

Poster Number: EP171 Name: Dr. Aditi Trivedi (Assist. Prof), Dr. Pundalik Sonawane (H. O. D.)

K J Somaiya Medical college

Title: Comparison of intramuscular carbetocin vs oxytocin for the prevention of post partum haemorrhage following vaginal delivery





INTRODUCTION

Post partum haemorrhage (PPH) is still one of the leading causes of maternal mortality and morbidity in India. Active management of third stage of labour (AMTSL) can prevent a significant number of PPHs which includes administration of uterotonics after delivery. Oxytocin, widely used uterotonic, has a half life of 1-6 minutes, is heat sensitive and needs to be stored at 2° to 8° Celsius. Carbitocin is a long acting, synthetic, heat stable analogue of oxytocin can be stored at room temperature. Hence, its worth exploring the efficacy of carbetocin over oxytocin in management of AMTSL.

Material and methods:

A prospective randomised control trial was conducted on 100 women who underwent full term vaginal delivery with live singleton gestation at K J Somaiya Hospital. 50 women received a single intramuscular injection 100 mcg of heat stable Carbetocin (group A) and 50 women received 10 units of oxytocin intramuscularly (group B) immediately post-delivery of the baby.

Interpretation:

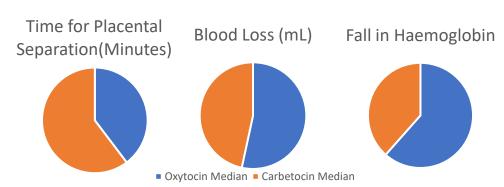
The p-value for taken for placenta separation is <0.001, suggesting that oxytocin may be more effective or faster at facilitating placental separation than carbetocin. The difference in blood loss between the two groups is statistically significant (0.0127), suggesting that carbetocin may result in slightly less blood loss compared to oxytocin. The fall in haemoglobin is not statistically significant between the two groups.

Conclusion:

Aims and objectives:

To compare the effectiveness of carbetocin versus oxytocin for the prevention of PPH following delivery with respect to

- a. total amount of blood loss during 3rd stage of labour
- b. time for placental separation
- c. fall in haemoglobin (before and after 24 hrs post delivery)



	OXYTOCIN (Mean ± SD)	CARBETOCIN (Mean ± SD)	p-value
Time for Placental Separation (Minutes)*	5.1 ± 1.4	7.6 ± 4.5	<0.001
Blood Loss (ML)*	228.8 ± 25.4	199.5 ± 48.9	0.0127
Fall in Haemoglobin	0.8 ± 0.9	0.5 ± 0.7	0.1651

According to our study, single dose of heat stable carbetocin appears to be more effective and just as safe in prevention of PPH and reducing post partum blood loss post vaginal delivery. It can be used over heat sensitive oxytocin in Active management of third stage of labour.