

## MODULE 2

# VBAC: The Benefits and Risks for Mothers and Babies





# Making an Informed Decision

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- ☛ If you have given birth by cesarean in the past and are pregnant, or plan a pregnancy, you have important decisions to make.
- ☛ Giving birth is a highly personal, spiritual, and important cultural event in a family's life. Birthing families have the right to choose how, where, and with whom they want to give birth.



Evaluating the benefits and risks of having a repeat cesarean or laboring for a VBAC is a highly personal decision.



# What You Should Expect from Your Caregivers

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- Current ethical guidelines in maternity care recommend that your care providers give evidence-based information about your birth options early in your pregnancy.
- Your care provider should explain the benefits and risks of VBAC compared to a routine repeat cesarean and then respect the informed decision you ultimately make.





What Decision  
Will You Make?



# What **Decision** Will You Make?

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- ☛ The decisions you make should be based not only on medical benefits and risks but also on your past birth experience, personal values, and what you feel is best for your family.
- ☛ Ultimately, your decision will also hinge on the maternity care available and on the amount of community support for VBAC.



# Three Possible Birth Outcomes After a Prior Cesarean

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- ☛ A scheduled repeat cesarean at term without going through labor.
- ☛ Labor and a VBAC.
- ☛ Labor that may result in another cesarean.



# What is a VBAC?

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- VBAC is a vaginal birth after a cesarean.
- VBAC2C is a pregnant person who had a VBAC after two prior cesareans.
- CBAC is someone who labored for a VBAC but had a cesarean.
- HBAC is a home birth after a cesarean.



# What is a TOLAC?

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- ☞ TOLAC is a trial of labor after a cesarean.
- ☞ A “candidate” for a TOLAC is a pregnant person that can “safely” labor for a VBAC.
- ☞ Many mothers find the terms “TOLAC” and “candidate for a TOLAC” negative and restrictive and not supportive and encouraging of pregnant people who want to labor for a VBAC.





Evidence Supports VBAC  
as a Safe, Lower-Risk  
Birth Option than Routine  
Repeat Cesareans.



Offering a VBAC as an  
Option After a Prior  
Cesarean is Best Practice.





# Who Supports VBAC as A Safe Option to a Routine Repeat Cesarean?

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- ☞ American College of Obstetricians and Gynecologists (ACOG)
- ☞ Society of Obstetricians and Gynaecologists of Canada (SOGC)
- ☞ Royal College of Obstetricians and Gynaecologist (RCOG)
- ☞ American College of Nurse Midwives (ACNM)
- ☞ American Association of Birth Centers (AABC)

# Why is VBAC an Option to Consider?

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- ☞ Research shows that cesareans may do more harm than good for healthy pregnant people and babies.
- ☞ Mothers and babies experience these harms both in the short- and long-term.

ACOG & SMFM. (2014, reaffirmed, 2016). Obstetric care consensus No. 1: Safe prevention of the primary cesarean section. Am J Obstet Gynecol, 210(3), 179-193. <https://www.acog.org/-/media/project/acog/acogorg/clinical/files/obstetric-care-consensus/articles/2014/03/safe-prevention-of-the-primary-cesarean-delivery.pdf>



# Why is VBAC an Option to Consider?

Each additional cesarean puts mothers at increased risk for operative complications including:

- ☛ Post-operative blood transfusion.
- ☛ Infections necessitating antibiotics.
- ☛ Readmission to the hospital.

Rottenstreich, M., et al. (2018). Prolonged operative time of repeat cesarean is a risk marker for post-operative maternal complications. BMC Pregnancy and Childbirth 477. <https://bmcpregnancychildbirth.biomedcentral.com/articles/10.1186/s12884-018-2111-8>



Compared to vaginal birth, mothers 35 years of age and over who have a cesarean without labor experience significantly higher risks of intra- or postpartum severe complications.

Korb, D., et al. (2019). Risk of severe maternal morbidity associated with cesarean delivery and the role of maternal age: A population-based propensity score analysis. CMAJ, 191, E352-60. <https://www.cmaj.ca/content/191/13/E352>





# What You Should Know About VBAC:

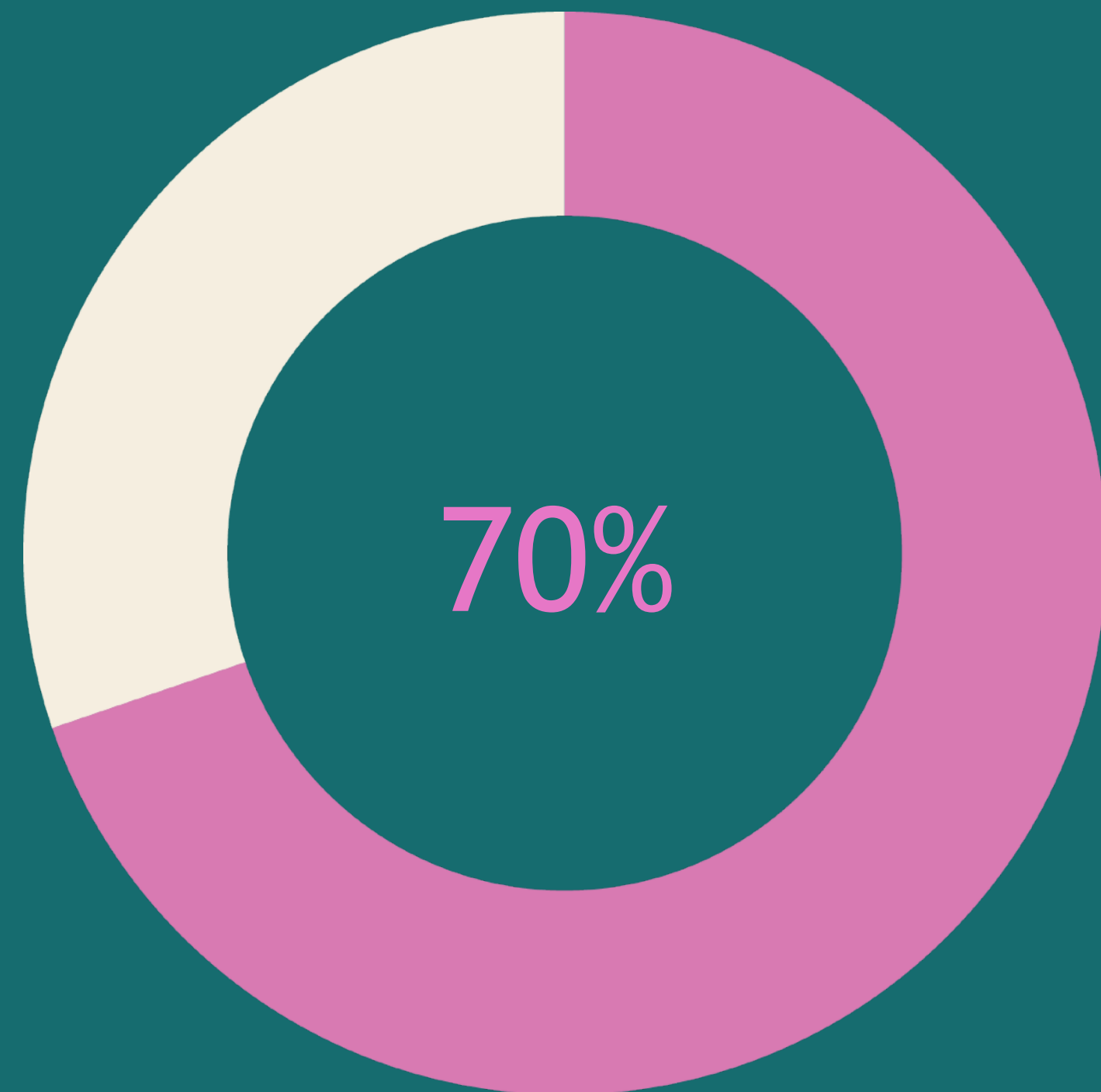
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- 👂 VBAC is a safe alternative to a routine repeat cesarean.
- 👂 If you have a healthy pregnancy, a low horizontal scar on the uterus, and go into labor on your own at term (39<sup>th</sup> to 40<sup>th</sup> week gestation), you have about a 70–75 percent chance to have a safe, normal birth.



# What you should know about VBAC:

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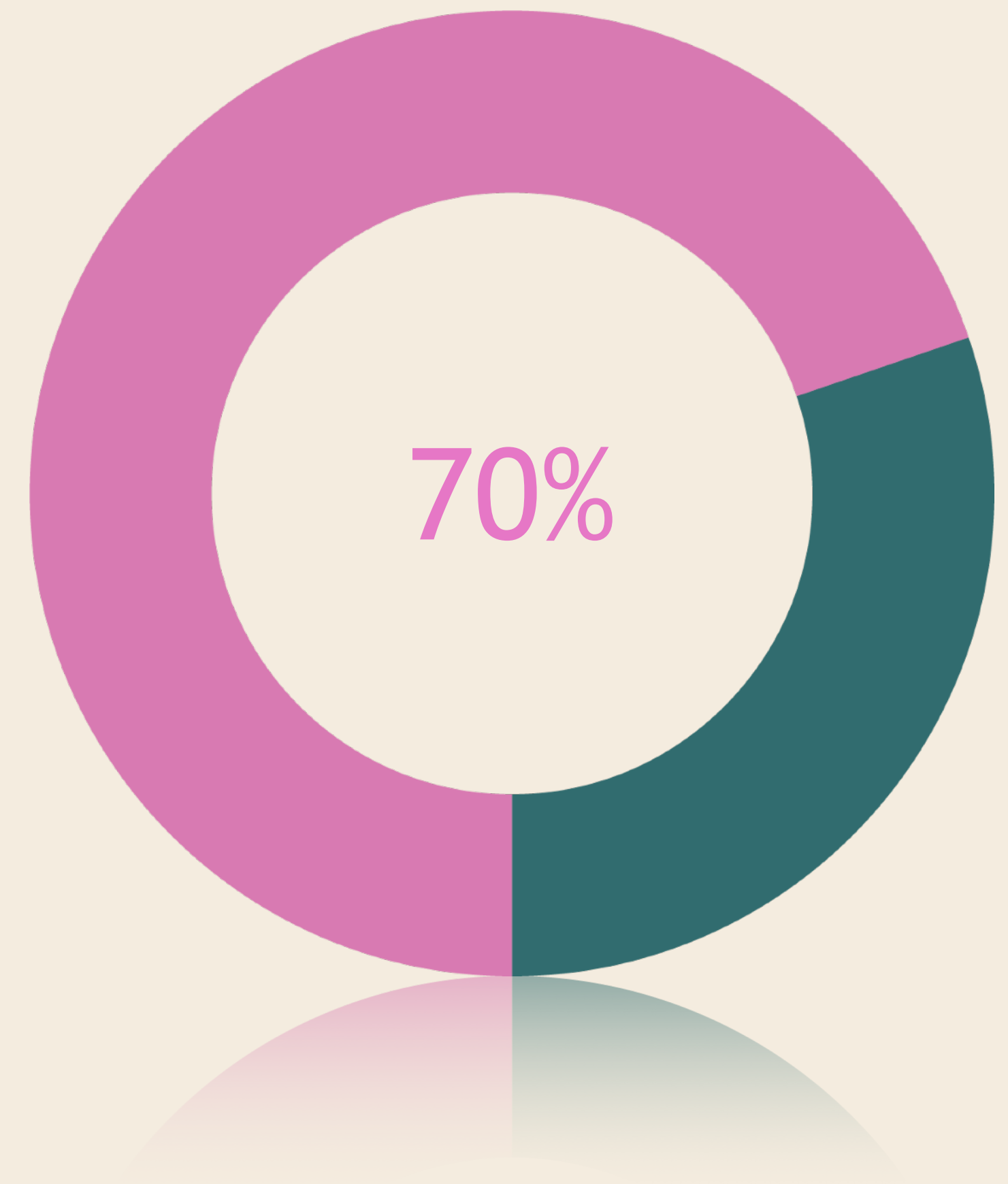


About 70 Percent of Women who Labor for a VBAC Avoid the Complications of Repeat Cesareans.

# If 100 Women Labor for a VBAC:

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- ☞ About 70 women avoid complications of surgery.
- ☞ About 70 babies avoid complications of surgery.
- ☞ About 70 babies avoid breathing problems from a scheduled cesarean.
- ☞ About 70 mothers and babies go home sooner.





# What You Should Know About VBAC:

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- ☛ Women who are cared for by midwives or who labor in a birth center have a higher chance of a VBAC.
- ☛ Women who have the support of a birth doula are at lower risk for a cesarean section.

Goer, H. & Romano, A. (2012). Optimal care in childbirth: The case for a physiologic approach. Seattle, WA: Classic Day.

# What does the American College of Obstetricians and Gynaecologists (ACOG) Say About the Benefits of VBAC?

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“... the likelihood of achieving VBAC appears to be similar for women with one previous cesarean delivery and women with more than one previous cesarean delivery. Given the overall data, it is reasonable to consider women with two previous low-transverse cesarean deliveries to be candidates for TOLAC ...”

American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233. [https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice\\_Bulletin\\_No\\_\\_184\\_\\_Vaginal\\_Birth\\_After.48.aspx](https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice_Bulletin_No__184__Vaginal_Birth_After.48.aspx)



# What does the Society of Obstetricians and Gynaecologists of Canada Say About the Benefits of VBAC?

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“Provided there are no contraindications, a trial of labor after Caesarean should be offered to all women with 1 previous low-segment transverse Caesarean section after appropriate discussion and documentation of maternal and perinatal risks and benefits. The discussion should be documented.”

Dy, J., DeMeester, S., Lipworth, H., & Barrett, J. (2019). No. 382-Trial of labour after caesarean. *Journal of Obstetrics and Gynaecology Canada*, 41(7), 992-1011. doi: 10.1016/j.jogc.2018.11.008

# What does the Royal College of Obstetricians and Gynecologists Say About VBAC?

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“Women with one or more previous vaginal births should be informed that previous vaginal delivery, particularly previous VBAC, is the single best predictor of successful VBAC and is associated with a planned VBAC success rate of 85-90%. Previous vaginal delivery is also independently associated with a reduced risk of uterine rupture.”

Royal College of Obstetricians and Gynaecologist. (2015). Birth after previous caesarean birth: Green-top guideline no. 45. [https://www.rcog.org.uk/globalassets/documents/guidelines/gtg\\_45.pdf](https://www.rcog.org.uk/globalassets/documents/guidelines/gtg_45.pdf)



# What are the Benefits of VBAC for Mothers?

“VBAC is associated with decreased maternal morbidity and a decreased risk of complications in future pregnancies as well as a decrease in the overall cesarean delivery rate at the population level (1-3).”



American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233.  
[https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice\\_Bulletin\\_No\\_184\\_Vaginal\\_Birth\\_After.48.aspx](https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice_Bulletin_No_184_Vaginal_Birth_After.48.aspx)

# What Are the Benefits of VBAC, Compared to a Planned Repeat Cesarean, for Pregnant People?

- ☞ Avoiding the complications of major abdominal surgery.
- ☞ Avoiding the risk for a uterine rupture in a future pregnancy.
- ☞ Lower rates of thromboembolism (blood clots) and major infections.

American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233. [https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice\\_Bulletin\\_No\\_\\_184\\_\\_Vaginal\\_Birth\\_After.48.aspx](https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice_Bulletin_No__184__Vaginal_Birth_After.48.aspx)



# Mothers Are Less Likely to Experience Hemorrhage Requiring a Hysterectomy

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## Risk for hysterectomy:

- Mothers without a prior cesarean: 1 / 25,000
- Mothers with one previous cesarean: 1 / 500
- Mothers with three or more previous cesareans: 1 / 20

# What are the Benefits of VBAC for Mothers Compared to an Elective Repeat Cesarean?

Avoiding a cesarean lowers the risk for:

- ☞ Blood transfusion.
- ☞ Operative injuries.
- ☞ Admission to an ICU (intensive care unit).
- ☞ Adhesions (bands of scar tissue that can cause internal organs to stick together when they are not supposed to be).



Sandall, J., et al. (2018). Short-term and long-term effects of caesarean section on the health of women and children. The Lancet, 392(10155), 1349-1357.  
[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31930-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31930-5/fulltext)



# What are Adhesions?

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- Adhesions form during the healing process. They consist of fibrous scar tissue that connects abnormally between internal organs.
- Complications from postoperative adhesions are common with any abdominal surgery. Adhesions can cause chronic pelvic pain, bowel obstruction, and secondary infertility.
- Repeat cesareans are complicated by adhesions. They increase the length of the operation to birth the baby and heighten the risk of bladder injury.

# Avoiding a Cesarean Lowers the Risk for Adhesions in Future Cesareans:

## Risk for Adhesions:

- ☞ After a second cesarean 12-46%
- ☞ After a third cesarean 26-75%

Sandall, J., et al. (2018). Short-term and long-term effects of caesarean section on the health of women and children. The Lancet, 392(10155), 1349-1357.  
[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31930-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31930-5/fulltext)



# With a VBAC Mothers Are Less Likely to:

- ☞ Need postoperative assistance with breathing (intubation).
- ☞ Experience cardiac arrest.
- ☞ Suffer acute renal failure.
- ☞ Return to the hospital because of complications.
- ☞ Experience chronic pain.



Sandall, J., et al. (2018). Short-term and long-term effects of caesarean section on the health of women and children. *The Lancet*, 392(10155), 1349-1357.  
[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31930-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31930-5/fulltext)

# With a VBAC, Mothers Are at Lower Risk for Problems with the Placenta, including:

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- ☛ Placenta **increta** (when the placenta attaches more firmly to the uterus and becomes embedded in the muscle wall).
- ☛ Placenta **percreta** (when the placenta grows through the uterine wall and may merge into other abdominal organs).
- ☛ Placenta **accreta** (placenta grows into the uterine wall).

American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233.  
[https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice\\_Bulletin\\_No\\_184\\_Vaginal\\_Birth\\_After.48.aspx](https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice_Bulletin_No_184_Vaginal_Birth_After.48.aspx)



Problems with the  
Placenta Increase the  
Risk for Hemorrhage  
and a Hysterectomy.





# Fewer Mothers Die in Childbirth When Women Labor for a VBAC.

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Maternal Mortality Rate:

Per 100,000 who labor for a VBAC → 1.6-3.8

Per 100,000 who have an elective repeat cesarean → 5.6-13.4

Dy, J., DeMeester, S., Lipworth, H., & Barrett, J. (2019). No. 382-Trial of labour after caesarean. *Journal of Obstetrics and Gynaecology Canada*, 41(7), 992-1011. doi: 10.1016/j.jogc.2018.11.008



# What Are the Benefits of VBAC In a Future Pregnancy?

Pregnant people are less likely to:

- ☛ Have fertility problems, pre-term birth, or a stillbirth.
- ☛ Have a low-birth-weight baby.
- ☛ Experience bleeding during pregnancy and birth due to placenta problems.
- ☛ Experience a uterine rupture.
- ☛ Have a repeat cesarean.

American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233.  
[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31930-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31930-5/fulltext)



# Are There Any Disadvantages to Laboring for a VBAC?





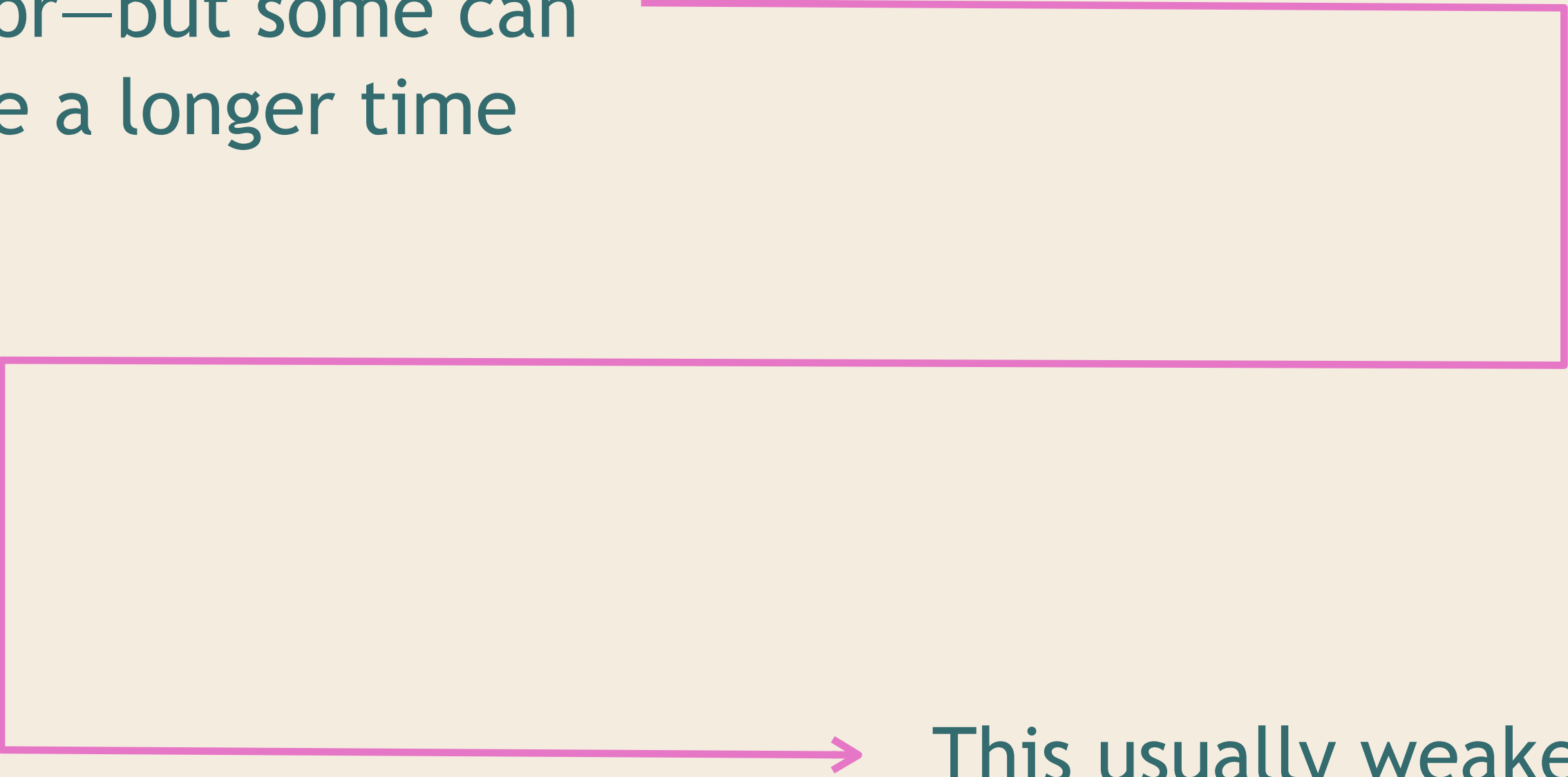
# Disadvantages When Laboring for a VBAC:

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- ☛ You may need an episiotomy (a surgical procedure in the tissues surrounding the vagina).
- ☛ You may need an assisted vaginal birth with forceps or a vacuum.
- ☛ You may experience a perineal tear in the muscle that controls the anus or rectum (third- or fourth-degree tear).

Childbirth Connection. (n.d.) VBAC basics: Planning ahead. National Partnership for Women & Families. Retrieved from <http://www.childbirthconnection.org/giving-birth/vbac/planning-ahead/>

Tears are usually minor—but some can be serious and require a longer time to heal.



This usually weakens the pelvic floor muscles and causes urine or feces leakage for some time after birth.



# Labor Practices Affect the Pelvic Floor.

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The risk for a vaginal tear is increased with certain birth practices, including:

- An episiotomy.
- An epidural (which may limit freedom of movement for birth).
- Applying fundal pressure to push the baby out.
- The use of vacuum extraction or forceps.

Childbirth Connection. (2020). VBAC basics. National Partnership for Women & Families. Retrieved from <http://www.childbirthconnection.org/giving-birth/vbac/basics/>

# A Routine Repeat Cesarean Is Not Protective of the Pelvic Floor.

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Evidence shows that having a routine repeat cesarean does not protect against severe urinary stress incontinence, urinary urge incontinence, or anal incontinence over the long run.

Childbirth Connection. (2020). VBAC basics. National Partnership for Women & Families. Retrieved from <http://www.childbirthconnection.org/giving-birth/vbac/basics/>



# What Are the Disadvantages When Laboring for a VBAC?

- ☛ You may need another cesarean section during labor. The odds are 25 out of 100 when laboring for a VBAC, compared to 20 in 100 when giving birth for the first time.
- ☛ The risk for complications from a cesarean performed in labor are higher than complications from a planned repeat cesarean.

Royal College of Obstetricians and Gynaecologists. (2016). Information for you: Birth options after a caesarean section. <https://www.rcog.org.uk/globalassets/documents/patients/patient-information-leaflets/pregnancy/pi-birth-options-after-previous-caesarean-section.pdf>

# What are the Disadvantages When Laboring for a VBAC?

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Although the risk is small, the chances of a uterine scar separating is higher during labor than with an elective repeat cesarean:

With an elective repeat cesarean → 0.26 per 1,000

When laboring for a VBAC → 4.7 per 1,000

Dy, J., DeMeester, S., Lipworth, H., & Barrett, J. (2019).  
No. 382-Trial of labour after caesarean. Journal of  
Obstetrics and Gynaecology Canada, 41(7), 992-1011.  
doi: 10.1016/j.jogc.2018.11.008



# Are There Benefits of VBAC for Babies?



# Benefits of VBAC for Babies:

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- 👂 Baby is exposed to beneficial vaginal organisms (which initiate immunities).
- 👂 Contractions stimulate and prepare the baby for breathing outside the womb.
- 👂 Baby is more likely to have skin-to-skin contact with its birthing parent.
- 👂 Baby is more likely to breastfeed after birth and continue to do so during infancy.

Goer, H. & Romano, A. (2012). Optimal care in childbirth: The case for a physiologic approach. Seattle, WA: Classic Day.



# Benefits of Breastfeeding for Babies

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Breastfeeding helps to protect babies from:

- ☞ Ear and stomach infections.
- ☞ Severe respiratory infections.
- ☞ Dental malocclusions (misalignment).
- ☞ Sudden infant death syndrome (SIDS).
- ☞ Death from necrotizing enterocolitis (a life-threatening intestinal infection).
- ☞ Childhood leukemia.

Victora, C. G., et al. (2016). Breastfeeding in the 21st century: Epidemiology, mechanisms, and lifelong effect. *The Lancet*, 387(10017), 475-490. [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)01024-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)01024-7/fulltext)

“... a mother’s breastmilk transmits elements of her own microbiome and immune responses, and also provides specific prebiotics to support growth of beneficial bacteria.”



Victora, C. G., et al. (2016). Breastfeeding in the 21st century: Epidemiology, mechanisms, and lifelong effect. *The Lancet*, 387(10017), 475-490. [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)01024-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)01024-7/fulltext)



# Benefits of Breastfeeding for Babies

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- ☛ Breastfeeding is associated with higher performance on intelligence tests.
- ☛ Children and adolescents who were breastfed are less likely to become overweight or obese and less likely to develop Type 2 diabetes later in life.

World Health Organization. (2020, August 24). *Infant and young child feeding*. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/infant-and-young-child-feeding>

# Benefits of Breastfeeding for Mothers:

Breastfeeding helps to protect mothers against:

- ☞ Breast cancer.
- ☞ Ovarian and pre-menopausal breast cancer.
- ☞ Type 2 diabetes.
- ☞ Heart disease.

Victora, C. G., et al. (2016). Breastfeeding in the 21st century: Epidemiology, mechanisms, and lifelong effect. *The Lancet*, 387(10017), 475-490. [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)01024-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)01024-7/fulltext)

Peters, S. A. E., Yang, L., Chen, Y., Chen, Z., Guo, Y., Bian, Z., Li, L., Du, J., Yang, J., Li, S., & Woodward, M. (2017). Breastfeeding and the risk of maternal cardiovascular disease: A prospective study of 300,000 Chinese women. *Journal of the American Heart Association*, 6(6). <https://www.ahajournals.org/doi/10.1161/JAHA.117.006081>



# What Are the Risks of VBAC for Babies Compared to an Elective Repeat Cesarean?

Complications for babies are higher and usually related to the occurrence of a uterine rupture.

## Complications

## Laboring for a VBAC vs. Elective Repeat Cesarean

☛ Risk of neonatal death	1.1 per 1,000 vs. 0.55 per 1,000
☛ Risk of perinatal death	1.3 per 1,000 vs. 0.5 per 1,000
☛ Risk of perinatal neurological injury	8 per 10,000 vs. 1 per 10,000

Dy, J., DeMeester, S., Lipworth, H., & Barrett, J. (2019). No. 382-Trial of labour after caesarean. *Journal of Obstetrics and Gynaecology Canada*, 41(7), 992-1011. doi: 10.1016/j.jogc.2018.11.008

# Who Can Labor for a VBAC?

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Evidence shows that most mothers who have had one or two previous cesareans with a low-transverse uterine incision can plan a VBAC, including:

- ☛ Mothers expected to give birth to a “big” baby (macrosomia).
- ☛ Mothers whose pregnancy may extend beyond 40 weeks.
- ☛ Mothers with a prior low-vertical uterine incision.
- ☛ Mothers with an unknown type of prior uterine incision.
- ☛ Mothers expecting twins.
- ☛ Mothers with a high Body Mass Index (overweight).

American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233. [https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice\\_Bulletin\\_No\\_\\_184\\_\\_Vaginal\\_Birth\\_After.48.aspx](https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice_Bulletin_No__184__Vaginal_Birth_After.48.aspx)



# What is the Body Mass Index?

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- Body mass index (BMI) is a measure of body fat based on height and weight that is applied to adult men and women.
- The value obtained from the BMI calculator indicates whether a person is underweight, normal weight, overweight, or obese.
- The BMI index ranges from 19 to 54.

# Pregnant People Who Have a Body Mass Index (BMI) of 30 or More Can Plan a VBAC:

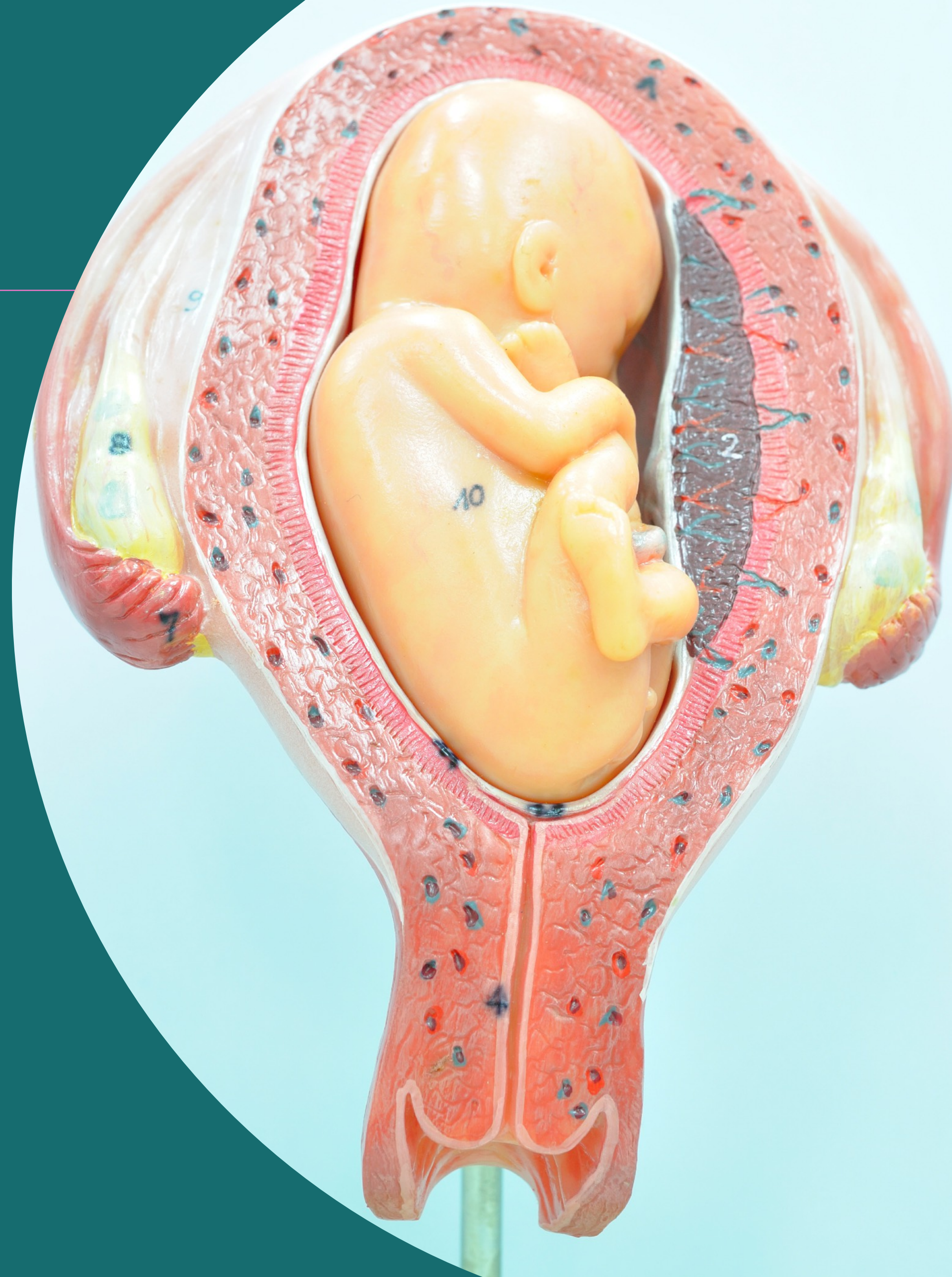
- ☛ A high BMI is not an absolute contraindication to laboring for a VBAC.
- ☛ With a BMI between 18.5 and 24.9, the odds for having a VBAC are 85 percent.
- ☛ With a BMI of 40 or more, the odds are 61 percent.
- ☛ A higher BMI puts mothers at increased risk for complications when having a repeat cesarean.
- ☛ Having a VBAC can reduce the potential for complications of cesarean surgery.



American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233. [https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice\\_Bulletin\\_No\\_\\_184\\_\\_Vaginal\\_Birth\\_After.48.aspx](https://journals.lww.com/greenjournal/Fulltext/2017/11000/Practice_Bulletin_No__184__Vaginal_Birth_After.48.aspx)



# Some Mothers with a Breech at Term Can Labor for a VBAC.



Dy, J., DeMeester, S., Lipworth, H., & Barrett, J. (2019). No. 382-Trial of labour after caesarean. *Journal of Obstetrics and Gynaecology Canada*, 41(7), 992-1011. doi: 10.1016/j.jogc.2018.11.008



# Contraindications for a VBAC:

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Planning a VBAC is not considered safe for a mother who has had:

- ☛ A prior uterine rupture.
- ☛ A prior uterine surgery (myomectomy, hysterotomy).
- ☛ A classical scar (high vertical uterine incision).
- ☛ An inverted T scar in the upper part of the uterus.

American College of Obstetricians and Gynecologists. (2017). Practice bulletin No. 184: Vaginal birth after cesarean delivery. *Obstetrics and Gynecology*, 130(5), e217-e233. doi: 10.1097/AOG.0000000000002398



# Planning a VBAC May Be Challenging.

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But many mothers:

- 👂 Feel empowered by having a VBAC.
- 👂 Gain self-confidence in their ability to give birth.
- 👂 Often heal from the trauma of a prior cesarean.

This is How Some  
Mothers Have Felt after  
Laboring for a VBAC





# VBAC Success Stories

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“We did it! Vbac! I had to fight pretty hard at the end for it but we went into spontaneous labour at 41 weeks, and my little girl arrived without intervention ... I ended up with this amazing midwife whose timing and experience set me up for success ...”

“It was honestly the most beautiful and empowering thing I have ever done.... And to add a bonus the consultant who cared for me over the weekend came in to tell me afterwards that I had really inspired him to assist other women proactively who were wanting vbacs.”

# VBAC Success Stories

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“I CAN’T BELIEVE I DID IT! So many people who assumed I was going to have a RCS we’re so doubtful and it was hard to stay positive and overcome, but I stayed vigilant throughout my pregnancy, read and listened to everything vbat I could get my hands on.”

“I had an awesome supportive practice of midwives and OBs behind me and an amazing team of VBAC supportive nurses once I got to the hospital. I am still in shock and elated to have had this healing birth after my traumatic csection.”



# If You Have Never Labored Before:

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- ☞ Your labor pattern will be similar to someone giving birth for the first time.
- ☞ Look for comprehensive information about what to expect from labor and birth.
- ☞ Learn the labor skills that will help you feel comfortable and safe and help your labor progress.
- ☞ Look for caregivers that are confident in your ability to give birth and give you all the support you need.
- ☞ Find encouragement and support in VBAC-support groups.

# Caregivers Differ About Who Can Labor for a VBAC:

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- ☞ Some, advise mothers based on their own personal experience and comfort level with VBAC—rather than on the evidence.
- ☞ If you feel strongly about planning a VBAC, don't get discouraged by the first caregiver that tells you it's not possible.
- ☞ In your search for a caregiver, consider obstetricians, family physicians, midwives, and DOs (doctors of osteopathic medicine).



# From an Author and a VBAC Mom:

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“On many occasions over a long period I dreamed that I would one day be able to push my own baby out into the world. Those three years of research left me convinced that there is not just one obstetric reality, but several, and that these realities are not necessarily the ones we hear as unavoidable solutions.”

“We women need to have our say because we are the people most immediately affected by birth.”

Hélène Vadeboncoeur. (2011). *Birthing normally after a cesarean or two: A guide for pregnant women, exploring reasons and practicalities for VBAC*. Chester-le-Street, England: Fresh Heart.

# Key Points to Review:

- ☛ VBAC is a reasonable option for women who do not need or want a repeat cesarean.
- ☛ The majority of women who labor for a VBAC ultimately have a vaginal birth.
- ☛ If you labor for a VBAC, it's possible that you may need a cesarean.
- ☛ Having a VBAC helps mothers and babies avoid the complications of surgery.
- ☛ Having a VBAC helps mothers avoid complications in a future pregnancy.
- ☛ With a VBAC, babies are more likely to begin and successfully continue to breastfeed.





# Checklist for Parents:

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- ☞ What information do you have now that you did not already know?
- ☞ What additional information would you like to have?
- ☞ If you are pregnant, have you started talking with your caregiver about your options?
- ☞ Make a list of questions or concerns you would like to discuss with your caregiver.
- ☞ Look at the additional resources in this section and discuss them with your partner and caregiver.

# Resources

**Thinking about VBAC:  
Deciding what's right for me**

If you have had a caesarean section (c-section) before, your midwife will talk to you about your options for this pregnancy. This handout aims to help you think and talk about your decision with your midwife, your partner and family and friends.

**What are my options when giving birth after a previous c-section?**

You will have the choice of planning either:

vaginal birth after caesarean section (VBAC)	repeat caesarean section (c-section)
VBAC is a safe choice for most people who have had a c-section. Many who have had a c-section in the past will still be able to give birth vaginally. Some who plan VBAC will end up having a c-section again.	You may prefer to have another c-section. For some a planned c-section may be a safer option.

**What are my chances of having a VBAC?**

Most VBACs happen as planned.

It's hard to guess your chance of having a VBAC. Some things about your own health history and previous birth experience(s) may make it more or less likely that you will give birth vaginally.

**Your chances of having a VBAC are INCREASED if:**

- You have had a vaginal birth before.
- The reason for your last c-section is not a factor this time (for example, your last c-section happened because your

**Studies tell us that for every 100 VBACs planned :**

**75% will be a VBAC**

## Thinking About VBAC: Deciding What Is Right For Me

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**Journal of Midwifery & Women's Health**

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**Birth Options after Having a Cesarean**

First published: 07 November 2016 | <https://doi.org/10.1111/jmwh.12565>

**What are my options for giving birth if I have had a prior cesarean birth?**

If you have had a cesarean birth in the past, you have 3 possibilities for the birth of your next baby:

- You can go into labor and have a vaginal birth, which is called a vaginal birth after cesarean (VBAC).
- You can go into labor but need another cesarean during your labor.
- You can choose to have another cesarean, which is called an elective repeat cesarean birth.

**What are the benefits of having a VBAC?**

Overall, your risk of having complications is less if you give birth vaginally. You will likely spend less time in the hospital and recover faster with less pain. Your baby has less chance of breathing problems shortly after a vaginal birth when compared to babies born by cesarean.

**What are the risks of attempting a VBAC?**

You have a higher chance of uterine rupture (uterus opening at the old scar), which is dangerous for your baby.

- Uterine rupture is very rare. Uterine rupture happens to about 7 or 8 women in every 1000 women in labor who had a previous cesarean.
- If your uterus does rupture, there is a higher chance your baby will die. This means that in 10,000 women who had a cesarean and try to have a VBAC, 2 babies will die.

**What are the benefits of having another cesarean birth?**

You can schedule when your birth will likely happen and know what to expect from surgery.

**What are the risks of having another cesarean birth?**

Overall, your risk of complications is higher if you have a repeat cesarean.

- You are more likely to have problems with surgery (like infection, bleeding, and damage to other organs, or to have a blood clot after surgery).
- You are more likely to have problems with your placenta in future pregnancies, which can lead to severe complications like bleeding, hysterectomy, and death.
- In the United States, 13 out of 100,000 women who have a cesarean and 4 out of 100,000

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**Recommended**

[Vaginal Birth after Cesarean](#)  
Obstetric Clinical Algorithms: Management and Evidence, (1)

[Vaginal Birth after Cesarean \(VBAC\)](#)  
Obstetric Clinical Algorithms, (1)

## Birth Options After a Cesarean

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**VBAC Basics**

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**What is VBAC?**

VBAC stands for "vaginal birth after cesarean" and refers to giving birth through the vagina after a woman has already had a cesarean section (C-section). Because a C-section leaves a scar on the uterus, there are concerns about the pressure from labor causing the scar on the uterus to break (rupture).

**Is planning a VBAC or a repeat C-section safer for my baby?**

**Is planning a VBAC or a repeat C-section safer for me?**

**Is it planning a VBAC or a repeat C-section safer for me and my babies in any future pregnancies?**

**Why do I hear conflicting information about VBAC vs. repeat C-section?**

**Why might my maternity care provider recommend a repeat C-section?**

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## VBAC Basics