

Postpartum hemorrhage is a leading cause of maternal mortality, accounting for approximately 30% of deaths in developing countries and 13% in industrialized nations. Complications can include hypovolemic shock, disseminated intravascular coagulation, organ failure, Sheehan's syndrome, or respiratory distress. Effective management can prevent radical interventions such as hysterectomy. This case study highlights the successful use of the Bakri balloon in controlling postpartum hemorrhage. A 27-year-old plurigravida (G2P2) was admitted post-term without contractions. Labor was induced with misoprostol (Angusta) and she delivered a healthy infant weighing 3780 grams without complications. However, four hours post-delivery, the patient experienced uterine bleeding totaling 1200 ml. Instrumental curettage, uterotonic agents, blood transfusions and coagulation factor replacement were administered. Despite such management, bleeding persisted. A Bakri balloon was inserted into the uterine cavity for 24 hours, which successfully controlled the hemorrhage and prevented the need for hysterectomy. Upon its removal, neither further bleeding nor coagulation disorders were observed. This case stresses the effectiveness of the Bakri balloon in managing postpartum hemorrhage and preserving fertility, highlighting the importance of adhering to gynecological guidelines to prevent radical surgical interventions.

