In the Municipality of Rio de Janeiro there are some 90,000 in-hospital deliveries per year with live births. Approximately 70% occur in institutions belonging to the Unified National Health System (SUS) (47% in the public Federal, State, and Municipal system and 23% in hospitals outsourced by the SUS). The remaining 30% of live-birth deliveries occur in private hospitals. Since the city of Rio de Janeiro is the former national capital, it has a large concentration of public institutions, thus giving its health system a unique configuration. Management of numerous hospitals was transferred from Federal to Municipal hands (through the so-called municipalization process), leading to infrastructural and functional modernization, with investments in medium- and high-complexity perinatal care as well as the implementation of humanized care for the women and their newborns.

The infant mortality rate had been decreasing until the mid-1990s, basically in the post-neonatal component, with stable rates in the neonatal (and especially early neonatal) period. Since the mid-1990s there has been a decline in mortality rates in the first week of life. The overall infant mortality rate is now some 15 deaths per thousand life births, with nearly 70% of these deaths occurring in the first 28 days of life, although there is still a major contingent of deaths from avoidable causes. Of all the live births, some 8,000 children (9%) are born premature and the same number with low birth weight. These figures alone emphasize the persistent challenge of infant mortality in the city. Late fetal deaths are more numerous than early neonatal deaths, and more than half of these combined deaths could be avoided.

Given this situation, in 2000-2001 the National School of Public Health at the Oswaldo Cruz Foundation (ENSP-FIOCRUZ), together with the Rio de Janeiro Municipal Health Department (SMS-RJ), with financial support from the Rio de Janeiro State Research Foundation (FAPERJ) and UNESCO, launched a research project entitled “Study of Perinatal and Neonatal Morbidity and Mortality and Childbirth Care in the Municipality of Rio de Janeiro” in a sample of maternity hospitals in the city, with the objective of producing a refined diagnosis of the system’s clientele and the practices, processes, and structure comprising the health services that provide childbirth care.

This thematic issue includes several articles by ENSP faculty members and professionals from the SMS-RJ, as well as graduate students from ENSP who have developed their theses and dissertations using data from this research.

The authors analyze maternal socio-demographic, behavioral, and obstetric characteristics, inequalities in access to prenatal care, childbirth care, and use of medication, as well as indicators of postpartum and neonatal results. Adolescent pregnancy received special attention since it poses a serious public health problem, considering its repercussions on the young mother and her child. In addition, a set of articles deals with the validity and reliability of study data, comparing the results obtained with those reported on patient records and in the official data systems on births and deaths, among other issues.

The project included participation by numerous interns, undergraduate medical and nursing students, and young scientist scholarship students at ENSP, all of whom the team of authors thank for their collaboration. To the participating health institutions and especially the women who confided their life histories to us and welcomed us at such a unique moment, we hope to repay their trust by demonstrating to Brazilian society and the local health system managers the problems that still persist in dealing with perinatal care in the Municipality of Rio de Janeiro.

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Perinatal health in Rio de Janeiro