oxytocin aided delivery, and though the placenta initially appeared complete, the patient experienced significant postpartum bleeding, estimated at over 2 liters of blood loss. Examination revealed extensive, bleeding vaginal tears that resisted traditional haemostatic measures. Chitosan powder^{*} application and gauze compression for five minutes effectively stopped the bleeding. There was no further vaginal bleeding, and haemostatic tests returned to normal within two days.

4.3.10. Case report: use of CELOX[™] PPH in combination with balloon tamponade for management of PPH.

Application of CELOX[™] PPH in combination with intrauterine balloon tamponade for postpartum Haemorrhage treatment – Case report of a novel "uterine sandwich" approach.

Seidel V, Braun T, Weizsäcker K, Henrich W. Int J Surg Case Rep. 2018; 48:101-103.

Case report (n=1)

- Presentation of a case of PPH where a novel "uterine sandwich" (a combination of CELOX™ PPH and intrauterine balloon tamponade) used to halt blood loss
- The novel treatment strategy was effective at stopping further blood loss
- The use of the "uterine sandwich" prevented the need for more invasive second stage intervention

CELOX[™] PPH has been used in a patient with PPH using a "uterine sandwich" approach using a combination of CELOX[™] PPH with an intrauterine balloon tamponade to prevent blood loss (Seidel et al, 2018). At about 35 weeks a planned caesarean section delivered three healthy boys. However, within 2.5 hours the uterus became atonic and filled with blood. As it was the first pregnancy for the woman, a fertility preserving strategy was preferred. CELOX[™] PPH was inserted, and an intrauterine balloon tamponade was added to the uterus. Bleeding was stopped after the additional insertion of the balloon. No further surgical intervention was necessary.