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BABY'S WELLNESS AT TIME OF BIRTH MAYBE REDUCED BY ELECTIVE CESAREAN

The overall wellness of a baby as it relates to respiratory and breathing problems can be lessened considerably with an elective cesarean birth that does not reach full term. In fact, the chances of this condition occurring can be as high as 4 times greater for elective cesarean birth than for a child delivered vaginally or by emergency cesarean section.

An examination of breathing problems in newborn children was recently investigated at the Aarhus University Hospital in Denmark. Over 34,000 babies who had between 37 and 41 weeks of gestation were included in the analysis. All of the deliveries were divided into one of two groups – elective cesarean sections and intended vaginal delivery. The "intended" category included emergency cesarean section birth. Of the total, 2,687 of the children were born through elective cesarean section.

Basically, the researchers wanted to discover if there indeed was a difference in breathing problems with children who entered the world in one of these manners. They were especially interested in determining if there was a difference in breathing difficulties for children with differing amounts of gestation.

What the researchers discovered was that there was quite a stunning difference among those born electively with only one week difference in gestation. The results they found were that the risk increased dramatically the earlier the cesarean was performed. At 37 weeks of gestation, it was found that there was almost a fourfold increase in risk of breathing problems. If the child was allowed to stay in the womb for 38 weeks, the risk dropped to threefold. At 39 weeks, there was a doubling of risk of respiratory difficulties.

Specifically, at 37 weeks, 2.8% of the vaginally intended births had breathing issues compared to 10% of the infants delivered by elective cesarean section. At 38 weeks, it was 1.7% for vaginal compared to 5.1% elective. At 39 weeks, it was 1.1% compared to 2.1%.

The exact reasons why children suffer more breathing problems with early elective surgery were beyond the scope of the study and not clearly identified. Researchers did speculate that hormonal and physiological changes that are associated with full term labor may be necessary for the lungs to fully mature. It is considered to be possible that these changes are not present in infants who have been scheduled for an early elective cesarean section delivery.

With more and more elective cesarean sections being performed these days, parents would be well advised to make good use of these statistics in their child birthing decision-making process. The timing factor involved in scheduling the elective cesarean section could become a critical factor in the wellness of the baby. The authors of the study made it very clear that, "Babies delivered by elective cesarean section at 37 to 39 weeks of gestation carry a two to fourfold increased risk of respiratory morbidity compared with babies delivered by intended vaginal delivery."

Source: The World Chiropractic Alliance. "Elective Cesarean Carry Increased Risk of Breathing Problems." March 2008.
http://www.worldchiropracticalliance.org/tcj/2008/mar/q.htm