

PATIENT INFORMATION

Vaginal Birth After Caesarean Section

Maternity Services

Along with discussion with your midwife and obstetrician, this leaflet has been produced to give you information about the option of vaginal birth after caesarean section (VBAC) to enable you make an informed choice about your care.

For most women pregnancy and birth is a normal healthy life event, but for a number of reasons, for some women ends in a caesarean birth rather than a vaginal birth.

National recommendations support women having the option of VBAC being considered as part of their care in future pregnancy and birth.

Is VBAC successful?

Overall about 75% of women will successfully give birth vaginally following one caesarean section (CS). If you have had a vaginal birth either before or after your CS about 90% of women will have a vaginal birth.

Care During Pregnancy

If you have had a CS for a previous birth it is recommended that you are cared for during your pregnancy by a Consultant Obstetrician. During your pregnancy you will have the opportunity to discuss your previous birth and your options for care and birth on this pregnancy including VBAC. There is a VBAC clinic which you can be referred to for further information – please ask your midwife or doctor.

During your pregnancy and in early labour it is important that you contact the Maternity Unit Delivery Suite if you experience any vaginal bleeding or tenderness over the area of your scar – the contact details are on the back page of this booklet.

Benefits associated with VBAC

Overall attempted vaginal birth following one CS appears to be safer than a planned caesarean with a lower risk of complications for both mother and baby.

CS is a major operation which can have both surgical and anaesthetic risks. In comparison your recovery time following a normal birth is less and you are less likely to develop further problems requiring surgery or complications in future pregnancies. Your baby is less likely to develop breathing problems and you are less likely to have difficulty in starting breastfeeding.

Disadvantages of VBAC

A woman who has had a previous CS is more at risk of scar weakening or rupture than a mother who has not had a previous CS. This is a rare complication, 2-8 in 1000, and overall the risk of maternal complications with planned repeat CS remains higher than with VBAC. You are more likely to need a CS for another reason such as bleeding or concern with the baby's heartbeat.

If labour is induced, the risk of uterine rupture does increase, therefore it is always preferable for you to go into labour on your own than it is to be induced. If you go over your due date by more than a week, your plan for birth should be reviewed.

If you have had more than one CS it may be possible to aim for a vaginal birth – this will be discussed further as you consider your options.

In addition, induction of labour is associated with an increased risk of caesarean section.

The risk of the baby dying or being damaged in labour is very small, and is no different to women in labour for the first time, about 2 in 1,000. But this is greater compared to a planned CS, 1 in 1,000. However this has to be balanced with the risks for you if you choose a caesarean birth.

Care During Labour

During labour it is recommended that you and your baby are monitored continuously to monitor your progress and for your midwife to be aware of any problems that may arise. Therefore it is advised that you give birth in the Consultant Maternity Unit at Ormskirk & District General Hospital. You are advised to contact the Delivery Suite early in labour or if you have any concerns.

If a decision for a repeat CS is made and you go into spontaneous labour earlier than anticipated, VBAC may be more appropriate, for example if the baby is premature or if you are in advanced labour.

It is possible for you to have an epidural for labour and your midwife can give you further information regarding this. You will have the opportunity to discuss this with an anaesthetist when you attend Delivery Suite in labour.

For further information please speak to your Obstetrician or Midwife.

This patient information leaflet is intended to be used to support discussion during your clinical consultation. If there is anything you do not understand or are unsure about,

please ask the midwife or doctor at your appointment or contact the people below.

Contact details:

Antenatal Clinic Ormskirk DGH 01695 656949
Delivery Suite Ormskirk DGH 01695 656919

Information sources:

www.vbac.org.uk

www.nctpregnancyandbabycare.com

References:

National Institute for Clinical Excellence NICE (2004)
Caesarean Section.

RCOG (2007) Birth after previous caesarean birth. London, RCOG.

During your contact with us, it is important that you are happy with your care and treatment. Please speak to a member of staff and/or the ward/department Sister/Charge Nurse if you have any questions or concerns.

MATRON

A Matron is also available during the hours of 9.00 to 5.00 pm Monday to Friday. During these periods, ward/department staff can contact Matron to arrange to meet with you. Out of hours, a Senior Nurse can be contacted via the ward/department to deal with any concerns you may have.

INFECTION CONTROL REQUEST

Preventing infections is a crucial part of our patients' care. To ensure that our standards remain high our staff have regular infection prevention and control training and their practice is monitored in the workplace. We ask patients and visitors to assist us in preventing infections by cleaning their hands at regular intervals and informing staff of areas within the hospital that appear soiled.

As a patient there may be times that you are unsure whether a staff member has cleaned their hands; if in doubt please ask the staff member and they will be only too happy to put your mind at ease by cleaning their hands so that you can see them.

SPECIAL INSTRUCTIONS

Please contact your Midwife or Doctor if you wish to discuss VBAC further.

ANY CONDITION SPECIFIC DANGER SIGNALS TO LOOK OUT FOR:

If you experience any scar tenderness or vaginal bleeding, contact the Delivery Suite on 01695 656919.

CONTACT INFORMATION IF YOU ARE WORRIED ABOUT YOUR CONDITION

Your own GP –

If you have any concerns, contact the Delivery Suite on 01695 656919

OTHER USEFUL TELEPHONE NUMBERS/CONTACTS:

NHS 111

Stop Smoking Helpline (Sefton) - 0300 100 1000

Stop Smoking Helpline (West Lancashire) - 0800 328 6297

**Please call 01704 704714 if you need
this leaflet in an alternative format**

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