

# Antepartum Haemorrhage (APH) & Preterm Birth

## Whānau Information

### What is an antepartum haemorrhage (APH)

This term describes any bleeding from the vagina after 20 weeks of pregnancy. There are several reasons why it may happen. Some bleeds may impact on the health of māmā/person and pēpi.

Wāhine/people who have an APH have an increased chance of preterm birth, either because birth is recommended (provider-initiated preterm birth) due to concerns for māmā and/or pēpi wellbeing, or because the bleeding causes the bag of waters (membranes) to break or labour to start early (spontaneous preterm birth).

### What are the causes of APH?

APH affects about 1 in 20 (5%) pregnancies. Important causes include bleeding from the **edge of the whenua/placenta**, a **low-lying placenta** or **placenta praevia** (placenta is close to or covering the cervix), **placental abruption** (placenta separates from the womb) and, rarely, a vasa praevia (pēpi blood vessels run through the bag of waters near the cervix). Other, less significant causes are bleeding from the cervix, vagina and vulva, for example due to infection, polyps (benign growths on the cervix) or after having sex.

### What happens if I have an APH?

You will be assessed and usually admitted to hospital for monitoring. If the bleeding becomes very heavy and is dangerous for you or pēpi, doctors may **recommend planning a preterm birth**. More commonly, the bleeding will settle and wāhine/people are often able to go home once the bleeding stops.

It is important to know that there is an **ongoing chance of preterm birth** even after the bleeding has settled. This is because the blood can weaken the bag (membranes) around pēpi and waters may break early. A bleed may also cause contractions to start early and your cervix to shorten and open.

**After an APH look out for signs or symptoms of preterm labour, as well as for further bleeding, and contact your midwife or doctor as soon as you can to arrange for review at the hospital**

### Why is it important to recognise signs & symptoms of preterm labour early?

Although it is not always possible to stop preterm labour, things can be done to **prepare for birth** to help pēpi survive and be healthy. Depending on your gestation, this may include corticosteroid injections, a magnesium sulphate infusion and being in a hospital with the right neonatal intensive care services for your pēpi. These are important in the few days and hours before pēpi is born.

*This Carosika Collaborative whānau information tool should be provided and used to support conversations between whānau and healthcare providers.*

*For more information including interventions that **optimise outcomes after preterm birth** (e.g. corticosteroids) and access to Taonga Tuku Iho (national best practice guide), you can visit the Carosika Collaborative website [www.carosikacollaborative.co.nz](http://www.carosikacollaborative.co.nz) or use the QR code.*

### Signs & symptoms of preterm labour

- Puku/tummy/abdominal or lower back pain that feels like period pain or comes and goes at regular intervals (contractions)
- Bleeding from the vagina
- Watery fluid from the vagina
- Increase in mucus discharge from the vagina



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