

OPTIMAL HEALTH UNIVERSITY™

Presented by Dr. Joseph Baker

Questioning Elective Cesarean Sections

An increasing number of mothers are choosing elective cesarean sections (C-sections) for reasons of convenience, rather than medical necessity. Scheduling the date and time of delivery has become the latest fad.

Doctors of chiropractic, such as Dr. Baker, have long been wary of the rising popularity of elective cesarean section. Dr. Baker urges expectant mothers to think twice before opting for a C-section without medical need. New research confirms that surgical C-sections shouldn't be treated casually.

For instance, C-sections may boost an infant's odds of disease. Researchers speculate that babies born via cesarean aren't exposed to certain bacteria, which are present in the birth canal. Exposure to these bacteria may be key to building a solid immune system (*J Allergy Clin Immunol* 2003;112:420).

Incidence on the Rise

Just how alarming is the rise in voluntary cesarean delivery? Incidence may be at an all-time high.

One analysis, which assessed 4 million births, found that 5.5 percent of low-risk mothers elected cesarean deliveries in 2001, up from 3.3 percent just 10 years earlier in 1991. The rate of elective C-section was highest among older mothers, with 19.5 percent of women over age 34 choosing cesareans for no medical reason (*BMJ*



2004;239:1240).

The Effects of Cesarean Deliveries

C-sections can have serious consequences for baby and mother. Below are some examples of the latest research on the subject.

Vertebral Subluxations

Researchers theorize that C-section deliveries may increase a baby's risks of a condition called **vertebral subluxations**. This increase could stem from the way doctors need to manipulate the baby's head and neck during delivery. Vertebral subluxations are areas of the spine where bones are slightly out of place or motion is restricted. These dysfunctional segments are linked to a host of maladies, ranging from headaches and backaches to infantile colic. Fortunately, doctors of chiropractic, like Dr. Baker, remove vertebral subluxations with highly specialized maneuvers called **chiropractic adjustments**.

Future Stillbirths

Research shows that cesarean section may double the risk of stillbirth in subsequent pregnancy, according to scientists at Cambridge University.

In the 13-year study, researchers examined mortality rates of 120,633 second births. While 4 percent of women with previous C-section endured a stillbirth, only 2 percent of those who delivered vaginally suffered a subsequent stillbirth (*Lancet* 2003;362:1779-84).

Respiratory Problems



Elective C-section may cause newborn respiratory problems, according to new research.

The study, which was performed at Tel Aviv University in Israel, included 277 women who elected cesarean deliveries and a control group of 311 women who had vaginal births. Both groups of women delivered at term, or at least 38 weeks.

Five newborns in the C-section study group were admitted to the neonatal intensive care unit due to respiratory disorders. In contrast, none of the infants in the control group had respiratory problems.

The researchers determined that besides C-section delivery, "no other factors were found to independently influence the risk of respiratory complications." (*J Matern Fetal Neonatal Med* 2006;19:75-8.)

Asthma

Infants who enter the world via cesarean section or forceps-assisted delivery are at a higher risk of developing asthma, compared with youngsters who are delivered without intervention, according to investigators.

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Researchers tracked 8,088 children in Finland from birth to age 7. Babies whose deliveries involved cesarean section or forceps were significantly more likely to have asthma or another allergic disorder, compared with other children (*J Asthma* 2000;37:589-94).

Food Allergies

Children of allergic mothers delivered via C-section are seven times more likely to suffer allergies to eggs, fish or nuts, compared with children of allergic mothers who were not delivered via cesarean.

On the other hand, no significant association is evident between delivery method and risk of food allergies among children of allergy-free mothers.

These findings were derived from an assessment of 2,803 children (*J Allergy Clin Immunol* 2003;112:420-6).

Slower Recovery Time

Having a baby requires significant time to recoup energy, which presents a particular challenge to career moms who plan to resume work shortly after delivering. The good news is that vaginal births usually require significantly less recovery time.

Five weeks following delivery, 716 women completed interviews discussing postpartum symptoms. Mothers who had cesareans suffered significantly worse physical function and health than those with vaginal births. C-section moms were also more apt to suffer physical limitations, lack energy and require ongoing rest and recovery.

The researchers determined that these findings indicate a need for "reassessment by the medical community of the progressively growing practice of cesarean deliveries." (*Ann Fam Med* 2006;4:159-67.)

Side Effects of Pain Medication

Mothers who give birth via C-section often require pain medication.

Regular doses of painkillers may present a range of side effects, ranging from gastrointestinal issues to rebound headaches. There may also be issues for breastfeeding.

Lower Your Chances of C-Section

Now that you know some of the consequences of C-section delivery, are there steps you can take to decrease your chances of needing one? Read on to find out.

Watch Weight

Obviously, gaining weight during pregnancy is necessary. But keeping tabs on weight may reduce the likelihood of having a cesarean section.

Findings from an inquiry of 12,303 births reveal that obese women are almost twice as likely to endure a cesarean delivery compared with their normal-weight counterparts.

Specifically, the normal-weight women in the study had an 8 percent rate of C-section, compared with 14 percent among obese women. Overweight women had a 10 percent risk of cesarean delivery. And, an alarming 25 percent of women with insulin-treated diabetes received C-sections (*Am J Obstetrics Gynecol* 2004;191:969-74).

Question Medication-Induced Labor

One theory suggests that inducing labor when the baby isn't ready to be born ups the risk of C-section. The baby is induced, but nothing much happens. However, since the water was broken and the baby began descending, eventually he or she may be at risk. At this point, a C-section is ordered.

Researchers analyzed data from one hospital regarding 796 elective inductions and 1,885 spontaneous labors.

The rate of cesarean deliveries was significantly higher in the induction group at 3.9 percent than the spontaneous labor group at 2.3 percent (*Obstet Gynecol* 2006;107:1029-34).

Consider Chiropractic for Breech Babies

Resolving mom's vertebral subluxations with chiropractic care in the last trimester of pregnancy may decrease risk for C-section due to breeched babies, according to research.

A chiropractic procedure called the Webster Technique involves correcting misalignments in mom's pelvic and low-back area. The Webster Technique doesn't involve moving the baby. Rather, it helps relax mom's ligaments and muscles, which support the uterus. It encourages optimal uterus positioning and, ultimately, a more favorable fetal position.

In a member survey of the International Chiropractic Pediatric Association (ICPA), 92 percent out of 112 respondents reported resolution of the breech presentation after the Webster Technique, while 9 percent remained unresolved.

"In view of these findings, the Webster Technique deserves serious consideration in the health care management of expectant mothers exhibiting adverse fetal presentation," conclude the study's authors (*J Manipulative Physiol Ther* 2002;25:E1-9).

Make an Informed Decision

If you're currently considering an elective C-section, we encourage you to weigh all the pros and cons and make an informed decision. We're your partners in health and wellness, and we're dedicated to helping you have a safe delivery and healthy child.



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