



Mercy Health  
Care first

# Vaginal birth after caesarean section (VBAC)

If you have had a caesarean birth, you may be thinking about how to give birth next time.

## What is a VBAC?

Most women who have had a caesarean birth are able to safely try a vaginal birth with their next pregnancy. This is called vaginal birth after caesarean or VBAC.

It is important to discuss your birth options with your maternity care providers so that you can make an informed choice.

Some of the things they may want to know are:

- the reason for your previous caesarean section
- the type of cut that was made in your uterus (womb)
- how long ago you had your caesarean section
- how you felt about your previous birth experience and what your wishes are for this birth
- complications in your current pregnancy.

Bring any documentation that relates to your previous birth to your appointment.

## What makes for a successful VBAC?

Approximately 7 out of 10 women who attempt VBAC will have a vaginal birth and 3 in 10 will have a caesarean section in labour

You are more likely to be successful with a VBAC if you:

- have had a vaginal birth in the past.
- go into labour yourself – your labour is not induced
- are not very overweight.

## What are the risks associated with a VBAC?

The scar on the uterus opening during labour is the most common risk. This is called uterine rupture. This occurs in about 1 in every 200 women. If this happens, the risks to you could be serious bleeding or hysterectomy. If the scar comes open, about 1 in 7 babies will be harmed, and 6 in 7 will not be harmed. The risks to your baby are admission to the special care nursery, disability and death. Your care provider will discuss the risks with you.

Risk	VBAC	Elective caesarean section
Uterine rupture	5 in 1000 women	Less than 2 in 10,000 women
Blood transfusion	20 in 1000 women	10 in 1000 women
Maternal death	4 in 100,000 women	13 in 100,000 women
Stillbirth after 39 weeks	1 in 1000 women	

### The benefits of VBAC

- Generally, a faster recovery from birth and shorter hospital stay.
- Earlier return to normal activities such as lifting and driving.
- Less likely to develop a blood clot in the legs or the lungs.
- If considering a large family, VBAC may avoid some of the risks associated with multiple caesarean sections such as hysterectomy, bowel or bladder injury and blood transfusion.

### When can I consider a VBAC?

- When your baby's head is down
- Your last caesarean section was a "lower segment" caesarean section, this is the most common type of caesarean section
- You have not had a previous uterine rupture or some other types of uterine surgery

These and other considerations can be discussed with your health care provider.

### What if I have had more than one caesarean section?

If you are considering a vaginal birth but have had more than one caesarean section, you should discuss your situation with a senior obstetrician about the potential risks, benefits and success rate in your individual situation.

### What will my care in labour be if I plan for a VBAC?

If you choose a VBAC, we recommend your care during labour should include:

- continuous electronic fetal monitoring (CTG monitoring) to detect uterine rupture
- insertion of an intravenous cannula in your arm

You have the right to be involved in the decision-making about how your baby will be born.

Your situation may change during the pregnancy, so please discuss your preferences about how you wish to birth your baby with your midwife or doctor throughout your pregnancy.



### For more information

If you have any questions regarding this information  
please contact Maternity services

**Mercy Hospital for Women**

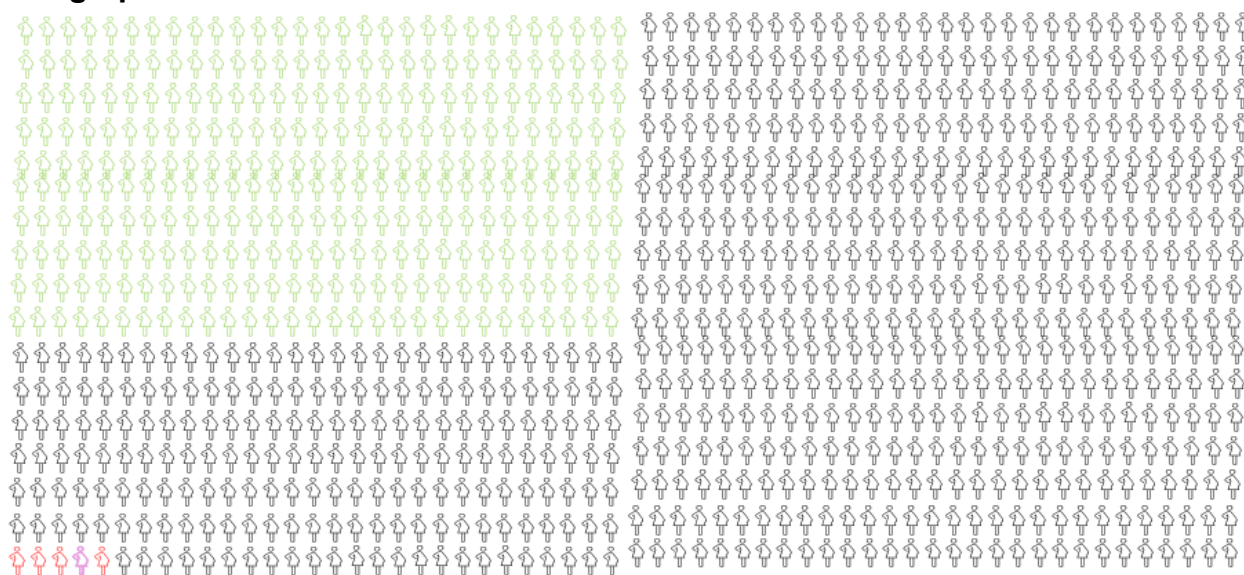
Ph: (03) 8458 4151

**Werribee Mercy Hospital**

Ph (03) 8754 3390

In the event of an emergency, please dial **000** for an ambulance or go to your nearest  
Mercy Health or other hospital emergency department.

## Info-graphic of risks associated with VBAC:



= uterine rupture



= baby harm



= caesarean section in labour



= vaginal delivery