Table D-45. Evidence table for studies addressing management of PPH (Ganguli 2008)

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| **Study** **Description** | **Intervention** | **Inclusion/Exclusion** **Criteria & Population** | **Outcomes** |
| Author:Ganguli et al., 200846Country: USEnrollment period: 52 months ending in April 2009Birth setting: HospitalFacility characteristics: Tertiary care hospitalFunding: NR Design: Cases series | **Intervention:** Uterine artery embolization (Uterine artery embolization )**Groups:****G1:** Uterine artery embolization **G1a:** Uterine artery embolization for primary PPH**G1b:** Uterine artery embolization for secondary PPHN at enrollment: **G1:** 76N at follow-up, n (%): **G1:** 66**G1a:** 50 (76)**G1b:** 16 (24)Duration of treatment: NRTiming of treatment: After usual obstetric maneuvers performed Order of treatment:Intravenous uterotonic agents, Aggressive uterine massage, Manual extraction ofthe placenta, Examination and repair of genital lacerations,Balloon tamponadeUterine artery embolization Length of follow-up: NR | **Operational definition of PPH:** Primary PPH was defined as hemorrhage that occurred within the first 24 hours after delivery. Secondary PPH was defined as hemorrhage occurring more than 24 hours after delivery.**Definition of success of treatment:** Technical success was defined as successful catheterization of both uterine arteries with embolization to stasis, embolization of a nonuterine pelvic vessel giving rise to active contrast agent extravasation, or successful coil embolization of a specific vascular lesion (ie, pseudoaneurysm).Clinical success of Uterine artery embolization was defined as obviation of subsequent hysterectomy.**Method of blood loss measurement:** NR**Severity:** NRInclusion criteria: * All women who underwent Uterine artery embolization for

obstetric reasons at a single institution during a 52-month period culminating in April2009Exclusion criteria: * Those with leiomyoma- or tumor-

related uterine hemorrhage**Maternal age, yrs, mean (range):****G1:** 33 (17-47)**G1a:** 32.7 (17-44)**G1b:** 32.4 (21-42)**Parity, mean (range):** **G1:** 1.8 (0-9)**G1a:** 1.9 (1-9)**G1b:** 1.8 (1-4)**Weeks gestation:** NR**Single pregnancy:** NR**Multiple pregnancy:** NR**Race/ethnicity:** NR**BMI:** NR**Baseline hemoglobin:** NR**SES:** NR**Mode of birth, n:** Vaginal delivery, n (%)**G1:** 48 (73)Cesarean section, n (%)**G1:** 18 (27)**G1a** 12/50 (24)**G1b:** 6/16 (38)**Risk factors:** NR**Primary etiology of PPH, n:**Retained products of conception:**G1b:** 13/16 (81)Uterine artery pseudoaneurysm:**G1b:** 3/16 (19) | **Harms pre-specified:** No**Transfusion of PRBCs (units), mean (range):**Primary PPH: 0.4(0-4)**Harms, n (%):** Hysyerectomy, total**G1:** 3 (4.5)**G1a:** 1 **G1b:** 2 Hysterectomy due to persistent PPH**G1:** 2 (3)Hysterectomy due to endometritis**G1:** 1 (1.5)Overall complication**G1:** 3 (4.5)Lower extremity deep vein thrombosis**G1:** 1Post procedural pancreatitis**G1:** 1Presumed endometritis after Uterine artery embolization as well as dilation and curettage**G1:** 1**Post-Uterine artery embolization hospital stay in days, mean (range):**Total**G1:** 3.5 (1-12)**G1a:** 3.9 (1-12)**G1b:** 2 (1-5)Mortality, n:**G1:** 0 |

**Comment:** Authors note one woman experienced a peripartum seizure that did not appear related to Uterine artery embolization procedure.