

Demographic predictors of severe postpartum haemorrhage in a tertiary setting



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Background

The incidence of postpartum haemorrhage (PPH) is increasing around Australia¹. Identifying risk factors could improve prediction of PPH.

Objectives

- To identify risk factors for PPH in patients birthing at a tertiary hospital.
- To explore a correlation between number of risk factors and PPH.

Methods

- Retrospective case control study comparing cases of severe PPH complicating vaginal birth, with controls over the month of September 2017.
- 17 risk factors were identified from previous literature on PPH and were quantified.

Results

PPH was most strongly correlated with forceps delivery, past history of PPH, low lying placenta at morphology scan, induction of labour and use of a Syntocinon infusion (figure 1). Women with 4 or more risk factors were more likely to have PPH than women with 1-3 risk factors (figure 2).

The comparison between those with 3 or less risk factors and 4 or more risk factors was predictive of PPH when using a Chi-squared comparison with $p < 0.001$.

Discussion

Assessing the number of risk factors for PPH during pregnancy could help to predict risk of PPH. Forceps delivery was correlated most strongly with PPH which could result in increased awareness of PPH risk when forceps are used and preventative measures could be put in place.

Figure 1: Risk factors associated with PPH

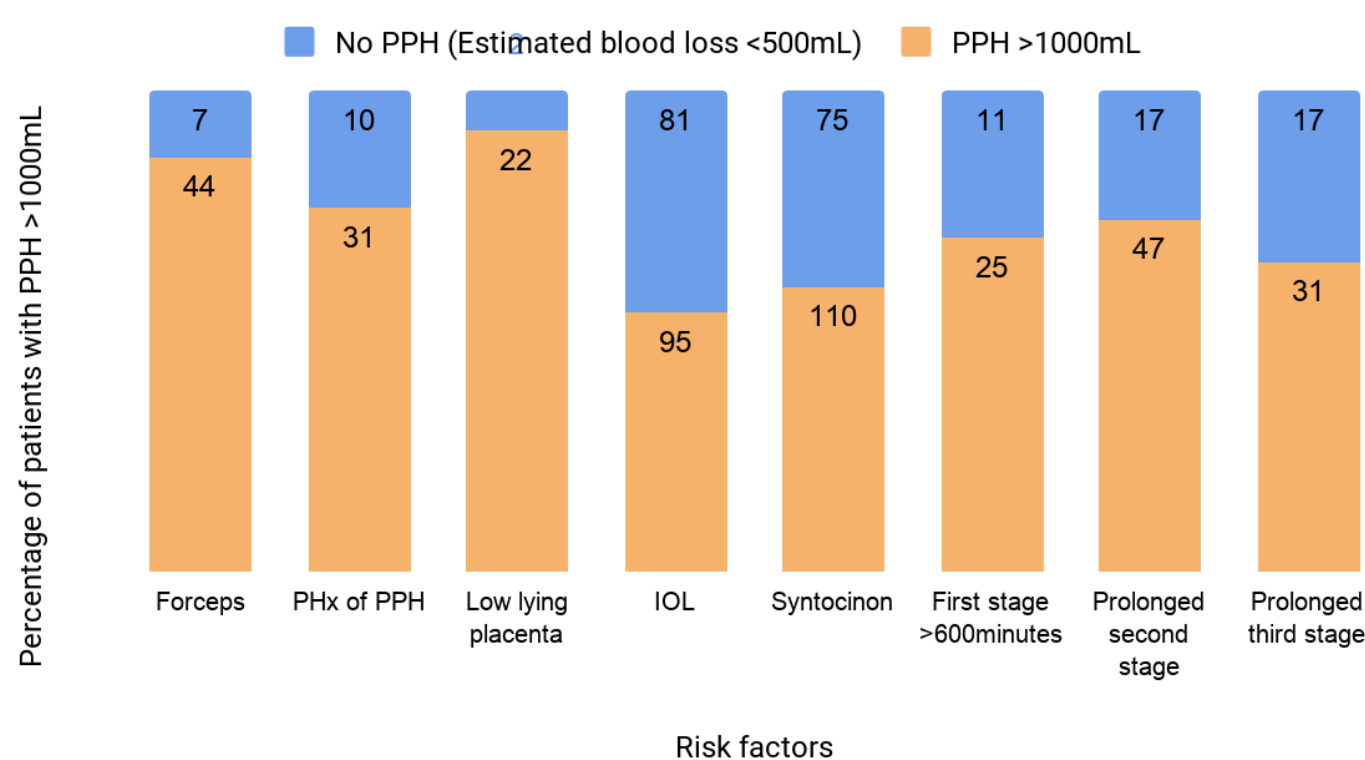
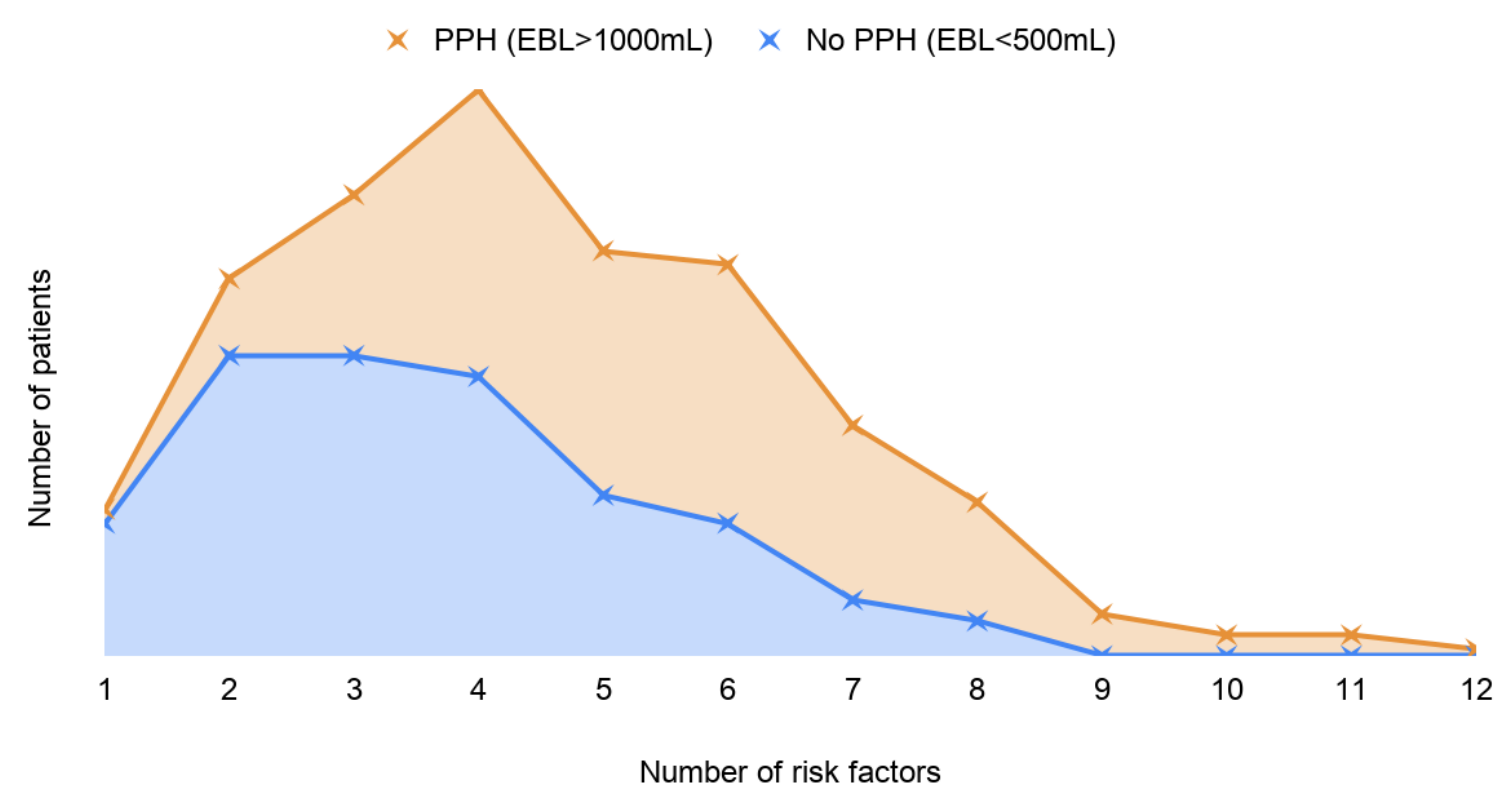


Figure 2: Number of risk factors in mothers with PPH



References

- Flood, MM, Pollock, WE, McDonald, SJ & Davey, M 2018, 'Monitoring postpartum haemorrhage in Australia: Opportunities to improve reporting,' *Women and Birth*, Vol 31, pp. 89-95.

Conclusion

Assessing risk factors for PPH and identifying high risk pregnancies, especially in women with 4-8 risk factors, could help devise a strategy or protocol aimed at preparing for and reducing the incidence of PPH.