

Peripartum management of Hypodysfibrinogenemia: A Case Report

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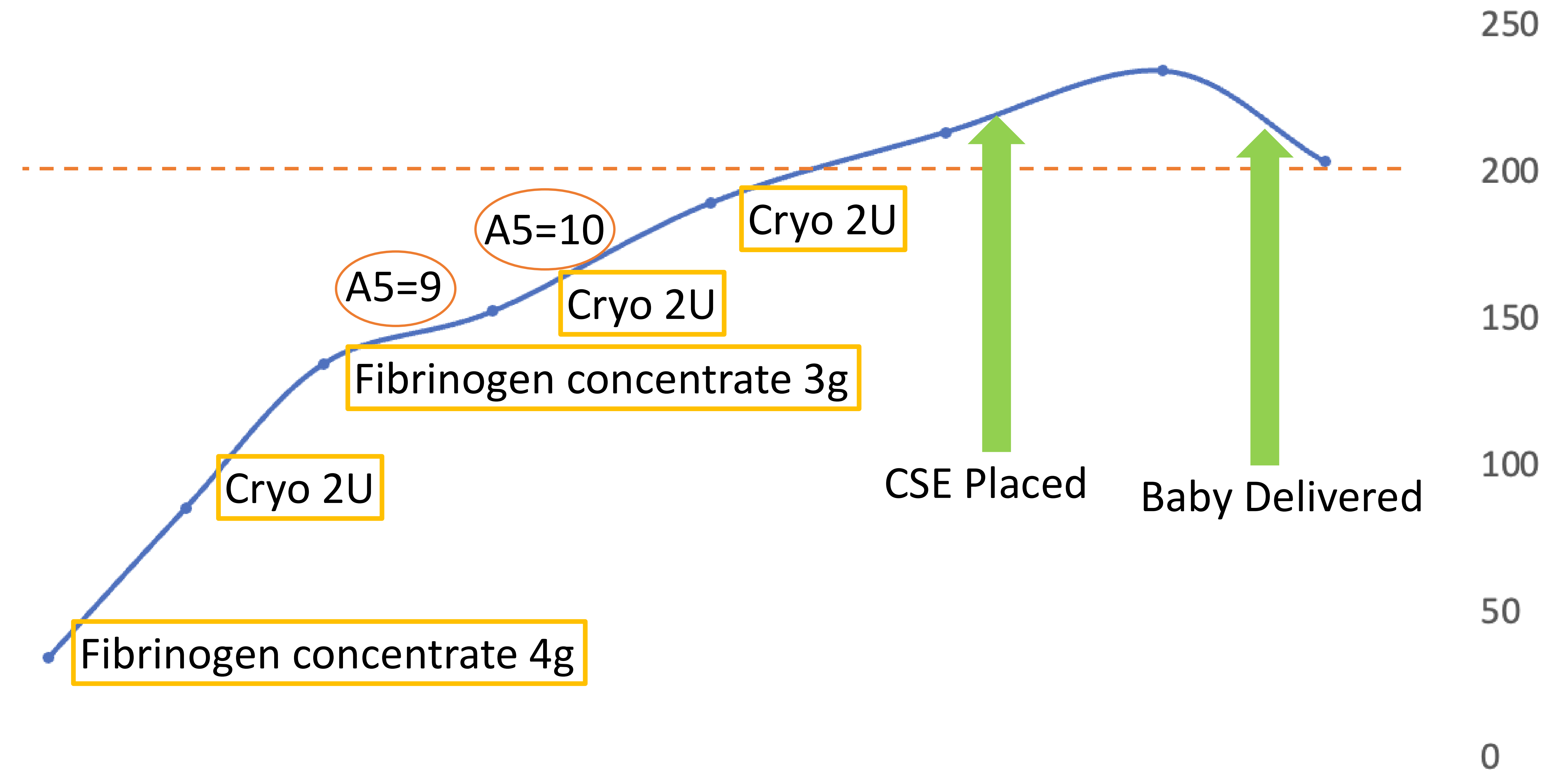
Background

- Hypodysfibrinogenemia = Low **level** + Low **function**
- Fibrinogen disorders increase risk of severe PPH and risk of hematoma from neuraxial procedures
- Fibrinogen repletion is a balancing act between **clotting** and **bleeding**



Case

- 31 yo G1P0 at 37w0d here for IOL for FGR
PMH of:
 - ACA aneurysm s/p coiling (2020)
 - Laparoscopic sleeve gastrectomy (2023)
 - ppx cryoprecipitate 2U
 - Hypodysfibrinogenemia (2023)
- Antepartum planning: MFM, hematology, genetics, anesthesiology
 - Fibrinogen > 200mg/dL, TXA until PPD 10



Teaching Points



- **Cryoprecipitate:** 10 units (2 pooled) = 100mg/dL
- **Fibrinogen concentrate:** $\text{Dose(mg/kg/ body weight)} = (\text{Target} - \text{Measured}) / 1.8$
- ROTEM in **active bleeding** vs ROTEM in **subacute/chronic coagulopathy**
- ROTEM is a useful tool when fibrinogen values are inconsistent with expected increase after repletion

