

FOR IMMEDIATE RELEASE
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CESAREAN SECTIONS AND LABOR INDUCTIONS — OR IS NATURAL BETTER?

NEW YORK, NY — Wednesday, December 12, 2001. The Midwifery Task Force, a coalition of consumers, midwives, educators, physicians and scientists supporting maternity care choices for women, responded immediately today to a statement issued by the American College of Obstetrics and Gynecologists (ACOG) that supports the growing number of cesarean sections and labor inductions in childbirth.

"How many years will it take for doctors to recognize that vaginal birth, when done in a relaxed environment, with a minimum of interventions and maximum emotional support, cannot be improved upon by a procedure like a C-section which carries all of the risks of major surgery?" says Dr. Heidi Rinehart, a New Mexico-based OB/GYN.

Citing concern over a marked increase of C-section deliveries in the US and the corresponding increase in chance of infection, potential for surgical damage to surrounding organs and a dramatically longer recover time, Dr. Rinehart added, "It took 30 years for OB/GYNs to recognize that forceps deliveries were harmful to women, and another 10 years for the procedure to be dropped as routine. An increase in unnecessary C-section delivery is not healthy for families in the US."

Today's warning by the American College of Obstetricians and Gynecologists (ACOG), that vaginal delivery may not be appropriate in certain cases, will more than likely add to the trend of increasing C-section rates in America. Citing recent studies, ACOG highlighted the increased risk of uterine rupture associated with Vaginal Birth After Cesarean Section (VBAC). However, the absence of well-documented statistics that take all factors into consideration raise questions concerning the studies' relevance.

Ken Johnson, a Canadian epidemiologist and author of the research study, CPM 2000 Statistics Project, states, "Why is it that when hundreds of studies suggest reducing use of interventions (C-sections, epidurals, episiotomies) the OB community largely ignores it, but when a couple of studies of dubious quality suggest increasing intervention like C-sections, they jump on it?"

The studies cited by ACOG contain serious design flaws. For example, the studies failed to differentiate between the risks for women who were induced and the risks for women who had no interventions.

Says Betty-Anne Daviss, a midwife of 25 years, "Offering C-sections as a choice or as an elective causes women to distrust their own capabilities. No one ever seems to mention what life is like after a C-section. The recovery time with a new baby in arms is a rough road. That is

why maternity care providers who practice the Midwives Model of Care recognize that pregnancy and birth are normal life processes, and therefore seeks to minimize technological interventions."

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This press release is a joint statement issued by The Midwifery Task Force (MTF) and the following organizations:

Citizens for Midwifery (CfM)
International Cesarean Section Awareness Network (ICAN)
Midwives Alliance of North America (MANA)

A press kit with additional background and supporting information is available upon request.

For more information about MTF, CfM, ICAN and, MANA visit:

<http://www.midwiferytaskforce.org> (MTF)
<http://www.cfmidwifery.org> (CfM)
<http://www.ican-online.org> (ICAN)
<http://www.mana.org> (MANA)

For more information about topics related to the ACOG press conference, visit
<http://www.midwiferytaskforce.org/>

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BirthNet, located in the Capital Region, educates the public about maternity care in order to improve it. We believe that birth is a normal, natural event in a woman's life; and we encourage women to learn about their rights and options. Our primary programs include education in the classroom (high school or college classes), community forums or workshops, and media outreach. For more information about BirthNet, please contact Carolyn Keefe 518-482-2504 or birthnetalbany@yahoo.com.

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