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 <u>link</u>. You can find more information about our organization on our new website!



"Voices from the Field"

The film *Voices from the Field* features doctors on the frontlines in low-resources countries using PPH innovations to save birthing mother's lives. You can watch the film at this link.

Overview

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

Announcements

WOMAN Pharmaco-TXA
Preliminary Data Findings
will be hosted virtually on
Monday, April 4, 2022 at 7a
PST/10a EST/3p BST.

- Professor Ian Roberts

 and others interested in reducing global burden from PPH will be discussing the latest in ongoing research & practice guidelines in an effort to help make progress to reduce global burden from PPH.
- Link to attend can be found (here).

UNITE GLOBE is a newsletter 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

MFMU TXA Study (NCT03364491)

- Presented at SMFM February 4, 2022
- Pending results/manuscript

WOMAN-PHARMACO TXA (NCT04274335)

- Enrollment completed: 120 women
- Anticipate results Spring 2022
- Preliminary results to be presented via Zoom April 4th, 2022 at 7a PST/10a EST/3p BST at this link.

New in Research and Innovation

J. Ansari et al published, "Quantitative blood loss after vaginal delivery: a retrospective analysis of 104 079 measurements at 41 institutions" in International Journal of Obstetric Anesthesia in January 2022 (link).

The results from this large set of QBL measurements and the PPH incidence provide normative "real-world" clinical care values that can be expected as hospitals transition from EBL to QBL to assess the blood loss of women having vaginal delivery.

Weeks, Andrew et al published, "World Health Organization Recommendation for Using Uterine Tamponade to Treat Postpartum Hemorrhage" in Green Journal in February 2022 (link).

Considering the balance of potential benefits and safety concerns, the WHO postpartum hemorrhage guideline panel therefore recommends that uterine balloon tamponade should be used only in contexts where other supportive post-partum hemorrhage interventions are available if needed.

Chainarong, Natthicha et al published, "Secondary postpartum hemorrhage: Incidence, etiologies, and clinical courses in the setting of a high cesarean delivery rate" in Public Library of Science in March 2022 (link).

Endometritis was the most common cause of secondary postpartum hemorrhage. Women who delivered by cesarean section were less likely to have retained placental tissue but were at higher risk for endometritis and uterine pseudoaneurysm than those who delivered vaginally.

Gilliot, Sixtine et al published "Pharmacokinetics of Curative Tranexamic Acid in Parturients Undergoing Cesarean Delivery" in Multidisciplinary Digital Publishing Institute in March 2022 (link).

A correlation between estimated creatinine clearance and CL, body weight before pregnancy, and V1 was found and partly explained the PK variability. The final model was internally validated using a 500-run bootstrap. The first population pharmacokinetic model of TXA in active hemorrhagic caesarean section was successfully developed and internally validated.

WOMAN-2 Trial (NCT03475342)

- 7,427 Women Randomized (updated March 4, 2022)
- Anticipate results August 2022

E-MOTIVE (NCT04341662)

• Anticipated completion date: January 2023

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• 400 women randomized (updated March 2022)

TRACES Trial (NCT02797119)

- Published!
- See the publication <u>here</u>.

Sun, Haiyan et al published, "Effectiveness and safety of carboxytocin versus oxytocin in preventing postpartum hemorrhage: A systematic review and meta-analysis" in Journal of Obstetrics and Gynaecology in March 2022 (link).

For patients undergoing cesarean section and vaginal delivery, carbetocin was superior to oxytocin in effectiveness and similar in safety. Therefore, carbetocin is expected to be an alternative uterine contraction agent for preventing PPH.

Dang, Xiaohe et al published, "Developing and Validating Nomogram to Predict Severe Postpartum Hemorrhage in Women With Placenta Previa Undergoing Cesarean Delivery: A Multicenter Retrospective Case-Control Study" in Frontiers in Medicine in February 2022 (link).

By comparing the discrimination, calibration, and net benefit of the two nomograms in the development cohort and validation cohort, we think that the intraoperative nomogram performed better. Moreover, application of the intraoperative nomogram before operation can still achieve good prediction effect, which can be improved if the severity of placenta accreta spectrum (PAS) can be accurately distinguished preoperatively. Further prospective external validation studies are expected to be conducted on the intraoperative nomogram to evaluate its application value.

Orsi, Michele et al published, "The impact of a multilevel approach to reduce emergency hysterectomy for postpartum haemorrhage: Insights from a tertiary referral centre in Northern Italy" in the European Journal of Obstetrics & Gynecology and Reproductive Biology in February 2022 (link).

A reduction of EPH incidence as a severe outcome of obstetric hemorrhage is achievable through a multilevel institutional effort. This study may inspire a larger-scale program to improve safety of patients experiencing PPH.

Igboke, Franciz Nwabueze et al published, "Tranexamic acid for reducing blood loss following vaginal delivery: a double-blind randomized control trial" in BioMed Central in March 2022 (link).

This study demonstrated that intravenous administration of TXA reduced blood loss following vaginal delivery. It also reduced the need for additional uterotonics. However, blood loss greater than 500 was not significantly reduced.

Black Maternal Health Week (BMHW): April 11-17, 2022

Founded and led by the Black Mamas Matter Alliance, the Black Maternal Health Week (BMHW) campaign is a week of awareness, activism, and community building. Black Maternal Health Week takes place every year from April 11 –17 and was officially recognized by the White House on April 13th, 2021. This year's BMHW theme "Building for Liberation: Centering Black Mamas, Black Families and Black Systems of Care" focuses on the importance of centering the voices of Black mamas and families, Black women's scholarship, sexual, reproductive, and maternal health care, services, and programs.



Dr. Shalon's Maternal Action Project, Tatia Oden French Memorial Foundation, and the ARIAH Foundation will host a free 7-day virtual series in honor of Black Maternal Health Week and the women and babies who have been lost from April 11-17, 2022. Topics will include, including men and the birth journey, the postpartum experience, respectful care, and nutrition and holistic methodologies. **To register, visit this link**.



Tufts University School of Medicine will be hosting the 5th Annual Black Maternal Health Conference on Friday, April 8, 2022 from 10:00 AM - 5:00 PM EST. The conference is led by Dr. Ndidiamaka Amutah-Onukagha, an Associate Professor in the Department of Public Health and Community Medicine at Tufts University School of Medicine. The theme for this year's conference is "The Role of Policy in Addressing Black Maternal Health Disparities". **To register, visit this link.**

Upcoming Conferences

ACOG: May 2022

SOAP: May 2022

• ISTH: July 2022

• FWGBD: Sept 2022

• FIGO: Oct 2023



Annual Clinical and Scientific meeting



Society for Obstetric Anesthesia and Perinatology Annual Meeting



World Congress of Gynecology and Obstetrics



FWGBD Conference



Congress of the International Society on Thrombosis and Haemostasis