

For postpartum hemorrhage, carbetocin similar to oxytocin

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carbetocin and oxytocin groups, respectively (relative risk, 1.04; 95 percent confidence interval, 0.87 to 1.25), with the confidence interval crossing the non-inferiority margin. There was no significant difference between the groups in terms of use of additional uterotonic agents, interventions to stop bleeding, and [adverse effects](#).

"Heat-stable carbetocin was non-inferior to oxytocin for the prevention of blood loss of at least 500 ml or the use of additional uterotonic agents," the authors write.

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(HealthDay)—For women after vaginal birth, heat-stable carbetocin is non-inferior to oxytocin for prevention of blood loss of at least 500 ml or use of additional uterotonic agents, according to a study published online June 27 in the *New England Journal of Medicine*.

Mariana Widmer, from the World Health Organization in Geneva, and colleagues enrolled women across 23 sites in 10 countries in a non-inferiority trial comparing intramuscular injections of heat-stable carbetocin with oxytocin administered immediately after [vaginal birth](#). A total of 29,645 women were randomized.

The researchers found that the frequency of [blood loss](#) of at least 500 ml or the use of additional uterotonic agents was 14.5 and 14.4 percent in the carbetocin and oxytocin groups, respectively (relative risk, 1.01; 95 percent confidence interval, 0.95 to 1.06), which was consistent with non-inferiority. The frequency of blood loss of at least 1,000 ml was 1.51 and 1.45 percent in the

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