

C-section

Definition

A C-section, also called a cesarean section, is the delivery of a baby through a surgical opening in the lower belly area.

Alternative Names

Abdominal delivery; Abdominal birth; Cesarean section

Description

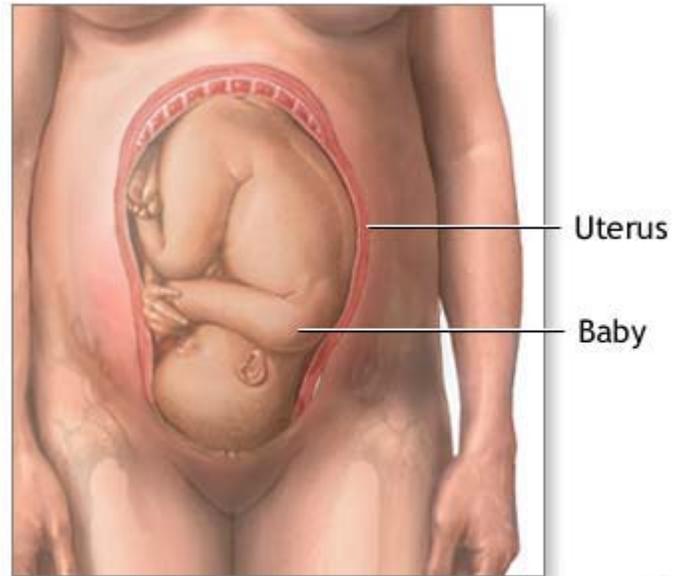
A C-section delivery is performed when a vaginal birth is not possible or is not safe for the mother or child.

Surgery is usually done while the woman is awake but numbed from the chest to the feet. This is done by giving her epidural or spinal anesthesia.

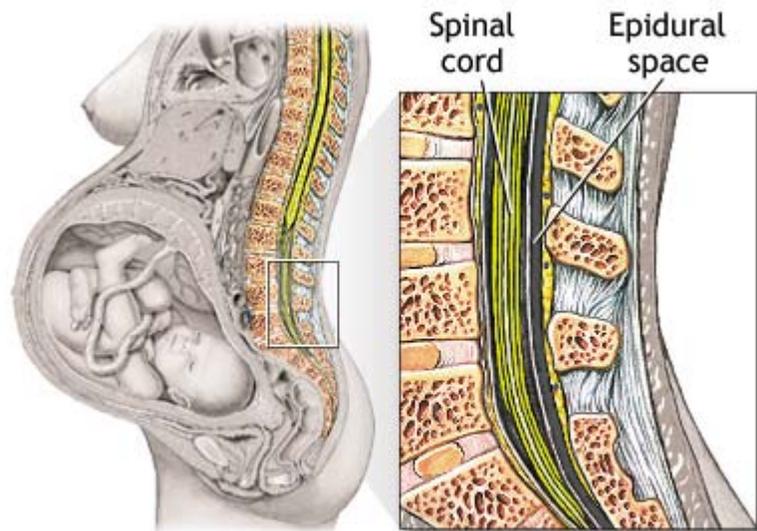
The surgeon make a cut across the belly just above the pubic area. The uterus and amniotic sac are opened, and the baby is delivered.

The health care team clears the baby's mouth and nose of fluids, and the umbilical cord is clamped and cut. The pediatrician or nurse makes sure that the infant's breathing is normal and that the baby is stable.

The mother is awake and she can hear and see her baby. The father or another support person is often able to be with the mother during the delivery.



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Why the Procedure is Performed

The decision to have a C-section delivery can depend on the obstetrician, the delivery location, and the woman's past deliveries or medical history. Some reasons for having C-section instead of vaginal delivery are:

Reasons related to the baby:

- Abnormal heart rate in the baby
- Abnormal position of the baby in the uterus such as crosswise (transverse) or feet-first (breech)
- Developmental problems such as hydrocephalus or spina bifida
- Multiple babies in the uterus (triplet and some twin pregnancies)

Reasons related to the mother:

- Active genital herpes infection
- Large uterine fibroids low in the uterus near the cervix

- HIV infection in the mother
- Previous uterine surgery, including myomectomy and previous C-sections
- Severe illness in the mother, including heart disease, toxemia, preeclampsia or eclampsia

Problems with labor or delivery:

- Baby's head is too large to pass through mother's pelvis (cephalopelvic disproportion)
- Prolonged or arrested labor
- Very large baby (macrosomia)

Problems with the placenta or umbilical cord:

- Placenta attaches in abnormal location (placenta previa)
- Placenta prematurely separated from uterine wall (placenta abruptio)
- Umbilical cord comes through the cervix before the baby (umbilical cord prolapse)

Recovery

The average hospital stay after C-section is 2 to 4 days. Recovery takes longer than it would from a natural birth. Walking is encouraged the day of surgery to speed recovery. Pain can be managed with medications taken by mouth.

Outlook (Prognosis)

Most mothers and infants recover well, with few problems.

Women who have C-section deliveries can have a normal vaginal delivery with later pregnancies, depending on the type of C-section performed and the reason the C-section was performed.

Many women who attempt a vaginal birth after cesarean (VBAC) delivery are successful. However, there is a small risk of uterine rupture associated with VBAC attempts, which can endanger the mother and the baby. It is important to discuss the benefits and risks of VBAC with your obstetric health care provider.

Risks

A c-section is a very safe procedure. The rate of serious complications is extremely low. However, certain risks are higher after C-section than after vaginal delivery. These include:

- Infection of the bladder or uterus
- Injury to the urinary tract
- Injury to the baby

A c-section may also cause problems in future pregnancies. This includes a higher risk for:

- Placenta previa
- Placenta growing into the muscle of the uterus and has trouble separating after the baby is born (placenta accreta)
- Uterine rupture

All surgeries carry risks. Risks due to anesthesia may include:

- Reactions to medications
- Problems breathing

Risks related to surgery in general may include:

- Bleeding
- Blood clots in the leg or pelvic veins
- Infection

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