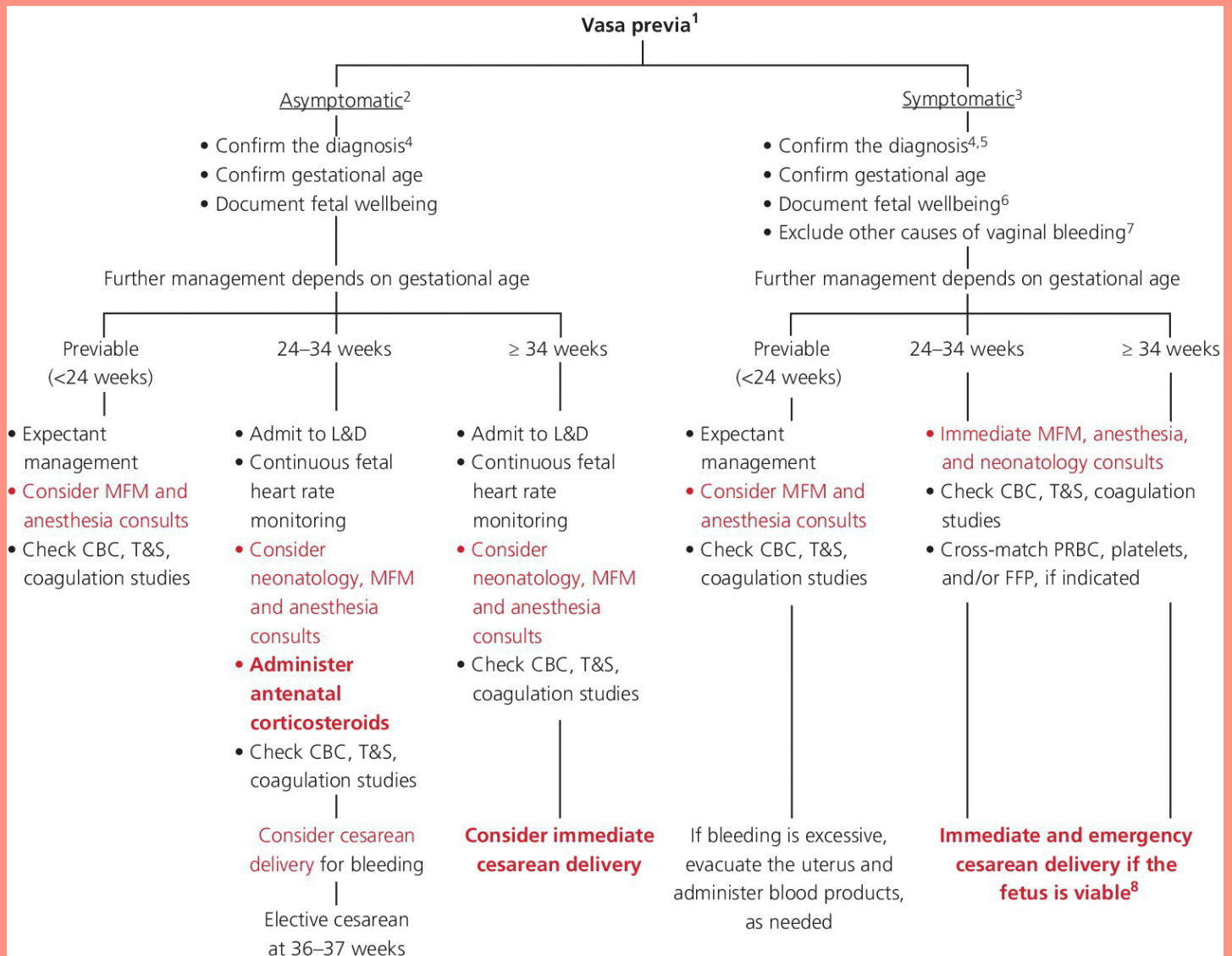




# Learn simply

## Vasa Previa

Passion profession same



1. Vasa previa refers to the presence of fetal vessels coursing through the membranes overlying the internal os ahead of the presenting part of the fetus.
2. Vasa previa may be an incidental finding on routine ultrasound.
3. Most patients are asymptomatic. Symptoms may include the acute onset of bright-red vaginal bleeding, which is usually painless. It is often accompanied by decreased fetal movement. Risks for bleeding from fetal blood vessels include rupture of the fetal membranes, funic (cord) presentation, multiple pregnancy, placental abnormalities (such as an accessory or succenturiate lobe of placenta, velamentous cord insertion).



Vasa Previa

1. Vasa previa is an ultrasonographic diagnosis. Ultrasound may confirm funic presentation with or without velamentous cord insertion.
2. In the setting of acute bleeding, consider performing a bedside Apt test (hemoglobin alkaline denaturation test). This involves the addition of 2-3 drops of a concentrated alkaline solution (sodium or potassium hydroxide) to 1 mL of blood collected from a vaginal pool. If the blood is maternal in origin, the erythrocytes rupture and the mixture turns brown. However, fetal erythrocytes are more resistant to rupture.
3. If the blood is fetal in origin, the erythrocytes will not rupture and the mixture remains red. Certain maternal conditions (hemoglobinopathies) may give a false-positive test result.



1. **Maternal complications are rare since the bleeding is fetal in origin. However, fetal mortality exceeds 75% due primarily to fetal exsanguination. Perinatal outcome depends primarily on the extent of the fetal bleeding, the gestational age, and the ability of the obstetric care provider to make the diagnosis and expedite delivery (which typically involves emergent caesarean delivery).**
2. **Other causes of vaginal bleeding include placenta previa, placental abruption, early labor, and genital tract lesions (cervical polyps or erosions).**
3. **Contraindications to emergency cesarean include a previable fetus (<23-24 weeks), intrauterine fetal demise, maternal hemodynamic instability or coagulopathy, or failure to obtain maternal consent for surgery.**

