Giving birth after cesarean section: how many trials and how much labour?

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON28107

Source
Nationaal Trial Register

Health condition

delivery after cesarean section, vaginal birth after cesarean section, elective repeat cesarean section, prognostic factors for vaginal delivery, trial of labour, prognostic model for delivery after cesarean section, counseling after a cesarean

bevallen na een sectio, succespercentage op vaginale bevalling, counseling na een voorgaande sectio, electieve repeat sectio

Sponsors and support

Primary sponsor: Atrium-Orbis
Source(s) of monetary or material Support: -

Intervention

Outcome measures

Primary outcome

delivery outcomes:

-normal vaginal delivery

-assisted vaginal delivery

-elective cesarean section

-secondary cesarean section

-neonatal outcome

Secondary outcome

-success percentage at vaginal birth

-delivery complications

Study description

Background summary

Retrospective study of delivery after a cesarean section in a Dutch hospital setting. By evaluating delivery outcomes in this population, patient-specific factors can be identified that can aid the gynecologist in counseling women with a history of a cesarean section.

Study objective

Certain patient-specific factors contribute significantly to the outcome of delivery after a cesarean section in a Dutch hospital setting. These factors influence the decision to initiate trial of labour (TOL) or plan for an elective repeat cesarean section (ERCS) at the presentation of a next pregnancy. Women with a previous complicated pregnancy and/or a traumatic obstetric history will often opt for an elective cesarean rather than TOL, and in case of TOL, they will experience more secondary cesareans and poor neonatal outcomes compared to women with a positive obstetric history. Elder women above the age of 39 will choose an elective cesarean more often than young mothers. Women with a high prognostic chance for a vaginal delivery will undergo more TOL.

Study design

-

Intervention

retrospective observational study

Contacts

Public
Universiteit Maastricht

Grace Bambe
Postbus 616

Maastricht 6200 MD
The Netherlands
0617730154
Scientific
Universiteit Maastricht

Grace Bambe
Postbus 616

Maastricht 6200 MD
The Netherlands
0617730154

Eligibility criteria

Inclusion criteria

Women of all ages with a history of a cesarean section who gave birth at the Orbis Medical Centre in Sittard, The Netherlands in the past five years following an uncomplicated second pregnancy.

Exclusion criteria

-incomplete or ambiguous patient files

-history of more than 1 cesarean section

-hospital presentation a term of 37 weeks in the second pregnancy

-patients who do not speak Dutch

-twin pregnancies

-breech presentation in the second pregnancy

Study design

Design

Study type:	Observational non invasive
Intervention model:	Factorial
Allocation:	Non-randomized controlled trial

Control: N/A , unknown

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	02-03-2015
Enrollment:	300
Type:	Anticipated

Ethics review

Positive opinion

Date:	02-04-2015
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL5004
NTR-old	NTR5159
Other	METC Atrium-Orbis-Zuyd : 5-N-53

Study results

Summary results

-