Incidence of postpartum hemorrhage lower with tranexamic acid

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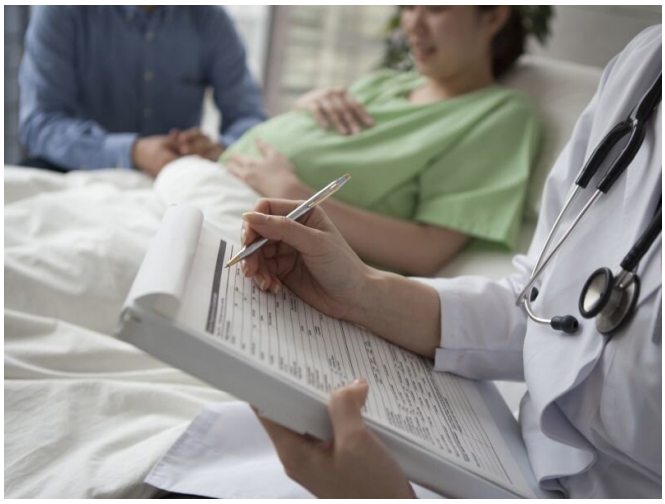

(HealthDay)—For women undergoing cesarean section, prophylactic use of tranexamic acid results in a lower incidence of postpartum hemorrhage, according to a study published in the April 29 issue of the *New England Journal of Medicine*.

Loïc Sentilhes, M.D., Ph.D., from the Bordeaux University Hospital in France, and colleagues randomly assigned women undergoing cesarean delivery before or during labor at 34 or more gestational weeks to receive an intravenously administered prophylactic uterotonic agent and either tranexamic acid or placebo. The primary outcome was postpartum hemorrhage; primary outcome data were available for 4,153 women.

The researchers found that the primary outcome occurred in 26.7 percent of 2,086 women in the tranexamic acid group and in 31.6 percent of 2,067 women in the placebo group (adjusted risk ratio, 0.84; 95 percent confidence interval, 0.75 to 0.94; P = 0.003). The mean gravimetrically estimated blood loss and the percentage of women with provider-assessed clinically significant postpartum hemorrhage did not differ significantly between the groups, nor did use of additional uterotonic agents or postpartum blood transfusion. In the three months after delivery, thromboembolic events occurred in 0.4 and 0.1 percent of women who received tranexamic acid and placebo, respectively (adjusted risk ratio, 4.01; 95 percent confidence interval, 0.85 to 18.92; P = 0.08).

"Our results show that prophylactic use of tranexamic acid at cesarean delivery had a biologic effect, in that the calculated estimated blood loss was significantly lower among women who received the drug than among those who received placebo," the authors write.

Two authors disclosed financial ties to biopharmaceutical companies.

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