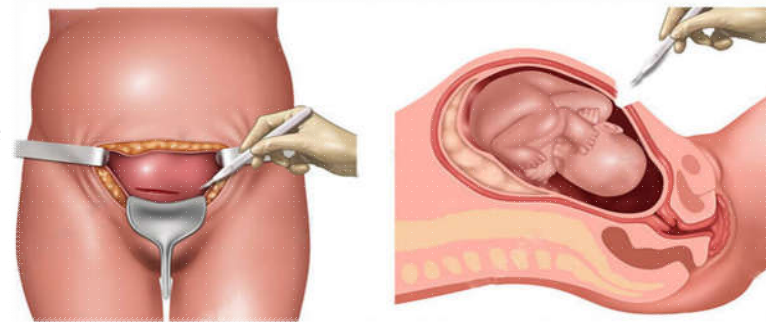


BIRTH PER VIAS NATURALES WITH SCARRED UTERUS

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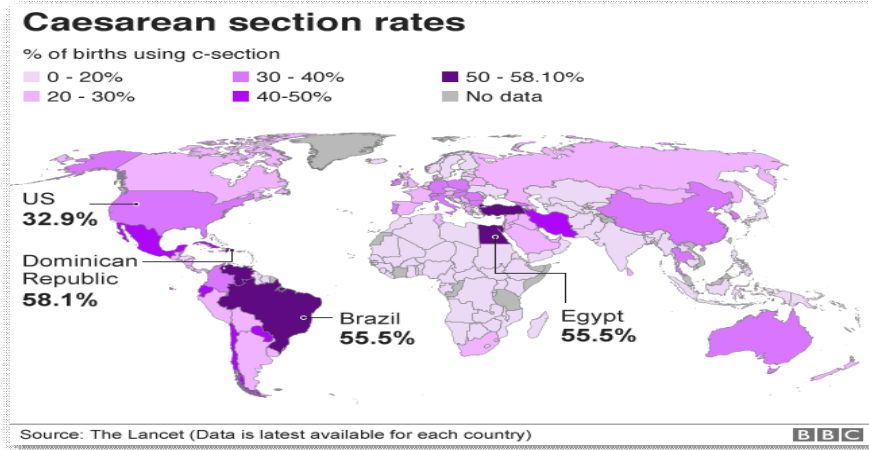
INTRODUCTION: Birth per vias naturales with scarred uterus could be considered a reasonable and safe option for most women with a single caesarean section in their history.



The benefits of VBAC compared to Caesarean section are:

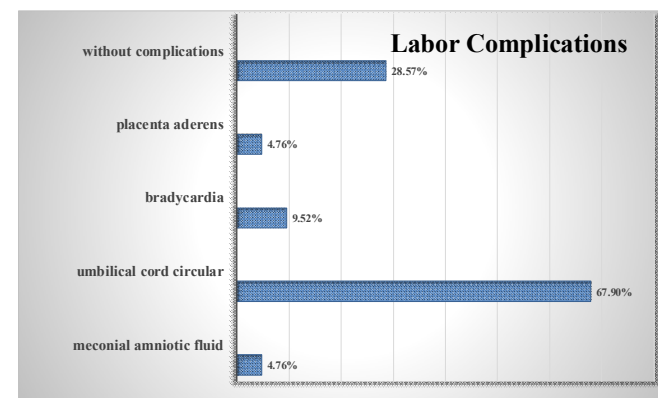
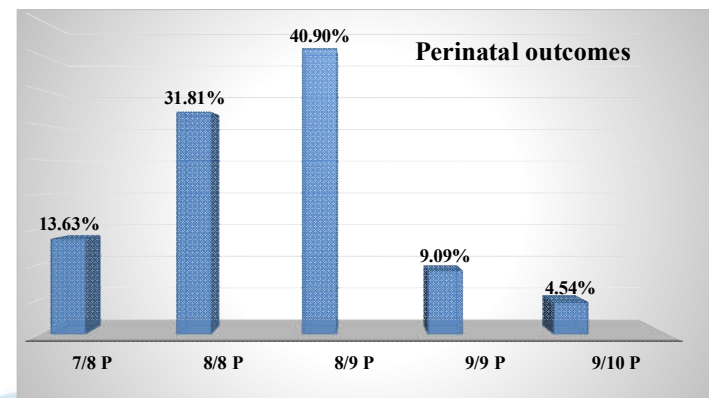
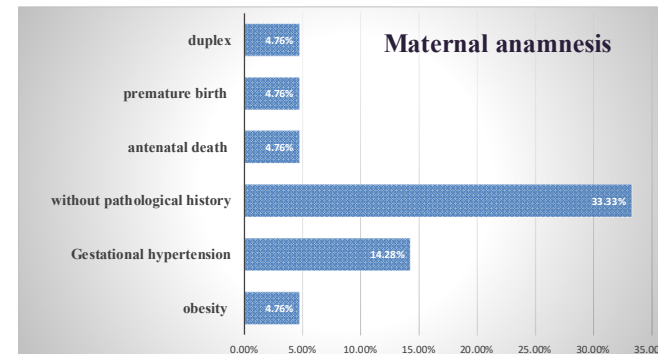
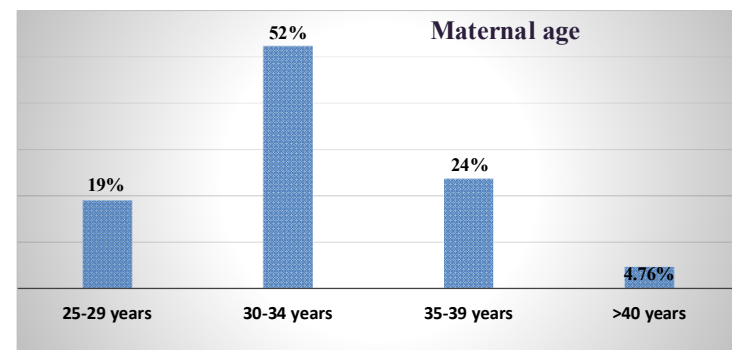
- lower maternal morbidity,
- shorter hospitalisation,
- lower rate of deep vein thrombosis
- lower incidence of postoperative complications.

Caesarean section is a modern part of today's obstetrics that preserves both maternal and fetal interests. Increasing world wide rates of caesarean section are a global concern since this is now the most commonly performed major surgery around the world, raising the most serious problems of all time not only among professionals but also in the whole society.



Were analysed 21 medical charts of patients who gave birth vaginally with a caesarean section in their medical history. The following were analyzed: patient age, gestational age, comorbidity, course of delivery, complications, newborn data.

Aim of the study:	METHODS AND MATERIALS	RESULTS
To investigate the specific features of the evolution of vaginal birth after caesarean section in the anamnesis.	Was performed a retrospective, descriptive analysis of all vaginal births in patients with cicatricial uterus in the obstetric unit No. 2 of IMSP SCM 'Gheorghe Paladi' from 2021.	Analysis of clinical trial data showed that during 2021, 3072 births took place in Obstetric Unit No. 2, of which 2474 were vaginal births and 598 by caesarean section.



CONCLUSION

- Term pregnancy and spontaneous start of labour are factors that increase the chance of successful birth per vias naturales with scarred uterus
- One strategy to reduce perinatal and maternal morbidity rates, and to protect medical staff from malpractice, is the management per vias naturalis approach in possible cases, as recommended by international protocols
- Thanks to the implementation in obstetrics practice of the national protocol for the management of vaginal birth after caesarean section, following the criteria of the age, fetal mass, physiological evolution of pregnancy, spontaneous debut of labor, we can choose the tactic of vaginal birth, after informing the patient about the maternal and perinatal risks and benefits, with qualified medical care and an adequate level of perinatological attendance.

Key words: Vaginal Birth, caesarean section, cicatricial uterus, management, pregnancy.

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