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# A view of the uterus at caesarean section in a subsequent pregnancy following the use of a Bakri balloon in a previous pregnancy for the management of PPH

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# A view of the uterus at caesarean section in a subsequent pregnancy following the use of a Bakri balloon in a previous pregnancy for the management of PPH

## **Abstract**

Abstract of a E-poster that was presented at the RCOG World Congress 2015, 12-15 April, Brisbane, Queensland, Australia.

## **Disciplines**

Medicine and Health Sciences | Social and Behavioral Sciences

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## A view of the uterus at caesarean section in a subsequent pregnancy following the use of a Bakri balloon in a previous pregnancy for the management of PPH

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### **Introduction**

The use of balloon tamponade technology (BTT) has steadily increased since the original descriptions in 1992. Despite the multitude of uterine and non-uterine specific balloons that have been used for the treatment of PPH secondary to an atonic uterus, few studies have commented on the subsequent effect of menses, fertility and pregnancy.

Following failed first-line uterotonics (FLU), other second-line approaches (SLA) such as compression sutures and vascular ligation/occlusions, have been associated with future menses, fertility and pregnancy related problems. Although more recently, uterine perforation and uterine rupture have been described in relation to BTT, few studies comment on the external/internal gross structure of the uterus following the use of BTT in the management of PPH.

### **Cases**

Two cases are presented in which a Bakri balloon was used for the management of PPH following a previous vaginal and caesarean birth. Both patients subsequently became pregnant and a lower segment caesarean section was performed. This provided an opportunity to view the gross external and internal surfaces of their uteri as well as the thickness of their respective lower segments. At caesarean section, there were no apparent adhesions on the external surface of either uterus. The myometrial thickness at the level of the lower segment appeared as expected in both cases, and the inner endometrial surfaces were regular in contour.

### **Conclusion**

The use of a Bakri balloon whether at caesarean section or following a vaginal birth, does not appear to result in any gross uterine structural alterations in a subsequent pregnancy.