

United Efforts to Reduce Global Obstetric Hemorrhage



In the Spotlight

Welcome new members!

Newsletter base has been growing, please help spread the word through this [link](#). You can find more information about our organization on our new [website](#)!



ISTH 2022 Congress Abstract Deadline

Submission closes on February 1, 2022. Plan to attend in London, England, UK. ([link](#))

Overview

- New in Research and Innovation
- Clinical Trials Updates
- Upcoming Conferences

Announcements

Postgraduate Course Update

Our course, "Prevention and Early Treatment of PPH: A Call to Action for Addressing Barriers and Inequities" will be hosted during the SMFM conference on January 31, 2022! Details [here](#).

- Event will be recorded and uploaded with no associated cost soon after meeting for LMIC.
- Agenda [here](#).

MFMU TXA Study

- Will be presented at SMFM on February 4th at 10:15 am by Dr. Luis D. Pacheco. Details [here](#).

Clinical Trials Update

MFMU TXA Study (NCT03364491)

- Presentation at SMFM February 4, 2022

WOMAN-PHARMACO TXA (NCT04274335)

- Enrollment completed: 120 women
- Anticipate results Spring 2022

WOMAN-2 Trial (NCT03475342)

- 6,635 Women Randomized (site updated December 22, 2021)

TRACES Trial (NCT02797119)

- Clinical study completion date: Fall 2021
- PKPD study completion date: Spring 2022

E-MOTIVE (NCT04341662)

- Study completion date: Late 2023

COPE

- 357 Women Randomized (January 2022)

New in Research and Innovation

Hemani, Mehdiya et al published, "Tranexamic Acid Use in the Postpartum Period Since the WOMAN Trial: A Retrospective Chart Review" in Journal of Obstetrics and Gynaecology Canada in November 2021 ([link](#)).

The majority of patients received TXA within guidelines and experienced fewer adverse outcomes. Further study is needed to identify the best order of TXA administration with additional uterotonics and whether TXA should be used prophylactically in some groups for postpartum bleeding.

Akazawa, Munetoshi et al published, "Machine learning approach for the prediction of postpartum hemorrhage in vaginal birth" in Scientific Reports in November 2021 ([link](#)).

Machine learning model can predict postpartum hemorrhage during vaginal delivery. Further research should be conducted to analyze appropriate variables and prepare big data, such as hundreds of thousands of cases.

Agrawal, Surbhi et al published, "Serum Lactate Level as a Predictor for Blood Transfusion in Postpartum Hemorrhage" in American Journal of Perinatology in November 2021 ([link](#)).

Women with elevated serum lactate levels were more likely to require blood transfusions during a PPH versus those with a normal serum lactate level. Thus, serum lactate levels are useful as an early indicator of requirement for blood transfusion in the management of obstetric hemorrhage.

Grassin-Delyle, Stanislas et al published, "Pharmacokinetics of tranexamic acid after intravenous, intramuscular, and oral routes: a prospective, randomised, crossover trial in healthy volunteers" in British Journal of Anaesthesia in January 2022 ([link](#)).

The i.m. (but not oral) route appears to be an efficient alternative to i.v. tranexamic acid. Studies in pregnant women are needed to examine the impact of pregnancy on the pharmacokinetics.

Tahitu, Marije et al published, "Clinical value of early assessment of hyperfibrinolysis by rotational thromboelastometry during postpartum hemorrhage for the prediction of severity of bleeding: A multicenter prospective cohort study in the Netherlands" in Acta Obstetrica et Gynecologica Scandinavica in November 2021 ([link](#)).

Thromboelastometric evidence of hyperfibrinolysis was rare in women with postpartum hemorrhage when assessed between 800 and 1500 ml of blood loss. The clinical predictive value of viscoelastometric point-of-care testing for hyperfibrinolysis for progression to severe postpartum hemorrhage during early postpartum hemorrhage is limited.

Vernekar, Sunil et al published, "Effect of heat stable carbetocin vs oxytocin for preventing postpartum haemorrhage on post delivery hemoglobin- a randomized controlled trial" in the Journal of Maternal-Fetal and Neonatal Medicine in November 2021 ([link](#)).

The present ancillary study showed that intramuscular administration of 100 µg of heat stable carbetocin can result in a slightly lower post-delivery hemoglobin, slightly higher drop and higher percentage of women having a drop of 2 g/dL or larger, compared to 10 IU of oxytocin.

Froeliger, Alizée et al published, "Posttraumatic Stress Disorder Symptoms 2 Months After Vaginal Delivery" in Obstetrics and Gynecology in January 2022 ([link](#)).

Approximately 1 of 20 women with vaginal delivery have PTSD symptoms at 2 months postpartum. History of psychiatric disorder, postpartum hemorrhage, and bad memories of deliveries at day 2 were the main factors associated with a PTSD profile.

Upcoming Conferences

- SMFM: Feb 2022
- ACOG: May 2022
- SOAP: May 2022
- ISTH: July 2022
- FWGBD: Sept 2022
- FIGO



Annual Clinical and Scientific meeting



Society for Obstetric Anesthesia and Perinatology Annual Meeting



42nd Annual Pregnancy Meeting



World Congress of Gynecology and Obstetrics



FWGBD Conference



Congress of the International Society on Thrombosis and Haemostasis