Rate of C-sections has stopped rising

By ACSH Staff — June 27, 2013

A Caesarian delivery (C-section) is considered a major surgery and comes with risks of infection for the mother, a longer recovery period than a vaginal birth, and risks for the newborn including breathing difficulties. The risk of neonatal complications is increased further the earlier the delivery is performed in pregnancy. Full-term is considered to be 39 weeks of gestation or later. So the fact that a new government report [2] found that the rate of C-sections has stopped rising and more of those C-sections are taking place closer to the due date, is good news.

In 1970, C-sections accounted for only five percent of births in the United States. In 2009, that number rose to about one-third of all births, largely due to the convenience of scheduling a delivery, according to experts. And although that rate has remained at about 31 percent, it has not risen since 2009. The goal now is to get this number to around 15 percent.

ACSH’s Dr. Gilbert Ross sees this as good news: The message that choosing to deliver even two weeks early exposes mother and newborn to unnecessary risks should continue to go out to doctors and parents-to-be, in an effort to drive this rate down. And, it should also be emphasized that C-sections done just for the convenience of doctors or parents should never be done. Indeed, nowadays parents are so concerned about minuscule and nonsensical pseudo-risks like vaccines and trace amounts of toxic chemicals, yet ignore actual significant risks like needless early delivery. This has got to change.