

Factors contributing to new mothers being discharged with a postnatal Hb < 8g/dl.



Ms. Caroline Brophy, Ms. Elaine Creedon, Dr Laoise O'Brien

Poppy Clinic



Introduction & Background

Anaemia is a significant cause of maternal mortality and morbidity globally and is highly prevalent in the postpartum period. It is associated with physical and psychological maternal morbidity.

The Postnatal Anaemic Surveillance Clinic (PASC) was established in 2022 in response to the need to formally follow up women discharged with severe postpartum anaemia (classified as a Hb <8g/dL). Women attend for review at 2 weeks postnatal. The visit involves a full assessment of the physical and, psychological well-being of the new mother, their adjustment to motherhood and a repeat Full Blood Count (FBC).

Aim

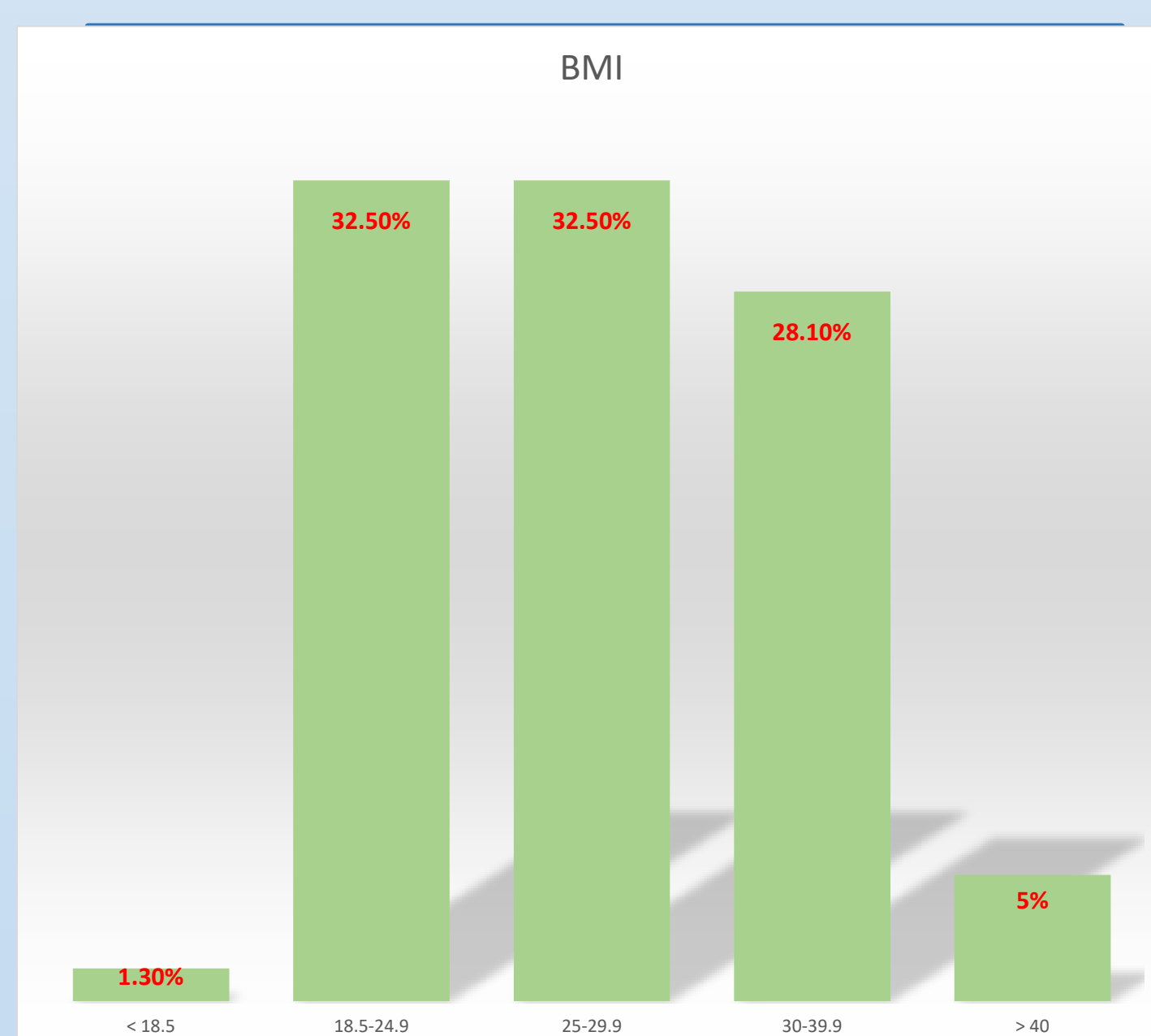
- ❖ Identify causes of severe anaemia (Hb < 8g/dl) at postnatal discharge.
- ❖ To improve maternal outcomes.
- ❖ Highlight oral iron benefits during the postnatal period.
- ❖ Support the development of best practice guidelines and policies.
- ❖ Use results to educate staff and improve practices across maternity units.

Methodology

A descriptive, exploratory design was used involving a retrospective chart review of cases referred to the PASC between January 2023 to December 2023 (N= 160) Data was collected anonymously from Electronic Health Care records.

Results

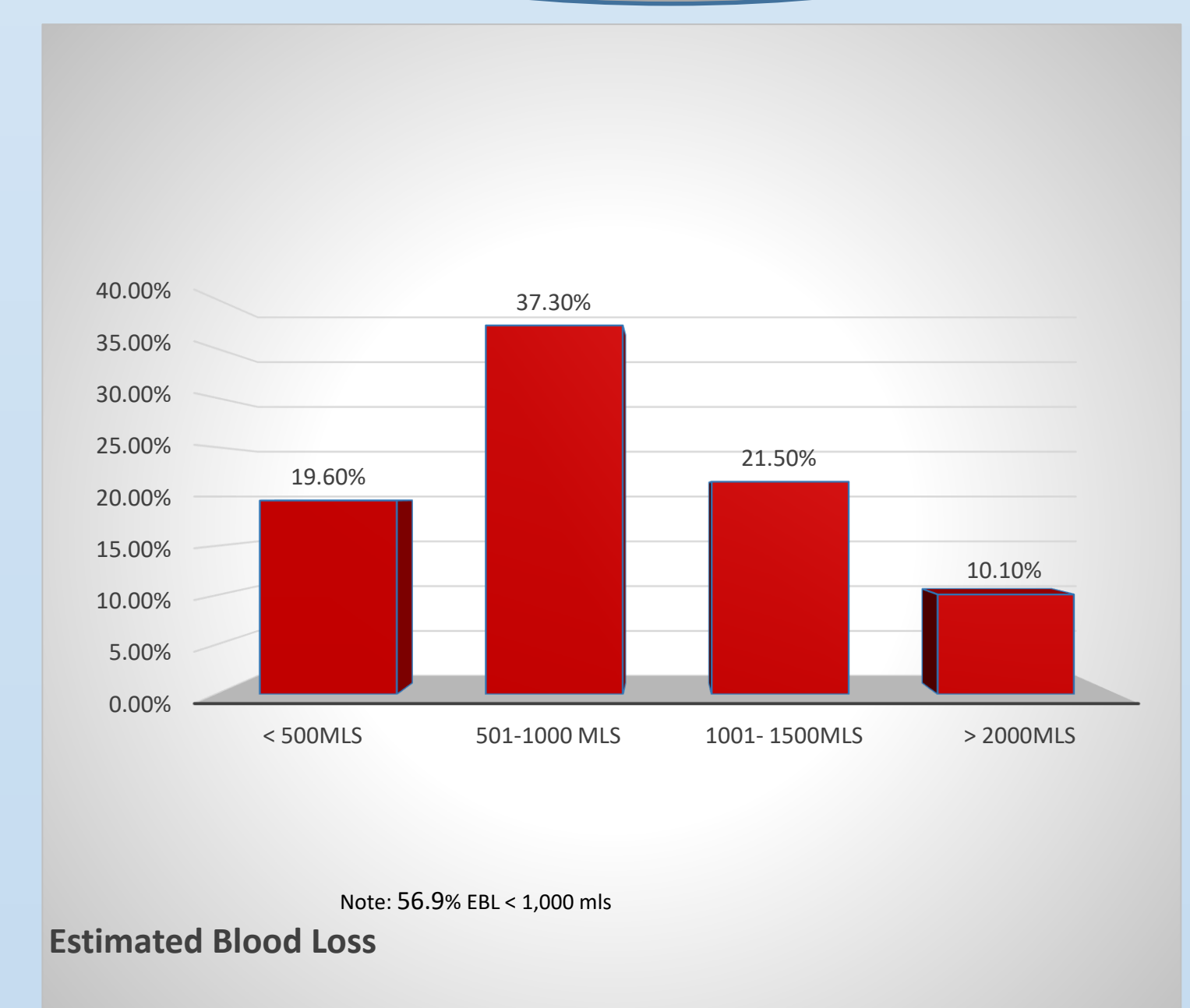
BMI



Hb Flow

Median Haemoglobin (1 st , 3 rd quartile)	Estimated Blood Loss (ml)				Total
	<500	501 – 1000	1001 – 2000	≥2000	
Booking Hb	11.7 (11.0, 12.4)	12.2 (11.7, 12.8)	12.1 (11.5, 12.9)	12.2 (11.8, 12.7)	12.1 (11.4, 12.8)
Pre-labour Hb	11.2 (12.3, 11.8)	11.3 (10.6, 12.0)	12.0 (11.2, 12.4)	12.6 (12.0, 12.9)	11.7 (10.9, 12.3)
Post-labour Hb	7.5 (7.2, 7.6)	7.5 (7.1, 7.8)	7.7 (7.0, 7.9)	7.4 (7.1, 7.7)	7.5 (7.1, 7.8)
Change (post – pre)	-3.9 (-4.8, -2.7)	-2.9 (-4.4, -3.1)	-4.3 (-4.9, -3.6)	-4.9 (-5.8, -4.6)	-4.3 (-4.9, -3.3)

Blood Loss



Results

BMI

Above 25kg/m² was associated with more severe postnatal anaemia (p=0.046).



Antenatal Anaemia

Antenatal Hb in the first trimester (p=0.950), 28 weeks gestation (p=0.224), or in labour (p=0.318) was not associated with postnatal discharge anaemia.

Antenatal iron intake

Over 90% of women were taking the recommended dose of oral iron during their antenatal period (>100mg of elemental Iron PO).

Blood loss

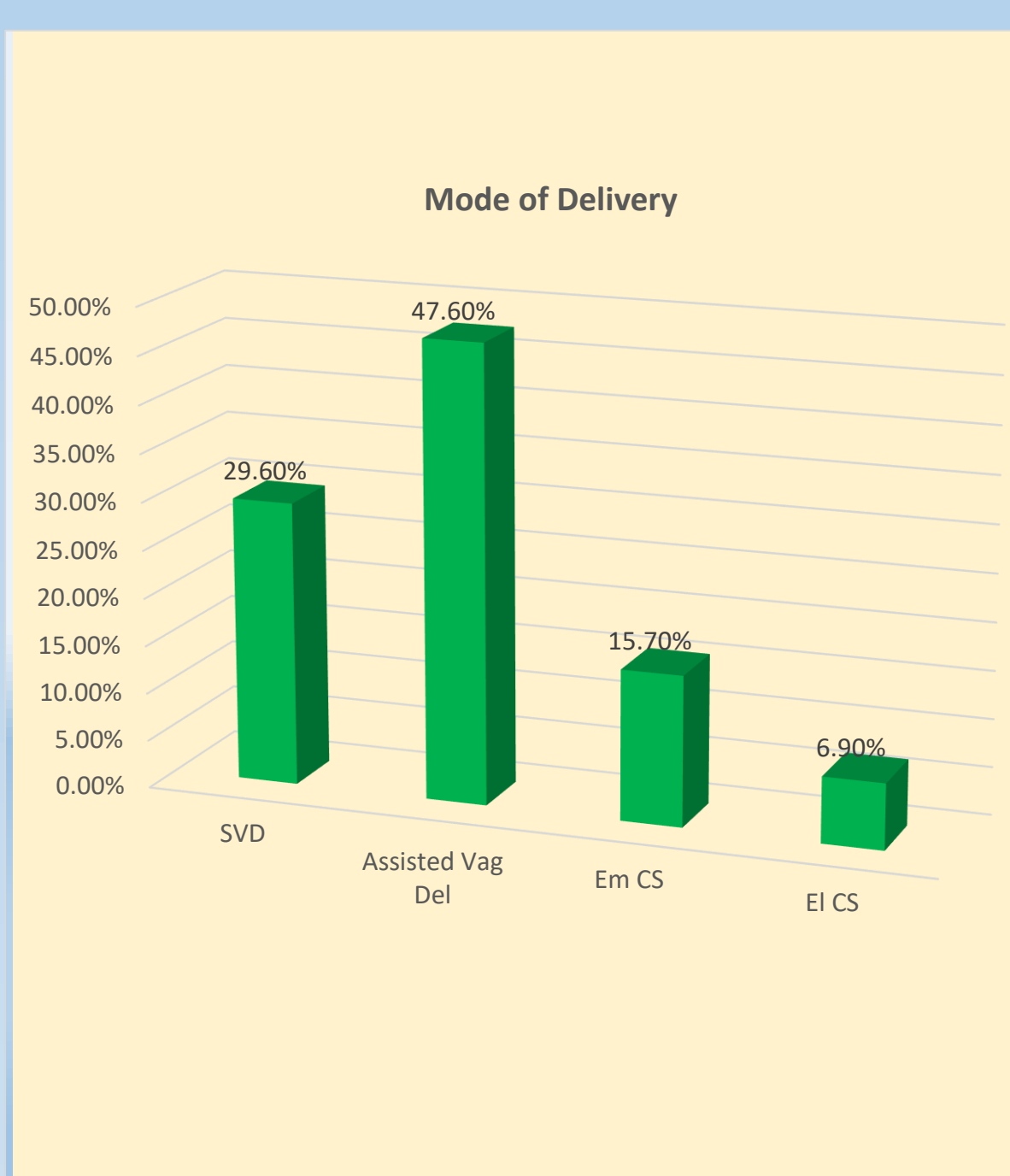
The degree of EBL was associated with postnatal Hb levels with a high degree of confidence (Fisher's exact test p<0.001).

Note: 56.9% EBL <1L.

Conclusion

- ❖ The increased prevalence of obesity and its effect on health is captured in this study identifying more severe postnatal anaemia in overweight and obese women.
- ❖ Iron supplementation continues to prevent pregnancy related anaemia. 91% of cohort studied took the recommended dose of oral iron.
- ❖ In this study antenatal anaemia did not have an association with severe postnatal anaemia.
- ❖ Part II of the study continues by analysing labour & delivery factors contributing to Hb < 8g/dl.

Part II of Study Analysis



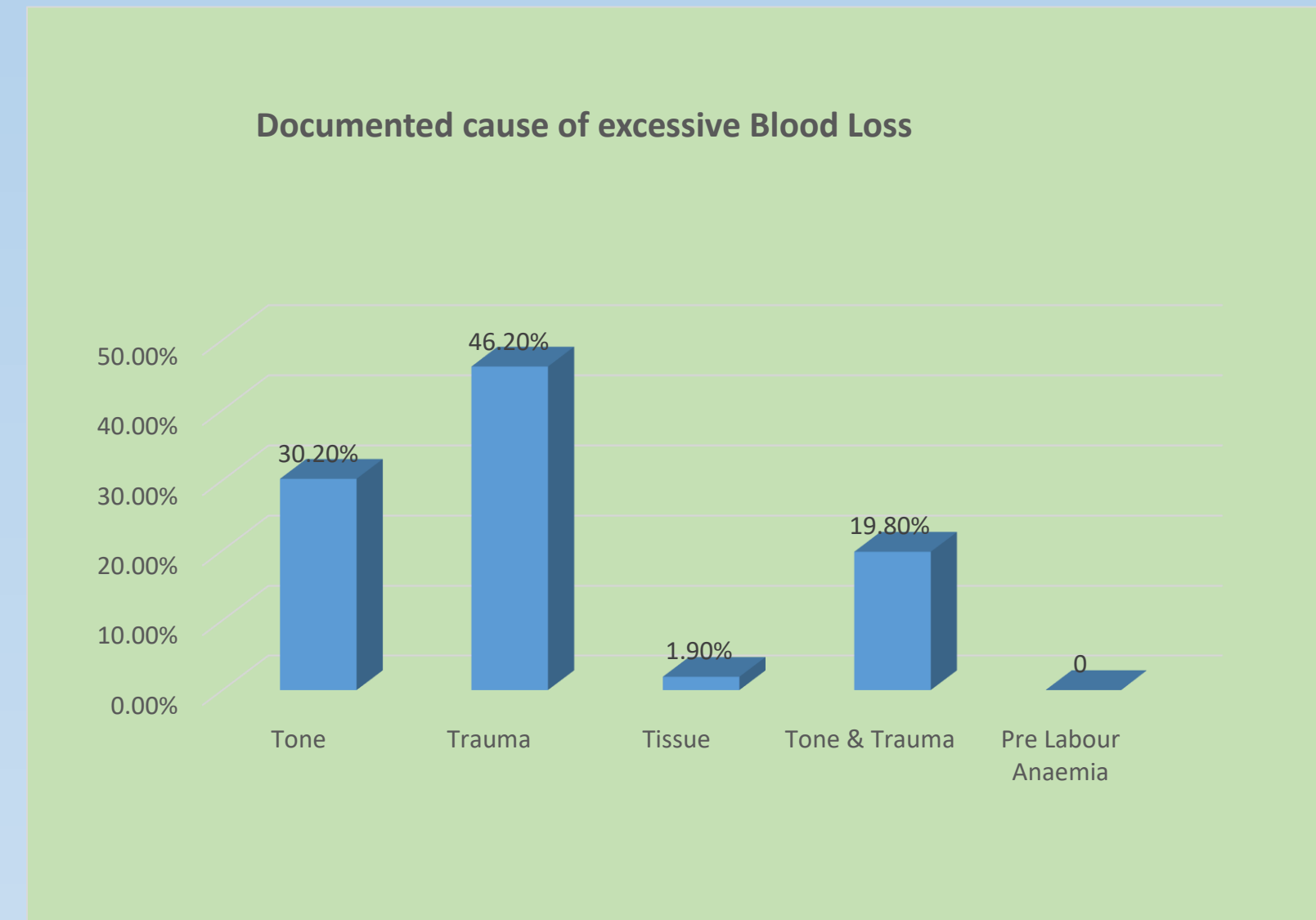
Labour & delivery analysis:

- ❖ Type of delivery
- ❖ Abdominal & perineal wounds
- ❖ Cause of PPH
- ❖ Transfer to theatre postnatal
- ❖ Estimated Blood Loss

Postnatal:

- ❖ Hb flow
- ❖ Benefits of postnatal oral iron intake

Documented cause of excessive Blood Loss



References

- ❖ Royal College of Obstetricians and Gynaecologists'. Care of Women with Obesity in Pregnancy. Green-top Guideline No. 72
- ❖ Royal College of Obstetricians and Gynaecologists. Prevention and Management of Postpartum Haemorrhage