

Too posh to push? The increasing trend for cesarean section

17 May 2011

During the last thirty years there has been an increase in the number of babies born by Caesarean section. New research published in BioMed Central's open access journal *BMC Public Health* shows that there has also been a change in the social and economic status of the mothers involved and that advantaged mothers are more likely to have their babies by Caesarean section than mothers living in more difficult circumstances.

Birth by Caesarean section can be a lifesaver for both mum and baby, however there are risks involved in such a major [abdominal surgery](#) and increased costs due to extended hospital stays for both mother and child. Researchers from the Medical Research Council/Chief Scientist Office Social and Public Health Sciences Unit (MRC/CSO SPHSU) looked at the mother's social class, and the level of deprivation of the area each mother lived in. This data was compared to patient records describing hospital births and patient records covering details about the pregnancy and delivery. Social class was obtained from the parent's occupation listed on the child's birth certificates and level of deprivation was calculated for each mother's postcode from the relevant census.

Ruth Dundas from the MRC/CSO SPHSU, said, "Thirty years ago [mothers](#) having Caesarean sections were more likely to come from deprived areas and/or from a lower social background. This was true for both elective and emergency sections. Ten years later the rates had changed so that, although women from a lower social background were more likely to have emergency sections, there was no difference between them and women from a higher [social background](#) in elective surgery rates. By 1999-2000 the rates had equalized for emergency section, but babies born by [elective surgery](#) were more likely to belong to mothers from the higher of the social classes measured."

She continued, "The disappearance of social trends for emergency [Caesarean section](#) reflects

increased equality in health care. However this does not explain the differences seen for elective section nor the differences seen between health boards. It is important to ensure that the clinical decision making process is the same for all women, regardless of their background, so that they all have equal chance of the best medical care."

More information: The influence of both individual and area based socioeconomic status on temporal trends in Caesarean sections in Scotland 1980-2000 Lesley Fairley, Ruth Dundas and Alastair H Leyland *BMC Public Health* (in press)

Provided by BioMed Central

APA citation: Too posh to push? The increasing trend for cesarean section (2011, May 17) retrieved 9 October 2022 from <https://medicalxpress.com/news/2011-05-posh-trend-cesarean-section.html>

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