

Odds for C-section may depend on hospital

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(HealthDay)—An expectant mother's biggest risk for undergoing an unnecessary C-section can be the hospital she chooses for the delivery, a new analysis contends.

Hospital cesarean, or C-section, rates vary widely across the United States, from a low of 7 percent to a high of 64 percent, the *Consumer Reports* analysis found.

"That kind of variation tells you there is not a standard agreement on how women should be handled during pregnancy," said Doris Peter, director of the Consumer Reports Health Ratings Center.

Of more than 1,300 U.S. hospitals included in the analysis, 56 percent had C-section rates higher than the national goal, the researchers found. The U.S. Department of Health and Human Services has set a national C-section target of 23.9 percent for mothers with low-risk births.

A woman's chances of a C-section can depend on which side of town she lives, Peter said.

For example, Good Samaritan Hospital and Bethesda North Hospital are both in Cincinnati, and even belong to the same health care network, Peter said. But Good Samaritan's C-section rate is 28 percent, while Bethesda North's rate is 18 percent.

Another example is Fort Worth, Texas, where Baylor All Saints Medical Center has a C-section rate of 34 percent, while JPS Health Network has an 18 percent rate, Peter said.

"Even within the same neighborhood you see variation from [hospital](#) to hospital," Peter said.

Many obstetricians and hospitals are making an effort to reduce unnecessary C-sections, said Dr. Mary Rosser, director of General Obstetrics and Gynecology at Montefiore Medical Center in New York City.

C-sections pose a risk of potentially dire complications. Also, if a woman has a C-section for her first delivery, she is 90 percent more likely to need a C-section in her second and subsequent pregnancies, Rosser and Peter said.

"C-sections do save lives when needed, so they should happen when they're necessary," Rosser said. "But there are many, many cases where a C-section is unnecessary and should be avoided."

C-section is currently the most common major surgery in the United States, with 1.3 million performed every year, Peter said.

"One in three babies are born with C-section," Rosser said. "That is just enormous."

Overall, 216 hospitals had C-section rates above 33.3 percent for low-risk deliveries, which earned *Consumer Reports'* worst rating.

Hialeah Hospital, outside of Miami, had the highest rate, with 64 percent of low-risk babies delivered by C-section.

Among large hospitals, South Miami Hospital in Miami (51 percent); Richmond University Medical Center in New York City (44 percent); Hackensack University Medical Center in Hackensack, N.J. (43 percent); and The Woman's Hospital of Texas in Houston (41 percent) had the highest C-section rates, the survey found.

Specific hospital characteristics generally fail to predict C-section rates, Peter said. For example, whether a hospital is public, private or academic doesn't seem to matter, nor does the mix of Medicaid versus privately insured patients.

However, some states tend toward more or fewer C-sections, Peter said.

Florida, Louisiana and West Virginia had rates above 30 percent, while Idaho, Minnesota, New Mexico and South Dakota were among the lowest, at 18 percent or lower.

Standards at the hospitals where new doctors undergo training might explain these state averages, Peter said. Doctors may be more or less inclined toward C-section based on what they learn during their residency, and then maintain those practices at other hospitals within the same state.

Women who want to avoid a C-section need to ask questions and plan well in advance of delivery, Peter and Rosser said.

"Once you're in labor and a doctor recommends a C-section, it's going to be very hard for a woman to push back," Peter said.

They should ask their hospital and their doctor about their C-section rates, and weigh those rates in deciding who will treat them and where they will go for their birth, Peter said.

Although many hospitals submit their C-section rates to accrediting bodies, they aren't required to make the information available to the public, Peter added. *Consumer Reports* does not have data for more than half of the estimated 3,000 U.S. hospitals that deliver babies.

Some of these hospitals handle thousands of births every year. "That information shouldn't be hidden," Peter said.

Specific practices increase the chances of a C-section, Peter and Rosser said. These include:

- Use of electronic fetal heart rate monitoring, which can influence the doctor to jump the gun and call for an unnecessary C-section.

- Injection of epidurals, which can sedate the mother so much that labor stalls.
- Admitting women for labor too early, which can make it falsely seem that labor is taking too long.

The analysis was published May 16.

More information: Doris Peter, Ph.D., director, Consumer Reports Health Ratings Center; Mary Rosser, M.D., Ph.D., director, General Obstetrics and Gynecology, Montefiore Medical Center, New York City; May 16, 2017, *Consumer Reports*, [More Information](#)

For more on C-sections, visit the [March of Dimes](#).

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