Vaginal Birth after Cesarean Section (VBAC)

The old saying “Once a Cesarean always a Cesarean” is **not always true**. The majority of women who have had a Cesarean, also called a C-section, can have a vaginal birth with their next pregnancy. The letters VBAC stand for “vaginal birth after cesarean.”

Why would I want a vaginal birth over a planned cesarean?

There are many benefits to the mother for a vaginal birth. These are:

- Faster recovery after birth
- Sense of accomplishment
- Breastfeeding is generally easier after a vaginal birth
- Reduces feelings of guilt that are sometimes associated with a cesarean
- Complications from surgery are prevented
- Less blood loss
- Decreased risk of infection
- Prevention of injury (bowel, urinary tract, etc.)
- Less likely to get blood clots in the legs, which can happen from any surgery
- Less anesthesia and pain medicine are needed
- Lower cost for a vaginal birth than a cesarean
- Maternal death is potentially lower with a vaginal birth than a cesarean
There are also benefits for the baby with a vaginal birth. These are:

- Less risk of early delivery
- Labor prepares the baby for life outside the womb
- Fewer breathing problems
- More opportunities for mother-baby bonding

**How do I know if I can have a vaginal birth?**

Talk with your doctor about your ability to have a vaginal birth.

- If you had a prior C-section and had a low transverse incision, you may be able to have a VBAC.
- If you previously had a cesarean because your baby was in either a breech position (feet first) or there were concerns about the baby’s health during prior labor, you may be able to have a VBAC. For other reasons for which your prior cesarean was performed, talk with your doctor about your ability to have a VBAC.
- If you are willing to prepare for a VBAC and accept the risks of a VBAC you may be able to do so.

**How do I know if I should have a repeat cesarean?**

Talk with your doctor about concerns with a VBAC.

- Some women prefer a scheduled, repeat cesarean.
- Women with a vertical uterine incision **should not** have a VBAC.
- Scheduled repeated C-section reduces the risk of uterine rupture during an attempted VBAC which can potentially harm the mother and baby.

**How can I prepare for a VBAC?**

There are things you can do to prepare for a VBAC:

- Read about vaginal births after a cesarean so that you understand your options and know the statistics associated with VBAC and repeat cesarean delivery.
• Discuss the benefits and possibility of a VBAC with your health care provider.
  › Find out why you had a prior cesarean
  › Talk about a birth plan with your health care provider
  › Talk to others about their experiences with VBAC
• Prepare physically for a VBAC. Labor is the hardest work you will ever do. Exercise regularly and eat healthy foods.
• Take prenatal classes. Learn about the birthing experience.
  › Read about birth preparation.
  › Talk with your health care provider about prenatal education.
  › Contact the hospital where you are planning to deliver to register for a VBAC class, refresher course or other preparation for your and your partner.
• Believe in yourself, your body and the process of birth.
  › Be proactive and talk about pain medicine options during birth with your health care provider.
  › Confront any negative emotions you may have from the prior cesarean birth. Some women experience guilt or disappointment. Develop positive feelings about the birthing process.
  › Reassure family and friends about the safe decisions you are making for your and your baby.

**Books and Resources for Cesarean and Vaginal Birth After Cesarean**

There are many resources available to help you with your choice and planning of a VBAC. Here is a list of some resources which are available at your local library, bookstores, or hospital education centers.

• Birth After Cesarean by Dr. Bruce Flamm
• The VBAC Companion: The Expectant Mother’s Guide to Vaginal Birth After Cesarean by Diana Korte
• [www.acog.org](http://www.acog.org) for information about VBAC (from The American College of Obstetricians and Gynecologists)