

# Trial of Labor After Having a Cesarean Delivery

## *Risks, benefits, and other options*

*This handout explains the risks and benefits of trying to have a child by labor after having had another child by cesarean delivery.*

### What is a trial of labor?

A *trial of labor* is trying to have a vaginal birth after having given birth by cesarean delivery. As you prepare to have your new baby, you may choose:

- To deliver your new baby by cesarean, or
- A trial of labor to try to have a vaginal delivery

### What are the risks?

Both vaginal and cesarean deliveries involve risks. These risks include bleeding, infection, injury during delivery, blood clots, and, rarely, death. Your risk of these complications can be higher if you try a vaginal delivery and then need to have a cesarean delivery.

The greatest risk to your health and your baby's health is from a possible *uterine rupture* (spontaneous opening of the scar from your earlier cesarean). Uterine rupture occurs in:

- Less than 1% of mothers who have already had 1 cesarean delivery (less than 1 mother out of 100)
- About 1 to 2% of mothers who have already had 2 cesarean deliveries (1 to 2 mothers out of 100)

If you have already had 2 cesarean deliveries, we will **not** offer you *oxytocin* to help your labor. The hormone oxytocin is often used to induce labor, but it can also increase the risk of having a uterine rupture.



*Talk with your pregnancy care provider if you have any questions or concerns about having a trial of labor.*

## What are the benefits?

The potential benefits of a successful vaginal delivery include:

- Avoiding surgery
- Lower risk of hemorrhage and infection
- Shorter recovery time
- Lowering the risks of having more than 1 cesarean delivery

## Other Important Information

- There is a tool that your doctor may use to calculate how likely it is that you will have a successful vaginal delivery after having had a cesarean delivery. You can see this tool on the Internet at:  
  
<https://mfmu.bsc.gwu.edu/PublicBSC/MFMU/VGBirthCalc/vagbirth.html>
- As your pregnancy progresses, we will watch your condition. We may learn things that may change both your risks and chances of having success with a trial of labor. We will check where the placenta is located, the position of the fetus at term, the gestational age at labor, and the results of your cervical exam when you are in labor.
- If you are in labor when you are admitted to the hospital, we will start an IV. Your doctor may also recommend other interventions during labor such as an *intrauterine pressure catheter* (a monitor inside your uterus that keeps track of how strong your contractions are) or an epidural.
- If you do not go into labor, please know that *augmented labor* (using medicines or other methods to speed up labor) is less likely to result in a successful vaginal delivery for mothers who have already had a cesarean delivery. It may also increase the risk of uterine rupture.
- You may also want to read the handout “Vaginal Birth After Cesarean Delivery: Deciding on a Trial of Labor After Cesarean Delivery,” from the American College of Obstetricians and Gynecologists. Please ask your provider for a copy of this handout.

### Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns.

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