

Interventional Treatment Can Save Mom, Prevent Hysterectomy

(BUSINESS WIRE) Using tiny balloons to temporarily block blood flow to the uterus during a high-risk Caesarean-section delivery can save the life of the mother while preventing hysterectomy and preserving fertility, suggests research being presented at the 25th annual International Symposium on Endovascular Therapy (ISET).

The placenta attaches abnormally in some pregnancies, putting the mother and baby at risk during delivery due to the likelihood of hemorrhage when the placenta is detached from the uterine wall. Women with this condition must undergo a C-section, but excessive blood loss remains a risk, and it may be necessary to perform a hysterectomy to save the life of the mother and baby. Called uterine artery balloon occlusion, the minimally invasive treatment involves inflating tiny balloons in the main arteries feeding the uterus prior to the C-section to stop the blood flow to the uterus.

“Before routine prenatal ultrasound, many of these women would die in childbirth, but now we can diagnose the problem in advance and perform balloon occlusion before a scheduled C-section, which also offers women a chance to preserve their fertility,” said Constantino Pena, M.D., medical director of vascular imaging, Baptist Cardiac and Vascular Institute, Miami, where many women have undergone the procedure. In the study, 35 pregnant women had uterine artery balloon occlusion prior to undergoing C-section. Twenty-six of the women had transfusions averaging 1,870 ml – far less than the usual blood loss of 3,000 to 6,000 ml for women with this condition.

All of the women and infants survived. Seven of the women ultimately had hysterectomies. Balloon occlusion involves placing a thin tube, or catheter, via the groin or femoral artery, advancing it to both internal iliac arteries and inflating a tiny balloon in each prior to the C-section.

“Our research demonstrates that obstetricians and interventional radiologists should work together to maximize patient safety and save the life of the woman with an abnormal placenta,” said Azzam Khankan, M.D., Ph.D., an interventional radiologist at King Abdulaziz Medical City, Riyadh, Saudi Arabia, and lead author of the study. “This most likely will help ensure future fertility.”

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