

Study finds that red blood cell transfusion decreases fatigue in women with acute postpartum anemia

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In a study to be presented today at the Society for Maternal-Fetal Medicine's annual meeting, The Pregnancy Meeting™, in Dallas, Texas, researchers will report findings that show that in women with acute postpartum anemia, due to excessive blood loss during delivery, red blood cell transfusion led to a statistically significant decrease in physical fatigue. While excessive blood loss during delivery caused severe physical fatigue, the effect of red blood cell transfusion on this fatigue was small.

This study, RBC Transfusion Leads to an Improvement of Physical Fatigue in [Women](#) with Acute Postpartum Anemia: the WOMB Study, is the first study worldwide to investigate the blood transfusion policy among postpartum women, a very specific population of mostly healthy, young women who develop an acute anemia due to postpartum hemorrhage.

"We believe that the difference in physical fatigue between blood transfusion and expectant management, i.e. no transfusion, is clinically acceptable and expectant management should therefore be preferred," said Johannes J. Duvekot, MD, PhD, with Erasmus MC, Obstetrics & Gynecology, Rotterdam, Netherlands, and one of the study's authors. "Blood transfusion should be given based on clinical symptoms and not on blood values only."

Duvekot and his colleagues investigated whether a red blood cell transfusion improved physical fatigue in postpartum anemic women, due to excessive [blood loss](#) during delivery, without severe physical complaints. Women who participated in the Netherlands nationwide study were randomly allocated to red blood cell transfusion or expectant management. They were followed for six weeks, in which they reported on their quality of life, including physical fatigue, by completing questionnaires.

The results of the study show that excessive blood loss during delivery caused severe physical fatigue. Red [blood cell transfusion](#) only mildly improved this fatigue. Therefore, in patients with acute anemia due to postpartum hemorrhage, who are hemodynamically stable, an expectant management is preferred.

More information: A copy of the abstract is available at [www.smfmnewsroom.org/annual-me ... 1-meeting-abstracts/](http://www.smfmnewsroom.org/annual-me...1-meeting-abstracts/)

Provided by Society for Maternal-Fetal Medicine

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