



# BIRTH OPTIONS AFTER HAVING A CESAREAN DELIVERY

If you have had a cesarean delivery (c-section) in the past, you have 3 possible options for delivering with this pregnancy:

- You can go into labor and have a vaginal birth. This is called a vaginal birth after cesarean (VBAC).
- You can go into labor, but need another c-section.
- You can choose to have another c-section.

\*If you do not go into labor on your own, you can have your labor induced (given medications to start labor) if it is medically appropriate for you.

## WHAT ARE THE BENEFITS OF HAVING A VBAC?

- There are fewer risks and/or complications associated with vaginal birth including lower risks of bleeding, blood clots, and infection.
- Less pain and shorter recovery time.
- Your baby has less risk of breathing problems right after delivery with a vaginal birth.

## WHAT ARE THE RISKS ASSOCIATED WITH ATTEMPTING A VBAC?

- Uterine rupture, which is the opening of your uterine scar, is the main risk. This is rare but dangerous for you and your baby.
  - Uterine rupture occurs in 7-8 women out of every 1000.
  - If your uterus does rupture, your baby's oxygen levels decrease which could cause the baby to die. Two babies die out of every 10,000 women who have uterine rupture.

## WHAT ARE THE BENEFITS OF HAVING A REPEAT C-SECTION?

- You can schedule your delivery date and have a planned, non-emergent surgery.

## WHAT ARE THE RISKS ASSOCIATED WITH HAVING ANOTHER C-SECTION?

- You are more likely to have complications associated with surgery including infection, bleeding, damage to other organs, and blood clots.
- There is a greater risk of placental problems with future pregnancies after a c-section.

## **ARE THERE REASONS I SHOULD NOT ATTEMPT A VBAC?**

If you have any of the following, we will recommend another c-section for you:

- The incision in your uterus is vertical (up and down). This may be different from the skin incision and can only be known from reading the report of your previous c-section. Vertical uterine incisions have a greater chance of rupture than horizontal (transverse) ones.
- You have had more than one c-section in the past. This increases your chances of uterine rupture.
- You have had previous other uterine surgery, which also increases the chance of uterine rupture.
- You have developed a problem with this pregnancy that requires a c-section like placental previa (the placenta covers the opening of the cervix).
- You are carrying twins.

## **WHAT ARE THE FACTORS THAT MAY LEAD TO A SUCCESSFUL VBAC?**

- The reason for your first c-section is unlikely to happen again; for example, your baby was in breech presentation, you were carrying twins, or your baby did not tolerate labor.
- You previously had a vaginal delivery.
- You go into spontaneous labor.
- You are induced or go into labor before your due date.

## **WHAT ARE THE FACTORS THAT MAY DECREASE THE CHANCES OF HAVING A SUCCESSFUL VBAC?**

- The reason you had your first c-section is likely to happen again; for example, your cervix did not dilate to 10cm in your previous labor or your baby did not descend enough for a vaginal birth.
- Your labor has to be induced.
- You are past your due date.
- Your baby weighs more than 8lbs. 13oz.
- You have other risk factors including increased BMI, age over 35, pre-eclampsia, or a short interval between this pregnancy and your last.

## **HOW DO I CHOOSE IF A VBAC OR REPEAT C-SECTION IS RIGHT FOR ME?**

Choosing your birth method is a very personal decision. The physicians here will discuss all options with you including the risks and benefits to both a VBAC and c-section. We are available to answer any question you have regarding your birth plans for this pregnancy.