## Managing adherent placenta-prepare & perform- Conclusions (v p paily)

Depends on type of implantation and extend of invasion.

Normal implantation (invasion upto stratum spongiosum)
Wait upto 30mts, manual removal of placenta
Abnormal implantation (placenta accreta spectrum)
Three options:

1. Expectant Mgmt-Cesarean with incision above placenta, leave placenta in situ (re intervention upto 25%)

## Managing adherent placenta-prepare & perform- Conclusions (v p paily )

- 2. Focal area of abnormal invasion- resect that area with myometrium, reconstruct uterus, devascularise uterus with stitches.
- 3. Extensive morbid adhesion or percreta do classical cs, subtotal hysterectomy with placenta in situ.

Occlude aorta or common iliac arteries after delivery of fetus. Clamp developed by v p paily may be used for this.