CORRESPONDENCE

Response to letter to the editor “Prophylactic use of Bakri balloon for reduction of hemorrhage at cesarean for placenta previa: addition and clarification”

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Dear Editor,

We appreciate the opportunity to address the comments and concerns expressed by Dr. Matsubara. In particular, among the suggestions made, we need to take measures to prevent balloon prolapse.

Actually, 10% of cases experienced balloon prolapse in our study [1]. Fortunately, postpartum hemorrhage was controlled in all cases, by re-insertion of the Bakri balloon without additional hemostatic measures. However, we were concerned about the potential need to manage a difficult case through re-insertion of a Bakri balloon during and after cesarean section. Furthermore, the most important point is prevention of a balloon prolapse. Dr. Matsubara suggested a “holding the cervix technique”, using a sponge forceps to close the cervix and prevent balloon prolapse after cesarean section and a “fishing method”, in which the balloon is held by a thread to prevent balloon prolapse during cesarean section. These simple methods are noninvasive, innovative [2, 3], and may resolve our most concerning problem.

We thank Dr. Matsubara for the interest in our original article. We will consider applying these methods in the future study. We believe that prophylactic use of a Bakri

balloon in placenta previa during a cesarean section is effective for the reduction of both intraoperative and postpartum hemorrhage.

Author contribution HS: manuscript writing. MM: manuscript editing. KF: supervise.

Compliance with ethical standards

Conflict of interest The authors declare no conflict of interest.

Ethical approval This article does not contain any studies with human participants or animals performed by any of the authors.

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