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Magnitude and associated factors of primary cesarean section among mothers who gave birth between September and August, 2016 G C in Suhul General Hospital, Tigray, Ethiopia

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Background: Cesarean section (CS) is a lifesaving medical intervention. Its share in decreasing maternal mortality and morbidity rates are immense, it is also an indicator of maternal health services quality of a country. However it is associated with many complications compared with vaginal deliveries. The rising rate of CS is a global concern and it ranges between 12 and 86% in developed and middle-income countries and between 2 and 39% in developing countries. Unjustified prior caesarean section and decreasing trial of labor after caesarean section are among the reasons for its increment. A woman after a primary cesarean has only 10% chance of a vaginal birth for subsequent deliveries. In Ethiopia, rate of caesarean section is increasing ranging from 8 to 37% in the urbanized region. However, rate and factors leading to primary caesarian section are not addressed well.

Objectives: To asses magnitude and associated factors of primary cesarean section among mothers who gave birth between September and August, 2008 in E C in Suhul General Hospital, Tigray, Ethiopia.

Methodology: Retrospective cross sectional study from September 19 to October 20, 2009 was conducted in Suhul General Hospital. The data entered into EPI-Info version 7 and exported to SPSS version 20 for cleaning, editing and analyzing. Logistic (bi-variable and multi-variables) regressions were used to examine associations between outcome and independent variables.

Result: The rate of primary CS in this study was 20.2%. Fetal distress 26 (32.2%), cephalopelvic disproportion 15 (17.3%). Mothers who had been augmented were 3.14 times more likely had undergone primary CS than who hadn't been AOR (95%CI)=3.14 (1.497, 6.571) and mothers who had pregnancy induced hypertension were 3.10 times more likely had undergone primary CS than those who hadn't AOR, 95%CI=3.10 (1.230, 7.829).

Conclusion & Recommendation: The magnitude of primary cesarean section in this study is high. Gestational age and augmentations, pregnancy induced hypertension and birth weights were associated factors. Objective decision for non-reassuring fetal heart beat pattern should be practiced to reduce the magnitude of primary caesarean section.

Biography

Addisu Alehegn Alemu has completed her MSc from Mekelle University College of Medicine and Health Sciences. She is a Researcher and Lecturer in Mizan Tepi University, Ethiopia. She has published more than three papers in reputed journals.

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