





Cesarean Birth

The normal way for a baby to be born is vaginally. However, in some circumstances a cesarean birth is the best and safest option for mother and baby.

A cesarean birth (c-section) is a surgical procedure performed in a hospital operating room. In most cases, you will receive anesthesia to numb your lower body only, so you can be awake when your baby is born.

An obstetrician will make an incision low on your belly, cutting through the skin, the fatty tissue, and the wall of your abdomen. Your abdominal muscles are not normally cut. A second cut into your uterus will allow the doctor to pull your baby out and remove the placenta. Your uterus will then be closed with stitches that dissolve in the body. Your skin will be closed up with stitches or staples.

Recovery from a cesarean birth takes more time than recovery from a vaginal birth. Expect to stay in hospital for two to four days. You'll also need more help at home in the first few weeks. For example, you won't be able to get in and out of a chair while holding your baby.

Reasons for Cesarean Birth

During your pregnancy, your care provider may recommend that it would be safer for you to choose a cesarean birth rather than attempting to give birth vaginally. This is known as an elective or **planned cesarean birth**. There are many different medical reasons for planning a cesarean birth, such as if your baby is breech or if your placenta is blocking the baby's way out of the vagina (placenta previa). With a planned cesarean birth, you will not go into labour at all. Instead, you will come to the hospital for your cesarean birth at a pre-arranged date and time.

Even if you intend to give birth vaginally, problems that arise during your labour could mean you ultimately have a cesarean birth. This is called an **unplanned cesarean birth**. Although it's sometimes referred to as an "emergency cesarean," in most cases the decision to perform a cesarean is not about rushing you into the operating room to prevent something terrible from happening to you or your baby. More often, you and your care provider will decide on a cesarean after a lengthy period of watching and waiting as you labour.

Compared to a planned cesarean birth – where the decision to have a cesarean is made ahead of time and scheduled before your due date – an unplanned cesarean birth carries greater risks for mother and baby.

There are many different medical reasons for having a cesarean birth – talk to your care provider about what circumstances might lead to this choice.

Benefits of cesarean birth

Cesarean birth is an excellent option in various circumstances when the health of the mother or baby is at risk. Cesarean birth has saved the lives of many mothers and babies.

Compared to vaginal birth, cesarean birth offers:

- Less soreness in and around your vagina
- Slightly less risk of short-term leaking of urine (urinary incontinence). However, in the long term it's not clear whether cesarean birth prevents urinary incontinence and other pelvic floor problems.

Risks of cesarean birth

Although cesarean birth is a common procedure, every surgery has its risks. The potential complications of cesarean birth are greater than the potential complications of vaginal birth. In addition, having a cesarean birth increases your risk of complications in future pregnancies.

Risks to mother:

- More blood loss
- A greater risk of injury and infection
- A longer hospital stay
- A slower, more painful recovery
- An increased risk of death (while maternal death is uncommon, the death rate from cesarean is almost five time more than that of vaginal birth)
- Short-term sexual problems after the birth of your baby, such as painful intercourse or decreased desire for sex. This is quite common following any type of birth.

Risks to baby:

- Breathing difficulties
- Breastfeeding difficulties
- Accidental nicks or cuts during surgery

Risks related to future pregnancies:

- Infertility
- Stillbirth
- Problems with how and where the placenta attaches itself to the wall of the uterus (placenta previa or placenta accreta); moderately increased risk after one cesarean, high increased risk after more than one
- Uterine rupture

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