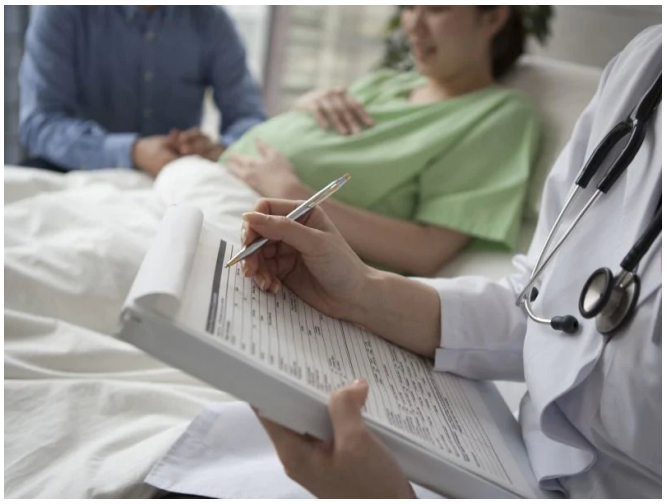
Prophylactic tranexamic acid doesn't cut postpartum bleeding

23 August 2018



(HealthDay)—Prophylactic administration of tranexamic acid does not reduce postpartum hemorrhage among women with vaginal delivery receiving prophylactic oxytocin, according to a study published in the Aug. 23 issue of the *New England Journal of Medicine*.

Loïc Sentilhes, M.D., Ph.D., from Bordeaux University Hospital in France, and colleagues randomized 4,079 women in labor with a planned vaginal delivery at 35 or more weeks of gestation to tranexamic acid or placebo, administered intravenously, in addition to prophylactic oxytocin after delivery. Overall, 3,891 of the women had a vaginal delivery.

The researchers found that the primary outcome of postpartum hemorrhage of at least 500 ml occurred in 8.1 and 9.8 percent of women in the tranexamic acid and placebo groups, respectively (relative risk, 0.83; 95 percent confidence interval, 0.68 to 1.01; P = 0.07). Compared with those in the placebo group, women in the tranexamic acid group had a lower rate of provider-assessed clinically significant postpartum hemorrhage (7.8 versus 10.4 percent; relative risk, 0.74; 95 percent confidence interval, 0.61 to 0.91; P = 0.004) and received additional uterotonic agents less often (7.2 versus 9.7 percent; relative risk, 0.75; 95 percent confidence interval, 0.61 to 0.92; P = 0.006).

"Among women with vaginal delivery who received prophylactic oxytocin, the use of tranexamic acid did not result in a rate of postpartum hemorrhage of at least 500 ml that was significantly lower than the rate with placebo," the authors write.

More information: Abstract/Full Text (subscription or payment may be required)
Editorial (subscription or payment may be required)