

Maternal and Newborn Outcome among Women Undergoing Elective versus Emergency Caesarean Section: A Comparative Study

Abstract

Caesarean section preferred as an emergency or elective procedure are entirely different entities according to the measures taken, facilities and skilled staff available, and preparation done. Complications are greater in emergencies compared with elective caesarean section. The aim of the present study was to compare maternal and neonatal outcomes among mothers undergoing elective versus emergency caesarean section. A prospective design was carried out for this study, and a representative sample of 300 parturient mothers (150 with elective CS and 150 with emergency CS) at the delivery unit in Mansoura University was recruited for this study. The tools used for data collection were; an interview questionnaire sheet, a clinical assessment form, the partograph, a summary of labor sheet, and a neonatal assessment sheet. Results: mothers who had emergency cesarean section were significantly in the young age category, i.e., below 25 years old, illiterate or could read and write, and were housewives. Previous cesarean section was the most common indication among mothers undergoing elective CS, and the least common indication was diabetes mellitus. While fetal distress was the most common indication for emergency CS, the least common indication was cord presentation. There are no statistically significant differences in maternal intra-operative and postoperative complications of CS between the two groups. Apgar scores at the first and fifth minutes were lower, with the lowest mean birth weight among neonates of mothers with emergency CS than those in the elective CS group, with a statistically significant difference. Meanwhile, asphyxia was the major cause of fetal morbidity at birth. It can be concluded that, previous cesarean section was the most common indication among mothers undergoing elective CS. While fetal distress was the most common indication for emergency CS. There are no statistically significant differences in maternal intra-operative and postoperative complications of CS between the two groups. The study recommended reducing the higher incidence of emergency cesarean section because emergency cesarean section is associated with intra-operative and postoperative complications by improving the quality and availability of antenatal care services.

Key word: Maternal and neonatal outcome, Elective cesarean section, Emergency cesarean section
