

VOL. 13 | APRIL 2024

UNITE GLOBE



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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 [website](#)!



Black Maternal Health Week

Black Maternal Health Week (BMHW) was April 11-17th, but it's not too late to share their [toolkit](#)! "BMHW is a week-long campaign founded and led by the Black Mamas Matter Alliance to build awareness, activism, and community-building to amplify the voices, perspectives and lived experiences of Black Mamas and birthing people."

See also: [Efforts from Speak! Move! Change!](#)

Overview

- Clinical Trials Updates
- New in Research and Innovation
- Advocacy & Education
- Upcoming Conferences and Meetings
- UNITE GLOBE Meeting Recap & Upcoming Events

Announcements

Join the PPH Community of Practice (CoP)!

From the PPH CoP:

We are a dynamic, interconnected, global learning platform that supports the dissemination and implementation of current evidence, and the sharing of country-to-country experiences to achieve global targets for postpartum hemorrhage. To learn more, explore the resources from our [Annual Meeting in 2023](#).

To join, visit [this link](#).

UNITE GLOBE is an organization committed to delivering current cutting-edge advancements in research, innovation, and advocacy related to reducing postpartum hemorrhage-related maternal mortality and morbidity internationally to improve the lives of women and families worldwide.

Clinical Trials Update

OPTIMUM-OB TXA (NCT05370820)

- Current enrollment: 28 women (updated Apr 2024)

COPE

- 1353 women randomized (updated Apr 2024)

New in Research and Innovation

Henrich W et al. published, "Uterine packing with chitosan-covered tamponade to treat postpartum hemorrhage" in American Journal of Obstetrics and Gynecology in March 2024 ([link](#)).

Modified chitosan-impregnated gauze was originally described in the management of acute hemorrhage in the field of military medicine, combining the physiological antihemorrhaging effect of modified chitosan with a compression tamponade for the acute treatment of wound bleeding. The first described use in obstetrics was in 2012, showing that the chitosan-covered tamponade is an effective intervention to arrest ongoing therapy-resistant postpartum hemorrhage. Further studies showed a reduction in hysterectomies and blood transfusions. The method is, however, underreported and is not yet an established method used worldwide. To demonstrate the step-by-step application of the intrauterine chitosan-covered tamponade in the management of therapy-resistant postpartum hemorrhage, we have produced a teaching video to illustrate the important steps and techniques to optimize the effectiveness and safety of this novel intervention.

Negesa B et al. published, "Factors associated with postpartum hemorrhage in selected Southern Oromia hospitals, Ethiopia, 2021: an unmatched case-control study" in Frontiers in March 2024 ([link](#)).

The study showed that factors such as lack of antenatal care, prepartum anemia, pregnancy-related hypertension, intrauterine fetal death and genital tract trauma during delivery were responsible for postpartum hemorrhage. The early introduction of antenatal care services for all mothers plays a crucial role in reducing postpartum hemorrhage.

Cagino K et al. published, "Risk of Postpartum Hemorrhage in Hypertensive Disorders of Pregnancy: Stratified by Severity" in American Journal of Perinatology in April 2024 ([link](#)).

Of 8,357 singletons, 2,827 (34%) had HDP. Preterm delivery <37 weeks, induction of labor, prolonged oxytocin use, and MgSO₄ usage were more common in those with versus without HDP ($p < 0.001$). CMHO was higher among individuals with HDP than those without HDP (26% vs. 19%; aRR 1.11, 95% CI 1.01-1.22). In the subgroup analysis, only individuals with preeclampsia with severe features were associated with higher CMHO ($n=802$; aRR 1.52, 95% CI 1.32-1.75). There was a higher likelihood of CNAO in individuals with both HDP and PPH compared to those with HDP without PPH (aRR 1.49, 95% CI 1.06-2.09). CMHO was higher among those with HDP. After stratification, only those with preeclampsia with severe features had an increased risk of CMHO. Among individuals with HDP, those who also had a PPH had worse neonatal outcomes than those without hemorrhage.

WOMAN-2 Trial (NCT03475342)

- Completed enrollment (Sept 2023): 15,068 women

TRAAPrevia

- Current status: recruiting (updated Apr 2024)

Want your trial to be featured in our newsletter? Email uniteglobenow@gmail.com and tell us about your study!

Yang Y et al. published, "Characteristics and treatment for severe postpartum haemorrhage in different midwifery hospitals in one district of Beijing in China: an institution-based, retrospective cohort study" in the British Medical Journal Open in April 2024 ([link](#)).

Severe PPH (SPPH) was observed in 324 mothers out of 106 697 mothers in the 4 years. There were 74.4% and 23.9% cases of SPPH without detectable antenatal PPH high-risk factors in secondary and tertiary midwifery hospitals, respectively. Primary uterine atony was the leading cause of SPPH in secondary midwifery hospitals, whereas placental-associated disorders were the leading causes in tertiary institutions. Rates of red blood cell transfusion over 10 units, unscheduled returns to the operating room and adverse PPH complications were higher in patients without antenatal PPH high-risk factors. Secondary hospitals had significantly higher rates of trauma compared with tertiary institutions.

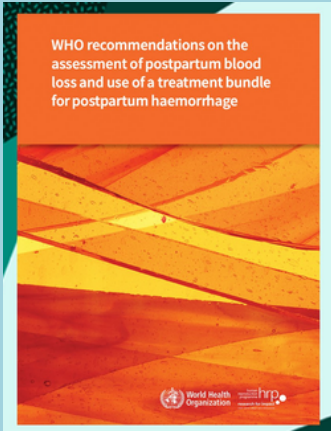
Lu X et al. published, "The value of the combined MR imaging features and clinical factors Nomogram model in predicting intractable postpartum hemorrhage due to placenta accreta" in Medicine (Baltimore) in March 2024 ([link](#)).

To explore the value of the combined MR imaging features and clinical factors Nomogram model in predicting intractable postpartum hemorrhage (IPH) due to placenta accreta (PA). We conducted a retrospective study with 270 cases of PA patients admitted to our hospital from January 2015 to December 2022. ROC analysis and Hosmer-Lemeshow goodness-of-fit test showed the Nomogram predictive model constructed with the high-risk factor has good discrimination and calibration. Decision curve analysis (DCA) showed that when the probability threshold for the Nomogram model's prediction was in the range from 0.125 to 0.99, IPH patients could obtain more net benefits, making it suitable for clinical application.

Okunade KS et al. published, "Incidence and Antepartum Risk Factors of Severe Postpartum Haemorrhage in Anaemic Pregnant Women in Lagos, Nigeria: A Secondary Cohort Analysis" in Cureus in February 2024 ([link](#)).

About one in 13 anaemic pregnant women enrolled in the study developed severe PPH during childbirth. Maternal obesity, antepartum bleeding in the current pregnancy, co-existing uterine fibroids in pregnancy, delivery gestational age beyond 38 weeks, and caesarean birth in the current pregnancy were factors that were significantly associated with severe PPH in anaemic pregnant women. These findings underscore the importance of increased vigilance during both the antenatal and peripartum periods to identify women with these risk factors for the initiation of timely interventions to prevent severe PPH.

WHO's PPH Recommendations



In December 2023, the World Health Organization (WHO) convened a Guideline Development Group to update an existing recommendation on assessing postpartum hemorrhage (PPH) and consider using a care bundle to treat PPH. To see the WHO's new recommendations, click [here](#).

Cor2Ed: Final Podcast Episode

New developments in the treatment of PPH



Prof. Nándor Ács



Dr Anne-Sophie Ducloy-Bouthors



Publication Date

Feb 2024

Listen at [this link!](#)

Also available on Spotify and Apple Podcasts

Upcoming Conferences and Meetings

- ACOG: May 2024
- SOAP: May 2024
- ISTH: June 2024
- FWGBD: Sept 2024
- COGI: Nov 2024
- SMFM: Jan 2025



Society for Maternal-Fetal Medicine



ACOG Annual Clinical and Scientific meeting



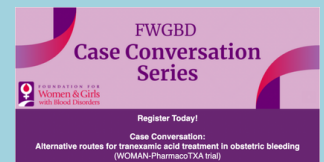
Society for Obstetric Anesthesia and Perinatology Annual Meeting



Congress of the International Society on Thrombosis and Haemostasis



All about Women's Health
International Congress on Controversies in Obstetrics, Gynecology, and Infertility



Foundation for Women & Girls with Blood Disorders

UNITE GLOBE Meeting Updates

UNITE GLOBE United Efforts to Reduce Global Obstetric Hemorrhage

[HTTP://UNITEGLOBE.ORG/](http://uniteglobe.org/)

July 15th, 2024 | 10AM EDT / 3PM BST

Join using [this link](#)



DR. ANNETTE VON DRYGALSKI
UNIVERSITY OF CALIFORNIA
SAN DIEGO
HEMATOLOGY
PPH in Mozambique - Outreach
Effort



TO BE ANNOUNCED

Missed our April 2024 meeting? Watch a recording of it [here](#).

April Speaker Contact Information:

Dr. Shad Deering:

shad.deering@christushealth.org

To see Dr. Deering's slides and simulation resources, click [here](#).

Dr. Stephanie Reitsma

stephanie_reitsma@med.unc.edu

Our next meeting will be on **July 15th, 2024** at 10am EDT/ 3pm BST. Attend via Zoom using [this link](#).