



BLOOD UTILISATION PATTERNS IN ABNORMAL UTERINE BLEEDING: A RETROSPECTIVE CHART REVIEW

Shivanand H K², Arun R, Nabnita Patnaik¹, Chada Tejaswi, Vasanth Asirvatham, Arya V Nair, Aswin Mohan

1. Department of Transfusion Medicine and Blood bank, Department of Obstetrics and Gynecology¹, All India Institute of Medical Sciences, Bibinagar, Hyderabad
2. Department of Transfusion Medicine, Kasturba Medical College, Manipal, Manipal Academy of Higher Education, Manipal, Karnataka, India - 576104 (Current affiliation)



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INTRODUCTION

Abnormal uterine bleeding (AUB) affects 30% of reproductive age women globally¹. The diagnostic guideline using structural and functional causes of AUB adopts the PALM-COEIN criteria. The role of blood transfusion in management of women presenting with AUB is unclear and has not been studied before.

AIM AND OBJECTIVES

Aim: To study the blood utilisation patterns in patients who presented with AUB.

Objectives:

1. To identify indications for blood transfusion
2. To calculate standard transfusion indices

MATERIALS AND METHODS

It is a retrospective chart review conducted for a period of 2 years in a tertiary care hospital in southern India by departments of Transfusion Medicine and Obstetrics and Gynecology. The RhD positive patients of all ABO blood groups are supported by the institute blood storage center while others are supported by outside blood centers. The details of all the patients who were transfused with support from the blood storage center were identified from issue register.

Only those who had diagnosis of abnormal uterine bleeding were selected. The demographic profile and clinical and transfusion details were entered in Microsoft excel. The data was analysed and the standard transfusion indices were calculated.

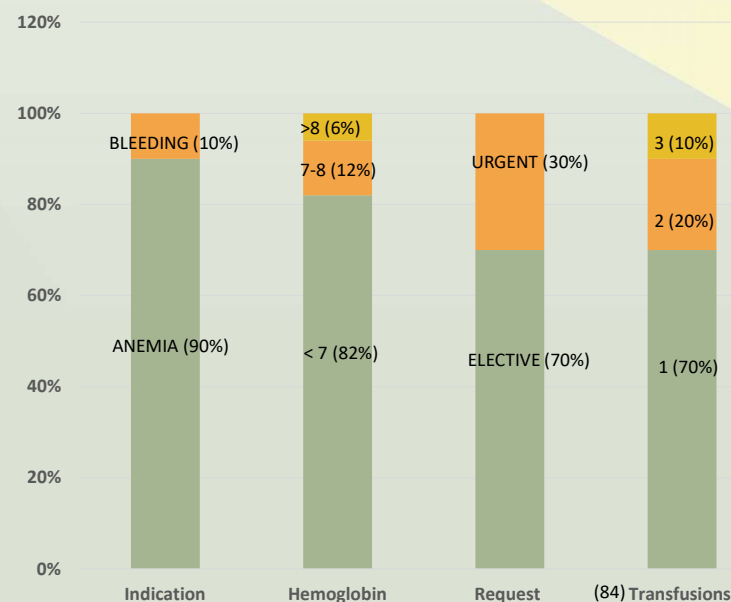
RESULTS

Total number of patients who presented with AUB and were transfused with packed red cells were 50.

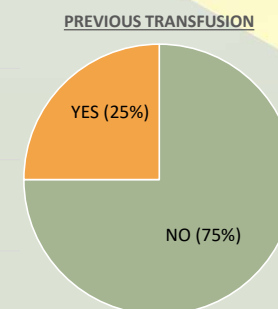
The patient's age group was mostly 30-50yrs (84%) followed by 18-29yrs (14%), >51yrs (2%).

The Blood group frequency was: 50% (O pos), 28% (B pos), 20% (A pos), 2% (ABpos).

30% patients had previous history of abortion.



Transfusion Indices	Values
CT Ratio	1.1
Blood Utilisation	91%
Transfusion probability	100%
Transfusion Index	1.5



DISCUSSION

The median age of presentation for AUB was 30 years according to a Kenyan study², similar to our study where most of the patients were in the age group 30-50 years. Most of our patients (90%) with AUB presented with anemia as indication of transfusion. The CT ratio and blood utilisation in our study group were 1.1 and 91%, which were well within the acceptable range (< 2.5 and >30%) respectively.

The improvement was needed in investigating hemoglobin levels after every transfusion before deciding to transfuse next unit. It was communicated to all stakeholders.

CONCLUSIONS

The transfusion was appropriate in most cases. The good transfusion practices were followed for blood utilization in AUB since the transfusion indices were in acceptable limits. Single unit transfusion followed by assessment was needed for implementation.

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