

Hemorrhage

[Health & Medicine](#), [Nursing](#)



POSTPARTUM HEMORRHAGE Postpartum Hemorrhage Postpartum

Hemorrhage is one of the leading causes of maternal deaths after childbirth. It is defined as blood loss of more than 500ml 24 hours after childbirth. This condition can be caused by a wide range of factors, such as uterine atony, lacerations, and clotting factor deficiency, to name a few. This condition is preventable and is treatable. However, this poses life threatening complications if left untreated and unnoticed. Hence, strong foundation on this is therefore important in promoting safe and quality healthcare in caring for this crucial time.

Often considered the “ fourth trimester” of pregnancy, the postpartum period encompasses the first six (6) weeks after childbirth. After the delivery, the woman begins to experience psychological and physiological changes that return the body into the pre-pregnant state. These changes often occur without difficulty. However, factors such as blood loss, trauma, infection and fatigue place the woman at high risk, making the postpartum period a crucial time.

Postpartum haemorrhage is considered one of the leading causes of maternal deaths, accounting approximately 30% of all pregnancy-related deaths. A study was made in aiming early identification of postpartum haemorrhage with the end view of preventing its occurrence and if not, to provide prompt intervention and prevention of its life threatening complications. It is vitally important to identify those women at increased risk of a postpartum hemorrhage, as well as understanding and carrying out expectant and active management of the third stage of labor.

Regardless of the cause, the woman is in danger of developing hypovolemia,

a system-wide decrease in blood volume from too much blood loss. If the blood loss continues, the woman may develop hypovolemic shock, which is characterized by a weak and thread and rapid pulse; hypotension; cold and clammy skin; and changes in level of consciousness. These findings may occur abruptly and be dramatic if the blood loss is large and occurs quickly. The woman who experiences postpartum haemorrhage is also at risk for developing anemia from the blood loss.

Active management comprises one of the most important sets to prevent these complications. An effective measure that can be delivered by trained health care providers linked with essential supplies in all the settings that women give birth. It includes administration of uterotonic agent; after the cord is clamped, placenta delivered by controlled cord traction with counter-traction on the fundus; uterine massage after delivery of the placenta as appropriate. It was designed to speed the delivery of the placenta by increasing uterine contractions and to prevent haemorrhage by averting uterine atony. These simple procedures help have potential to prevent maternal deaths every year. It was concluded that active management of the third stage of labor in the setting of a maternity hospital was superior to expectant management in reducing blood loss, postpartum hemorrhage and duration of the third stage. Active management of the third stage of labor also was associated with reduced postpartum anemia, decreased need for blood transfusion, and less use of additional therapeutic uterotonic drugs. The nurse therefore plays a vital role in identifying woman with complications to ensure early detection and prompt intervention. They need to be aware of the risk factors for postpartum haemorrhage and take

appropriate action when identified. This knowledge must be used in combination with an understanding with the women's cultural, social and psychological well-being.

The nurse plays an important role in monitoring the woman's status, assisting with measures to control bleeding, providing support to the woman and her family, and educating the woman about her condition. Maintaining the woman's safety is a paramount.

The study is aimed at promoting safer postpartal period, keeping in mind that postpartum haemorrhage is one of the leading causes of death after childbirth. Knowledge on its prompt identification and improvements in the intervention has the potential to create dramatic increase on the survival - or even prevention, of the aforementioned condition. Postpartum haemorrhage is preventable and treatable, and dramatic decline on maternal deaths can be made once a strong knowledge base on the condition has been established.

Woman reared us for nine months in their own body before we can be born, it's time we care for them during this most crucial period.