

*With knowledge  
we can make  
choices*

**Support**

**Information**

**Education**

**Informed Choices**

**Choices for Childbirth**

**VBAC**

**(Vaginal Birth After Caesarean)**

**Positive Caesarean**

**Knowledge**

**Empowered Birth**



[www.birthrites.org](http://www.birthrites.org)

## Subscriptions

Please phone if you would like to receive a FREE information pack and find out more about Birthrites.

For \$25Aus you can support Birthrites: Healing After Caesarean Inc. to continue offering education and support about caesarean birth and vaginal birth after caesarean (VBAC). Subscribers will receive our magazine

*Birthing Beautifully* as it is produced

through the year.

The subscription fee covers printing and postage—we are a not-for-profit organisation.

Birthrites: Healing After Caesarean Inc may be able to help if...

- You would like to talk about your caesarean birth experience
- You are worried about what your next birth experience will be like.

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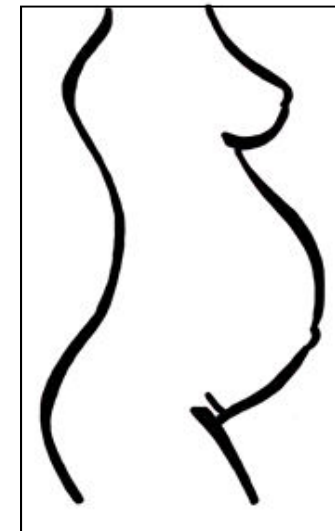
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## VBAC

### **Vaginal Birth After Caesarean ...**

*Making  
Informed Choices*



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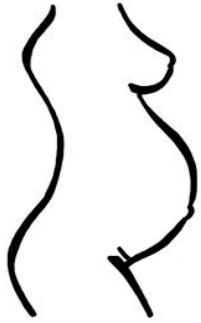
In Australia, 30% of babies are born by caesarean section every year.<sup>1</sup> The World Health Organisation (WHO) recommends a caesarean section rate of between 10-15%.<sup>2</sup> For many women and babies, caesarean is a life-saving operation. Some find, upon the arrival of a baby, that the mode of

birth matters less than the safe arrival of their baby. It may only be later, weeks or months after the birth of a child or even in a subsequent pregnancy, that a woman reflects on her past birth experience and discovers that she feels disappointed, perhaps even guilty about the way her baby entered the world.

These feelings are a common experience for women who have had a caesarean birth and it can be a great help to share these feelings with women who have had similar experiences.

*What about my next birth?* For future births after caesarean, 60–80% of women can expect to birth normally.

**“A planned vaginal birth after a previous caesarean section should be recommended for women whose first caesarean was by lower segment transverse incision, and who have no other indication for caesarean section in the present pregnancy.”<sup>3</sup>**



*What about my scar?* The scar from your previous caesarean is strong. While many people fear that the scar will rupture, and cause the death of the mother and/ or her child, medical studies have shown that this risk is greatly overstated.

The only way that VBAC differs from other labours is the small increased risk of uterine rupture - about 0.4% (one in every 250 VBAC attempts). The risk of uterine rupture prior to elective repeat caesarean (ie. while pregnant) is 0.2%<sup>4</sup>

To put this risk into some perspective, consider that the probability of requiring a caesarean section for other obstetric emergencies (not related to the previous caesarean birth), such as acute fetal distress, cord prolapse or antepartum haemorrhage is up to 30 times higher than the risk of uterine rupture<sup>4</sup>

A recent Australian study estimates the risk of uterine rupture in VBAC at 0.3% (one in 300). In that study, the risk of the baby dying because of uterine rupture in a woman trying for VBAC was 0.05% (one in 2000).<sup>4</sup>

*What if I choose a repeat elective caesarean?* Caesarean birth is not without its own risks (see Birthrites brochure 'Information for women about caesarean birth') and “existing studies indicate that 370 elective caesarean deliveries would need to be performed to prevent one symptomatic uterine rupture.”<sup>5</sup>

1. Australia's mothers and babies 2002. AIHW National Perinatal Statistics Unit, Sydney, 2004.

2. [www.who.int/reproductive\\_health/publications/MSM\\_94\\_14/MSM\\_94\\_14\\_chapter3.en.html](http://www.who.int/reproductive_health/publications/MSM_94_14/MSM_94_14_chapter3.en.html). 23/08/2004.

3. A Guide to Effective care in pregnancy and childbirth. P 370. Enkin M and Marc JNC Kierse et al. Oxford University Press:Oxford and New York, 2000.

4. Caesarean Birth...Making Informed Choices. 2004. An initiative of Birthrites:Healing After Caesarean Inc.

5. Guise JM et al. Systematic review of the incidence and consequences of uterine rupture in women with previous caesarean section. BMJ, 2004, vol 329, 1-7.

## Philosophy

*With knowledge we can make choices that lead to self empowerment and healing through birth.*

Women can become informed enough to make their own birth choices. The decision of whether to have a vaginal birth after caesarean (VBAC) or a repeat caesarean should be made by the woman, together with her family and care providers.

Women should be supported and nurtured in their decisions throughout their pregnancy towards a positive outcome for both mother and baby.



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