

Is a Caesarean Section a Matter of Choice?



Know the Facts about Caesarean Sections

Delivery Options are about Safety

Make sure you discuss your delivery options with your doctor well before your expected delivery date. Most babies are born vaginally, which is why this is typically referred to as a “natural” birth. Under some circumstances, your doctor may recommend — or bring up the possibility of — a caesarean section (C-section) which requires a surgical cut into your belly and uterus to extract your baby. Increasingly, some doctors are recommending C-sections because they are easier to schedule, and some are even presenting C-sections as merely an alternative option to natural birth. This has been a controversial discussion in medical circles.¹

Let’s look at the two delivery methods.

Natural Birth

During labour, the uterus contracts regularly to thin and open (efface and dilate) the cervix and push the baby out through the birth canal. Most women with no risk factors for problems during labour or delivery have their babies vaginally.² It is the natural way.²

The World Health Organization (WHO) recommends that pregnant women plan for a natural birth unless there is a medical reason for a C-section. Benefits of vaginal births for the mother include shorter hospital stays, lower infection rates, and quicker recovery. Studies have shown benefits of vaginal births for the baby include a lower risk of respiratory problems.³

C-section

A C-section may be medically necessary for several reasons.

In advance of your due date, your doctor may recommend a C-section because of developing complications that suggest planning for one:

- Your baby is not in a head-down position close to your due date (although sometimes the baby can be repositioned safely prior to delivery)⁴



- You have a problem such as heart disease that could be made worse by the stress of labour⁴
- You have an infection that you could pass to the baby during a vaginal birth⁴
- You are carrying more than one baby (multiple pregnancies)⁴

During actual labour, your doctor may decide that there are developing complications that warrant a C-section:

- Labour is slow and hard or even stops completely⁴
- Your baby shows signs of distress, such as a too fast or too slow heart rate⁴
- There is a problem with the placenta or umbilical cord⁴
- Your baby is too big to be delivered vaginally⁴

A growing number of doctors are offering C-sections as an alternative to natural birth, even when there is no medical reason for the procedure.¹ To many women this option may be appealing because it seems convenient or perhaps because they are fearful of the potential pain of labour. The decision for a C-section is between you and your doctor, but you should be informed about C-section before considering one.

There is much more to know about C-sections, and you should read up on the subject and discuss this with your doctor so you can make an informed decision about your delivery. A good starting place for your reading may be Giving Birth (Labour and Delivery) in the free booklet, *Healthy Pregnancy, Healthy Baby*.

To access your copy,

Here are some things you may want to consider:

1. The procedure itself is major abdominal surgery. It involves an incision through the skin, abdomen, muscle, and then into the uterus. It requires manual adjustment of internal organs and incisions near both the bladder and bowel. A C-section involves risk of damage to surrounding organs, excessive bleeding, and infection.¹
2. Recovery from a C-section can take longer, too. For several days after the surgery, women may be limited in their movement. Because it's major abdominal surgery, women who undergo the procedure will probably be told that they can't lift anything heavier than their newborn for at least two weeks. They may also be restricted in other activities such as driving, exercise and sexual intercourse.⁴
3. Having a C-section may create complications with future pregnancies, so you should talk to your healthcare provider if you have plans for more than one child. Many hospitals and doctors will not perform a natural delivery if the mother has already had a C-section, meaning the decision for one C-section may be a decision for all future deliveries to be by C-section. Studies suggest that multiple C-sections pose an even greater risk to the mother.

¹ Obstetrics & Gynecology, "Labor Induction and the Risk of a Cesarean Delivery Among Nulliparous Women at Term," July 2010

² The American College of Obstetricians and Gynecologists, "Preterm (Premature) Labor and Birth," November 2016

³ World Health Organization, "WHO Statement on Caesarean Section Rates," 2015

⁴ March of Dimes, "Medical reasons for a c-section," June 2013

⁵ International Cesarean Awareness Network, "Issues and Procedures in Women's Health - Vaginal Birth After Cesarean (VBAC)," January 2014

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