**Table D-72. Evidence table for studies addressing management of PPH (Ledee 2001)**

| **Study**  **Description** | **Intervention** | **Inclusion/Exclusion**  **Criteria & Population** | **Outcomes** |
| --- | --- | --- | --- |
| Author:  Ledee et al.,  200173  Country:  France  Enrollment period:  1983 to 1998  Birth setting:  Hospital  Facility characteristics:  Tertiary care university hospital  Funding:  Agency/NR  Design:  Retrospective cohort study | **Intervention:**  Hospitalization in ICU for intractable PPH  Initial treatment: simple bimanual compression, oxytocin followed by prostaglandin (PGE2) IV and maternal resuscitation.  Follow-up treatments: embolizing the selective pelvic vessels or ligating the hypogastric arteries  **Groups (based on primary second-line attempt to arrest hemorrhage):**  **G1:** Bilateral hypogastric artery ligation  **G2:** Embolization  **G3:** Hysterectomy  N at enrollment:  **G1:** 48  **G2:** 8  **G3:** 5  Duration of treatment: NR  Timing of treatment:  Initial treatment: simple bimanual compression, oxytocin followed by prostaglandin (PGE2) IV and maternal resuscitation.  Follow-up treatments: embolizing the selective pelvic vessels or ligating the hypogastric arteries  Order of treatment:  G1: 4 women required hysterectomy post-ligation  G2: 1 women required methotrexate, 1 required ligation, 1 required hysterectomy post-embolization  G3: 1 required embolization  Length of follow-up: NR | **Operational definition of PPH:**  Intractable PPH: cases that did not respond to usual treatment within 60 minutes or worsening of maternal condition  **Definition of success of treatment:** NR  **Method of blood loss measurement:** Estimated by volume of blood transfused  **Severity:** Intractable PPH  Inclusion criteria:   * Patients hospitalized for intractable PPH between 1983 and 1998   Exclusion criteria: NR  **Maternal age:** NR  **Parity:** NR  **Weeks gestation:** NR  **Single pregnancy:** NR  **Multiple pregnancy:** NR  **Race/ethnicity:** NR  **BMI:** NR  **Baseline hemoglobin:** NR  **SES:** NR  **Mode of birth, n (%):**  Cesarean  **G1+ G2:** 41/56 (73)  Vaginal  **G1+G2:** 15/56 (27)  **Risk factors:** NR  **Primary etiology of PPH, n (%):**  Group 1 Received < 4 units RBCs n=22  Atony: 8/22  Group 2 Received 4-7 units RBCs n=16  Atony: 8/16  Group 3 Received 8-20 units RBCs n=13  Atony: 5/13  Group 4 Received > 20 units RBCs n=10  Atony: 8/22 | **Blood loss:** NR  **Transfusion, n:**  Received < 4 units RBCs  **G1:** 21  **G2:** 1  **G3:** 0  Received 4-7 units  **G1:** 10  **G2:** 5  **G3:** 1  Received 8-20 units  **G1:** 11  **G2:** 1  **G3:** 1  Received > 20 units  **G1:** 6  **G2:** 1  **G3:** 3  **ICU admission:** NR  **Anemia:** NR  **Length of stay:** NR  **Mortality:** Maternal deaths, total  **G1+G2+G3:** 7  Maternal deaths post hysterectomy  **G3:** 5  Uterine preservation  **G1+G2+G3:** 10 total hysterectomies  Future fertility:  **G1:** 7 pregnancies among 10 women desiring pregnancy 1-4 years post-ligation  **G2:** 1 pregnancy 1 year post-embolization (number desiring pregnancy NR)  **Breastfeeding:** NR  **Psychological impact:** NR  **Harms of intervention:** NR  **Confounders:** NR  **Effect modifiers:** NR |

**Comments:** Details for each maternal death (n=7) reported separately in the text.