

Thesis Title Factors Affecting Immediate Postpartum
 Haemorrhage at Ramathibodi hospital :
 1979-1988

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Abstract

In this retrospective study incidence, trend, causes and factors associated with immediate postpartum haemorrhage were studied. Data was collected from the delivery records at Ramathibodi hospital from January 1, 1979 to December 31, 1988 during which there were 2,643 deliveries. Sampling was purposive 881 mothers experienced immediate postpartum haemorrhage. The control group was selected during the same period and comprised of 1,762 mothers who did not have postpartum haemorrhage and in whom deliveries occurred immediately before and after those whose Data was collected from hospital records and was analysed using percentages, rates, chi-square test, Phi-coefficient and Cramer's v coefficient.

The results were.

The annual incidence of immediate postpartum haemorrhage was found to be 14.8, 13.1, 12.3, 11.6, 11.2, 10.3, 11.6, 14.1, 14.8 and

16.0 per 1,000 deliveries during 1979-1988 respectively. The result suggested that the trend during the first six years (1979-1984) was decreasing. On the contrary, the trend of the following four year (1985-1988) was on the increase.

In this study the major causes of immediate postpartum haemorrhage were uterine atony, lacerations of the genital tracts, retained placenta or retained secundines and defects of the clotting mechanism with the incidence of 5.9, 2.2, 1.3 and 0.13 per 1,000 deliveries respectively.

Factors associated with immediate postpartum haemorrhage with statistical significance and the strength of association with immediate postpartum haemorrhage ranked from high to low were retained placenta or membranes, manual removal of placenta, lacerations of the genital tract, third stage of labour, operative deliveries, birth weight, complication before delivery, second stage of labour, type of pregnancy, blood coagulation defects, history of postpartum haemorrhage, attendant at delivery, the use of oxytocin and maternal age. Factors not associated statistically with immediate post partum haemorrhage were gravidity, parity, first stage of labour, anaesthesia and disease of the blood.

In order to reduce the incidence and risk of immediate post partum haemorrhage women who have tendency for post partum haemorrhage should be delivered in a hospital. Furthermore patients' care in the labour room should be improved.