Beyond the usual suspects: Acquired haemophilia A as a cause of secondary postpartum haemorrhage

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ABSTRACT

Introduction: Postpartum acquired haemophilia A (PAHA) is an uncommon autoimmune disorder in which women develop abnormal bleeding, commonly occurring 1 to 4 months after childbirth. **Case Description:** We report a 27-year-old Para 1 that presented to us with excessive per vaginal bleeding at day 7 post vaginal delivery. During this encounter, she was stable and investigations were unremarkable, thus, she was treated for endometritis. However, subsequently she had multiple admission for excessive per vaginal bleeding that requires transfusion of blood products. During her 2nd admission, her haemoglobin dropped to 6.4 mg/dL, ultrasonography showed collection in the uterus, and she underwent suction and curettage and was discharged well, but returned with similar symptoms. Subsequently, PAHA was suspected in view of isolated elevation of activated partial thromboplastin time (aPTT) with normal prothrombin time (PT) & international normalised ratio (INR). Haematological services were consulted for coagulopathy evaluation and mixing study, factor assay and inhibitor level were performed, thus confirming the diagnosis of PAHA. She was started on steroids, and hemostasis was achieved. **Discussion:** PAHA is a rare cause of postpartum haemorrhage (PPH), and delayed diagnosis is common. An isolated prolonged aPTT should prompt further investigation into haematological disorders in patients with refractory bleeding. Early detection and diagnosis are crucial to reduce maternal morbidity related to haemorrhage.