

Severe bleeding after birth

This information sheet aims to answer some commonly asked questions about severe bleeding after birth.

IMPORTANT: This is general information only. Ask your doctor or midwife about what care is right for you.

What is a primary postpartum haemorrhage (PPH)?

Severe bleeding is called a haemorrhage. A primary postpartum haemorrhage (PPH) is when you lose a lot of blood in the first day after giving birth. After a vaginal birth this usually means you have lost at least 500 mL (half a litre) of blood and after a caesarean section at least 1000 mL (a whole litre) of blood.

Why does PPH happen?

Often the exact reason is not known. Some common reasons that increase the chances of having a PPH are:

- Having a low level of iron in your blood at the time you give birth (anaemia)
- Having had a PPH with a previous baby
- Being more than 35 years old
- Having a body mass index (BMI) higher than 30 kg/m²
- Having given birth to 3 or more babies before
- You are pregnant with twins (or triplets) or a large baby
- You have diabetes or high blood pressure
- Your placenta is attached in an unusual way (e.g. placenta praevia)

Sometimes events in labour can make a PPH more likely to happen. Some of these are:

- If your labour is induced
- Having a longer labour than normal
- Having a very fast labour and birth
- Some or all of your placenta or membranes is not completely delivered
- Forceps or a vacuum suction is used to help birth your baby
- You get an infection during your labour or after birth
- You have a general anaesthetic
- Your uterus doesn't contract properly after birth (uterine atony)

Can PPH be prevented?

The chances of having a PPH can be reduced but not totally prevented. Keeping healthy in your pregnancy and going to all your appointments will help detect any problems early.

Women who have a greater chance of a PPH are usually advised to have:

- An intravenous cannula (IV) inserted during labour just in case medication or fluid is needed in an emergency
- Medication (oxytocin) to help deliver the placenta (rather than just waiting for the placenta to deliver by itself)
- Extra monitoring after your baby is born

What is the treatment for a PPH?

You will have your blood pressure and heart rate watched carefully. Other treatments you may be advised to have are:

- Extra blood tests
- Oxygen through a mask
- Intravenous fluids (a drip)
- A urinary catheter to keep your bladder empty and help your uterus contract

If your bleeding is very severe you may be advised to have:

- Medications that can help reduce the bleeding
- A blood transfusion
- An operation



What happens after a PPH?

Blood tests

You will usually have a blood test the next day to check if you are anaemic. Anaemia can make you feel very tired, dizzy and emotional. You may be offered a blood transfusion, or iron medication to help correct your anaemia.

Breastfeeding

Sometimes a PPH can affect your breast milk and make it harder to breastfeed. If you are having trouble breastfeeding or you think your baby is not getting enough breastmilk, talk to your midwife about getting help with breastfeeding.

Risk of clots in your blood vessels

A PPH increases your risk of having a blood clot (an embolism) after birth. Moving around and drinking plenty of water can help prevent a blood clot forming. You may also be advised to wear support stockings or to take medication. This will depend on your individual circumstances.

Emotional wellbeing

It can be upsetting when things don't go as planned during your baby's birth and talking about it can help. You may like to talk to the health care providers who looked after you during your PPH. You can do this while you are in hospital or you may like to wait until later when you feel better. Finding out if there was a reason for your PPH and what treatment you had, can also help with planning your next baby.

Do you need follow-up after a PPH?

Visit your GP for a check-up about 6 weeks after giving birth. Go to your GP earlier if:

- Your bleeding increases
 - You need to change your pad every 1–2 hours
 - You pass clots of blood
 - Your bleeding becomes bright red in colour
- You have a high temperature (more than 37.5°C)
- You have pain redness or swelling in your legs
- You feel short of breath while resting
- You feel more tired or emotional than you expect

Comfort, support & information

13HEALTH (13 432584) is a phone line that provides health information, referral and services to the public.

Pregnancy, Birth & Baby Helpline (1800 882 436 - free call) offers free, confidential, professional information and counselling for women, their partners and families relating to issues of conception, pregnancy, birthing and postnatal care
www.health.gov.au/pregnancyhelpline

Lifeline (13 11 14) Lifeline offers a telephone crisis support service to anyone www.lifeline.org.au