

Carbetocin versus Syntometrine in the Prevention of Postpartum Haemorrhage among Women with Risk Factors following Vaginal Delivery

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ABSTRACT

Introduction: Postpartum haemorrhage (PPH) is one of the main factors that contribute to maternal morbidity and mortality worldwide. **Objectives:** The aim of this study was to compare the efficacy and safety of carbetocin and syntometrine in the prevention of PPH in patients with at least one risk factor for PPH following vaginal delivery. **Methods:** This study was a double blind randomised controlled study conducted in tertiary centre whereby 140 pregnant women with risk factors of PPH who delivered vaginally. **Results:** The amount of intrapartum blood loss and requirement of additional uterotonic agent was significantly lower in carbetocin group (304.43 ± 192 vs 402.19 ± 265) (15/70 vs 5/70, $p=0.016$). Women who developed PPH (EBL more than 500mL) were also higher in syntometrine group and it was statistically significant (22.9% vs 10%, $p=0.04$). However, there was no significant difference regarding the incidence of major PPH, blood transfusion requirement and haemoglobin differences. There were also lower incidence of drug side effects in carbetocin group compared to syntometrine group (5/70 vs. 23/70). **Conclusions:** This study showed that IM carbetocin is more effective in reducing the intrapartum blood loss. Thus it is beneficial in the prevention of PPH among high-risk pregnant women who delivered vaginally.