Postpartum Haemorrhage (PPH) is commonly defined as a blood loss of 500 ml or more within 24 hours after birth. PPH is the leading cause of maternal mortality in low-income countries and the primary cause of nearly one quarter of all maternal deaths globally. Most deaths resulting from PPH occur during the first 24 hours after birth: the majority of these could be avoided through the use of prophylactic uterotonics during the third stage of labour and by timely and appropriate management. Improving health care for women during childbirth in order to prevent and treat PPH is an essential step towards the achievement of the
Millennium Development Goals.

The primary objective of these recommendations therefore is to provide a foundation for the strategic policy and programme development needed to ensure the sustainable implementation of effective interventions for reducing the global burden of PPH. Health professionals responsible for developing national and local protocols and health policies constitute the main target audience of these recommendations.

The guidance provided is evidence-informed and covers topics related to the management of PPH that were selected and prioritized by an international, multidisciplinary group of health care workers, consumers and other stakeholders.

These recommendations establish general principles of PPH and they are intended to inform the development of protocols and health policies related to PPH. These recommendations are not intended to provide a comprehensive practical guide for the prevention and treatment of PPH.

Recommendations

**WHO recommendations on PPH prevention**

**WHO recommendation on the use of uterotonics for the prevention of postpartum haemorrhage during the third stage of labour**
Published: September 2012

**WHO recommendation on the uterotonic drug of choice for the prevention of postpartum haemorrhage during the third stage of labour**
Published: September 2012

**WHO recommendation on the uterotonic drug of choice for the prevention of postpartum haemorrhage in settings where oxytocin is unavailable**
Published: September 2012

**WHO recommendation on the uterotonic drug of choice for the prevention of postpartum haemorrhage in settings where skilled birth attendants are not present and oxytocin is unavailable**
Published: September 2012

**WHO recommendation on controlled cord traction after vaginal birth for the prevention of postpartum haemorrhage in settings where skilled birth attendants are available**
Published: September 2012

**WHO recommendation on controlled cord traction after vaginal birth for the prevention of postpartum haemorrhage in settings where skilled birth attendants are unavailable**
Published: September 2012

**WHO recommendation on the timing of cord clamping after vaginal birth**
Published: September 2012
WHO recommendation on the use of sustained uterine massage in women who have received prophylactic oxytocin for the prevention of postpartum haemorrhage
Published: September 2012

WHO recommendation on abdominal uterine tonus assessment for early identification of uterine atony
Published: September 2012

WHO recommendation on the uterotonic drug of choice for the prevention of postpartum haemorrhage in caesarean section
Published: September 2012

WHO recommendation on cord traction for the removal of the placenta in caesarean section

WHO recommendations on PPH treatment
Published: September 2012

WHO recommendation on the uterotonic drug of choice for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of uterotonics for the treatment of postpartum haemorrhage if intravenous oxytocin is unavailable, or if the bleeding does not respond to oxytocin
Published: September 2012

WHO recommendation on the use of uterine massage for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of fluid replacement for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of tranexamic acid for the treatment of postpartum haemorrhage
Updated: October 2017

WHO recommendation on the use of intrauterine balloon tamponade for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of uterine artery embolization for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of surgical interventions for the treatment of postpartum haemorrhage
Published: September 2012
WHO recommendation on the use of bimanual uterine compression for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of external aortic compression for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of non-pneumatic anti-shock garments for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on the use of uterine packing for the treatment of postpartum haemorrhage
Published: September 2012

WHO recommendation on cord traction and oxytocin for retained placenta
Published: September 2012

WHO recommendation on the use of prostaglandin E2 alpha for the management of retained placenta
Published: September 2012

WHO recommendation on the use of ergometrine for the management of retained placenta
Published: September 2012

WHO recommendation on the use of antibiotics for the manual removal of retained placenta
Published: September 2012

WHO recommendations on Health Systems and Organization of Care recommendations for the prevention and treatment of PPH?

WHO recommendation on the use of formal protocols by health facilities for the prevention and treatment of PPH
Published: September 2012

WHO recommendation on the use of formal protocols for referral of women to a higher level of care
Published: September 2012

WHO recommendation on the use of simulations of PPH treatment for pre-service and in-service training programmes
Published: September 2012

WHO recommendation on monitoring the use of uterotonics after birth for the prevention of PPH
Published: September 2012
Statements related to topics for which there is insufficient evidence to issue a recommendation

There is insufficient evidence to recommend the use of intraumbilical vein injection of oxytocin as a treatment for retained placenta.

Published: September 2012

There is insufficient evidence to recommend the antenatal distribution of misoprostol to pregnant women for self-administration for the prevention of PPH.

Published: September 2012

There is insufficient evidence to recommend one oxytocin route over another for the prevention of PPH.

Published: September 2012

There is insufficient evidence to recommend the use of recombinant factor VIIa for the treatment of PPH.

Published: September 2012

There is insufficient evidence to recommend the measurement of blood loss over clinical estimation of blood loss.

Published: September 2012

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