



Interdelivery Interval

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How long should I wait between pregnancies before it is safe to VBAC?

Many women wonder what the risks are of becoming pregnant shortly after having a cesarean. Is it safe to attempt a VBAC when your pregnancies are close together? There are no guarantees in life, but having a short interval between pregnancies is associated with a slight increase in risk of uterine rupture. The exact amount of the increase is somewhere between 1.1 and 6.6 times [1,2].

The largest and most recent study addressing this topic included over 25,000 women who delivered between 1995 and 2000. They found that becoming pregnant within 6 months of the previous delivery was associated with a 2.66 increase in odds of uterine rupture [3]. What this means is that the women who were pregnant within 6 months after their previous cesarean (children spaced less than 15 months apart) had a rupture rate of 2.7% compared to a 0.9% rate for those who waited at least 6 months before conceiving again. There was no effect on VBAC success rate, with 77% of all trials of labor ending in a successful vaginal birth. Several smaller and less recent studies report similar results.

What factors can minimize my risk of uterine rupture?

Some researchers have attempted to create a “scoring” system by assigning points based on some basic information known to be related to uterine rupture risk [4]. They concluded that there was less than a 0.25% chance of uterine rupture in women who fit the following criteria: had 1 prior cesarean, more than 18 months interdelivery interval, and were either under age 30 or were under age 40 and also had one prior vaginal delivery. Note that in this particular group of subjects, those with three or four risk factor “points” had uterine rupture rates of 3 to 5%, but the number of deliveries included in the higher risk group was small (less than 150), making this rupture risk estimate somewhat uncertain. The risk factors included interdelivery interval less than 18 months, maternal age over 30, and multiple cesareans.

Conclusion

Given that many factors that contribute to uterine rupture rate cannot be modified (such as maternal age or birth history) having an interdelivery interval of at least 18 months is one way to significantly reduce uterine rupture risk. However, having an interdelivery interval of less than 18 months should not prevent a mother from considering VBAC a reasonable option, and the overall risks should be considered in comparison to the risks associated with a repeat cesarean.



References:

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