

Summary

The third stage of labour is potentially the most dangerous part for the mother, and active management is necessary, i.e. (administration of a uterotonic medication before the placenta is delivered, early clamping and cutting of the umbilical cord, and application of controlled traction to cord). The main risk is the occurrence of postpartum hemorrhage.

PPH is the most common cause of maternal morbidity and mortality worldwide. In developing countries the PPH is the main cause of maternal deaths which is defined as bleeding from the genital tract of 500ml or more in the first 24 hours following delivery of the baby.

Uterine atony is the most common cause of immediate heavy PPH. Standard measures to control such a clinical condition include measures such as haemostatic suturing, hypogastric arterial ligation, angiographic embolization of the major pelvic arteries, uterine artery ligation, uterine packing, and hysterectomy.

However, most of these packing techniques have the shortcomings of difficult insertion and in some cases, difficult estimation of the volume bleeding after packing because of the (masking effect) of the pack.

Use of Sengstaken Blackmore tube has the advantage of easy application and at the same time, easy withdrawal without the problem of (traumatic friction) with the endometrial, endocervical or vaginal surfaces at the time

of removal which sometimes trigger new bleeding when sponge fabric packing is utilized .also the advantage of correctly measuring the amount of bleeding by the drainage shaft.

In this is prospective study, we select 12 cases of atonic postpartum hemorrhage in obstetric department of Benha university hospital.

These cases should have two inclusion criteria:

1. Presence of atonic postpartum hemorrhage.
2. Failure of medical treatment of the bleeding.

While our study was retrospective, we nevertheless aimed at assessing the efficacy of this technique. When conventional medical treatment fails, tamponade with a sengstaken blackmore tube stopped the bleeding temporarily or definitively in 91.7% of cases

Conclusion

Our study shows that tamponade with a Sengstaken-Blackmore tube deserves a place in the treatment of atonic postpartum hemorrhage. It is effective, simple to use, scarcely invasive, but it is expensive and the only apparent contraindication is the discovery of an infection during delivery.