

TO ASSESS THE EFFICACY OF CARBETOCIN AS A PROPHYLAXIS FOR POSTPARTUM HAEMORRHAGE

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INTRODUCTION

- **Post Partum Haemorrhage (PPH)** - blood loss from genital tract >500ml within 24 hours of normal delivery or 1000ml during caesarean section.
- PPH distribution - highest prevalence in Africa (5.1% -25.7%), followed by North America (4.3% - 13%) and Asia (1.9%-8%).
- Maternal deaths - India accounts for 12% of global maternal mortality.
- **Carbetocin**- Long-acting synthetic oxytocin analogue.
- Dose- 100 µg as an IV bolus over 1 minute
- Half life- 40 minutes (around 4-10 times longer than oxytocin) and uterine contractions occur in less than two minutes after intravenous administration of optimal dosage of 100 µg
- **ADVANTAGES:** Long acting, single dose, heat stable.

OBJECTIVE

- To study the hemodynamic effects of carbetocin in preventing PPH.
- To assess the need for other uterotonics

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MATERIALS AND METHODS

- Prospective case-control
- Department of Obstetrics and Gynecology at Manipal Hospital, Bengaluru (Oct 2022 – Apr 2024)
- A total of **134** antenatal women at risk for PPH were enrolled and divided equally into two groups.
- **Group A** -100 µg IV carbetocin after delivery of the anterior shoulder of baby
- **Group B** - 10 IU oxytocin in 500 mL saline (150 mL/h IV) plus 600 mcg rectal misoprostol.

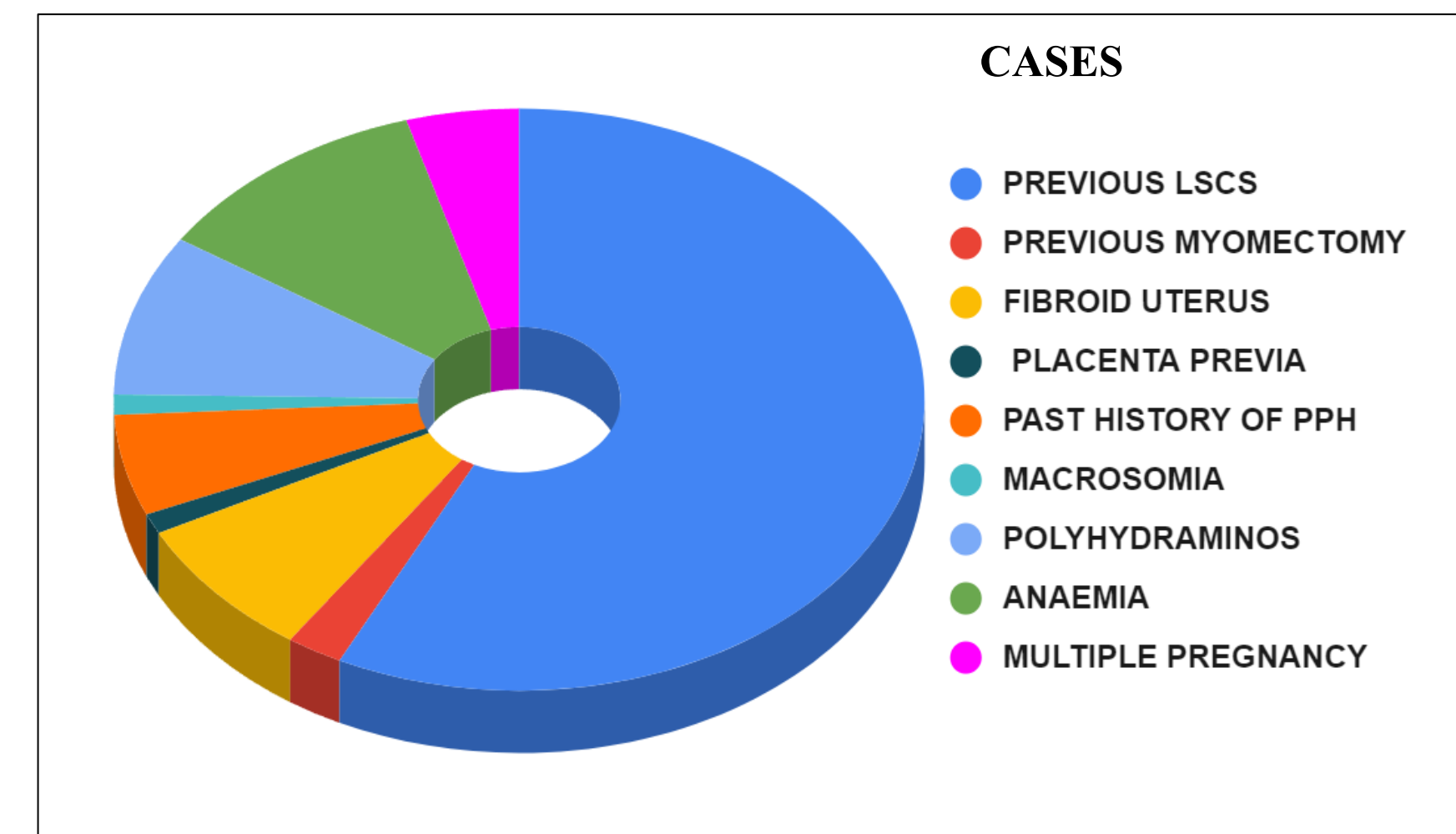
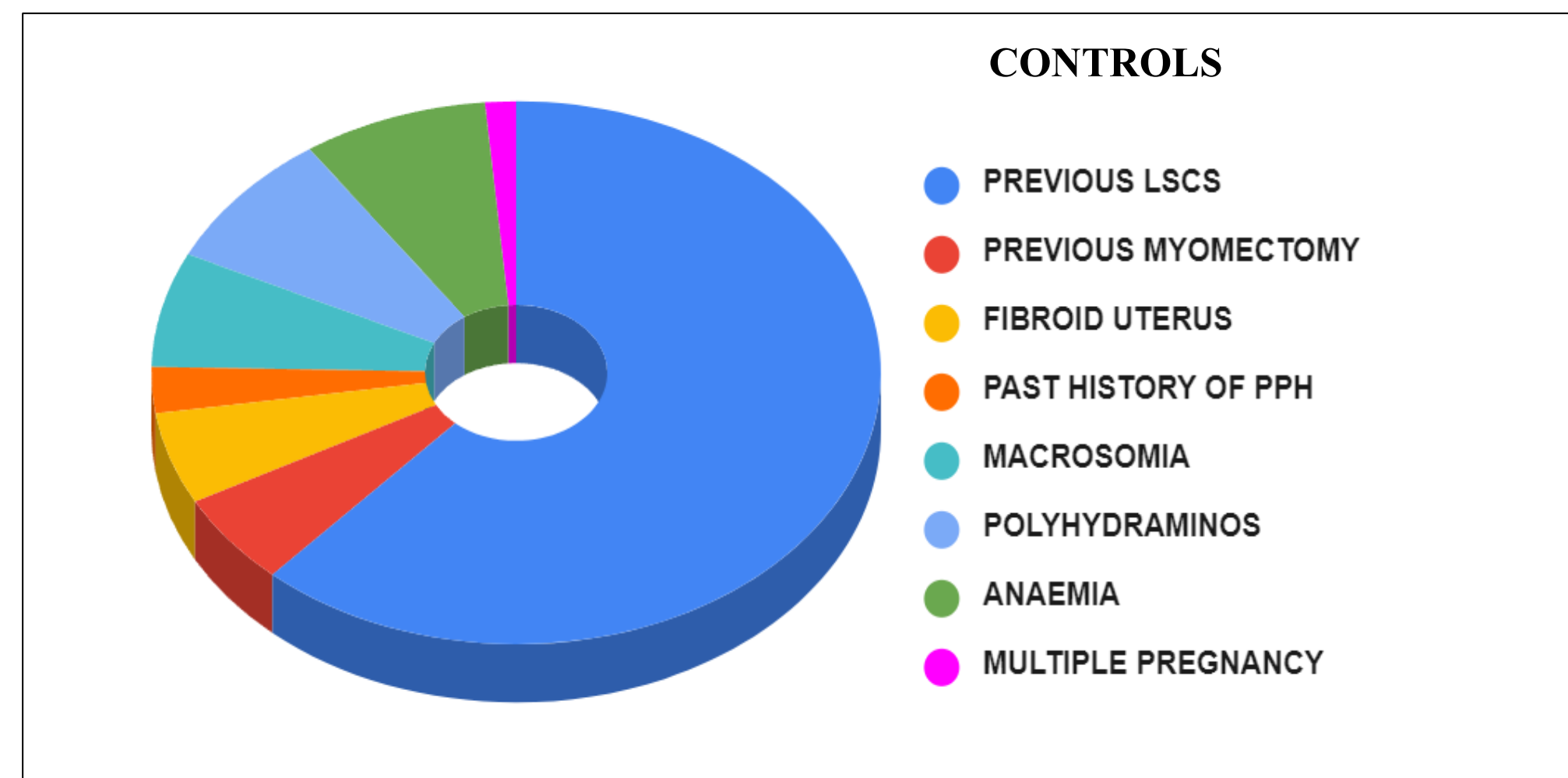
DATA COLLECTION

Sociodemographic details	Clinical details	Pre delivery	During delivery
• Age • Education • Parity • Socioeconomic status	• No. of pregnancies • BMI • Mode of delivery • Antenatal comp.	• Hb • PCV	• Blood pressure • Blood loss • Hb and PCV- at 2hrs and 24 hrs after delivery • Urine output

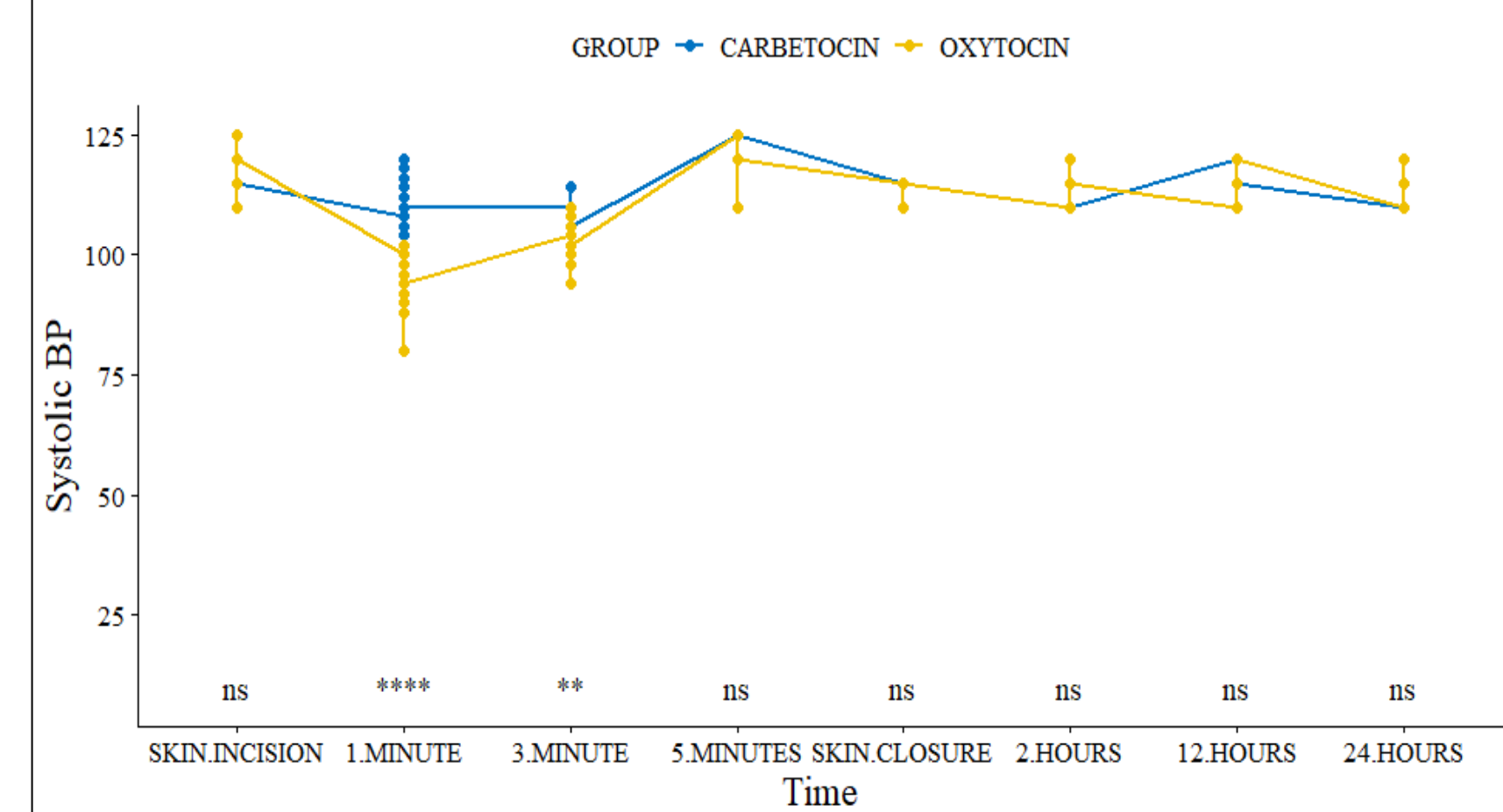
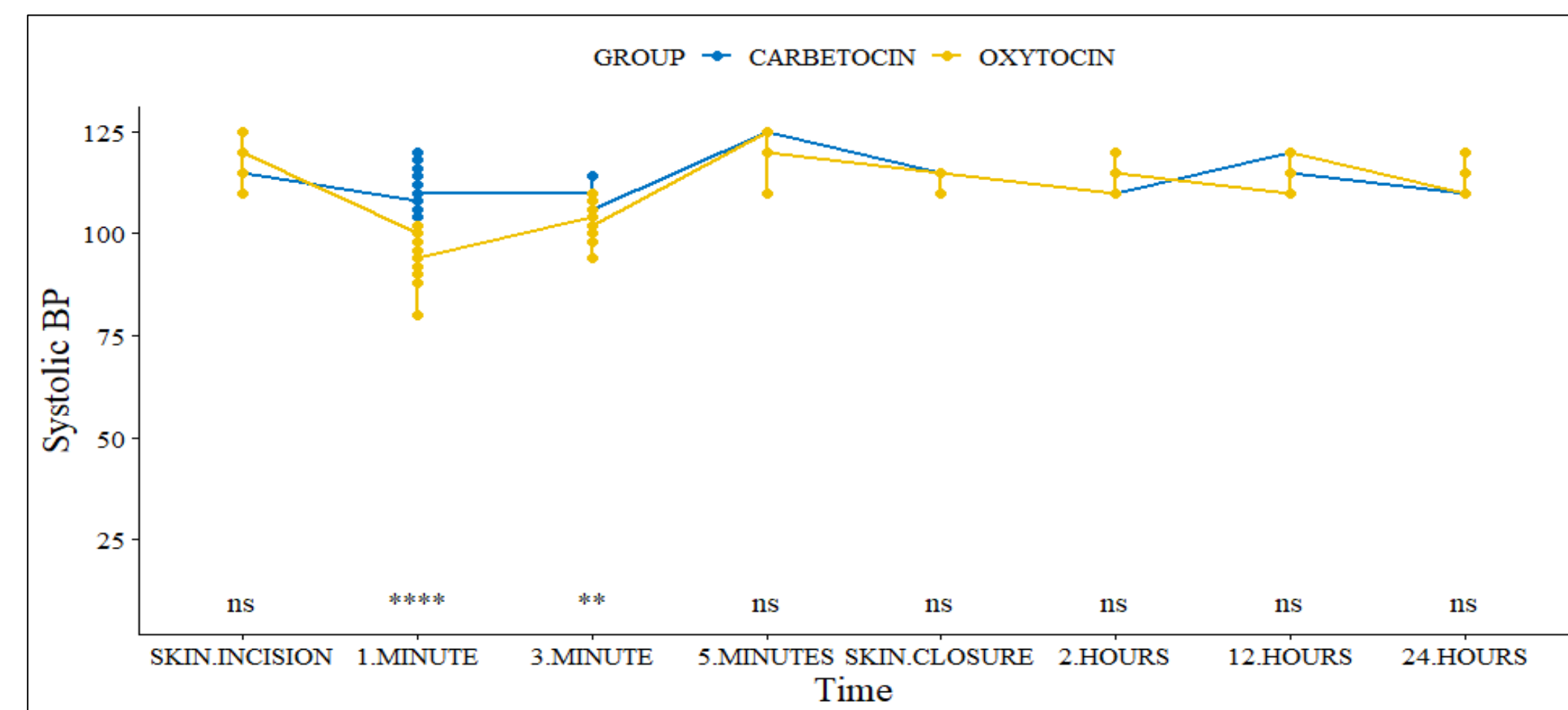
RESULTS AND ANALYSIS

	Oxytocin + Misoprostol - Controls (n = 67)	Carbetocin - Cases (n= 67)
Mean age (years)	31-35	36-40
Scarred uterus (previous LSCS/ Myomectomy)	73.13%	79.1%

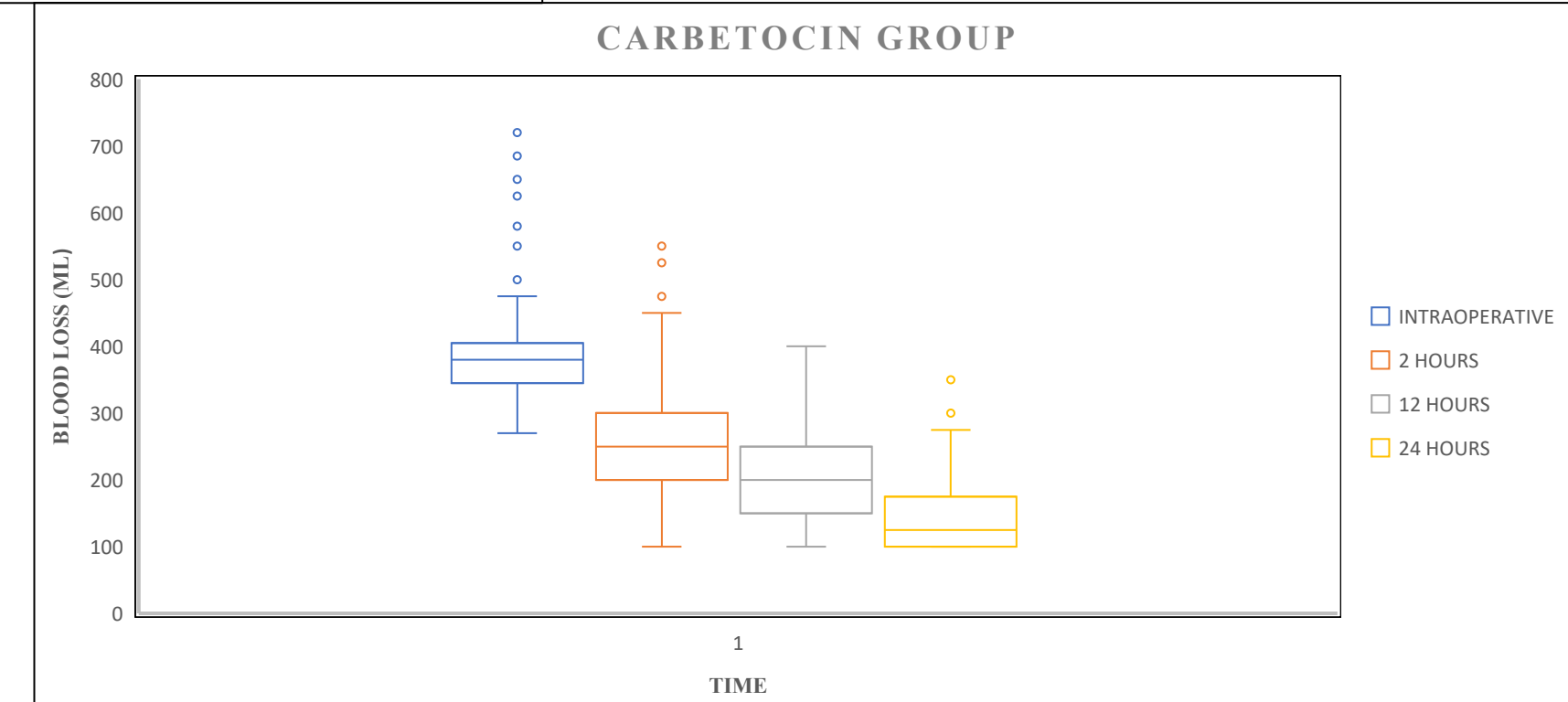
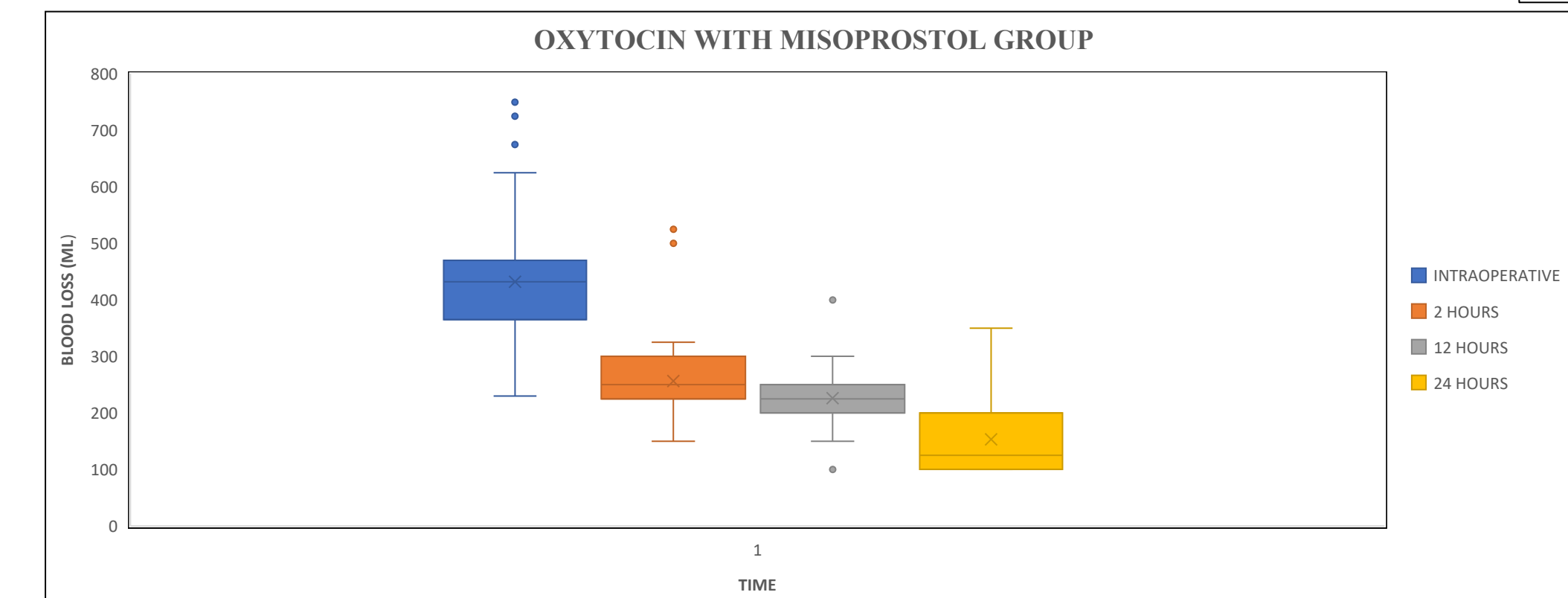
RISK FACTORS



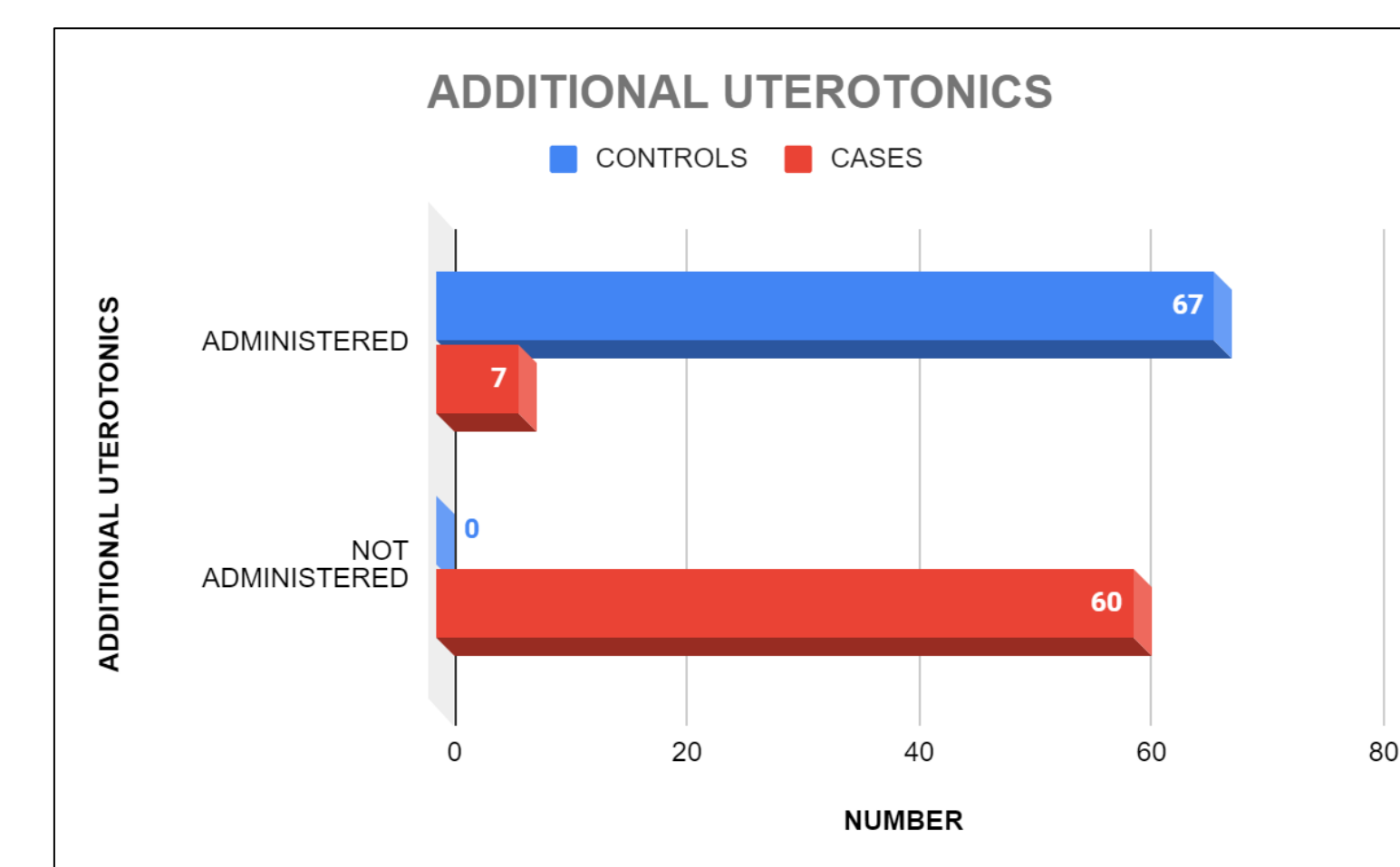
BLOOD PRESSURE



BLOOD LOSS



NEED FOR ADDITIONAL UTEROTONICS



CONCLUSION- CARBETOCIN

- Heat stable
- Can be used effectively in LMIC
- Single dose
- Effective alternative to oxytocin