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SUMMARY:1970-1978
Issued July 1982

CENTERS FOR DISEASE CONTROL

ECTOPIC PREGNANCY

SURVEILLANCE



Family Planning Evaluation Division
Center for Health Promotion and Education

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES • Public Health Service

PREFACE

This report analyzes data from the National Hospital Discharge Survey, National Center for Health Statistics*, on women discharged with a diagnosis of ectopic pregnancy from U.S. non-federal, short-stay hospitals between 1970 and 1978. It is intended for use by clinicians, health planners and evaluators, and other public health professionals interested in the number and characteristics of women with ectopic pregnancies.

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I. SUMMARY

From 1970 to 1978, approximately 261,600 women aged 15-44 were discharged from United States hospitals with a diagnosis of ectopic pregnancy. For every 1,000 reported pregnancies during that period, an estimated 7.1 were ectopic. The number of ectopic pregnancies steadily increased from 17,800 in 1970 to 42,400 in 1978. The ectopic pregnancy rate also increased each year, regardless of which of three denominators (female population aged 15-44, live births, or reported pregnancies) was used. For each denominator, the rate more than doubled from 1970 to 1978.

During this 9-year period, over half the ectopic pregnancies occurred among women aged 25-34; over 70% occurred among white women, although the rates were consistently higher for black women.

When live births or reported pregnancies were used as the denominator, ectopic pregnancy rates rose as age increased. When the female population was used as the denominator, rates decreased for the oldest age group (35-44 years of age) since these women become pregnant less often than younger women.

The greatest number of ectopic pregnancies occurred in the South, but ectopic pregnancy rates were slightly higher in the Northeast. Previously noted variations in regard to age and race persisted within each region. Although over 70% of ectopic pregnancies occurred among currently married women, the ectopic pregnancy rates were highest for previously married women. The average length of hospital stay for ectopic pregnancy decreased from 7.2 days in 1970 to 5.9 days in 1978 and averaged 6.5 days for the period 1970-1978.

Although 437 women died because of ectopic pregnancy during 1970-1978, the mortality rate declined during this period from 3.5 to 0.9 deaths per 1,000 ectopic pregnancies. This trend was generally true for each age group. However, for each age group and region, the ectopic pregnancy mortality rates for black women were higher than those for white women. Mortality rates by month ranged from 0.9 (April) to 2.3 (January), with an overall rate of 1.7 deaths per 1,000 ectopic pregnancies.

II. INTRODUCTION

Because of 1) the important contribution of ectopic pregnancy to maternal mortality and 2) the absence of comprehensive national statistics on ectopic pregnancies, the Family Planning Evaluation Division, Center for Health Promotion and Education, Centers for Disease Control, is studying trends in the number and characteristics of women with ectopic pregnancies and investigating mortality from ectopic pregnancies.

This report, which presents data on ectopic pregnancy among reproductive-age women (15-44 years of age): 1) documents the estimated number and characteristics of women discharged after treatment of ectopic pregnancy in non-federal, short-stay hospitals in the United States during the 9-year period from 1970 through 1978; 2) analyzes major changes that occurred during those years; and 3) documents the number and characteristics of women who died from this condition.

III. SURVEILLANCE METHODS AND DEFINITIONS

Our surveillance includes systematic collection, analysis, and dissemination of information on this subject. Our overall surveillance objectives are to study the trends in ectopic pregnancy, to identify those women at greatest risk, to determine risk factors for morbidity and mortality, to assess the degree to which complications (including death) associated with this condition are preventable, and to reduce morbidity and mortality through prevention or appropriate intervention. CDC has already published several reports on ectopic pregnancy (see bibliography).

The numbers of ectopic pregnancies reported are estimates based on a systematic sample of medical records from a representative sample of hospitals in the United States. The diagnosis of ectopic pregnancy is based on those hospital discharge records coded 631 according to the eighth revision of the "International Classification of Diseases" (ICDA-8) (1). The rates for ectopic pregnancy are also estimates and were calculated by dividing the estimated number of ectopic pregnancies by three annual estimates: 1) the female population aged 15-44, 2) live births, and 3) reported pregnancies (defined as the sum of live births, legal induced abortions, and ectopic pregnancies). All three rates are included to provide comparative data. The data on deaths from ectopic pregnancy are based on U.S. mortality statistics provided by the National Center for Health Statistics. Mortality rates were calculated by



dividing the number of deaths from ectopic pregnancy by the estimated number of ectopic pregnancies.

A. Incidence Data

Statistical Design of the National Hospital Discharge Survey--The numbers of ectopic pregnancies presented in this report are based on data collected by the National Center for Health Statistics (NCHS) as part of the ongoing National Hospital Discharge Survey (NHDS). Data from the NHDS were reviewed and reanalyzed by CDC. The NHDS is conducted each year, using a sample of more than 400 non-federal, short-stay hospitals that represents all 50 States and the District of Columbia. The objective of the NHDS is to estimate the number and characteristics of patients admitted to hospitals because of disease or injury, or because they need surgery. Only non-federal hospitals with six or more inpatient beds and with an average hospital stay for all patients of less than 30 days are included in the NHDS (2).

Data Collection and Processing--A sample of medical records is abstracted annually in each designated hospital. Demographic data, final diagnoses, and surgical procedures shown on the medical-record face sheets are collected on a one-page NHDS medical abstract form. Each year the NHDS receives about 225,000 abstracts, which represent about 0.7% of the discharges from non-federal, short-stay hospitals. Each abstract in the sample represents approximately 160 patients discharged from these hospitals.

Presentation of Estimates--Estimates of ectopic pregnancy occurrence were rounded to the nearest hundred for this report. This rounding sometimes causes the sum of individual numbers not to equal the total. Rates and averages were calculated from the unrounded estimates and may vary slightly from calculations based on the rounded totals.

The population estimates used to compute ectopic pregnancy rates in this report are unpublished estimates of the U.S. resident population and were prepared by the U.S. Bureau of the Census.

Reliability of Estimates--NHDS estimates are subject to measurement errors because of some hospitals' failure to respond, missing abstracts, incomplete or inaccurate information on the abstract form, and errors in processing.

For the 9-year period 1970-1978, the percentage of patients discharged who were of unknown race ranged from 8% to 15% per year. To calculate race-specific rates, we redistributed the records for patients of unknown race according to the known distribution of race. Patients of unknown marital status accounted for only 2% of the total; their records were not redistributed, but instead were excluded from marital status tables.

Because a sample was used in the NHDS, the estimates are also subject to sampling error. Small estimates are subject to proportionately larger errors than large estimates. One estimate is less than 4,000 and is marked with an asterisk (*) to indicate possible unreliability.

B. Mortality Data

The National Center for Health Statistics (NCHS) is responsible for classifying causes of death in the United States. From NCHS we obtained computer tapes which contained data on all such deaths, although data on marital status were not available. The deaths attributed to ectopic pregnancy in this report are those for which the underlying cause of death was coded 631 according to the eighth revision of the "International Classification of Diseases" (ICDA-8). Rates were obtained by dividing the number of deaths by the estimated number of ectopic pregnancies.

C. Definitions

Ectopic Pregnancies--These are fertilized ova implanted anywhere other than inside the body of the uterus, including cervical, interstitial, serosal, and extra-uterine locations; most ectopic pregnancies occur within a fallopian tube.

Geographic Region--The four regions are defined by the U.S. Bureau of the Census as Northeast, North Central, South, and West (Figure 1).

Age--Only women of reproductive age (defined as those aged 15-44 years) are included.

Race--Women were grouped and analyzed as "white" or "black." Hispanic Americans were included in the white group. The black group included all races other than white; 93% of women in this category were black.

Marital Status--Women were classified as currently, previously, or never married at the time of their discharge from the hospital. Patients who were separated were considered currently married; divorced and widowed women were classified as previously married.

Length of Hospital Stay--This was measured as the total number of days a patient was hospitalized. This number was computed by adding all days from (and including) the date of admission to (but not including) the date of discharge.

IV. NUMBER AND CHARACTERISTICS OF WOMEN WITH ECTOPIC PREGNANCIES

A. Numbers and Rates (Table 1)

From 1970 through 1978, 261,600 ectopic pregnancies occurred in the United States. The number increased successively each year from 17,800 in 1970 to 42,400 in 1978. The overall ectopic pregnancy rate per 10,000 females aged 15-44 was 6.3, increasing each year from 4.2 in 1970 to 8.5 in 1978. The overall rate per 1,000 live births was 8.8, increasing each year from 4.8 in 1970 to 12.8 in 1978. The overall rate per 1,000 reported pregnancies (including live births, legal induced abortions, and ectopic pregnancies) was 7.1, increasing from 4.5 in 1970 to 9.4 in 1978.

B. Age and Race (Table 2)

For 1970-1978, the overall ectopic pregnancy rate based on the female population increased from 5.3 per 10,000 for the 15- to 24-year age group to 10.3 for the 25- to 34-year age group, then decreased to 2.9 for the 35- to 44-year age group. In contrast, the rates based on live births and reported pregnancies increased with each successive age group. The rates based on live births almost doubled between age groups: 5.8, 11.3, and 20.5 per 1,000 for the 15- to 24-, 25- to 34-, and 35- to 44-year age groups. Similarly, ectopic pregnancy rates based on reported pregnancies were 4.5, 9.7, and 15.2 per 1,000 for the same three age groups.

Over 70% of the ectopic pregnancies from 1970 through 1978 occurred among white women, although ectopic pregnancy rates were consistently higher for black women. For each of the three denominators, the rates for black women were about double the comparable rates for white women.

C. Geographic Region (Tables 3 and 4)

The overall ectopic pregnancy rates were similar for all four regions. The highest rates occurred in the Northeast, with the lowest rates in the South (although the South had the highest numbers of ectopic pregnancies). Rates increased with increasing age in all regions when live births and reported pregnancies were used as denominators.

Analysis by region and race shows that the ectopic pregnancy rate for white women was lowest in the South for all three denominators. The rate for black women was also lowest in the South when live births were used as the denominator, but was lowest in the West when the rate was based on population or reported pregnancies. The highest rates for both whites and blacks occurred in the Northeast for two of the three denominators used: rate per 10,000 females for blacks; rate per 1,000 pregnancies for whites; and rate per 1,000 live births for both.

D. Marital Status (Tables 5 and 6)

The highest number of ectopic pregnancies occurred among currently married women. However, ectopic pregnancy rates were highest for previously married women, lowest for never married women, and intermediate for currently married women. Rates by age were also highest for previously married women. Rates for black women were higher than those for white women in all three marital status categories.

E. Length of Stay (Table 7)

For women hospitalized for ectopic pregnancy, the mean length of stay fell from 7.2 days in 1970 to 5.9 days in 1978, averaging 6.5 days for the period.

V. ECTOPIC PREGNANCY MORTALITY

A. Numbers and Rates (Tables 8 and 9)

Between 1970 and 1978, 437 women died from ectopic pregnancies. The mortality rate declined from 3.5 to 0.9 deaths per 1,000 ectopic pregnancies during that period (Figure 2), as the annual number of deaths decreased from 63 to 37. However, deaths from ectopic pregnancy as a percentage of all maternal deaths increased from 8% to 12% between 1970 and 1978 (3). In 1976 and 1977, ectopic pregnancy was the largest single cause of maternal death for black women, accounting for 18% of such deaths in both years.

B. Age and Race (Table 10)

Mortality rates decreased from 1970 to 1978 (Figure 2) and for all three age groups and both racial categories. Mortality rates were very similar for all age groups; the overall rate was 1.7. For both races, the greatest number of deaths from ectopic pregnancy occurred among 25- to 34-year-old women. Black women had consistently higher mortality rates than white women for all age groups. Overall, black women had a mortality rate 3.4 times that of white women. The mortality rate for black women under 25 years of age was almost seven times higher than the mortality rate for white women aged 35-44 years.

C. Geographic Region (Table 11)

The mortality rate ranged from 1.1 deaths per 1,000 ectopic pregnancies in the West to 2.2 in the South. For white women, the rates were similar in all regions, ranging from 0.8 to 1.1, but for black women, the rate in the north central region (4.0) was double the rate in the West (2.0).

D. Temporal Trends (Table 12)

There did not appear to be any seasonal trends in the occurrence of ectopic pregnancies or deaths from this condition. The greatest number of ectopic pregnancies occurred in March and the smallest number in September. The highest mortality rate (2.3 per 1,000 cases) occurred in January, and the lowest (0.9) occurred in April.

VI. DISCUSSION

The incidence and rates of ectopic pregnancies in the United States have increased more than twofold from 1970 to 1978. The risk of this condition increased with age and was higher for black women than for white women. Mortality rates for black women remained consistently higher than those for white women in every age group and geographic region.

The estimated numbers of ectopic pregnancies in this report are low estimates for the United States because they do not include women admitted to federally operated hospitals, such as Armed Forces and Public Health Service hospitals. Furthermore, ectopic pregnancies may be undiagnosed and therefore underreported, although presumably most cases are eventually treated in hospitals.

The reported pregnancies used as denominators are underestimates because the numbers of spontaneous abortions, illegal abortions, and stillbirths are excluded (accurate data on these three outcomes are not available). In addition, the numbers of legal abortions included in this denominator are based on data reported to the Centers for Disease Control and are approximately 18% less than those ascertained by the Alan Guttmacher Institute (4). Therefore, the rates based on reported pregnancies are likely to be overestimates.

The race of the patient was unknown for about 12% of the sampled medical records each year. To calculate race-specific ectopic pregnancy rates, unknown race was redistributed according to the percentage of known race. Conclusions regarding race should therefore be interpreted with caution. The exclusion of about 2% of the records because of unknown marital status makes the totals in marital status tables differ from those in other tables.

The magnitude of the public health problem presented by ectopic pregnancies is indicated when ectopic pregnancy rates are calculated using the number of women 15-44 years old as the denominator. These rates can be compared with other rates which use the same denominator to determine the relative frequency of ectopic pregnancy compared with that of other health problems affecting reproductive-age women. However, use of the population denominator is less helpful in determining risk factors for individual women having an ectopic pregnancy because this denominator does not clearly define the population at risk of developing this condition.

The rates by age are very different when live births or reported pregnancies are used as the denominator instead of the population. This is because rates using female population as the denominator do not take into account the fact that women aged 35 years or more are less likely to become pregnant than younger women. Therefore, a smaller proportion of these older women are at risk of having an ectopic pregnancy. When the denominator includes the large number of older women who do not become pregnant, the rates are decreased, and the true effect of increasing age on the occurrence of ectopic pregnancy is hidden. This effect is revealed when live births or reported pregnancies are used as the denominator because older women are more likely to develop an ectopic pregnancy than younger women.

The most striking aspect of the ectopic-pregnancy mortality rates, other than the overall decline over time, is the racial differences. These racial differences persist over time for different age groups and regions. Black women are not only at higher risk of developing an ectopic pregnancy, but are also at higher risk of dying from this condition if it occurs.

Technologic changes have probably decreased the risk of death from this condition. More sensitive pregnancy tests, ultrasound examination, and laparoscopy have contributed to the earlier and more frequent diagnosis of ectopic pregnancies. Greater awareness of ectopic pregnancies on the part of women and health care providers has probably contributed to more frequent diagnosis as well. Shorter stays for treatment of ectopic pregnancy may have resulted from earlier intervention and less extensive treatment for unruptured ectopic pregnancies.

Anyone learning of deaths which may be attributable to ectopic pregnancy is requested to contact:

Abortion Surveillance Branch
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Center for Health Promotion and Education
Centers for Disease Control
Atlanta, Georgia 30333
(404) 329-3131

VII. CENTERS FOR DISEASE CONTROL PUBLICATIONS RELATED TO ECTOPIC PREGNANCY

1977

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1982

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3. National Center for Health Statistics. Final mortality statistics. Rockville, Md: National Center for Health Statistics, 1970-1978.
4. Centers for Disease Control. Abortion surveillance 1978. Issued November 1980.

Table 1

Numbers and Rates of Ectopic Pregnancies by Year, United States, 1970-1978

Year	Number	Rates		
		Females Aged 15-44 ¹	Live Births ²	Reported Pregnancies ³
1970	17,800	4.2	4.8	4.5
1971	19,300	4.4	5.4	4.8
1972	24,500	5.5	7.5	6.3
1973	25,600	5.6	8.2	6.8
1974	26,400	5.7	8.4	6.7
1975	30,500	6.5	9.8	7.6
1976	34,600	7.2	11.0	8.3
1977	40,700	8.3	12.3	9.2
1978	42,400	8.5	12.8	9.4
Total	261,600	6.3	8.8	7.1

¹Rate per 10,000 females

²Rate per 1,000 live births

³Rate per 1,000 reported pregnancies (live births, legal induced abortions, and ectopic pregnancies)

Table 2

Numbers and Rates of Ectopic Pregnancies by Age and Race¹,
United States, 1970-1978

Numbers of Ectopic Pregnancies

Age	White	Black	Total
15-24	65,400	27,000	92,400
25-34	100,700	38,000	138,700
35-44	19,000	11,500	30,600
Total	185,100	76,600	261,600

Rate per 10,000 Females

Age	White	Black	Total
15-24	4.4	10.5	5.3
25-34	8.6	20.9	10.3
35-44	2.0	8.2	2.9
Total	5.2	13.2	6.3

Rate per 1,000 Live Births

Age	White	Black	Total
15-24	5.2	7.8	5.8
25-34	9.6	22.0	11.3
35-44	15.8	40.1	20.5
Total	7.6	14.0	8.8

Rate per 1,000 Reported Pregnancies
(Live births, legal induced abortions, and ectopic pregnancies)

Age	White	Black	Total
15-24	4.2	5.7	4.5
25-34	8.5	16.1	9.7
35-44	12.2	25.9	15.2
Total	6.4	10.1	7.1

¹Unknown race redistributed according to the percentage
of race known

Table 3

Numbers and Rates of Ectopic Pregnancies by Age and Geographic Region,
United States, 1970-1978

Numbers of Ectopic Pregnancies

Age	Northeast	North Central	South	West	Total
15-24	18,300	24,600	31,400	18,000	92,400
25-34	37,300	37,200	38,400	25,700	138,700
35-44	8,700	5,400	9,800	6,800	30,600
Total	64,300	67,200	79,700	50,500	261,600

Rate per 10,000 Females

Age	Northeast	North Central	South	West	Total
15-24	4.7	5.1	5.6	5.8	5.3
25-34	12.1	10.4	8.9	10.2	10.3
35-44	3.4	1.9	2.9	3.5	2.9
Total	6.7	6.0	6.0	6.7	6.3

Rate per 1,000 Live Births

Age	Northeast	North Central	South	West	Total
15-24	6.5	5.7	5.4	6.1	5.8
25-34	13.0	11.1	10.5	10.9	11.3
35-44	24.0	13.3	21.3	24.7	20.5
Total	10.6	8.3	8.0	9.1	8.8

Rate per 1,000 Reported Pregnancies
(Live births, legal induced abortions, and ectopic pregnancies)

Age	Northeast	North Central	South	West	Total
15-24	4.3	4.8	4.5	4.4	4.5
25-34	10.3	10.0	9.3	9.0	9.7
35-44	16.0	11.2	17.6	18.6	15.2
Total	7.6	7.2	6.9	6.9	7.1



Table 4

Numbers and Rates of Ectopic Pregnancies by Race¹ and Geographic Region,
United States, 1970-1978

Numbers of Ectopic Pregnancies					
Race	Northeast	North Central	South	West	Total
White	45,600	51,600	48,300	41,500	185,100
Black	18,800	15,600	31,300	9,000	76,600
Total	64,300	67,200	79,700	50,500	261,600

Rate per 10,000 Females

Race	Northeast	North Central	South	West	Total
White	5.4	5.1	4.5	6.2	5.2
Black	16.5	13.9	11.6	10.8	13.2
Total	6.7	6.0	6.0	6.7	6.3

Rate per 1,000 Live Births

Race	Northeast	North Central	South	West	Total
White	8.9	7.3	6.5	8.6	7.6
Black	20.8	14.6	12.2	13.0	14.0
Total	10.6	8.3	8.0	9.1	8.8

Rate per 1,000 Reported Pregnancies
(Live births, legal induced abortions, and ectopic pregnancies)

Race	Northeast	North Central	South	West	Total
White	6.8	6.5	5.8	6.5	6.4
Black	10.5	11.1	9.8	9.5	10.1
Total	7.6	7.2	6.9	6.9	7.1

¹Unknown race redistributed according to the percentage of race known

Table 5

Numbers and Rates¹ of Ectopic Pregnancies by Age and Marital Status²,
United States, 1970-1978

Numbers of Ectopic Pregnancies

Age	Currently Married	Previously Married	Never Married	Total
15-24	51,800	8,400	30,800	90,900
25-34	106,100	17,100	12,800	136,000
35-44	22,700	4,700	2,100*	29,500
Total	180,600	30,100	45,700	256,400

Rate per 10,000 Females

Age	Currently Married	Previously Married	Never Married	Total
15-24	9.1	28.3	2.7	5.2
25-34	9.8	17.6	9.0	10.3
35-44	2.5	4.4	4.0	2.8
Total	7.1	13.0	3.4	6.2

¹Data for rates based on live births and reported pregnancies not available

²Excludes unknown marital status

*Estimate possibly unreliable because of small sample size

Table 6

Numbers and Rates of Ectopic Pregnancies by Race¹ and Marital Status²,
United States, 1970-1978

Numbers of Ectopic Pregnancies				
Race	Currently Married	Previously Married	Never Married	Total
White	142,900	17,100	23,400	183,500
Black	37,700	12,900	22,200	72,900
Total	180,600	30,100	45,700	256,400

Rate per 10,000 Females				
Race	Currently Married	Previously Married	Never Married	Total
White	6.3	9.1	2.1	5.2
Black	13.0	29.6	9.7	13.0
Total	7.1	13.0	3.4	6.2

¹Unknown race redistributed according to the percentage of race known

²Excludes unknown marital status

Table 7

Number of Ectopic Pregnancies and Average Length of Hospital Stay for
Females Aged 15-44, United States, 1970-1978

Year	Number	Average Length of Stay (Days)	Total Person-Days Hospitalized
1970	17,800	7.2	127,800
1971	19,300	7.1	136,700
1972	24,500	7.1	173,800
1973	25,600	7.4	189,200
1974	26,400	6.8	179,200
1975	30,500	6.1	186,200
1976	34,600	6.4	221,600
1977	40,700	5.8	236,200
1978	42,400	5.9	249,900
Total	261,600	6.5	1,700,700



Table 8

Numbers and Rates of Ectopic Pregnancy Deaths
by Age, Race, and Geographic Region,
United States, 1970-1978

Characteristics		Number of Deaths	Rate ¹
Age			
15-24		171	1.9
25-34		218	1.6
35-44		48	1.6
Race ²			
White		179	1.0
Black		258	3.4
Geographic Region			
Northeast		99	1.5
North Central		105	1.6
South		178	2.2
West		55	1.1
Total		437	1.7

¹Deaths per 1,000 ectopic pregnancies

²Unknown race redistributed according to the percentage of race known

Table 9

Numbers and Rates of Ectopic Pregnancy Deaths by Age,
United States, 1970-1972, 1973-1975, 1976-1978

Age	Numbers of Deaths			Total
	1970-1972	1973-1975	1976-1978	
15-24	67	57	47	171
25-34	84	75	59	218
35-44	21	14	13	48
Total	172	146	119	437

Death Rate per 1,000 Ectopic Pregnancies

Age	1970-1972	1973-1975	1976-1978	Total
15-24	3.5	1.8	1.1	1.9
25-34	2.6	1.8	0.9	1.6
35-44	2.2	1.5	1.1	1.6
Total	2.8	1.8	1.0	1.7

Table 10

Numbers and Rates of Ectopic Pregnancy Deaths by Age and Race¹,
United States, 1970-1978

Number of Deaths				
Age	White	Black	Total	
15-24	63	108	171	
25-34	104	114	218	
35-44	12	36	48	
Total	179	258	437	

Death Rate per 1,000 Ectopic Pregnancies				
Age	White	Black	Total	
15-24	1.0	4.0	1.9	
25-34	1.0	3.0	1.6	
35-44	0.6	3.1	1.6	
Total	1.0	3.4	1.7	

¹Unknown race redistributed according to the percentage of race known

Table 11

Numbers and Rates of Ectopic Pregnancy Deaths by Race¹
and Geographic Region, United States, 1970-1978

Number of Deaths					
Race	Northeast	North Central	South	West	Total
White	45	42	55	37	179
Black	54	63	123	18	258
Total	99	105	178	55	437

Death Rate per 1,000 Ectopic Pregnancies					
Race	Northeast	North Central	South	West	Total
White	1.0	0.8	1.1	0.9	1.0
Black	2.9	4.0	3.9	2.0	3.4
Total	1.5	1.6	2.2	1.1	1.7

¹Unknown race redistributed according to the percentage of race known

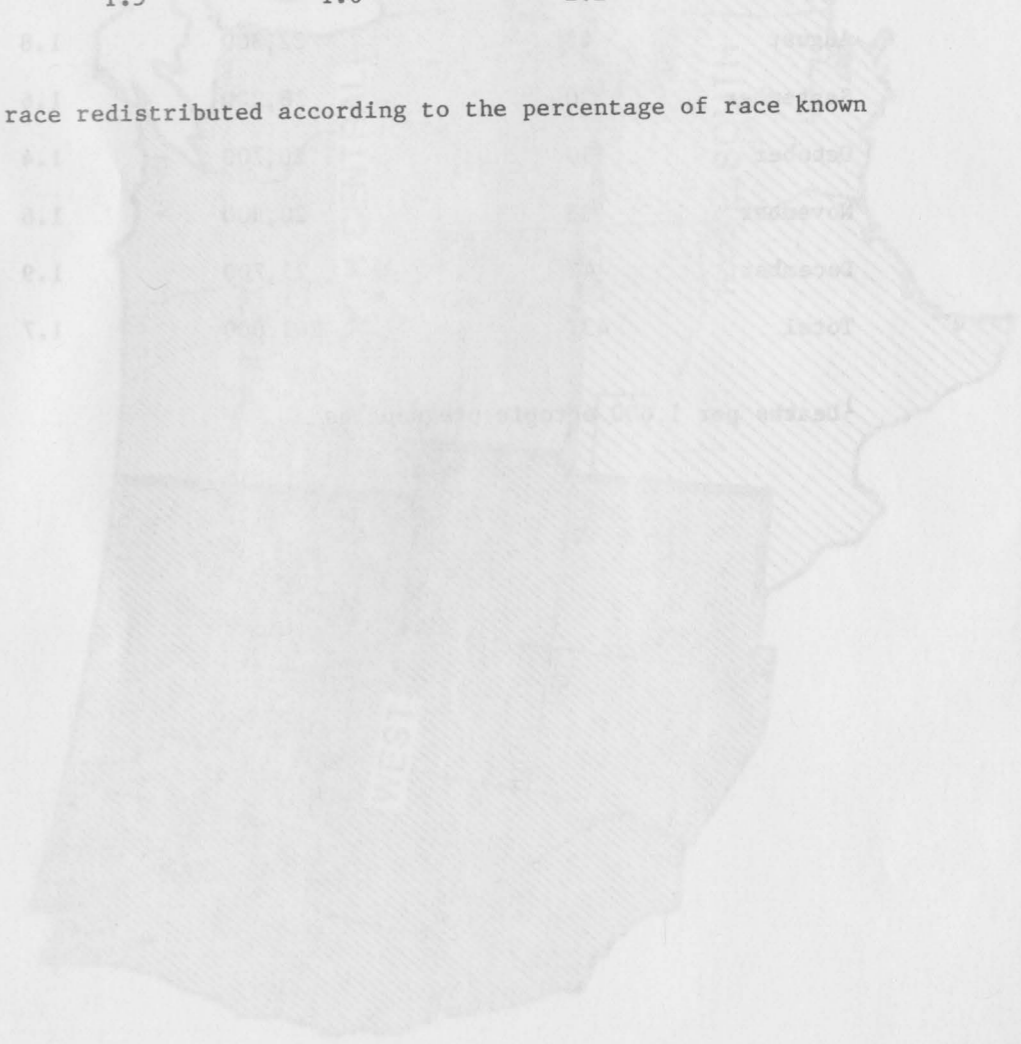


Table 12

Mortality Rates for Ectopic Pregnancies by Month,
United States, 1970-1978

Month	Number of Deaths	Number of Ectopic Pregnancies	Rate ¹
January	56	24,200	2.3
February	38	18,400	2.1
March	36	25,300	1.4
April	22	24,400	0.9
May	26	19,500	1.3
June	33	22,000	1.5
July	49	23,800	2.1
August	42	22,800	1.8
September	30	18,200	1.6
October	30	20,700	1.4
November	33	20,900	1.6
December	42	21,700	1.9
Total	437	261,600	1.7

¹Deaths per 1,000 ectopic pregnancies

Fig. 1
STATES IN FOUR REGIONS AS DEFINED BY THE U.S. BUREAU OF THE CENSUS

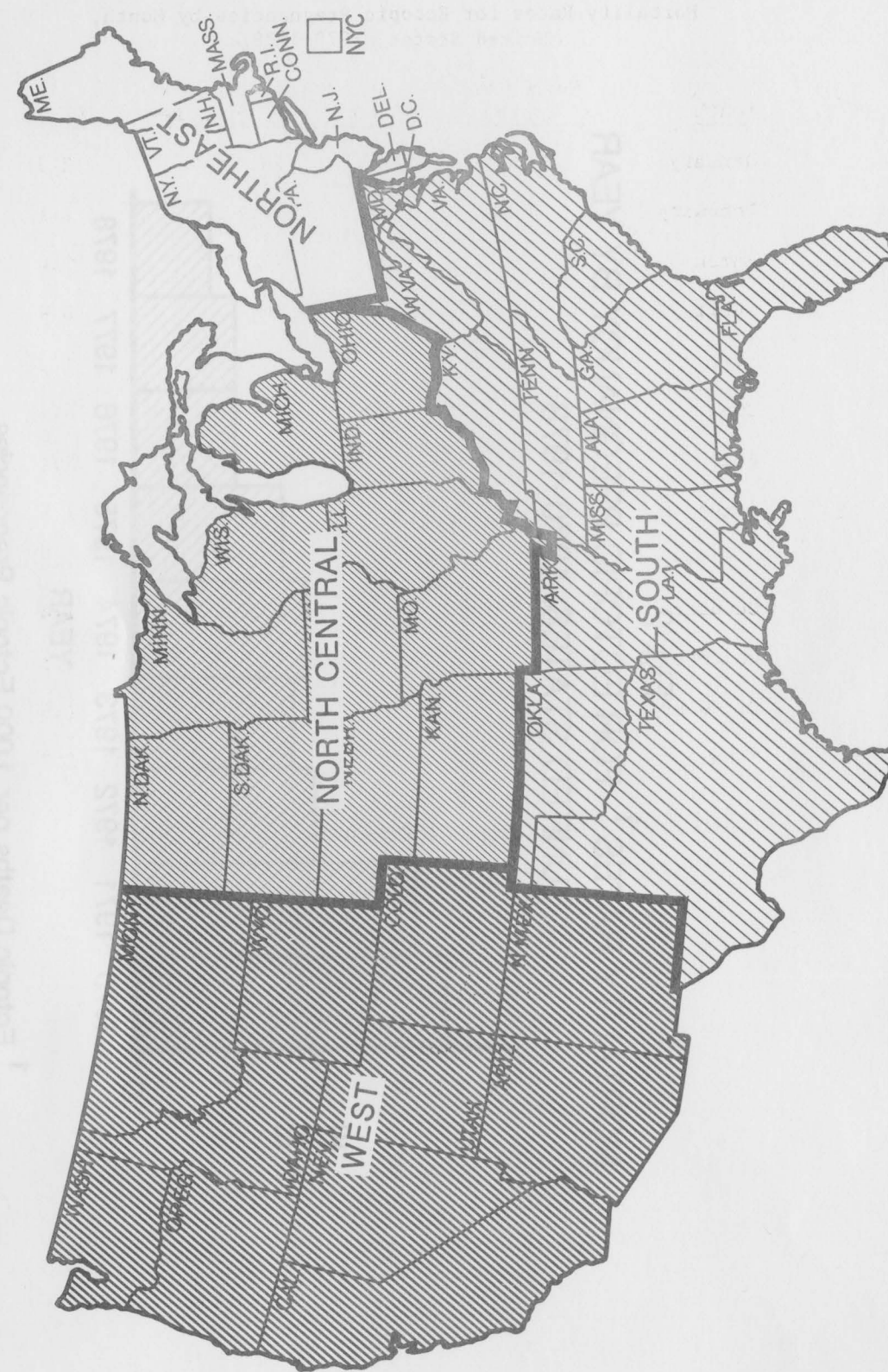
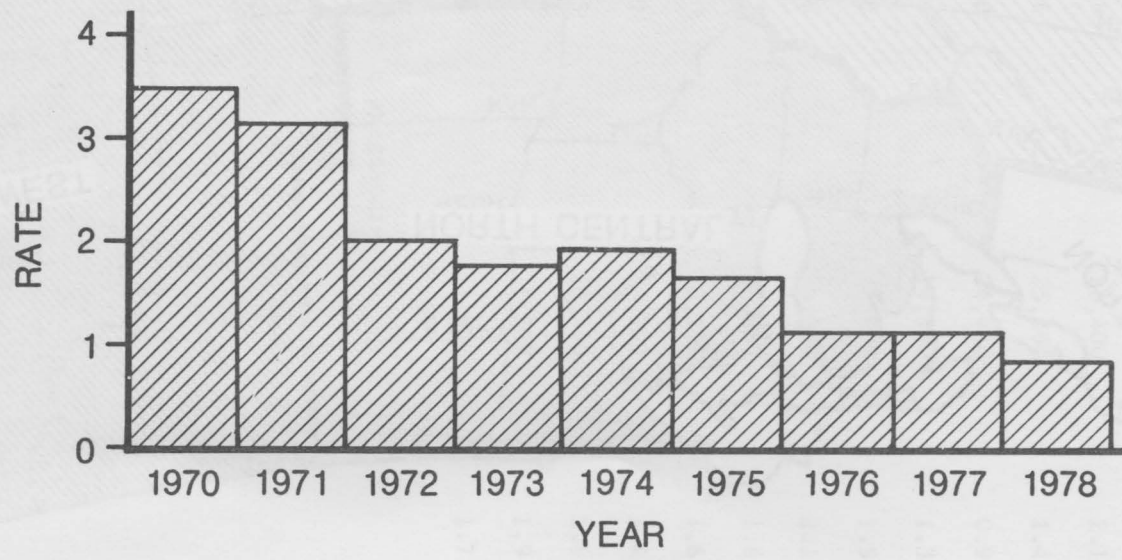


Fig. 2
MORTALITY RATES¹ FOR ECTOPIC PREGNANCY BY YEAR
UNITED STATES, 1970-1978



¹ Ectopic Deaths per 1,000 Ectopic Pregnancies

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