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Elective C-Sections Add Risks During Pregnancy

Some women or health professionals may elect to have a scheduled C-section, rather than attempt a vaginal birth. The SOGC is concerned that there may be an emerging trend towards more scheduled childbirth and routine medical intervention.

In Canada:

- Though the impact of the preferences of women and health professionals is not well understood, many have speculated that changing attitudes of health professionals and women about medical intervention during pregnancy are a contributing factor to rising C-section rates.
- Worldwide, an estimated one to 18 percent of all Cesarean sections are performed at the request of the mother. Data for Canada is lacking, but it is estimated that, at most, one to two percent of Cesarean sections are performed because they are requested by the mother.¹

Why might women choose elective C-sections?

- Apprehensions about pain during childbirth
- Apprehensions about her ability to give birth vaginally
- For convenience – to schedule the date of her child's birth.

Why might healthcare professionals encourage elective C-sections?

- Perceived fear that there is increased risk of litigation when performing a vaginal birth
- Scheduling convenience
- Some women, such as older women and those that have had a previous C-section, have a higher likelihood of requiring a Cesarean partway through a trial of vaginal birth. Healthcare professionals may be disinclined to attempt a vaginal birth in these cases, and may elect for a C-section instead.

The Society of Obstetricians and Gynaecologists of Canada ...

- Has always promoted natural childbirth.
- Believes that the decision to perform a C-section during labour and delivery should be based on medical indications.
- Believes that the safety of a woman and her baby should be the driving factors in a decision to conduct a C-section.
- Believes that each woman should receive balanced, accurate, and complete information regarding her options for labour and birth in order to arrive at an informed decision.

References

1. Cesarean Birth by Maternal Request

Presented by Leanne Dahlgren, MD, FRCSC, MHSc, at the *Cesarean Birth in BC: Trends, Perspectives & Future Strategies Consensus Conference*, January 2008.

[http://www.cmnh.ca/Cesarean presentations/M - Dahlgren - BC Consensus conference jan 08.pdf](http://www.cmnh.ca/Cesarean%20presentations/M%20-%20Dahlgren%20-%20BC%20Consensus%20conference%20jan%2008.pdf)

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About the SOGC

The Society of Obstetricians and Gynaecologists of Canada (SOGC) is one of Canada's oldest national specialty organizations. Established in 1944, the Society's mission is to promote excellence in the practice of obstetrics and gynaecology and to advance the health of women through leadership, advocacy, collaboration, outreach and education. The SOGC represents obstetricians/gynaecologists, family physicians, nurses, midwives and allied health professionals working in the field of sexual reproductive health. For more information, visit www.sogc.org.