

Successful Vaginal Birth Subsequent to Cesarean Section

Abstract

Abstract: Successful vaginal birth after cesarean section is more comfortable than repeat elective cesarean section. Trial of labor should take into consideration the patient's preference, together with the proper setting. **Aim:** identify factors affecting the successful vaginal birth subsequent to cesarean section in order to develop a predictive score for successful trial. **Subject & Methods:** a prospective study design at the delivery unit in delivery unit in Mansoura University, Egypt, Egypt. 200 parturient women who were selected purposively with previous one lower segment cesarean section. A structured interviewing schedule, maternal and neonatal assessment sheet, partograph, labor record; were used for data collection. **Results:** revealed that vaginal birth after cesarean section was successful in 76.5% of women and the rest 23.5% had failure in vaginal birth after cesarean section and underwent emergency repeated cesarean section. Positive factors which increase the likelihood of successful vaginal birth after cesarean were; younger women age, gestational age, parity, duration between the previous cesarean section and the present pregnancy, history of prior vaginal birth before the previous CS, and bishop score as well as neonatal weight. **Conclusion:** maternal age > 25 years, gestational age > 40 weeks, parity more than three, duration between the previous cesarean section and the present pregnancy < 18 months , recurrent indication of CS and abnormal fetal condition, delay in labor progress as well as fetal weight $> 4,000\text{kg}$. Furthermore, more problems during the fourth stage of labor were mostly exposed to ERCS. **Recommendations:** Vaginal birth subsequent to cesarean section trial of labor should be conducted in hospitals, with adequate facilities for immediate delivery and resuscitation of the newborn as well as high quality care and proper counseling from the nurse midwife. Furthermore, factors associated with failure in the successful VBAC as well as women with prior cesarean deliveries require special management, both antenatal, in labor and delivery.

Keywords: vaginal birth, Cesarean section