Tranexamic Acid and Blood Loss During and After Cesarean Section: A Prospective Randomized Study

Noshina Shabir, Hina Pirzada,
Shafaq Hanif and Rubina Rafique

Abbas Institute of Medical Sciences, Muzaffarabad, Azad Kashmir,
Pakistan

Abstract: Background:
Incidence
of cesarean sections is on the rise. This has increased incidence of associated
complications, especially the Postpartum hemorrhage (PPH). Tranexamic acid is a
potent antifibrinolytic agent. Efficacy and safety of the drug has not been
assessed in patients from Muzaffarabad, as of yet.

Objective:
To find out the effectiveness and safety of
tranexamic acid in the reduction of blood loss during and after the cesarean section.

Methods:
A
prospective, randomized, placebo controlled, study was directed on 100 women
experiencing lower segment cesarean segment (LSCS) at Department
of Obstetrics and Gynecology, Combined Military Hospital Muzaffarabad over 6
months from May 2018 to October 2018.
Fifty of them were given tranexamic acid preceding LSCS were contrasted
and 50 control group who got IV placebo. Blood loss was collected and estimated
during two periods. The study group got IV tranexamic acid and the control
group got IV placebo. Following delivery, all participants got 10 units of
oxytocin in 500 mL of normal saline. Hemoglobin, urine examination, liver and
renal functions were checked in both the groups.

Results:
Tranexamic
acid essentially decreased the quantity of blood loss from the finish of LSCS
to 2 hours postpartum: 60.96±13.4 ml in the investigation group versus
112.02±13.46 mL in the control group (p=0.001). It additionally essentially
reduced the amount of blood loss? Intraoperative 500.62±111.20 mL in the study
group, versus 696.85±196.32 ml in the control group. (P<0.001). No serious complication
or reactions were accounted for in either group.**Conclusion:** Tranexamic acid
essentially decreased the quantity of
blood loss during and after the
lower segment cesarean segment
and its utilization was not associated with any serious reactions or side effect like thrombosis. TXA can be
utilized as safe and effective
in participants undergoing LSCS and useful
for anemic women or the individuals who refuse blood transfusion.