

Research and Information Service Briefing Note

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Incidence of Caesarean Sections

1 Introduction

This briefing note provides information in relation to the rate of Caesarean sections in Northern Ireland. A Caesarean Section, or a C-section, is the surgical method of childbirth and was introduced as a lifesaving procedure for mother and baby.

- In Northern Ireland, the decision to deliver a baby by C-section either electively
 (i.e. the operation was planned for in advance) or as an emergency, is based on
 the clinical judgement of an obstetrician who takes account of the medical
 condition and circumstances of both mother and infant.
- In cases where there are known risks for labour and delivery, C-sections are usually pre-scheduled, but most of the time a C-section only happens when complications arise during labour and it becomes too risky to continue with a vaginal birth. C-Sections can occur for a wide variety of reasons: for example, if the baby is in a breech position or in distress, complications with the placenta, or medical conditions in the mother, such as diabetes or high blood pressure.
- A greater number of C-Sections are also being carried out on obese women.¹
 Other literature suggests a number of women requesting C-Sections for fear of natural labour.²

¹ BBC News, 16 March 2011 More than 60% of pregnant mums obese or overweight

In Northern Ireland, the total number of elective and emergency caesarean sections has been rising over the last 5 years. As can be seen in Figure 1 in 2004/5, this figure was 6,290, and rose to approximately **7,797** in 2008/9.

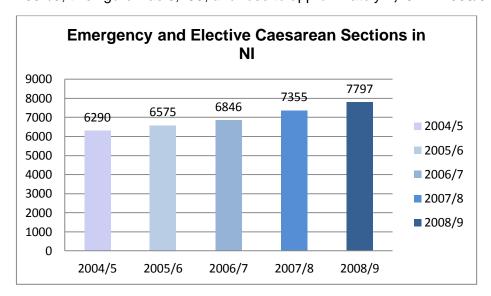
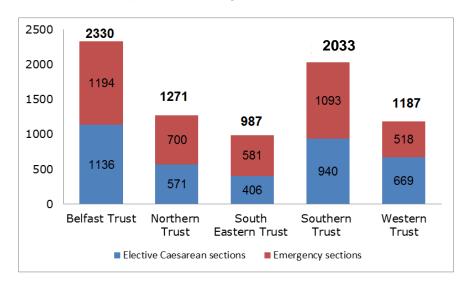


Fig. 1 Growing incidence of Caesarean sections in Northern Ireland 2004/5-2008/9³

 In 2007/8, the average number of caesarean sections across NI was 28% (over one quarter) of all births. This is slightly higher than the rest of the UK, but broadly comparable (around 23-25%). The World Health Organisation recommends the level of caesareans should be around 15%, which is well below the rate in NI. The number of elective and emergency Caesarean sections by local Trust area for 2008/9 is presented in Figure 2 below.⁴



² McCourt, C. et al (2007) Elective Cesarean Section and Decision Making: A Critical Review of the Literature. Birth, Volume 34, Issue 1, pages 65-79, March 2007

³ Source: Child Health System.

⁴ Response to Assembly Question AQW 2314/10 - to ask the Minister to detail the number, and percentage, of both planned and emergency caesarean births broken down by Health and Social Care Trust area.

Fig. 2 Elective and Emergency Caesarean sections in Northern Ireland by Trust area 2008/9

- As can be seen in Figure 2, rates of C-sections vary amongst Health Trusts. In 2008/9, the Belfast Trust, servicing the largest part of the population in Northern Ireland, carried out the highest number of both elective and emergency caesarean sections (2,330 in total). The lowest number of C-sections was carried out by the South Eastern Trust (987 in total).
- The Department (DHSSPS) has taken a number of steps to ensure C-sections are carried out appropriately. For example, in 2008 the DHSSPS endorsed National Institute for Clinical Excellence (NICE) guidance in relation to both Antenatal and Intrapartum care.⁵
- According to an article in the Belfast Telegraph, a C-Section costs £800 more than a natural birth.⁶ This has implications on the stretched resources facing the current healthcare system. NICE also suggests that an increasing number of women are requesting C-sections despite there being no medical reasons for doing so in many cases.
- Elsewhere, the incidence of C-Sections ranges from around 15% in Eastern Europe, to higher levels of 30% in the USA, 34% in Portugal and 38% in Italy.⁷

⁵ NICE Website: both documents are available online at: http://www.nice.org.uk/nicemedia/pdf/CG062NICEguideline.pdf and http://www.nice.org.uk/nicemedia/pdf/IPCNICEGuidance.pdf Website accessed 27.6.11

Belfast Telegraph, May 24, 2011 Bid to reduce rising Caesarian demand
 World Health Report (2010) World Health Organisation. Available online at:

http://www.who.int/healthsystems/topics/financing/ healthreport/30C-sectioncosts.pdf pp16-18 Website accessed 27.6.11