

Appendix 1 (as supplied by the authors)

EPIMOMS multicriteria standardised definition of severe maternal morbidity, that was developed through a national Delphi formal expert consensus process, concerning only women during their pregnancy after 22 gestational weeks and until the 42nd day after their delivery

ITEMS	CRITERIA (AT LEAST ONE)
	. Volume of postpartum blood loss \geq 1500 ml
	. Blood transfusion \geq 4 units RBC
Major obstetric hemorrhage	. Uterine arteries embolisation
	. Vascular ligation, compressive uterine sutures
	. Emergency peripartum hysterectomy
Eclampsia	Seizures in a woman diagnosed with preeclampsia, and if not, not attributable to another cause
HELLP syndrome	HELLP syndrome* <u>only if</u> associated with hepatic haematoma or rupture *Haemolysis, Elevated Liver enzymes > 3 times the normal level and Low platelets < 50 000
Severe preeclampsia	Preeclampsia** only if it induced a preterm delivery for a main maternal indication before 32 gestational weeks ** Defined as hypertension \geq 140/90 and proteinuria \geq 0.3 g/24 h
Pulmonary embolism	Clinical symptoms consistent with pulmonary embolism + confirmation with imaging + treatment (imaging: computed tomography or ventilation/perfusion scintigraphy or Doppler; treatment: heparin or thrombolysis or embolectomy)
Placental abruption	Placental abruption associated with a haematological dysfunction criterion
Stroke	Cerebral imaging showing cerebral infarction or haemorrhage, or venous thrombosis, or sub-arachnoid haemorrhage
Cerebral transient ischaemic attack	Neurological deficit with symptoms§ completely regressive in 24 hours and normal cerebral imaging, in absence of associated migraine confirmed by neurologist § Monocular blindness, aphasia, haemianopsia, motor and/or sensory uni- or bilateral disorders
Severe psychiatric disorder	. Severe acute psychiatric disorder or acute decompensation of chronic disease (psychosis, major depression, bipolar disorder) diagnosed by psychiatrist . Suicide attempt

	<ul style="list-style-type: none"> . Cardiac arrest . Acute pulmonary oedema with hypoxaemia < 60 mm Hg or SaO₂ < 90% or treated with diuretics . Shock: Systolic blood pressure < 90 mm Hg during > 60 min or unresponsive to plasma expansion
Cardiovascular dysfunction	<ul style="list-style-type: none"> . Acute left ventricular dysfunction: left ventricular ejection fraction < 40% . Need for continuous IV vasopressor/inotrope drugs . Decompensation of a pre-existing cardiopathy with need for specialised management . Troponinaemia > 1 microg/l
Respiratory dysfunction	<ul style="list-style-type: none"> . Acute hypoxaemia < 60 mm Hg or SaO₂ < 90% with spontaneous ventilation . Mechanical ventilation, or non-invasive ventilation in the absence of chronic disease, not related to anaesthesia
Renal dysfunction	<ul style="list-style-type: none"> . Acute renal failure with creatinemia > 135 µmol/l . Acute oliguria < 500 ml/24 h
Neurological dysfunction	<p>Coma, regardless of stage and duration #</p> <p># Stage 1 coma = impaired consciousness with obtundation and reaction to painful stimuli only</p>
Hepatic dysfunction	<ul style="list-style-type: none"> . Prothrombin time < 60%, in the absence of constitutional deficiency . Direct bilirubinaemia > 20 micromole/l
Haematological dysfunction	<ul style="list-style-type: none"> . Thrombocytopenia < 50 000 /mm³ in the absence of chronic disorder . Acute anemia < 7 g/dl . Disseminated intravascular coagulation: platelets < 50 000/ mm³ or prothrombin time < 60% or fibrinogen < 2 g/l
Emergency surgery apart from childbirth procedure	<ul style="list-style-type: none"> . Secondary hysterectomy . Laparotomy for post-delivery complication apart from haematoma or parietal infection
Admission to Intensive Care Unit	
Maternal death	