported to have died from maternal causes (Table 1C-1). This represents a 27.3 percent increase from the number of maternal deaths recorded in 2018. The number of maternal deaths does not include all deaths occurring to pregnant women, but only those deaths assigned to causes related to or aggravated by pregnancy or pregnancy management.

Based on the total number of 193 maternal deaths from 2009 to 2019, women age 35 and older had the highest proportional contribution to maternal mortality followed by women age 25 - 34, and women age 24 and younger (Figure 1C-3).

In the eleven-year period from 2009 to 2019, the major causes of maternal deaths in the state have included complications following childbirth (i.e. complications of the puerperium), complications mainly related to pregnancy, complications occurring in the course of labor and delivery, and ectopic pregnancy. All other possible causes of maternal death accounted for 66.8 percent of the maternal deaths from 2009 to 2019 (Figure 1C-4, Table 1C-2).

**Figure 1C-3**
Percent of Death from Maternal Causes by Mother’s Age Group, Arizona, 2009-2019

**Figure 1C-4**

Notes: * Based on the total number of maternal deaths from 2009 to 2019; * Complications of the puerperium.
Fetal mortality rates vary by the race/ethnicity of the mother (Figure 1C-5). The fetal mortality rate for Black or African American women was 11.8 per 1,000 live births plus fetal deaths, the highest rate among the racial/ethnic groups. The fetal mortality rate was equally high for American Indian women (8.2), while the rates of Hispanic or Latino (6.0), White non-Hispanic (5.5), and Asian women (3.5) were below the state average.

Fetal mortality rates vary by maternal age (Figure 1C-6). In 2019 fetal mortality rates were lowest for women aged 20-24 years and highest for women aged 35 years and older. The fetal mortality rate for mothers aged 35 and older increased slightly from 7.6 in 2018 to 7.7 in 2019.