

P161. DECLINING USE OF PERIPARTUM HYSTERECTOMY IN ATONIC POSTPARTUM HAEMORRHAGE

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CONTEXT:

Obstetric haemorrhage remains one of the major causes of maternal death in both developed and developing countries. The last two decades have shown an increasing trend in occurrence of postpartum haemorrhage (PPH) majority being attributed to Atonic PPH. An audit of such cases is pertinent for planning healthcare systems. Trends in Peri partum Hysterectomy over the years have declined with use of devascularisation techniques and better medical management.

OBJECTIVE:

Identify incidence of Atonic postpartum haemorrhage (PPH) and study relation of Atonic PPH to mode of delivery, management, blood transfusions over 5 years.

METHODS:

The study was conducted at a tertiary care centre Government Lady Goschen hospital, associated with Kasturba Medical College, Manipal University Mangalore India. This study was a retrospective observational study. All women who developed Atonic PPH during a 5 year period January 2010 - December 2014 were included in the study. Details were retrieved from the medical records. Demographic details, mode of delivery, management to control bleeding both medical and surgical, need for blood transfusions were noted. Data was entered into Microsoft offices excel worksheet and was analysed using statistical software SPSS version 17.0.

RESULTS:

The incidence of Atonic PPH was 3.9% (1051/26693 deliveries).Vaginal delivery was associated with 2.12% (362/1051) and 7.26 %(588/1051) among caesarean delivery. 90.3 %(n=950) of Atonic PPH were managed medically and only 9.6 %(n=101) needed surgical intervention. Devascularisation was performed in 67.2% of cases with 15% needing more than one devascularisation procedure. Incidence of Peri partum hysterectomy for Atonic PPH remained a minimal 0.67% (n=18). Blood transfusion was required in 9 %(n= 95) and majority (84.2%, n=80) were following caesarean section. The 5 year study revealed the incidence of Atonic PPH has remained the same with a decline in Peri partum hysterectomy as a treatment for Atonic PPH.

CONCLUSION:

Incidence of Atonic PPH remains static over the 5 year period. A higher incidence of Atonic PPH is

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noted with caesarean delivery. There is a decline in Peri partum hysterectomy as a treatment for Atonic PPH.