Postpartum haemorrhage requiring a blood transfusion remains a relatively rare event. Comprehensive risk assessment should be undertaken before inserting large-bore catheters in perinatal women” Webster et al (2017).

Abstract:

BACKGROUND: Insertion of a 16 or 18 gauge peripheral intravenous catheter is a potentially painful intervention but one frequently experienced by pregnant women when admitted to hospital. Although the rationale for this practice is ‘in case of an emergency bleed’, evidence for using large-bore catheters in this population is absent.

AIMS: (i) To identify the proportion of 18 gauge or larger peripheral catheters inserted into maternity patients; and (ii) to investigate the proportion of women who require blood products during their perinatal period.

MATERIALS AND METHODS: Data from a sub-set of maternity patients who were included in a study of risk factors for peripheral intravenous access failure were analysed using descriptive statistics.
RESULTS: One hundred and fourteen catheters were inserted in 95 women. Of the 95 first-inserted catheters, 84 (88.4%) were 16 or 18 gauge and 69 (82.1%) of these were placed in the hand or wrist. Four women (4%) received blood products, all were for non-urgent transfusions.

CONCLUSION: Postpartum haemorrhage requiring a blood transfusion remains a relatively rare event. Comprehensive risk assessment should be undertaken before inserting large-bore catheters in perinatal women. Small veins in the hand and wrist should not be used for large bore catheters.

Reference:


Thank you to our partners for supporting IVTEAM