

C-section Deliveries by Weeks of Gestation

2000 Bexar County C Section Live Births

Weeks	Births	Percentage
22 or less	3	0.0%
23 to 33	250	1.0%
34 to 36	434	1.8%
37 to 39	1635	6.8%
40 or more	1173	4.9%
Total C sections	3495	14.6%
Total Births	23877	

2007 Bexar County C Section Live Births

Weeks	Births	Percentage
22 or less	14	0.1%
23 to 33	500	1.8%
34 to 36	1152	4.2%
37 to 39	6205	22.8%
40 or more	1514	5.6%
Total C sections	9385	34.6%
Total Births	27156	

	C Section in 2007	Incidence	C Section in 2000	Incidence	Total Cohort	Relative Risk
Total Births	27,156		23877		51,033	
22 or less	14	0%	3	0%	17	4.103
23 to 33	500	2%	250	1%	750	1.759
34 to 36	1,152	4%	434	2%	1,586	2.334
37 to 39	6,205	23%	1,635	7%	7,840	3.337
40 or more	1,514	6%	1,173	5%	2,687	1.135
Total C sections	9385	35%	3495	15%	12,880	2.361

According to preliminary birth data from the National Center for Health Statistics (NCHS), c-section rates in the United States reached a high of 31.1% of all births in 2006. That is a 50% increase over the past decade. Bexar County's c-section rate is 35% of all live births for 2007. Birth data for Bexar County from 2000 to 2007 showed an increase of nearly 240% in c-section deliveries in just seven years. Late preterm births (34 to 36 wks estimated gestational age) increased by 230%. The highest increase was in 37 to 39 weeks of gestation increased 330%.

The March of Dimes, the U.S. Centers for Disease Control and Prevention, and the Albert Einstein College of Medicine conducted an analysis of premature birth rates. This effort found that 92% of the increase in singleton premature births is due to c-sections. Late preterm babies, born between 34 and 36 weeks, accounted for the majority of this increase. The study is published in the June 2008 issue of Clinics in Perinatology.

The March of Dimes reports that babies born during this critical period of development, between 34 and 36 weeks gestation, have greater risks of breathing problems, feeding difficulties, temperature instability, jaundice, delayed brain development and death than babies born at term. As many as three-quarters of babies born at 34 weeks end up in the neonatal intensive care unit to receive specialized care. In addition, babies born between 34 and 36 weeks are six times more likely to die in the first week, and three times more likely to die in the first year than their term peers.*

According to the American College of Obstetricians and Gynecologists, no one should be induced to deliver her baby before 39 weeks unless there is a medical necessity. Contrast this recommendation with the statistics illustrated above. A clear increase in preterm deliveries occurred. About 33% of mothers were obese before becoming pregnant, a risk factor for a c-section.

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*MacDorman, M., Menacker, F., Declarcq, E., et al., Cesarean Delivery: Its Impact on the Mother and Newborn. Clinics in Perinatology 2008; 35(2), 293-468.