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.,  200846  Country: US  Enrollment period:  52 months ending in April 2009  Birth setting:  Hospital  Facility characteristics:  Tertiary care hospital  Funding: 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 PPH  N at enrollment:  **G1:** 76  N at follow-up, n (%):  **G1:** 66  **G1a:** 50 (76)  **G1b:** 16 (24)  Duration of treatment: NR  Timing of treatment: After usual obstetric maneuvers performed  Order of treatment:  Intravenous uterotonic agents, Aggressive uterine massage,  Manual extraction of  the placenta,  Examination and repair of genital lacerations,  Balloon tamponade  Uterine 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:** NR  Inclusion criteria:   * All women who underwent Uterine artery embolization for   obstetric reasons at a single institution during a  52-month period culminating in April  2009  Exclusion 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:** 1  Post procedural pancreatitis  **G1:** 1  Presumed 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.