

07th May 2021

Dublin 2

Clár Sláinte Náisiúnta do Mhná & do Naíonáin

Feidhmeannacht na Seirbhíse Sláinte, Aonad 7A, Áras Dargan, An Ceantar Theas, Baile Átha Cliath 8 T: 076 695 9991

National Women and Infants Health Programme

Health Service Executive, Unit 7A, The Dargan Building, Heuston South Quarter, Dublin 8

T: 076 695 9991

PQ Ref 19496/21 To ask the Minister for Health the steps being taken to improve vaginal birth after caesarean counselling in hospitals here; and if he will make a statement on the matter.

Dear Deputy Cullinane

Deputy Cullinane Dáil Éireann, Leinster House

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

The fundamental issue with vaginal delivery after caesarean section is to maximise the number of women achieving a vaginal delivery whilst minimising the number of women who suffer from a uterine rupture in labour. Uterine rupture is a recognised event that can lead to serious injury to both the baby and the mother. An important cause of this event is rupture of a previous caesarean scar on the uterus.

Many factors, including patient preference, feed into this decision making equation and both clinician and patient should be comfortable with the suggested pathway. Many maternity services, particularly the larger sites and services, have in place specific midwifery provided clinics targeted at supporting women choosing to have a vaginal delivery further to a C-section. As long as women attend vaginal birth after caesarean section the risk of rupture remains, although it can be reduced to a very small level.

Commencing in 2019, the Irish Maternity Indicator System (IMIS) began collecting data on vaginal birth after a C-section rates in maternity hospitals. This data for the first year in 2019 was incomplete as it was a new national metric, however it is anticipated by NWIHP that the IMIS report regarding 2020 data which is due to be published in Q2 2021 will provide more comprehensive data regarding this metric across the 19 maternity units and services, thereby further informing and underpinning work in this area.

I trust this clarifies the matter.

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Yours sincerely.

Mary-Jo Biggs, General Manager, National Women and Infants Health Programme

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