



Indigeneity and its Impact on Primary Postpartum Haemorrhage in North Queensland

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Introduction

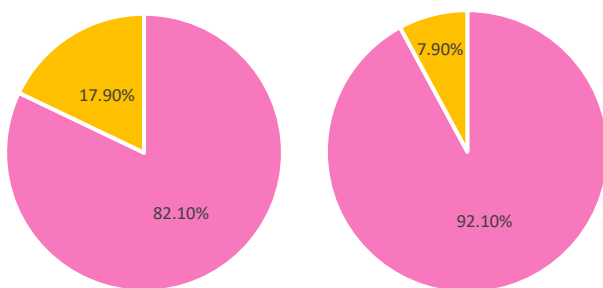
- Obstetric haemorrhage was the second highest cause of direct maternal death in Australia from 2010-2019.¹
- Recent research has shown that Indigenous women have a higher incidence of primary postpartum haemorrhage (PPH) when compared to non-Indigenous women.²
- Despite this, indigeneity is not currently recognised as a risk factor for PPH within the Queensland State Guidelines.³

Methods

- This was a retrospective clinical chart audit of women with severe PPH (1000 mL) from July 2021 – June 2022.
- Women were broken up into groups based on severity of PPH (1000 mL – 1500 mL; 1501 mL-2000 mL; >2000 mL)

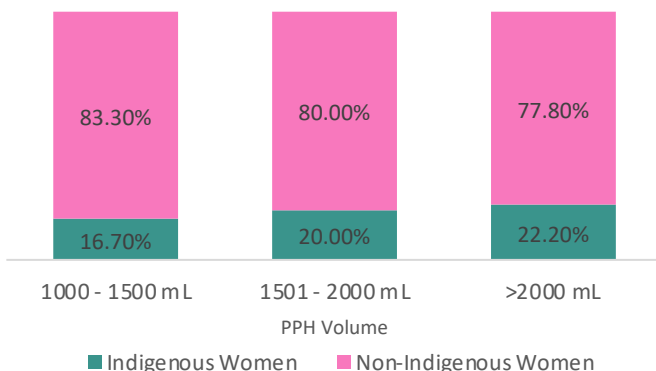
Results

Proportion of Women with PPH and Proportion of Women in the Community



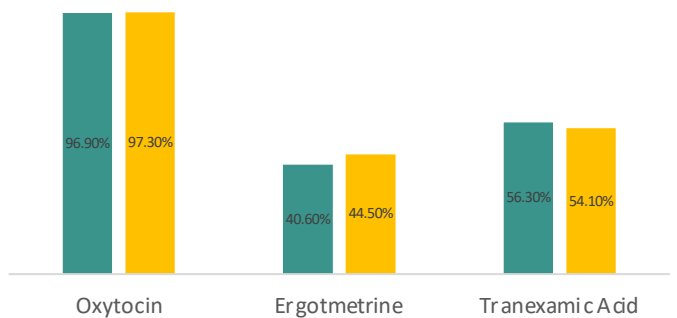
■ Non-Indigenous Women
■ Indigenous Women

Proportion of Indigenous and Non-Indigenous Women According to PPH Severity



■ Indigenous Women ■ Non-Indigenous Women

Management of PPH in Indigenous and Non-Indigenous Women



■ Indigenous Women ■ Non-Indigenous Women

- The severe PPH rate of Indigenous peoples was higher than the proportion of Indigenous peoples in the population (17.9% vs 7.9%, respectively).⁴
- As volume of PPH increased, the proportion of Indigenous women increased (16.7%; 20.0%; 22.2%, respectively) and the proportion of non-Indigenous women decreased (83.3%; 80.0%, 77.8%, respectively).
- Compliance to guidelines was similar in Indigenous and non-Indigenous women, with good compliance to active third stage management (96.9% vs. 97.3%, respectively), moderate compliance to ergometrine administration (40.6% vs. 44.5%, respectively) and moderate compliance to tranexamic acid administration (56.3% vs. 54.1%, respectively).

Conclusions

- This audit and previous research support the idea that Indigenous women are at higher risk of PPH.
- The data also shows that Indigenous women may have increased severity of PPH when compared to non-Indigenous women.
- Future research is needed to elucidate if indigeneity is an independent risk factor for PPH or if other obstetric issues play a role in increasing their PPH rate
- This higher risk profile is an important factor to consider when managing Indigenous women.

References

1. Australian Institute of Health and welfare, National Maternal Mortality Data Collection annual update 2019
2. Lucas, I.M., et al., *Gestational diabetes is associated with postpartum hemorrhage in Indigenous Australian women in the PANDORA study: A prospective cohort*. International Journal of Gynecology & Obstetrics, 2021. **155**(2): p. 296-304.
3. Queensland Clinical Guidelines. Postpartum haemorrhage Guideline No. MN18.1- V10-R23 Queensland Health.2021. Available from: <http://www.health.qld.gov.au/qcg>
4. 2016 Townsville Census [Internet]. Australian Bureau of Statistics. [cited 2023Aug05]. Available from: <https://www.abs.gov.au/census/find-censusdata/quickstats/2016/318>