

Tranexamic Acid in Prevention of Postpartum Haemorrhage in Elective Cesarean Section

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Abstract : Background and Objectives: Postpartum hemorrhage (PPH) is a common and occasionally life-threatening complication of labour. Cesarean section (CS) is associated with more blood loss than vaginal delivery. There is a trend for increasing CS rates in both developed and developing countries. This could increase the risk of morbidity and mortality, especially among anemic women. The objective of this study was to evaluate the effect of preoperative administration of Intravenous Tranexamic Acid (TA) on blood loss during and after elective CS delivery. Materials and Methods: It is a prospective, randomized controlled study. 160 eligible pregnant women of 37 or more POG planned for CS were randomized into two groups either to receive 10ml(1gm) of tranexamic acid intravenously or 10ml of normal saline. Blood loss was measured during and for 24 hours after operation. Results: The mean estimated blood loss was significantly lower in women treated with TA compared with women in the placebo group (392.13 ml \pm 10.06 versus 498.69 ml \pm 15.87, respectively; p < 0.001). The mean difference in pre-operative and post-operative hemoglobin levels was statistically significant in the tranexamic acid group than in the control group (0.31 \pm 0.18 versus 0.79 \pm 0.23, respectively; p < 0.001). Conclusion: Pre-operative use of tranexamic acid is associated with reduced blood loss during and after elective cesarean section. In a developing country like ours where PPH is a major threat to the life of the mothers, it seems to be a promising option.

Keywords : blood loss, cesarean section, postpartum hemorrhage, tranexamic acid

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