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Case Series of Uterine Artery Embolization Prior to Induction of Labor in Late Placenta Previa Abortions

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ABSTRACT

Background: Late abortions are a common practice in many hospitals due to various maternal or fetal causes. The chosen technique is induction of vaginal delivery with pharmacological treatment because of its lower maternal morbidity. However, the presence of placenta previa, which is common at this gestational age, may complicate fetal expulsion and increase maternal morbidity due to increased bleeding. We present a series of cases in which selective uterine artery embolization was used prior to the induction of this type of labor to decrease maternal morbidity.

Case series: (1) 26-week pregnancy with a diagnosis of type IV fetal growth retardation and estimated fetal weight less than 400 g. It is decided to perform a legal termination of pregnancy. Previous analysis: Hemoglobin (Hb) 13.2 g/dl. (2) 19-week pregnancy with premature rupture of membranes and anhydramnios. Previous Hb 12.7 g/dl. (3) 20-week pregnant woman was diagnosed with trisomy 21 with complex heart disease. Hb previous 12.4 g/dl. (4) 19-week pregnant woman, diagnosed with trisomy 21 and willing to terminate her pregnancy, Hb previous 10.6 g/dl. (5) 23-week pregnant woman with a diagnosis of chorioamnionitis and previous Hb 11.3 g/dl.

All patients underwent embolization of both uterine arteries with Spongostan® because they presented total occlusive placenta previa and labor was induced with prostaglandins and oxytocin until expulsion of fetus and placenta. The first one had a subsequent infection that required the performance of a hysterectomy and three of them had a subsequent gestation at term. Subsequent hemoglobins were: 12.6 g/dl, 12.7 g/dl , Hb 11.3 g/dl, Hb 10.3 g/dl, 10.6 g/dl respectively.

Conclusion: Prophylactic embolization of the uterine arteries prior to placenta previa abortion induction seems to be an effective technique to decrease maternal blood loss.

Keywords: Placenta previa, Uterine artery embolization, Late abortion

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