

Catastrophic Rate of Caesarean Section in Iranian Midwives

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Opinion

In the last century, Caesarean section has played an important role in reducing maternal and fetal mortality. But a worrying issue in modern midwifery is the high rate of cesarean section. According to the World Health Organization, the expected cesarean rate in different countries of the world should be 10 to 15% of births. But unfortunately, the statistics published in most parts of the world, especially in Iran, differ from this ratio and are much higher. In recent decades, it seems that there is a general tendency for cesarean section among both health care givers and providers.

Among midwifery personnel and students there are also those who believe that cesarean is the most appropriate method of delivery, while others believe that cesarean section is a very large operation with many complications. It is obvious that awareness of the health care givers' performance toward choosing a delivery method for their own pregnancies is important for health policies related to decrease cesarean section rate. Because the performance of the medical staff, especially midwives, in choosing the type of delivery can directly affect the performance of pregnant mothers.

The results of our recent study showed that 22.5% of the midwives of an educational hospital in Ahwaz, Iran had normal vaginal delivery in all their own pregnancies. 66.3% of the midwives

mentioned the history of cesarean section and 11.2% of them had experienced the cesarean section after normal vaginal delivery. 33.8% of the cesareans were elective. 74.1% of those who were selected the cesarean section stated that if they return to the past, they will repeat that again. 24.4% of the participants suggested that cesarean section is more appropriate than normal vaginal delivery to terminate uncomplicated pregnancies for mothers who will eventually have two to three pregnancies in their lifetime.

According to these results it seems that despite the fact that midwives learn more about the complications of cesarean section, they tend to be more willing to do this for termination of their own pregnancies. The reason for this may be due to the experience of working in maternities and seeing the suffering of labor pain in clients. One of the other possible reasons may be this fact that the elective caesarean section is a clean operation and an effortless method of birth.

Considerable findings of our study are a serious warning about the high rate of cesarean section among midwifery personnel in Iranian medical community. Trying to root these results is very necessary, because the midwives have a strong role in guiding pregnant women for decision making about mode of delivery.