## 4.3.3. Randomised, prospective evaluation (n=61) comparing the effectiveness of CELOX<sup>™</sup> PPH with balloon tamponade in patients with PPH.

## Comparison of CELOX<sup>™</sup> PPH and Bakri balloon in management of primary atonic postpartum Haemorrhage.

Von Beckerath AK, Maul H, Elmohandes AM, Shaaban M, Habib DM, Nasr A, Abdel-Kawi AF. Am J Obstet Gynecol. 2016; 214(1 Suppl 1):S335. [poster presentation]

Randomised, prospective study (n=61)

- Assessment of the effectiveness of intrauterine insertion of CELOX™ PPH in comparison to Bakri balloon
- Failure rate which led to peripartum hysterectomies were 9.7% (3/31) in the CELOX™ PPH group compared to 40% (12/30) in the Bakri balloon group
- CELOX<sup>™</sup> PPH is a potentially effective treatment in the management of atonic PPH
- CELOX<sup>™</sup> PPH is cost effective, and is easy to use compared to the standard balloon therapy

The effectiveness of CELOX<sup>™</sup> PPH to control PPH was assessed in an unblinded, randomised, parallel prospective study in sixty-one patients with atonic PPH. Thirty-one patients received CELOX<sup>™</sup> PPH, and 30 patients were treated with Bakri balloon (von Beckerath et al, 2016a). Three patients receiving CELOX<sup>™</sup> PPH required postpartum hysterectomy which equated to a 9.7% failure rate. This compared to a failure rate of 40.0% (12/30) in the Bakri balloon group (Figure 12).



