

EP15.05 Devascularization of the pelvis by ligation of the internal iliac arteries – safe procedure for placenta accreta spectrum

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Introduction

Various surgical techniques for managing PAS are described. One option for pelvic devascularization is internal iliac artery ligation (IAL)

- **The aim of our study:**
 - **Analysis of complications** associated with this method when performed by a team of specialists in perinatology

Methods

- The **retrospective cohort** study (2005- 2023)
- **N = 132**
 - 78 high-risk group (**44 PAS, 16 previous CS, 18 placenta previa**)
 - 54 low-risk group (**no risk factor**)
- **The uniform IAL technique**
 - planned **first-step procedure** (PAS)
 - **therapeutic option** (low-risk group)
- **Complications:** early and late postoperative morbidity

Results

Risk group	Complications		Total
	No*	Yes	
high risk	45 (68.1%)	33 (50.0%)	78 (59.0%)
low risk	21 (38.9%)	33 (50.0%)	54 (41.0%)
Total	66 (50.0%)	66 (50.0%)	132 (100%)

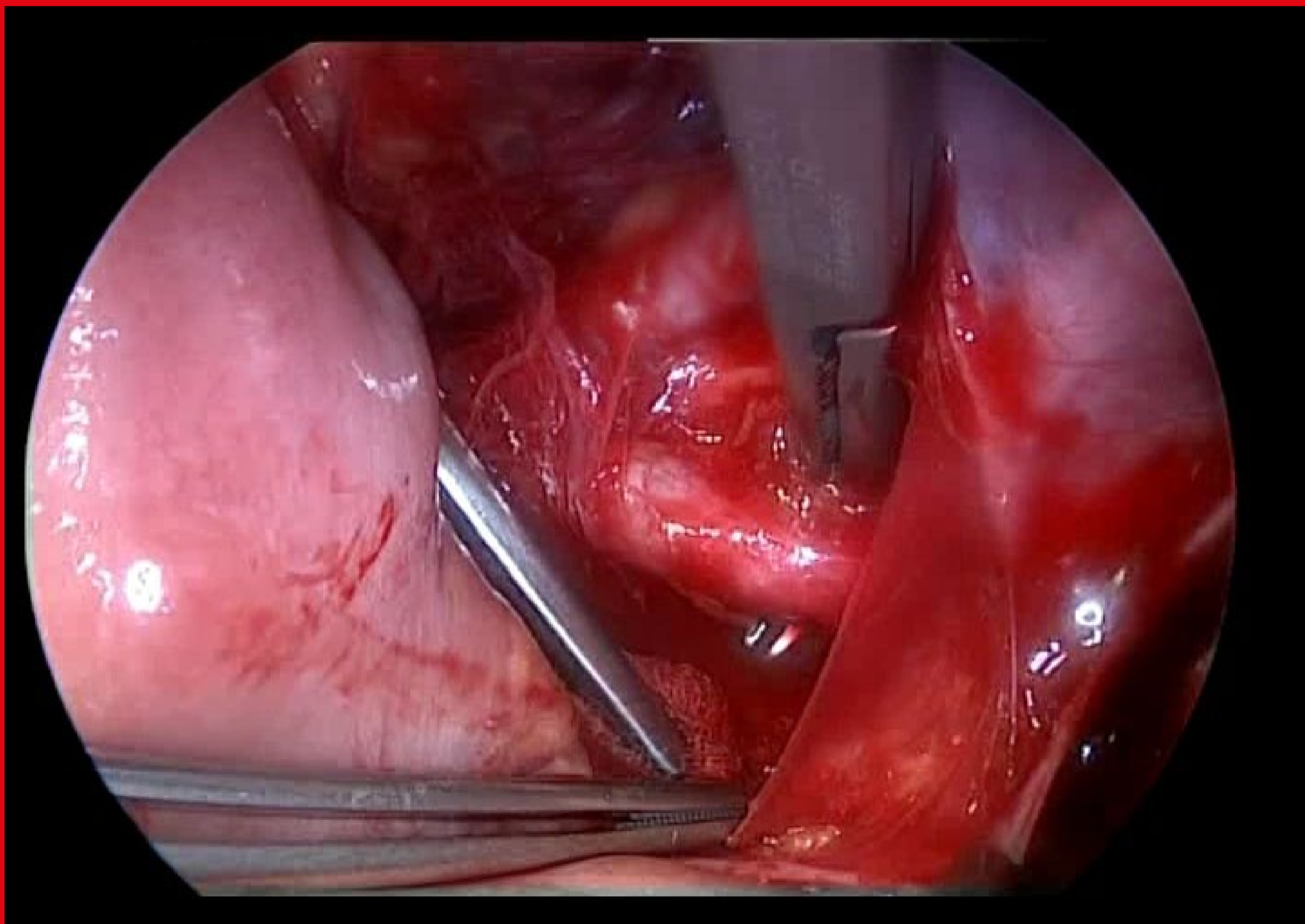
Legend: The table presents frequencies (row proportions in percentage). *No complication means there is neither early nor late complication.

➤ **p=0.035, OR 2.143, 95% CI 1.056-4.349**

Artery ligation	Complications		Total
	No*	Yes	
First step	61 (54.0%)	52 (46.0%)	113 (85.6%)
Therapeutic	5 (26.3%)	14 (73.7%)	19 (14.4%)
Total	66 (50.0%)	66 (50.0%)	132 (100%)

Legend: The table presents frequencies (row proportions in percentage). *No complication means there is neither early nor late complication

➤ **p=0.032, OR 3.285, 95% CI 1.109-9.731**



Ligation IAL.

Complications	n (%)
Maternal mortality	1/137 (0.07)
morbidity	
Early postoperative morbidity:	
urethral/urinary bladder leasion	10/137 (7.3)
coagulopathy	13/137 (9.5)
≥ 4 TU EM	59/137 (43.1)
Late postoperative morbidity:	
infection, late reoperation	12/132 (9.8)

Complications

Conclusion

IAL used as a first-line procedure, part of a complex surgery, is a safe method of devascularization in complicated cases, including PAS. Moreover, this method is performed at our center by non-oncologist surgeons without increasing surgical time.