



Cesarean Fact Card

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White Papers

Cesarean Fact Card

- When a cesarean is necessary, it can be a life-saving technique for both mother and infant.
- One in four births is a cesarean, with some hospitals reporting as high as one in two. This represents a 400% increase in less than 15 years. This cesarean rate increase has not led to an improvement in the infant mortality and morbidity rates but instead has put mothers and babies at greater risk. Rates began to fall in the mid-1990s, but are rising again in the new millennium.
- Vaginal Birth After Cesarean (VBAC) is safer for both mother and infant, in most cases, than is routine repeat cesarean, which is major surgery.
- The risk to your infant from the very low incidence of uterine rupture (less than 1%) is much less than the risk to your infant from respiratory distress as a result of a scheduled cesarean.
- One-half of all cesarean women suffer complications, and the maternal mortality rate is at least two to four times that of women with vaginal births. Approximately 180 women die annually in the United States from elective repeat cesareans.
- Many indications for cesarean can and should be questioned, including cephalopelvic disproportion (CPD or baby too big, pelvis too small), dystocia, failure to progress, breech, etc.



- According to the World Health Organization, "Countries with some of the lowest perinatal mortality rates in the world have cesarean rates of less than 10%. There is no justification for any region to have a rate higher than 10-15%."

This information is found in well-respected medical journals and government publications including the National Institute of Health (NIH) task force report on cesarean childbirth published in 1982.

The International Cesarean Awareness Network, ICAN, founded as Cesarean Prevention Movement in 1982, has chapters, individuals, an international newsletter (The Clarion), e-mail newsletter and website ready to give you support and information. Donations are tax deductible.

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