Having a VBAC
(Vaginal Birth after Cesarean Section)

This handout is designed to help our patients decide whether to attempt a vaginal birth after a cesarean section or C section, or to have a repeat C section instead.

Why should I think about having a VBAC?
Even if you have had a C section in the past, you may be able to have a VBAC in the future. The success rates of women trying VBAC range between 60 and 80% in reported studies.

The benefits of VBAC include
- Shorter recovery time
- No abdominal surgery
- Lower risk of infection
- Less blood loss and need for transfusion
- Less risk of pregnancy complications that go along with having more than one C section
- Less risk for future deliveries; multiple cesarean deliveries are associated with additional potential risks

Why would I choose to have a repeat C section instead?
- Avoid the risk of uterine rupture (separation of uterine scar), which may injure the infant or result in hysterectomy
- Avoid the chance that you will go through most of labor, and still need a C section
- Ease of having a scheduled birth

Who can have a VBAC?
Women who have had one or two C sections through a low transverse incision on the uterus (not the same as the incision on the skin) can likely have a VBAC. We will need to obtain the report of your prior C section to confirm this.

Some reasons women may not be able to try VBAC include
- If your baby is not head down
- If the placenta is covering the cervix (placenta previa)
- If you have had more than two C sections
- Prior uterine rupture
- If your former doctor advised against having a future VBAC

What are the risks of trying VBAC?
- Uterine rupture
- Emergency C section
- Risks to your health
- Risks to baby’s health
- There is more risk if C section needs to be done after an attempt at labor compared to having a planned repeat C section
How can these risks be decreased?
- Fetal monitoring, lab work (to include blood count and typing) and intravenous line (IV) while in labor
- Prevent induction, by using certain medicines known as prostaglandins
- Delivery in a hospital and with a doctor able to recognize and manage problems
- Avoid prolonged labor, and proceed to repeat C section if problems arise

What can increase my chances of having a successful VBAC?
- Labor that starts on its own
- Labor before the due date
- A history of a successful vaginal delivery in the past
- Good prenatal care, that includes a healthy diet and exercise

Lastly…..
All types of deliveries, vaginal and cesarean, are subject to risks. Keep in mind that most women and their babies have happy and healthy outcomes.

Discuss these issues, your concerns, and your obstetric history with our Ob/Gyn doctors to set a plan that you are both at ease with and agree to follow.

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Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person’s health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 1/2015. University of Wisconsin Hospital and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#6687