

# Neonatal outcomes in elective repeated caesarean section at term pregnancy

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## Abstract

**Background:** Caesarean delivery is associated with adverse health outcomes on both women and newborn infant. Timing of elective caesarean delivery also had an effect on the neonatal outcomes.

**Objective:** To find out the association between neonatal outcomes and gestational age and determining the favorable time for elective caesarean delivery.

**Patients and Methods:** A hospital-based cross-sectional study was done from 1st July, 2014 to 31st January, 2015 at the maternity teaching hospital in Erbil. A convenience sample of 200 full term pregnant women was selected from those admitted to the hospital for elective repeated caesarean delivery. Gestational age was determined by 1st trimester ultrasound and last menstrual period. Data on fetal variables probably associated with neonatal outcomes were collected in especially designed questionnaire.

**Results:** The rate of elective repeated caesarean section before 39th week of gestation was 81.5%. Mean weight of infants and mean Apgar scores of infants at delivery were increasing with gestational age  $P < 0.001$ . The rate of admission to neonatal intensive care unit was higher among those delivered at 37th than 38th week of gestation. No admission was reported among those delivered at 39th week of gestation ( $P=0.006$ ). No significant variations in the duration of admission, status of infant on discharge, and rates of respiratory symptoms were demonstrated between those delivered at 37th and 38th week of gestation.

**Conclusion:** The vast majority of elective caesarean delivery are performed early before 39th week of gestation, which is associated with high incidence of neonatal morbidity and mortality.

**Key words:** Caesarean delivery, Gestational age, Neonatal morbidity, Neonatal outcome.

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