Injection Prevents Complications

**Oxytocin from page 1**

minutes in the oxytocin group), but sig-
nificantly more women in the saline group than in the oxytocin group had a retained placenta after 15 minutes (5 vs. 0 women).

Furthermore, the groups had similar mean hemoglobin levels prior to delivery (11.7 vs. 12.1 g/dL), but those who received saline had significantly lower mean postpartum hemoglobin levels (used as a measure of blood loss) than did those in the oxytocin group (9.9 vs. 10.8 g/dL), said Dr. Ghulmiyyah of the University of Cincinnati.

Patients in both groups were treated via intrauterine balloon vein injection, with injection performed slowly over 1 minute fol-
lowing cord clamp.

Although audience members debated the value of routine use of oxytocin for pre-
venting placental retention—with at least one saying it could provide a clinical and practical solution to an important problem, and others arguing that more safety and cost-benefit data are needed—Dr. Ghulmiyyah said that he would recommend its routine use, particularly in patients who present in active labor with no intravenous access, and in patients such as Jehovah’s Witnesses, for whom blood transfusion would not be an option.

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lowing cord clamp.