

POST PARTUM OXYGEN INHALATION REDUCES THE RISK OF POST PARTUM HAEMORRHAGE

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Post Partum Haemorrhage (PPH) accounts for 17-40% of the annual global maternal mortality. Atony of the uterus is the main cause and prophylaxis with Oxytocic drugs in 3rd stage of labour reduces this risk. Hypoxia is a known factor that relaxes the uterus but its relevance in the aetiology of post partum uterine atony is not well described. The objective of this research was to assess the influence of post partum routine oxygen inhalation on the uterine atony associated PPH.

A randomized controlled study was conducted amongst all consenting mothers delivering at Peradeniya Teaching Hospital over a period of 3 months during 2001. Mothers with significant perineal trauma, retained products of conception, coagulatory defects and mothers on anticoagulation therapy were excluded. Mothers were randomly allocated into two groups- the subjects receiving oxygen therapy for 6 hours following delivery and controls. In both groups peripheral oxygen saturation was measured hourly for 6 hours in addition to cardiovascular and respiratory parameters. Blood loss was assessed by measuring the weight of blood soaked pads.

Twenty two subjects and 22 controls were enrolled for analysis. The average blood loss per hour in subjects receiving oxygen therapy was 11.6041 ml (SD=7.3256), whereas in the controls it was 17.9945 ml (SD=11.5746) was significantly lower. The average blood loss per hour in the group who received oxygen therapy (P=0.031)

This study shows that post partum routine oxygen inhalation therapy may be an effective method in preventing atonic uterine bleeding.