

The use of a Bakri balloon as a treatment for heavy bleeding from the uterus after birth

Following delivery of your baby, you may experience heavy bleeding from the uterus (womb). This happens in about 1% of births at the RBH. The use of a Bakri balloon is one of the treatment options available to control bleeding from the uterus. If you have any questions or concerns, please speak to your midwife or doctor.

Why would I bleed heavily after birth?

Normally after the birth of the baby the uterus contracts, clamping the blood vessels that were feeding the placenta. The uterus should feel firm like a cricket ball, once it has contracted, after the birth but if this does not happen, you can bleed heavily.

What is done to prevent excessive bleeding?

Drugs can be given either by an injection into the muscle in your thigh or by intravenous injection, via a cannula into the vein of your arm. If the bleeding persists, you may need to be taken into the operating theatre and under an anaesthetic, you will be examined to ensure any placental tissue or blood clots in the uterus have been removed. During the examination, if you had an episiotomy (cut made during the birth) or sustained any tears, this will be sutured at the same time.

When is the Bakri balloon used?

If the uterus continues to bleed it may be necessary to insert a Bakri balloon. This is inserted through the neck of the womb into the cavity of the womb. When in place its position may be checked using an ultrasound machine while you are in the operating theatre.

How does this work?

The Bakri balloon will be slowly filled with warm sterile saline (salt water) until it fits snugly against the wall of the uterus. The balloon will press against the blood vessels that supplied blood to the placenta and stop them from bleeding. The balloon will be filled until there is no bleeding through the cervix (neck of the uterus).

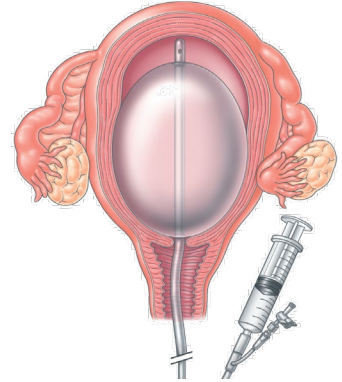
What happens after the balloon is placed inside the uterus?

You will recover in the Delivery Suite where a midwife will monitor your pulse, blood pressure and keep a check on your blood loss. You will have a urinary catheter (fine tube) inserted into your bladder while you are in theatre so that we can measure the amount of urine you pass, as this is a good indicator that you are well.

You will be given intravenous antibiotics (through your cannula in your vein) and a blood test will be taken after six hours to ensure you are not anaemic (low iron), due to the amount of blood you have lost. You may have an oxytocin infusion (a tube into your vein containing hormones) to ensure that your uterus remains well contracted. The anaesthetist will ensure you are comfortable by giving you the pain relief you feel you need.

Some facts about the Bakri balloon:

- This is single-use rubber catheter.
- It can hold 1500 ml when it is filled with saline.
- About 500-600ml of saline may be needed to stop any bleeding.



When is the Bakri balloon removed?

The balloon will normally remain inside the uterus for 4-6. Hours but if inserted overnight, the balloon may be left until the morning for safety reasons. Sometimes, it may stay in for up to 24 hours if we have any concerns that the bleeding may return. It is usually removed in the morning and you will be observed for bleeding.

You may be asked by the anaesthetist, not to eat or drink for a few hours prior to removal of the balloon.

Is an anaesthetic required to take the Bakri balloon out?

No. It is a simple procedure where the saline in the balloon is drained and then the balloon is removed. You will be monitored for at least an hour after this is done to ensure bleeding is minimal. This does not require an anaesthetic.

Why a vaginal pack is sometimes needed?

Sometimes, a vaginal pack is used to ensure the balloon remains inside the womb. This will be removed at the same time as the balloon. If you do have a vaginal pack you will be given a pink wristband to wear which will be removed when the pack is taken out.

What if this treatment is not successful?

Very rarely bleeding from the uterus continues, and a blood test is needed to test for a blood clotting disorder as a result of the heavy bleeding. If this is diagnosed, treatment will be given, but you may need additional procedures involving either 'interventional radiology' where a radiologist looks at images of the inside of your body or more extensive surgery.

Can a Bakri balloon be used to control excessive bleeding during Caesarean birth?

Yes. If necessary, the balloon can be inserted before your uterus is closed and the catheter placed through your vagina. The balloon is then inflated with warm saline after your birth.

Can the Bakri balloon be used if you come back to hospital with heavy bleeding a few weeks after the birth (secondary postpartum haemorrhage?)

Yes, depending on the size of the uterus when you are admitted. In the majority of cases, heavy bleeding that occurs many days after delivery is usually caused by retained placental tissue or due to infection. Any infection is usually treated with antibiotics. You may also need your uterus to be examined and emptied under an anaesthetic. Occasionally, a small Bakri balloon may be inserted to stop any heavy bleeding.

References

1. Doumouchtsis, Stergios, Papageorghiou, Arulkumaran et al. Systematic Review of Conservative Management of Postpartum Haemorrhage: What to Do When Medical Treatment Fails. *Obstetrical and Gynaecological Survey*. 62(8):540-547, August 2007.
2. Balloon tamponade and uterine packing for major PPH. South Australian Perinatal Practice guidelines.
3. [Prevention and Management of Postpartum Haemorrhage. RCOG Green-top guideline 52.](#)

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Please ask if you need this information in another language or format.

P Bose, Consultant Obstetrician (August 2011)

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'Working together with women, birthing people and families to offer compassionate, supportive care and informed choice; striving for equity and excellence in our maternity service.'

You can read our maternity strategy here



Compassionate

Aspirational

Resourceful

Excellent