Analysis of Risk Factors for Severe Intraoperative Bleeding in Patients With Placenta Accreta Spectrum

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Abstract

Objective: To analyze relevant risk factors for severe postpartum hemorrhage in patients with placenta accreta spectrum to improve the ability to identify patients with high-risk for intraoperative bleeding and improve maternal outcomes.

Methods: This study is a retrospective study. Placenta accreta patients who delivered by cesarean section at Peking University Third Hospital from September 2017 to December 2019 were selected and included, according to the amount of intraoperative bleeding, in the severe bleeding group (bleeding volume $\geq$ 2000 mL, 68 cases) and nonsevere bleeding group (bleeding volume <2000 mL, 99 cases). Univariate analysis and multivariate logistic regression were used to analyze the correlations between related risk factors or ultrasound imaging characteristics and the severity of bleeding during operation.

Results: (1) There were statistically significant differences in gravity, parity, number of prior cesarean deliveries and placenta accreta ultrasound scores ($p < 0.05$) between the two groups of patients. (2) Among the ultrasonographic indicators, the disappearance of the postplacental clear space, the emergence of cross-border blood vessels in the region of subplacental vascularity, interruption or disappearance of the bladder line, and the presence of the cervical blood sinus had the most significant correlation with hemorrhage during placenta accreta ($p < 0.05$).

Full Text

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