

Post-Partum Hemorrhage among Mothers of Twins

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The true incidence rate of post-partum hemorrhage (PPH) is not known with certainty, but it is thought that one woman dies every minute of every day from bleeding or other delivery related causes. Mothers of twins are reputed to be at higher risk of PPH than are mothers of singletons, but rates vary enormously from <5% to as much as 20%, with equal or greater variation in the samples from which these data derive. To our knowledge, prior attempts to query mothers of twins directly regarding their experiences with PPH are lacking. Accordingly, the Center for Study of Multiple Birth and the Post-Partum Hemorrhage Foundation collaborated in the development of a survey which was distributed via the ICOMBO group to constituent national organizations throughout the world. Use of internet membership lists, Facebook Postings and Twitter brought the survey to the attention of a large group of women who had had twin deliveries and offered them a chance to participate using Survey Monkey. Responses were voluntary and it is not possible to generate a denominator that represents the number of mothers who received the survey and could have responded. The first analysis was undertaken in mid-January 2012 and included 1605 respondents.

In the current analysis we focused on those mothers who had given birth to one set of twins as well as a singleton. Within these 146 mothers, 19 had experienced PPH in their singleton delivery while 111 had suffered from that condition after the delivery of twins; an additional 16 mothers were affected in both pregnancies.

Based on these numbers, the relative risk (RR) of PPH in twin pregnancies is 5.8, confirming the suspected higher risk. Next, we fractioned our analysis on the order of singleton/twins pregnancies. As expected, the majority of mothers had their singleton birth first (107 vs. 39); the RR in this group was estimated at 5.1 vs a substantially higher risk in mothers who had delivered twins in their first pregnancy (RR=10). This difference in RR was not statistically significant, but its magnitude in clinical terms warrants further analysis in larger samples.

Overall, this survey is the first study quantifying the relative risk of PPH in twin pregnancies, highlighting the relevance of this topic in terms of care provided to mothers in the labor and delivery settings.