University Hospitals of North Midlands

NHS Trust

Appendix 1

University Hospitals of North Midlands NHS Trust Patient Information Leaflet Giving birth vaginally after a previous Caesarean section (VBAC)	Patient Details
The aim of this information leaflet is to help you to understand the risks and benefits of having a Vaginal Birth after having had a previous Caesarean Section and to answer any questions you may have.	Reduced complications by avoidance of surgery, leading to less chance of infection, thrombosis (Blood Clots) and Blood Transfusion. Babies born vaginally have a reduced risk of breathing problems compared to babies
Making a Choice There is no right or wrong choice.	born by Caesarean Section. at are the Risks of VBAC?
What is VBAC? •	There is a small risk of scar complications.
VBAC is an abbreviation of Vaginal Birth After Caesarean.	The scar from your previous Caesarean may begin to rupture during labour and an Emergency Caesarean Section would be
The term Vaginal Birth will also include having an assisted vaginal delivery, including Ventouse suction or a Forceps delivery.	required. The risk of scar/Uterine rupture is 0.5%. However, having an Induction of Labour,
60-70% of women will achieve a Vaginal Delivery following a previous Caesarean Section.	when you have had a previous Caesarean Section may increase the risk of Uterine rupture three-fold.
• What are the benefits of VBAC?	Scar rupture may increase the risk of a Hysterectomy following birth. This happens
 Women who achieve a Vaginal Birth after a previous Caesarean Section may have a 	to 3 in 10,000 women who attempt VBAC (0.03%
more nesitive hirth experience	at choices do you have?
more natural approach to Labour and Birth. but	AC is a very realistic choice for most women, some will have a valid reason for choosing a
speedy return to everyday activities.	nned Caesarean Section.

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There is a 72-76% chance of achieving a successful VBAC.

Increasing to 87-90% for women who have had previous VBAC and/or any woman who has had a previous normal delivery

You may have an invitation to attend the Midwife-Led birth options clinic if you have had a single previous Caesarean Section, where a Midwife will discuss your previous delivery and Birth choices for your current pregnancy.

Alternatively, some women will have an appointment with an Obstetrician to discuss Birth Options.

Points to Consider:

- The reason why you had a previous Caesarean Section
- How many babies are you planning to have?

Place of Delivery:

If you decide to opt for VBAC Delivery, it is advisable to have a Hospital birth on the Consultant-Led Delivery Suite with appropriate facilities if complications arise in relation to the labour and delivery.

Your care will be given by a Midwife during the Labour and Birth.

However, if you wish to explore the option of a Home Birth or delivery on the Midwife Birth Centre, you can discuss this with the Obstetrician and Midwife.

Monitoring:

For women agreeable to VBAC, it is advisable that the Baby's Heart Rate is monitored continuously throughout labour.

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If you wish to be mobile in labour, or to use hydrotherapy during the first stage of labour, we have access to Telemetry (Mobile Continuous Monitoring

Communication:

You will be asked to confirm that you understand the purpose and outcome of the consultation and a management plan will be documented in your Hand Held Pregnancy Notes regarding your birth choices, including a care plan in case you do not labour spontaneously.

Interpreters will be used, as per Trust Policy, for all women for whom English is not their first language. Please let staff know if you need an interpreter.

Further Information:

If you have any questions or concerns regarding your pregnancy, or for any further information, please contact your G.P. or Community Midwife.

The <u>Patient Advice and Liaison Service (PALS)</u> offer a confidential advice and support service if you have any concerns.

PALS can be contacted on: 01782 676450 or email: patient.advice@uhnm.nhs.uk