

Placental Separation: Assessing Traditional Signs In Active management of Third-Stage of Labor

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Objective

- ❑ Evaluate the reliability of clinical signs used to detect placental separation during the active management of the third stage of labor.
- ❑ Assess the clinical effectiveness of Controlled Cord Traction (CCT) in improving maternal outcomes.
- ❑ Examine the role of CCT in preventing complications such as: Retained placenta, Postpartum hemorrhage (PPH)

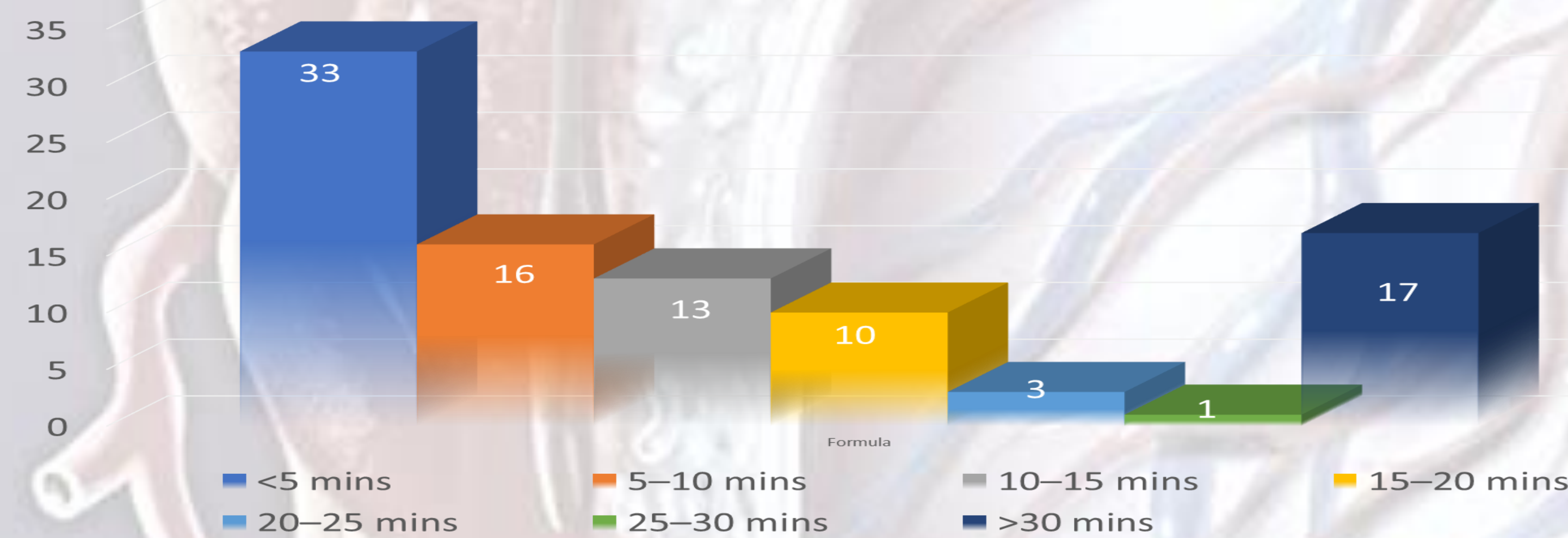
Study Design

- Observational study over 2 months at a District General Hospital
- Includes women who delivered vaginally

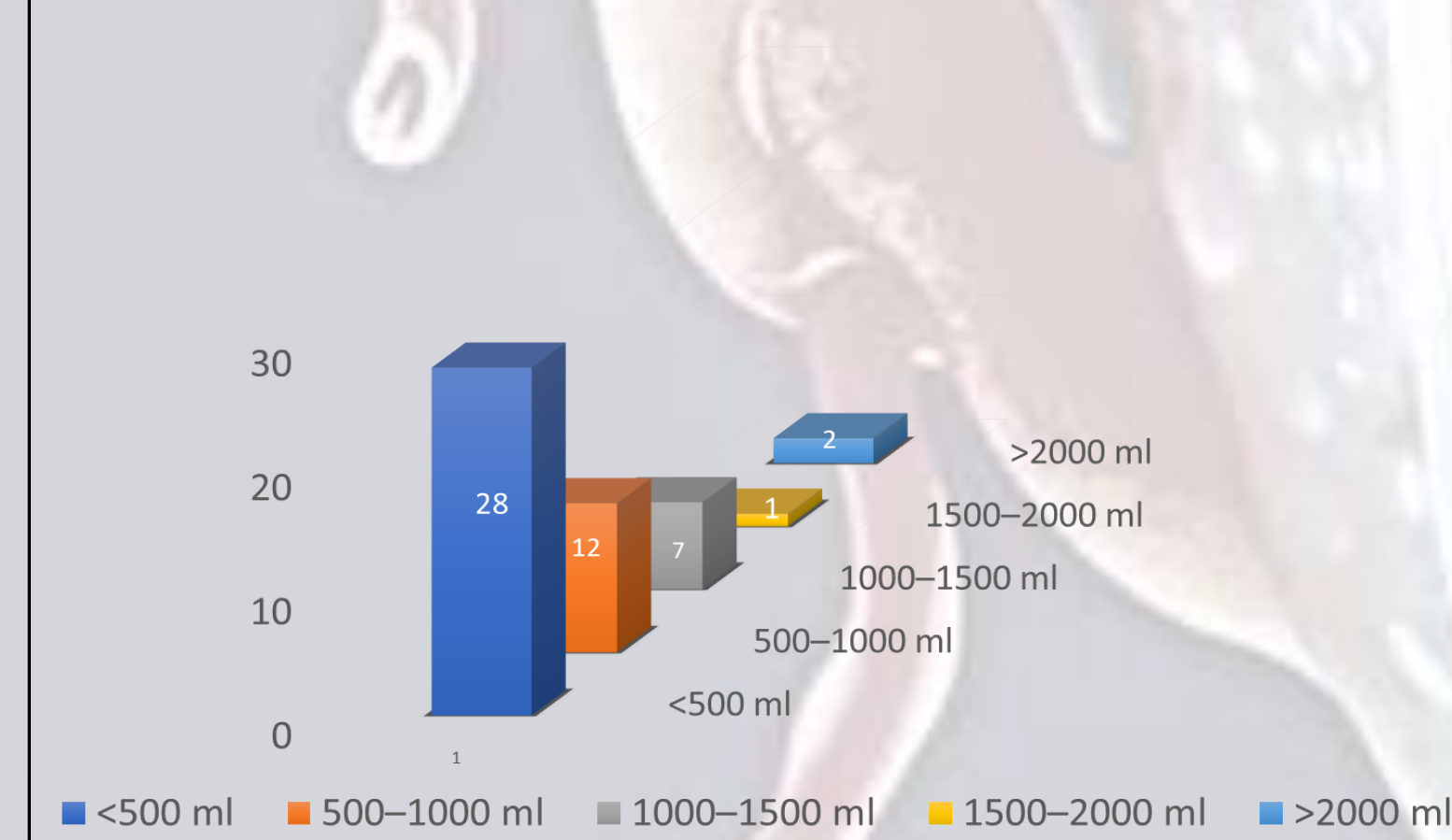
Methodology

- Participants: Women delivering vaginally
- Observed clinical signs: Cord elongation, uterine contraction, gush of blood.
- CCT applied as part of third-stage labor management.
- Outcomes tracked: Retained placenta, PPH.

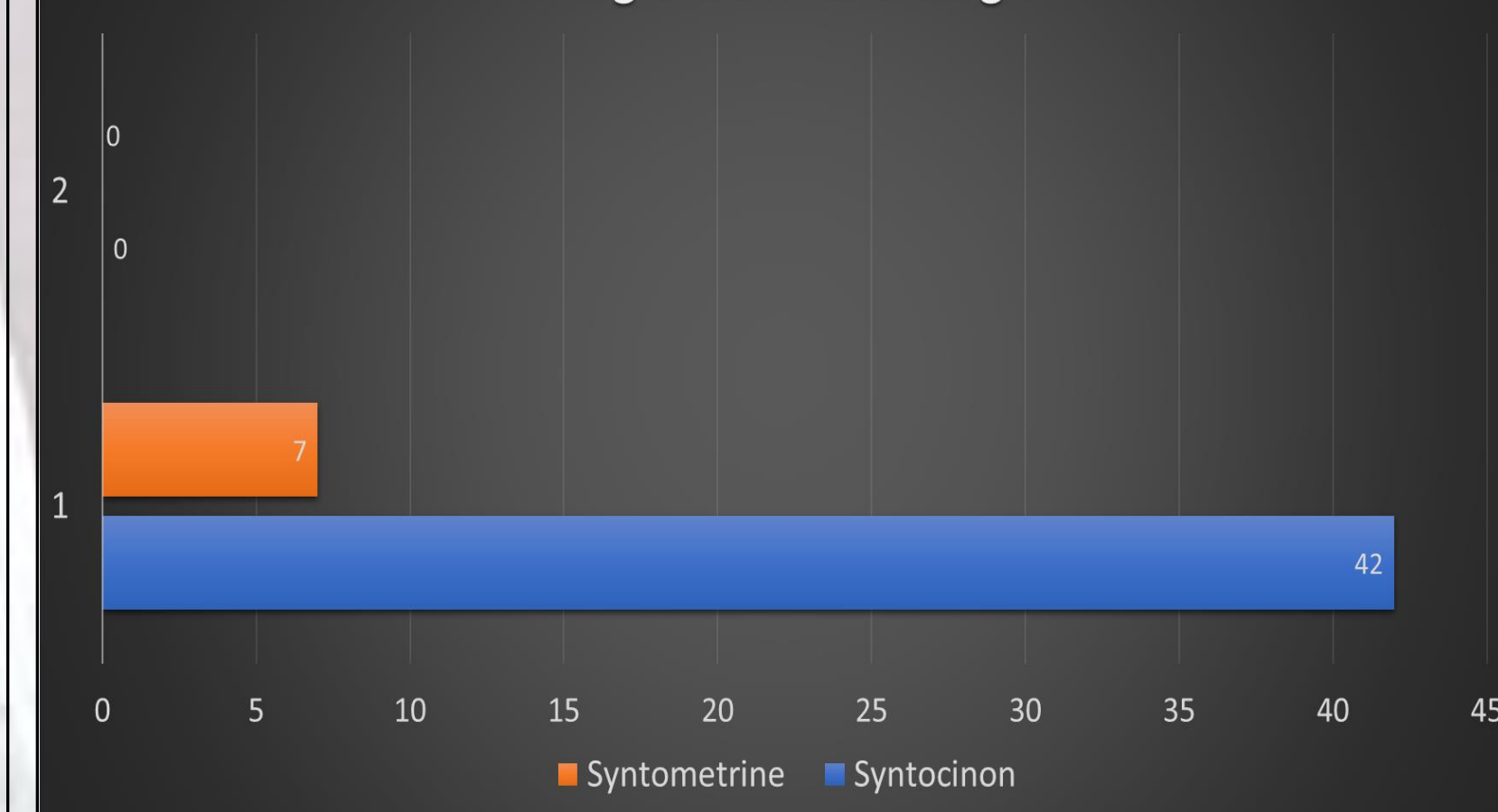
LENGTH OF THIRD STAGE



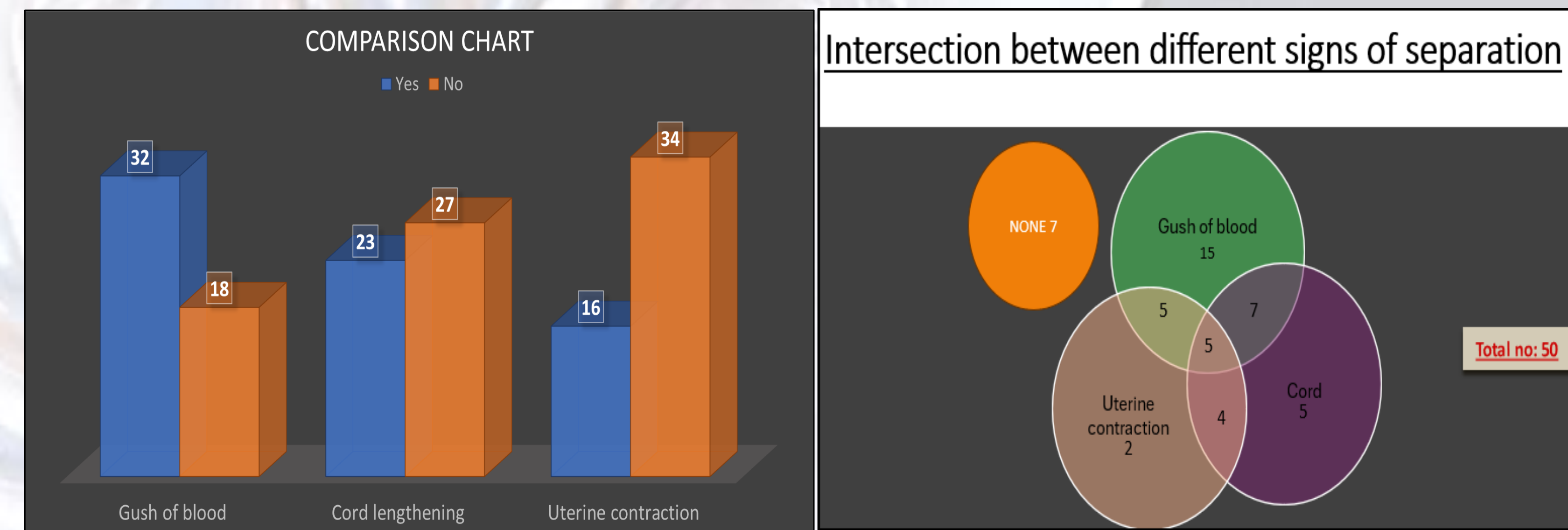
Blood loss



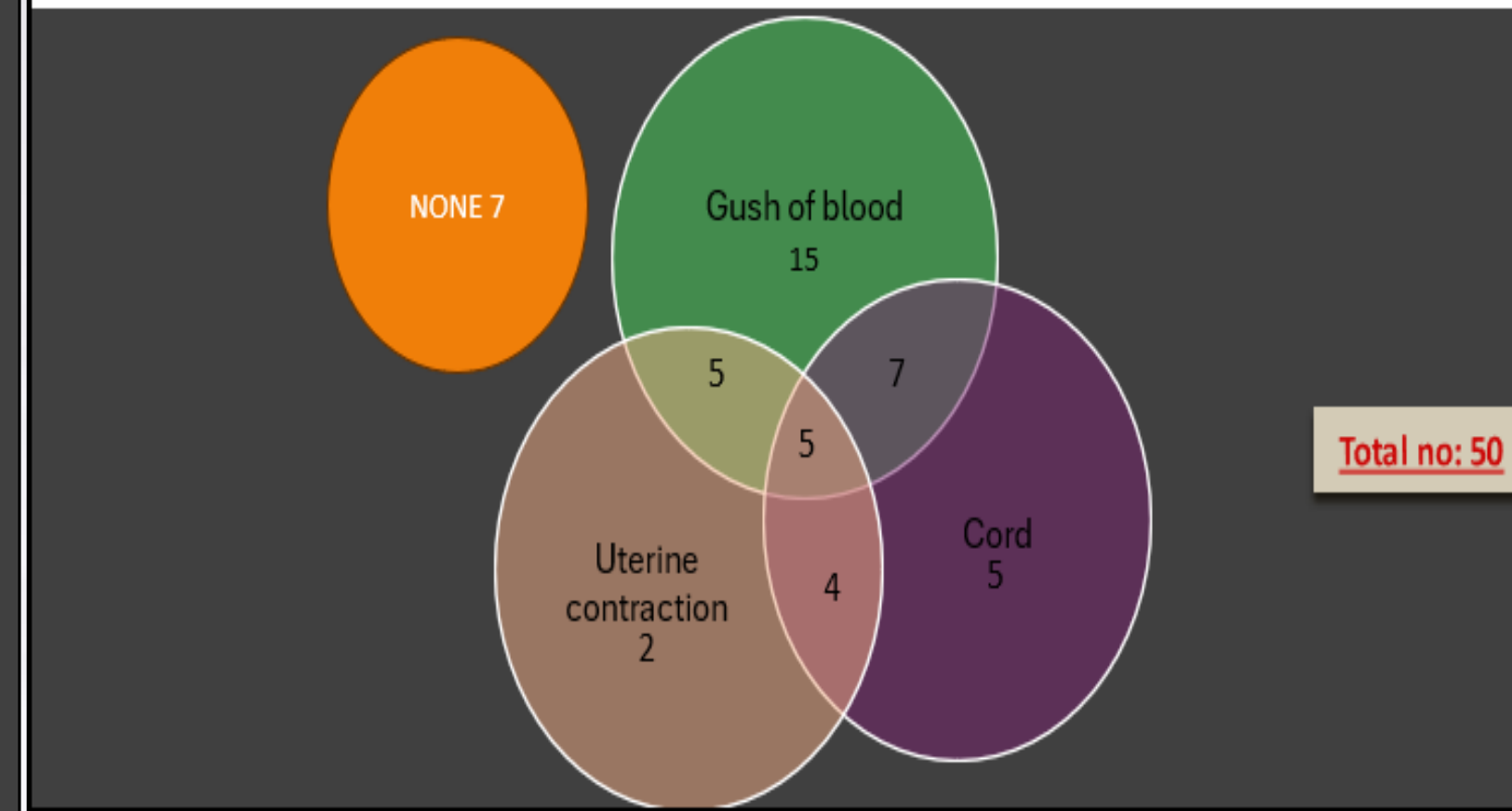
Drug used in 3rd stage



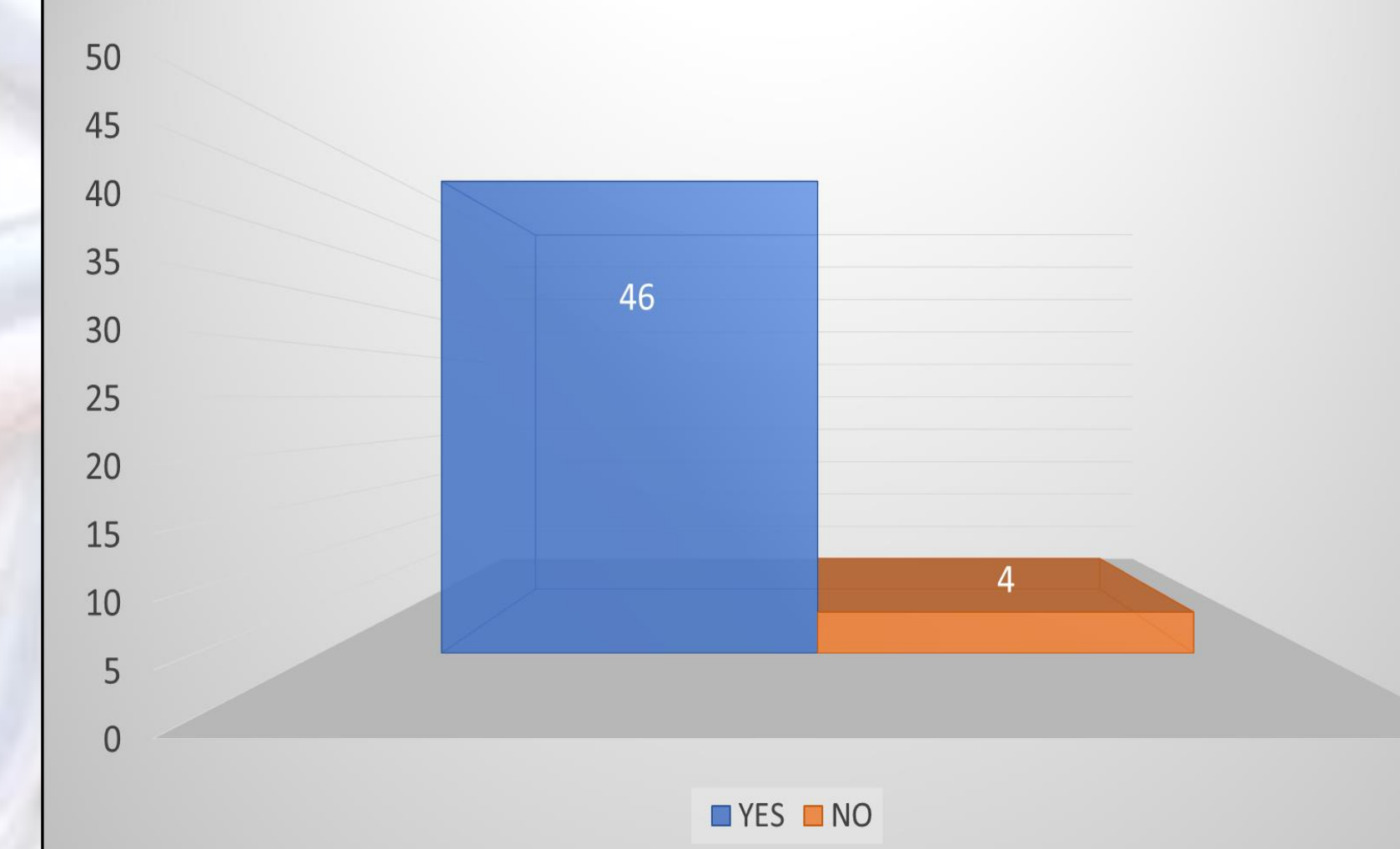
Results



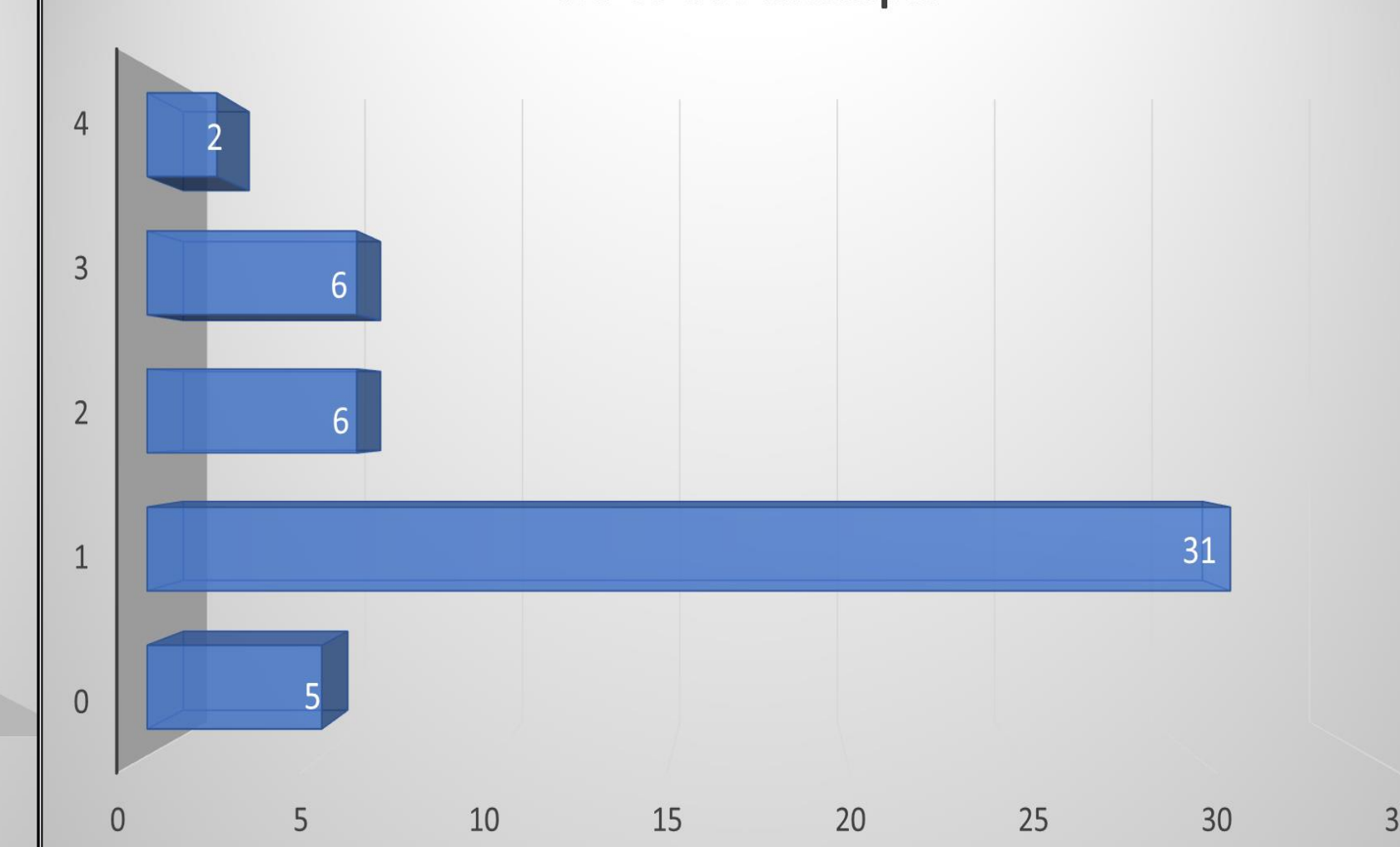
Intersection between different signs of separation



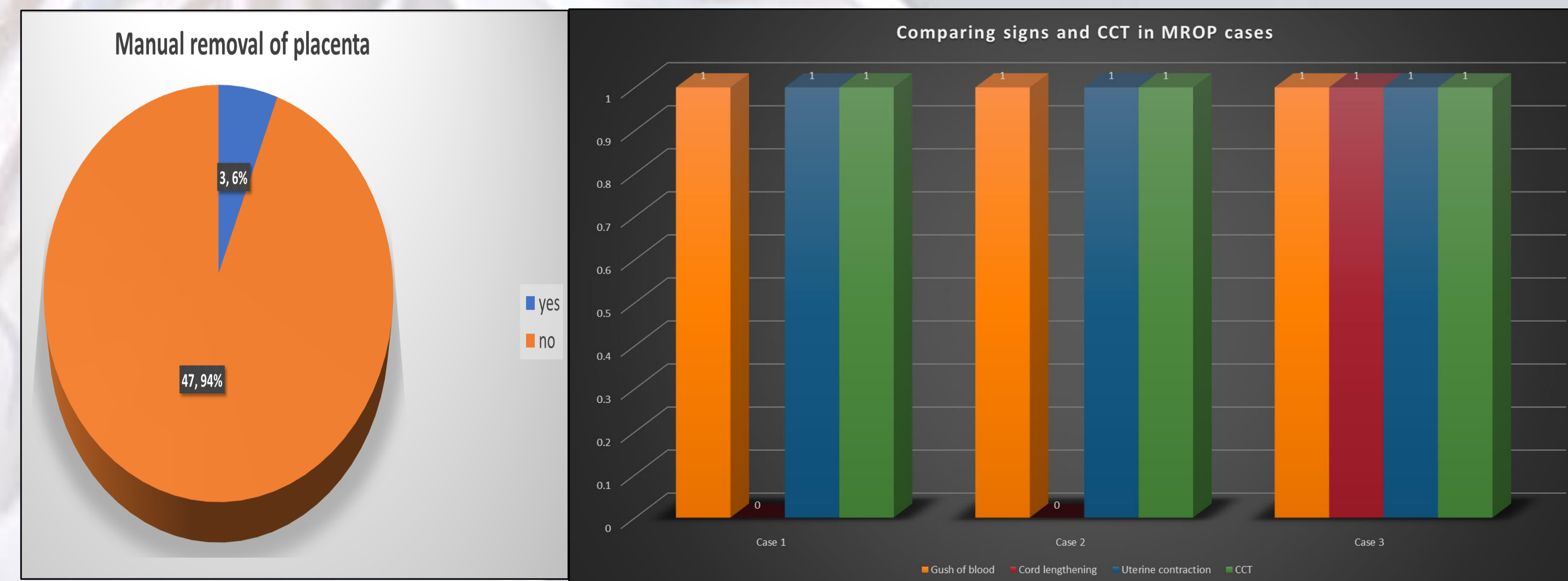
Controlled cord traction



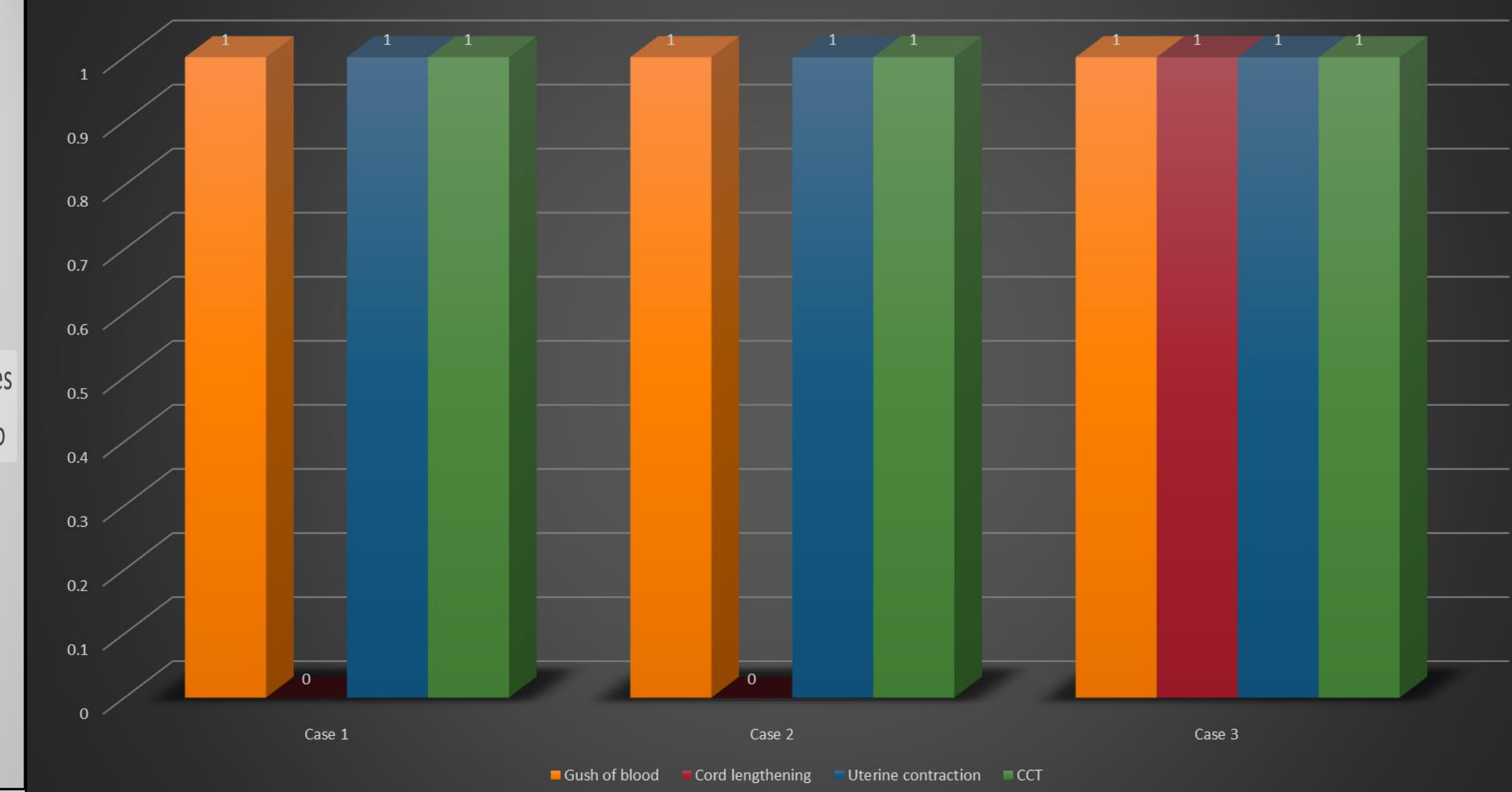
No of CCT attempts



Manual Removal of Placenta



Comparing signs and CCT in MROP cases



This compares presence of signs and CCT use in MROP cases. Most patients lacked strong clinical signs, and CCT was either ineffective or difficult. This highlights the predictive value of signs and the limitations of traction alone

Summary

- 1. Clinical signs of placental separation are variable:**
 - ❑ Not all patients display all three classical signs.
 - ❑ **Gush of blood** is the most frequently observed single indicator, but not always accurate
- 2. A significant number of cases (7/50) had no visible signs,**
 - ❑ Highlighting the **limitations of relying solely on textbook signs** for clinical decisions.
- 3. Combination of signs may improve accuracy,**
 - ❑ But waiting for all three may unnecessarily delay intervention.
- 4. Controlled Cord Traction (CCT) is effective in most cases,**
 - ❑ Particularly when at least one clinical sign is present.
- 5. Manual Removal of Placenta (MROP) :**
 - ❑ May have signs of separation, especially gush of blood
- 6. Uterine contraction was the least commonly observed sign,**
 - ❑ Possibly due to subtle presentation or observational variation.

Recommendations

- ❑ Do not wait for all three signs before proceeding with CCT,
- ❑ Action should be based on any one or combination of signs with clinical judgment.
- ❑ Document signs and CCT attempts systematically, This improves decision-making and helps monitor intervention effectiveness.
- ❑ Train delivery staff to recognize partial or atypical signs, to reduce dependency on ideal textbook presentations.
- ❑ Be cautious in cases with no signs, Monitor closely and consider early intervention if separation is suspected despite absent signs.

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