

This leaflet is designed for use alongside discussions with your midwife, obstetrician and GP, to enable you to make an informed decision about how you would like to give birth this time.

You will be able to discuss with your obstetrician or midwife your chance of a successful vaginal birth, your personal wishes and future fertility plans when making your decision about whether to have a vaginal birth or caesarean delivery.

Some women require a caesarean birth rather than a vaginal delivery. The main reasons for this are:

- Concern for the well being of the baby;
- Slow progress in labour;
- Previous caesarean section;
- Breech presentation.

However, none of these reasons necessarily mean that a woman cannot give birth vaginally in a subsequent pregnancy.

Most women have the option of a vaginal birth after a caesarean section (VBAC) and Bedford Hospital is committed to supporting personal choice and facilitating as natural a birth as possible to ensure the best experience for mother and baby.



Why consider a VBAC?

A caesarean section is a major abdominal operation which has surgical and anaesthetic risks attached and a longer recovery time.

Research shows that VBAC would appear to be safer for a mother and baby than an elective caesarean* and poses a lower risk of your baby developing breathing problems and complications in future pregnancies **.

How successful is a VBAC?

Your chances of a successful vaginal birth will depend on a number of factors including: the reason for your previous caesarean, and the number of past caesareans you have had. It is important that you discuss these factors and any worries or queries you may have with your midwife, obstetrician or GP.

Statistics show that 72-76%* of women should be able to have a successful vaginal birth after caesarean (VBAC). If you have had a previous vaginal birth then the success rate rises to 90%. The discussion with your maternity team about your mode of birth will consider your preferences and priorities, and a general discussion about the overall risks. Bedford Hospital will aim to facilitate whichever choice you make.

Risks of VBAC compared with a repeat elective caesarean:

- Uterine rupture (a tearing of your scar) occurs in 0.5% of VBACs;
- A higher chance of an infection in the uterus or needing a blood transfusion in 1% of VBACs.

Because of these risks it is advised that women undergoing VBAC should plan to deliver in a hospital such as Bedford, that has an appropriately equipped delivery suite with continuous care, monitoring and immediate access to facilities for an emergency caesarean and neonatal resuscitation equipment.

* Based on a study by The Royal College of Obstetricians and Gynaecologists (RCOG)

** NICE (National Institute for Clinical Excellence) guideline 13 Caesarean Section (2004).

Further information and resources:

This leaflet has been designed to provide you with some basic information about VBAC, however please discuss any questions you have regarding your options for birth with your midwife, obstetrician or GP.

You may also find the following website resources useful:

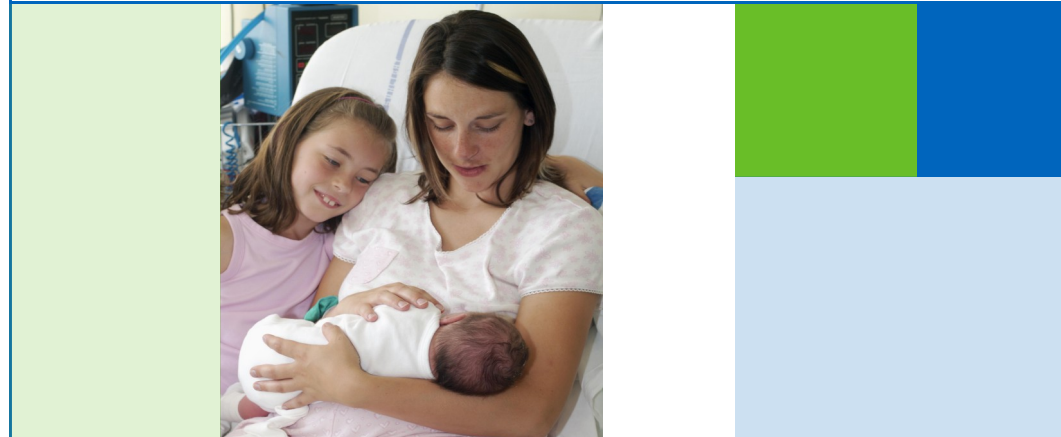
www.nhs.uk
www.vbac.org.uk
www.nice.org.uk
www.nctpregnancyandbabycare.com
www.rcog.org.uk

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Maternity

Vaginal Birth After Caesarean Section (VBAC)



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