

Having a cesarean birth



What you need to know

Most babies are born through vaginal birth. However, about one-third of babies are delivered by Cesarean birth (also called C-section), a surgery in which your baby is born through an incision that your doctor makes in your belly and uterus.

For some women and babies, a C-section is safer than vaginal birth. You may need a C-section because of medical reasons that affect your pregnancy.

If your pregnancy is healthy and you don't have any medical reasons to have a C-section, it's best to have your baby through vaginal birth.

Medical reasons for having a C-section

Complications during pregnancy

- You've had a C-section in a previous pregnancy or other surgeries on your uterus (womb).
- There are problems with the placenta. The placenta grows in your uterus and supplies the baby with food and oxygen through the umbilical cord. Placental problems can cause dangerous bleeding during vaginal birth.
- You have an infection, like HIV or genital herpes.
- You're having multiples (twins, triplets or more).
- You have a chronic health condition, like diabetes or high blood pressure, which requires treatment.

Complications during labor and birth

- Your baby is too big to pass safely through the vagina.
- Your baby is in a breech position (bottom or feet are facing down) or a transverse position (shoulder is facing down). The best position for your baby at birth is head down.
- Labor is too slow or stops.
- Your baby's umbilical cord slips into the vagina where it could be squeezed or flattened during vaginal birth. This is called an umbilical cord prolapse. The umbilical cord is the cord that connects your baby to the placenta. It carries food and oxygen from the placenta to the baby.

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High-risk case management

If you are having problems with your pregnancy, our case managers can help and answer any questions you may have.

Questions?

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- Your baby has problems during labor, like a slow heart rate. This is also called fetal distress.
- Your baby has a certain type of birth defect. Birth defects are health conditions that are present at birth. Birth defects change the shape or function of one or more parts of the body. They can cause problems in overall health, how the body develops, or in how the body works.

The procedure: what happens during a C-section?

Anesthesia

Most likely, you can have regional anesthesia (like an epidural or spinal block) that lets you stay awake for your baby's birth. This means you're numb from below your breasts all the way down to your toes. If you have an emergency C-section, you may need general anesthesia. General anesthesia makes you go to sleep during surgery.

Before surgery:

- The nurse washes and may shave your belly so the area is clean for surgery.
- You get a catheter (tube) in your bladder to drain urine.
- You get an IV (needle) in your hand or arm to give you fluids and medicine.

During surgery:

- When you're numb, the doctor makes the first incision in your belly. In most cases, it's a low transverse incision (also called a bikini incision) that goes across your belly, just above your pubic bone.
- The doctor makes the next incision in the uterus. A horizontal (across) incision is best because it doesn't bleed too much and heals well. Sometimes the doctor has to make a vertical (up and down) incision because of your baby's size or position.
- The doctor opens the amniotic sac and removes the baby. You may feel some tugging, pulling and pressure.
- The doctor cuts the umbilical cord and removes the placenta.
- The doctor closes the incisions with stitches or staples.

After delivery

It usually takes longer to recover from a C-section than vaginal birth. You can expect to stay two to four days in the hospital after a C-section. Full recovery usually takes four to six weeks.

Here's what you can do to feel better faster:

- Talk to your doctor about pain medicine. Your doctor can recommend one that won't hurt the baby while you're breastfeeding.
- If your provider says it is okay, get out of bed and walk around within 24 hours after surgery. This can help you have a bowel movement and prevent blood clots. Make sure a nurse or another adult is there to help you the first few times you get out of bed.
- Call your doctor if you have a fever or if your incision swells, is painful or becomes increasingly red in color. These could be signs of infection.
- To prevent infection, don't have sex or put anything (including tampons) in your vagina for a few weeks after your C-section. Ask your doctor when it's safe to do these things again.
- Take it easy. Avoid hard activities, like lifting heavy things, for a few weeks. Try to sleep when your baby does.

Here's what you can do to prepare for your C-section:

- Learn as much as you can about C-sections. Ask your doctor about what to expect and about different kinds of anesthesia. Talk to friends and family members who have had a C-section.
- Get help at home. Ask friends or family to be there after your baby is born to help take care of the baby, other children, and household tasks.
- Ask if your partner can be with you in the operating room.
- If you think you want to watch your baby's birth, tell your doctor and the nurses at the hospital.

