Table D-8. Evidence table for studies addressing management of PPH (Park 2014)

| **Study** **Description** | **Intervention** | **Inclusion/Exclusion** **Criteria & Population** | **Outcomes** |
| --- | --- | --- | --- |
| **Author:**Park et al., 20149**Country:**S. Korea**Enrollment period:** January 2000 to December 2012**Birth setting:** NR**Facility characteristics:** Tertiary care**Funding:** NR**Design:** Retrospective case series | **Intervention:** Transcatheter arterial embolization performed by interventional radiologists to treat secondary PPH **Groups:****G1:** Embolization**G1a:** Successful**G1b:** Failed**N:** **G1:** 52**G1a:** 47**G1b:** 5**Duration of treatment:** NR**Timing of treatment:** NR**Order of treatment:** Obstetric maneuvers used to control hemorrhage d uterine massage, uterine packing, administration of uterotonic agents, and surgical intervention (eg inspection and repair of lower genital tract tears, manual exploration of uterine cavity, uterine suturing, and uterine artery ligation or hysterectomy).**Length of follow-up:** NR | **Operational definition of intractable secondary PPH:** Continuous vaginal bleeding despite medical management, including administration of intravenous fluid, transfusion, or uterotonic agentsDefinition of success of treatment: Clinical success defined as cessation of bleeding after TAE with no further management such as repeat TAE or additional surgery during the hospital stay**Method of blood loss measurement:** NR**Severity:** NR**Inclusion criteria:** Patients who underwent TAE for secondary PPH at single institution between Jan 2000 to Dec 2012**Exclusion criteria:** NR**Maternal age, yrs, mean (range):****G1:** 31.6 (25-40)**Parity, n (%):** Primiparous**G1:** 35 (67.3)Multiparous**G1:** 17 (32.7)**Weeks gestation, n (%):** NR**Single pregnancy, n (%):** NR**Multiple pregnancy, n (%):** NR**Race/ethnicity:** NR**BMI:** NR**Baseline hemoglobin:** NR**SES:** NR**Mode of birth, n (%):** Vaginal**G1:** 34 (65.4)Cesarean**G1:** 18 (34.6)**Risk factors, n:** History of cesarean**G1:** 8**Primary etiology of PPH, n:** Retained placenta**G1:** 23 Placental anomaly**G1:** 3 Placental accreta/increta**G1:** 2Placenta previa**G1:** 1Uterine AVM**G1:** 6Rupture or injury of uterine artery**G1:** 9 Uterine subinvolution/atony**G1:** 5Trauma (cervical laceration)**G1:** 1Coagulopathy (maternal ITP)**G1:** 2Unknown**G1:** 3  | **Successful control of bleeding n, (%): G1:** 47/52 (90.4)**Harms pre-specified:** Classified as major vs. minor using Society of Interventional Radiology guidelines**Harms, n:** Procedure related complications **G1:** 0 |