

Normal Vaginal Delivery Versus Caesarean Section: A Comparative Study in Al-Nasiriya city, South of Iraq

Firas Fadhil Alyaseen^{*}, Suad Rodan Shwielf²

^{1,2}College of Pharmacy, University of Thi-Qar, Thi-qar-Iraq

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ABSTRACT

The term pregnancy, which is also known as gestation or gravidity, refers to the duration in which an embryo carries and develops within the woman's body, and precisely, in her womb (uterus). However, it is called multiple pregnancies when more than one fetus involves. Pregnancy can be existed either by sexual connection or with the help of reproductive technology. Ordinarily, it endures around 40 weeks, or over 9 months, as determined from the last monthly period till delivery. On the other hand, the embryo can be defined as an evolving offspring over the first eight weeks post-conception; after that, it can be called a fetus till childbirth. The popular signs and symptoms of pregnancy might involve each of the missed period, inflated breasts, nausea with or without vomiting, repeated urination, and tiredness. A pregnancy test can be utilized for confirmation. The current study aimed to discuss the maternal medical outcomes after both: Caesarean section and natural vaginal childbirth. Results have shown that when the cases with cesarean and the normal delivery was compared in term of the adverse effects and the complications we find that there are no significant differences in term of normal blood loss while when the bleeding during and after delivery was investigated, we found the rate of it was significantly more in cesarean than in normal delivery, also fever was significantly higher in females who delivered in cesarean than who delivered with normal vaginal delivery. In conclusion, the incidence rate of cesarean section deliveries was increased compared to normal vaginal deliveries, so the complications and adverse effects that may be associated with the cesarean section need to be investigated and compared to what happens with normal vaginal delivery.

Keywords: Cesarean section, Normal vaginal delivery, Pregnancy

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INTRODUCTION

The supervisors of health care have mentioned to three sections of pregnancy are known as trimesters. The main events, for every trimester, can be described as a following:

The first trimester starts from the first week of pregnancy to the 12th week and comprises conception—the conception onsets when the sperm penetrates the egg. Then, the zygote, which is a fertilized egg, moves during the fallopian tube and instills itself in the uterine wall. The zygote is comprised of a bloc of cells that later compose each of; fetus and placenta.¹ During the first trimester, the level of miscarriage risk, the death of an embryo or fetus, can be high.

The second trimester of pregnancy starts from week 13 to 28, and the activity of the fetus can be felt in the middle of this trimester. However, with high-level medical care, the percentage of babies, who can survive out of the womb, is more than 90%. The third trimester of pregnancy starts from week 29 to week 40.¹⁻⁶

To upgrade the level of pregnancy results, prenatal care has to be improved. Thus, procedures such as continuous physical checkups, Keep exercising, blood Checks, taking more folic acid, and abandoning the drugs or alcohol totally, must be organized.⁷ To upgrade the level of pregnancy results, prenatal care has to be improved. Thus, procedures such as continuous physical checkups, Keep exercising, blood Checks, taking more folic acid, and abandoning drugs or alcohol totally must be organized.⁷ In contrast, many complications might be occurred during the pregnancy, such as anemia (iron-shortage), nausea and vomiting, high blood pressure of pregnancy, and gestational diabetes.⁸ Duration of pregnancy is (37 to 41 weeks), but it can be an early term (37 to 38 weeks), or full-term (39 to 40 weeks), or late-term (41 weeks); however, it is called post-term when it becomes more than 41 weeks. Furthermore, when babies born before week 37, they are preterm and have a high risk of health problems like cerebral palsy. It is not recommended to implement the childbirth prior to 39 weeks by labor induction

*Author for Correspondence: Firas-f@utq.edu.iq, firasalyaseen22@gmail.com

Table 1: Complications during and after delivery in normal and C-section deliveries.

NO.	Category	Normal delivery	Percentage %	C/S	Percentage%
1	Blood loss				
	Normal	57	35.625	48	30
	Abnormal	23	14.375	32	20
	Complications during delivery				
2	Bleeding	7	4.375	10	6.25
	Asphyxia	9	5.625	1	0.625
	Other			7	4.375
	Complications after delivery				
3	Bleeding	15	9.375	9	5.625
	Hypotension	5	3.125	4	2.5
	Fever	3	1.875	17	10.625
	Other	20	12.5	53	33.125
	Complications on baby				
4	Asphyxia	13	8.125	17	10.625
	Other	2	1.25	2	1.25

or cesarean section except demanding medical reasons.⁹

In 2012, statistically, there were approximately 213 million pregnancies around the world. This number included 190 million in the developing countries and 23 million in the developed countries. Moreover, for women in the age (15 to 44 years), the number of pregnancies was about 133 per 1000.¹⁰ In contrast, in 2013, the complications of pregnancy led to 293,000 deaths comparing with 377,000 deaths in 1990. However, the main reasons for this number of death included high blood pressure of pregnancy, obstructed labor, abortion and its complications, maternal bleeding and sepsis.¹¹ Generally, the percentage of women, who were not planning for their pregnancy, was 40%, while more than 50% of the unplanned pregnancies were aborted^[10]. In North America, the percentage of women who utilized the contraceptives was 60%, at least, over the first month of pregnancy.¹²

METHODOLOGY

Methods

During the time from May until October 2018, in Bint-Alhuda teaching hospital, Nasiriya, South of Iraq, where a current study had conducted, healthy pregnant ladies, who attended to the hospital either for natural vaginal childbirth or Caesarean section, were included. The conducting of the Caesarean section was either because of a breech presentation or for maternal demand. The analysis of our data was conducted depending on the intentional mode of childbirth. 160 pregnant women were involved in the study, 80 had a Caesarean section, and 80 had a natural vaginal delivery. The major factors utilized in the current study, and that must be determined, include; the social differences between both groups, the variances in the amount of blood loss, the infection average, the C-section complications, the morbidity in the group of natural vaginal delivery, and duration of stay in the hospital. The collected data are then analyzed statistically and arranged

in tables and figures to be discussed properly.

According to the international labor Adequacy Clinical Practice Guidelines Update Work Group, a standard protocol for the process procedures has been conducted and developed. The work potential was a multidisciplinary and included information from the care department of the pregnancy and newborn in Bint Al- Huda-Teaching Hospital, Al Nasiriya city, south of Iraq.

Statistical Analysis

A comparison between measurements was made by analysis of variance (ANOVA) by using SPSS software version 20. T-test was used to test the significance of changes between different variables. The exact Fisher test was utilized for categorical data. Statistically, P-value at point 0.05 and less had deemed as a significant difference.

RESULTS

The complications post-delivery was investigated and compared between the normal vaginal delivery and the cesarean section as in Table 1.

And the findings showed there are significant differences between the two groups (normal delivery and the cesarean section) in term of bleeding after delivery as in the normal delivery group, the was 9.4% while for cesarean section was 5.6%. In contrast, for fever, the rate of incidence in normal delivery group was 3% compared with the 10.6% for the cesarean section group.

DISCUSSION

Comparison between the complications of the normal vaginal delivery and the cesarean section in term of the adverse effects that associated with each method as there are a significant increase in the rate of the cesarean section in the last years, Begum B et al. 2009 also was studied a group of woman who delivered either by normal vaginal delivery and another group

who delivered by the cesarean section they was found the immediate and the late complications post the delivery was higher in group of cesarean section than the 2nd group who delivered normally by vaginal delivery even the days who need to return to normal activity was higher in cesarean section group.

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