Role of coagulation disorders in postpartum hemorrhage

Coagulation disorders can play a significant role in both primary and secondary postpartum hemorrhage. Maternal clotting factors induced by pregnancy decline after delivery, raising the hemorrhage risk. Other pregnancy-related coagulation abnormalities include idiopathic thrombocytopenia, preeclampsia, and disseminated intravascular coagulation (DIC). Causes of DIC include preeclampsia, fetal demise in the uterus, infection, placental abruption, and amniotic fluid embolism.

Congenital coagulation disorders (including hemophilia A or B, factor XI deficiency, and von Willebrand disease) also increase hemorrhage risk. Unfortunately, some women may not know they’re carriers of these disorders or may not manifest them until they become pregnant. Hemophilia carriers have a postpartum hemorrhage incidence of 24%; factor XI deficiency carriers, 24%, and von Willebrand carriers, 20% to 28%.