CESAREAN DELIVERY

Cesarean delivery represents a potentially life-saving procedure for both mother and infant in cases of labor complications and health conditions that require early or immediate delivery. However, in the absence of medical indications, cesarean sections can pose avoidable risks, including longer maternal recovery, neonatal respiratory problems, and potentially severe complications in subsequent pregnancies. After increasing every year from 1996 to 2009, the U.S. cesarean delivery rate declined slightly between 2009 and 2010 from 32.9 percent to 32.8 percent and remained unchanged through preliminary data for 2012. Though no longer increasing, the current rate of about one in three births far exceeds the upper limit of 15 percent advised by the World Health Organization.

Healthy People 2020 has set national objectives to reduce the cesarean delivery rate by ten percent among low-risk women giving birth for the first time and among low-risk women with a prior cesarean section. Low-risk is defined as non-breech, singleton deliveries at 37 weeks or more gestation. In 2011, among the 36 states and District of Columbia that had implemented the 2003 revision to the standard birth certificate as of January 1st, 26.2 percent of low-risk women giving birth for the first time and 89.5 percent of low-risk women with a prior cesarean section delivered by cesarean. Cesarean delivery among low-risk, first births increased greatly with maternal age from 18.7 percent of women less than 20 years of age to 51.6 percent of women aged 40 and older. This pattern may partly reflect age-related increases in medical indications for cesarean delivery. However, the repeat cesarean rate among low-risk women was about 90 percent, regardless of maternal age.

Recently, cesarean delivery rates among low-risk pregnancies were found to vary fifteen-fold across U.S. hospitals from 2.4 percent to 36.5 percent, highlighting the importance of quality improvement and standardization in maternity care. To reduce cesarean delivery rates, there have been calls to expand public and provider education, to tie payments to quality improvement, and to publicly report hospital-level data.

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**Cesarean Delivery Rate, 1990-2012**

Source (I.1,I.2): Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

![Cesarean Delivery Rate Graph](image)

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**Primary and Repeat Cesarean Delivery Rates Among Low-Risk Women,* by Age, 2011**

Source (I.14): Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

![Cesarean Delivery Rates Graph](image)

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*Low risk is defined as non-breech, singleton deliveries at 37 weeks or more gestation; Data are from 36 states and the District of Columbia that implemented the 2003 revision of the birth certificate as of January 1, 2011, representing 83% of all US births.

*Data for 2012 are preliminary.