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Caesarean incision

Caesarean incision is a surgical operation during which the baby is extracted from the uterus via a cut in the stomach and the uterus.

Regular caesarean incisions are usually performed after the 39th week of pregnancy. Spinal anaesthesia or sometimes a general narcosis is used to carry out the surgery. In the case of spinal anaesthesia, you are awake but feel no pain. In the case of general narcosis, you are asleep.

Caesarean incisions can be both regular and done as an emergency.

Medical indications of planned caesarean incisions include:

- two or more previous caesarean incisions, one T-shaped incision, or a uterus surgery which included the opening of the uterine cavity.
- the child is not in a head-down position.
- acute genital herpes or an HIV infection with poor or no response to treatment
- twin pregnancy
- the children share the placenta and the amniotic fluid sack, or are triplets
- the placenta is in the way.

Medical indications of an emergency caesarean incision include:

- the life of the child is in danger
- the life of the mother is in danger
- the childbirth is not following its natural course, despite treatment

A caesarean incision will not be performed without clear medical reasons, due to the risks involved.

If you have had a caesarean incision before, it does not necessarily mean that any future births must be C-sections. Most women are able to perform vaginal births later in life under the right conditions.

A caesarean incision usually lasts about half an hour, sometimes longer. During a planned incision, the father or other support person may be present. During an emergency incision, however, no one external is allowed to be present.

After a caesarean incision the mother must be put under supervision in an intensive care unit, where she can spend time with her child, and if their conditions have stabilized and the mother is feeling fine, they can move to a family or a regular ward.

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