

VBAC

Vaginal Birth After Cesarean

What is a vaginal birth after cesarean?

VBAC is attempting a vaginal birth after having a prior cesarean.

60-80% (roughly 3 to 4 out of 5) of women who have previously undergone cesarean birth can successfully give birth vaginally

Attempting a VBAC is also called a trial of labor after cesarean (TOLAC).

The greatest concern for women who have had a previous cesarean is the risk of uterine rupture during a vaginal birth.

According to the American College of Obstetricians and Gynecologists (ACOG), if you had a previous cesarean with a low transverse incision, the risk of uterine rupture in a vaginal delivery is .2 to 1.5%, which is approximately 1 chance in 500.

What Criteria Must I Meet To Be Considered For VBAC?

- Your previous cesarean incision was a low-transverse uterine incision (which is horizontal) rather than a vertical incision in your upper uterus or T-shaped, which would put you at higher risk for uterine rupture.
- No more than 2 low transverse cesarean deliveries. [discuss with provider]
- No additional uterine scars, anomalies or previous ruptures.
- If the original reason for a cesarean delivery is not repeated with this pregnancy
- You have no major medical problems
- You've never had any other extensive uterine surgery
- Best to wait at least 18 months to subsequent pregnancy
- Your health care provider or birth location should be prepared to monitor labor and perform or refer for a cesarean if necessary.

What are the benefits of having a VBAC?

- A successful VBAC allows you to avoid major abdominal surgery and the risks associated with it.

These include a higher risk of excessive bleeding, which can lead to a blood transfusion or even a hysterectomy in rare cases, as well as a higher risk of developing certain infections and other organ damage during the procedure.

- All the potential complications of major abdominal surgery increase with each cesarean delivery because the scarring can make each procedure technically more difficult.
- A c-section requires a longer hospital stay than a vaginal birth, and your recovery is generally slower and more uncomfortable.
- If you plan to have more children, you should know that every c-section you have raises your risk in future pregnancies of placenta previa and placenta accreta, in which the placenta implants too deeply and doesn't separate properly at delivery. These conditions can result in life-threatening bleeding and a hysterectomy.

What are the risks of attempting a VBAC?

- Even if you're a good candidate for a VBAC, there's a very small (less than 1 percent) risk that your uterus will rupture at the site of your c-section incision, resulting in severe blood loss for you and possibly oxygen deprivation for your baby.
- Also, if you end up being unable to deliver vaginally, you could endure hours of labor only to have an unplanned c-section. And while a successful VBAC is less risky than a scheduled repeat c-section, an unsuccessful VBAC requiring a c-section after the onset of labor carries more risk than a scheduled c-section.
- With an unplanned c-section after laboring, you have a higher chance of surgical complications, such as excessive bleeding that could require a blood transfusion or a hysterectomy, in rare cases, and infections of the uterus and the incision. And the risk of complications is even higher if you end up needing an emergency cesarean.
- Finally, there is the risk of the baby having a serious complication that could lead to long-term neurological damage or even death. While this risk is very small overall, it may be higher in women who undergo an unsuccessful VBAC (which would mean a c-section after failed labor) than in women who have a successful vaginal delivery or a scheduled c-section.

What is a cesarean section?

A cesarean delivery is a surgical procedure in which a fetus is delivered through an incision in the mother's abdomen and uterus. It is the number one women's surgical procedure to date in the world.

A cesarean delivery may be necessary if: medical complications occur in pregnancy or labor or problems with the placenta. There are other medical indications however discussing with your provider ahead of time is best to prevent unwanted circumstances. Talk with your provider about your birth options prior to birth to obtain the best birth outcome.

Is homebirth after cesarean safe?

<http://vbacfacts.com/start/hbac/>

<https://www.midwiferytoday.com/articles/homebirthaftercesarean.asp>

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