Maternal Mortality Legislation – HB 2573
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Kelli Krase MD

I was born and raised in Hesston, KS. I went to Bethany College in Lindsborg, KS. I graduated from the University of Kansas School of Medicine 10 years ago. I returned to work in Kansas City three and a half years ago as an Obstetrician and Gynecologist to serve the women of Kansas. I have been a Fellow of the American College of Obstetricians and Gynecologists for the past 3 years. I have been serving on the Wyandotte County Fetal and Infant Mortality Review Board for the past year and a half. I believe it is critical for the health of the mothers in Kansas that we develop a Maternal Mortality Review Board.

I was a chief resident when I encountered my first maternal mortality. I remember her name and her face so clearly. She was 24 years old and a nursing student. She was transferred to our hospital when I was on call one night from a small hospital in rural Ohio. She had already been diagnosed with a stillbirth and she was very sick. I put in consults and walked with her as we transferred her to the ICU. I talked with her parents to try to find out more about her after she lost consciousness. When she coded the first time, we did a c-section in the ICU in an attempt to save her life and found her intestines were full of blood. She ultimately died in the operating room as the general surgery team was unable to stop the bleeding from her perforated stomach ulcers. I left the hospital that day and I wept. And when I returned, we spent a lot of time picking apart what had happened. Gastric ulcers are not a common cause of maternal mortality, but it is crucial that when mothers die that we thoroughly examine what happened to learn and hopefully prevent the death of future mothers. After talking to her family, we discovered she had been taking a lot of ibuprofen. This likely worsened her gastric ulcers and made them rupture, and it is something we don't recommend women take during pregnancy. I still think of this patient each time I tell my current patients not to take ibuprofen during their pregnancy.

One of the reasons I believe that creating a Maternal Mortality Review process in Kansas is so important is from my experience on the Wyandotte County Fetal and Infant Mortality Review Board. It is hard and sad to review the medical records of the babies that die each year. It is through this work that we can identify the themes and risk factors that contribute to each of the fetal or infant deaths. These themes then get passed to the community action teams to focus on things like safe sleep and fetal kick count campaigns.

Maternal mortality is increasing in our country. We must begin to take a thorough examination of each one of these cases so that we can identify the themes and risk factors. We need access to the medical records so we can have a confidential and privileged deep dive into the cases of each maternal death. Our goal is to learn from these maternal deaths, to prevent future mothers dying.

Dr. Kelli Krase
6119 Lockton Lane
Fairway, KS 66205