UTERINE ATONY – 10 YEAR REVIEW

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PROBLEM STATEMENT

Uterine atony is thought to be the most common cause of postpartum hemorrhage and a major cause of maternal mortality worldwide. This study aimed to evaluate **population specific risk factors** and obstetric outcomes for uterine atony cases in our department for the last ten years.

METHODS

A retrospective observational study was conducted from 2006 to 2016 in Department of Obstetrics and Gynecology of Centro Hospitalar do Baixo Vouga. A total of **50 cases** of uterine atony were identified for analysis in this study. Clinical files were reviewed concerning demographic factors, obstetric background, particularities of the pregnancy and labour, and lastly the applied management strategies. Microsoft Office Excel® was used for data analysis.

RESULTS

AVERAGE LABOUR TIME: 6.1 hours
AVERAGE WEIGHT OF NEWBORNS: 3358g

TREATMENT

SURGICAL TREATMENT

IMMEDIATE FOLLOW-UP

CONCLUSION

Uterine atony is identified as one of the major causes of postpartum hemorrhage and therefore associated with significant maternal morbidity and mortality. Understanding the population specific risk factors for uterine atony would be of great importance in order to prevent this clinical condition and decrease adverse outcomes. Nevertheless, a clear association between demographic factors, obstetric background and the occurrence of uterine atony could not be demonstrated in our population. Primiparity was the most consistent risk factor. The major complications identified in our review were the need of blood transfusions, hemodynamic instability requiring admission to the Intensive Care Unit and the need of hysterectomy as a lifesaving procedure in six women. When medical treatment fails, clinicians must be prepared to perform specific surgical measures in order to preserve future fertility. Unfortunately, in some cases hysterectomy cannot be avoided and prompt decision making is essential to prevent catastrophic outcome such as maternal death.

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