

The baby is born: Augmentation and Cesarean Delivery

Birth of the baby is a joyful moment but labour and delivery are apprehensive for most mothers-to-be. Figures from the Department of Obstetrics and Gynaecology , HKU LKS Faculty of Medicine reveal that around 50% mothers in Queen Mary Hospital delivered their babies through augmentation, induction or cesarean section in 2004.

Many people do not understand the difference between augmentation and induction because oxytocin injections are used for both. Augmentation means strengthening the uterine contractions in a woman who is already in labour and is usually done when the natural contractions are not adequate. Induction means using drugs or other means to make a woman go into labour. It is usually done to prevent complications for the mother or the baby should pregnancy be further prolonged. For example, labour is induced after 41 weeks pregnancy to prevent intrauterine death.

Caesarean section, on the other hand, is needed if vaginal delivery cannot be safely achieved, for example, in cases of placenta praevia, abnormal position of the baby before labour, or in cases of fetal distress or slow progress of labour not correctable by augmentation during labour.

Physicians, however, do not recommend parent picking the “lucky-birth-hour” through induction or cesarean delivery. After all, risk is always involved. Regular prenatal visits, attending antenatal classes and relaxation exercises help to reduce the anxiety of labour. Family support is, of course, always crucial.