

Placental delivery with cord traction is more effective than manual removal at caesarean section

Clinical question	Which is the most effective method of delivering the placenta at caesarean section?
Bottom line	Delivery of the placenta with cord traction has advantages compared to manual removal. These include less endometritis, blood loss, and decrease in haematocrit levels postoperatively, and a shorter duration of hospital stay. There were no significant differences between the two methods in rates of foeto-maternal haemorrhage, blood transfusion or puerperal fever (although the numbers studied for these outcomes were small).
Caveat	A possible longer interval between birth of the baby and delivery of the placenta with cord traction was the only relative disadvantage noted, but this did not significantly increase the overall duration of surgery. The sample size of the studies was variable. The blood loss at operation was estimated by different methods in the various trials. Most of the studies did not mention blinding at the time of measurement of blood loss in theatre and reading of charts on the wards.
Context	Worldwide, caesarean section is the most common major operation performed on women. Some of the reported short term morbidities include haemorrhage, postoperative fever and endometritis. The method of removing the placenta may contribute to an increase or decrease in the morbidity of caesarean section. Two methods used to deliver the placenta are cord traction and manual removal.
Cochrane Systematic Review	Anorlu RI et al. Methods of delivering the placenta at caesarean section. Cochrane Reviews 2008, Issue 3. Article No. CD004737. DOI: 10.1002/14651858.CD004737.pub2. This review contains 15 studies involving 4694 participants.
PEARLS 113, September 2008, written by Brian R McAvoy	

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