



INTRODUCTION:-

postpartum Hemorrhage is the most life threatening complication during pregnancy and atonic PPH being the commonest one. In spite of using uterotonic agents such as oxytocin, misoprostol and ergometrine and uterine massage fails to control bleeding then surgical techniques like the B-Lynch suture provide a lifesaving alternative to hysterectomy.

OBJECTIVES:- To preserve the uterus by B-Lynch procedure techniques in patients of primary PPH after cesarean section.

CASE OPERATIVE PROCEDURE:

Patients profile: 22-year-old primigravida, 39 weeks term pregnancy from Katihar came to OBS gynae casualty in KMC, with chief complain of prolonged labor pain and pregnancy induced hypertension. She experienced severe PPH post-cesarean delivery. Patient was unresponsive to oxytocin and uterine massage.

↓ S/A A/S/P, uterus exteriorized during cesarean section. Bladder was retracted inferiorly for clear visualization. A large absorbable catgut suture No.1 was used. The needle was inserted 3 cm below the lower uterine incision on the anterior surface. The suture passed from anterior to the posterior uterine wall (transfixing the myometrium). The suture was looped over the uterine fundus to compress the uterus. The process was repeated on the opposite side to ensure full uterine compression. The uterus was observed for signs of reduced bleeding and adequate contraction. Hemostasis was confirmed and the uterus was returned to the abdomen.

POSTOPERATIVE CASE:-

patients was shifted to ICU for continuous vital and sign of shock monitoring.

- Uterotonics (oxytocin infusion) and higher antibiotics was given.
- Follow up ultrasound was conducted for the evaluation of uterine integrity and rule out hematoma formation.

DISCUSSION:- Success rate of B-Lynch suture is 75-90%, 10-15% cases may require hysterectomy, the B-LYNCH suture allows women to retain their uterus and fertility which is a critical advantage for younger patient.

CONCLUSION:- despite some risk, the B-lynch suture remains one of the most effective, low-cost solution to reducing material mortality associated PPH.

ACKNOWLEDGMENT:- sincerely thank my mentor, the surgical team, and the obstetrics department for their invaluable guidance and support in completing this study on B-Lynch Suture Application in Atonic Postpartum Hemorrhage.

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