

# Severe recalled labour pain and elective cesarean section in a subsequent delivery: A population-based, longitudinal study

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October 15, 2020

## Abstract

**Objective** To assess the impact of severe recalled labour pain from the previous birth on the preference and delivery of an elective cesarean section (CS) in the subsequent delivery. **Design** A population-based, longitudinal study. **Setting** Akershus University Hospital, Norway. **Population** In total, 1,244 parous women recruited during routine fetal ultrasound examination at the 17th week of pregnancy between November 2008 and April 2010 were included. **Methods** Logistic regression analyses were conducted with data gathered from two questionnaires at 17th and 32nd week of pregnancy and electronic birth records. **Main Outcome Measures** Preference of an elective CS and actual delivery by elective CS. **Results** Recalled severe labour pain at the previous birth was associated with a preference of an elective CS (crude OR 2.11, 95% CI 1.43-3.12) and actual delivery by elective CS (crude OR 1.70, 95% CI 1.04-2.77). This association remained statistically significant for both preference of (adjusted OR 1.75, 95% CI 1.10-2.77) and delivery by elective CS (adjusted OR 1.95, 95% CI 1.03-3.66) when adjusting for years passed since previous birth, birth method, epidural anesthesia, overall birth experience, and fear of childbirth. **Conclusions** Women with severe recalled labour pain were about twice as likely to prefer or deliver by elective CS as women without severe recalled pain. Irrespective of severe recalled labour pain, preference for elective CS was statistically significantly associated with actual delivery by elective CS. **Funding** Research Council of Norway (project number 191098) **Keywords** Elective cesarean section, recalled labour pain, preference, delivery, previous birth experience

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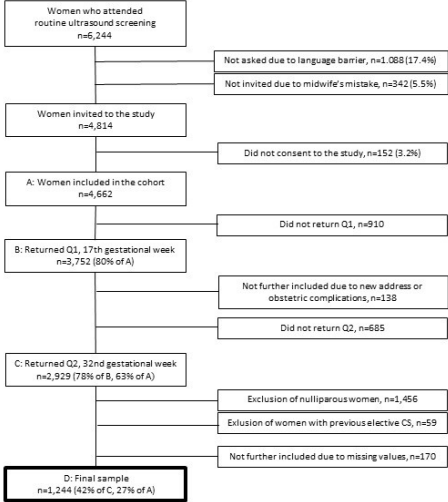
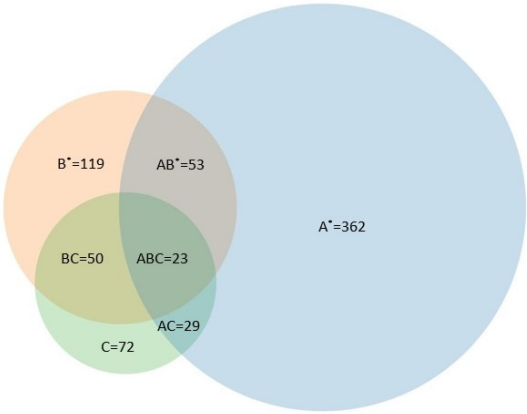


Figure 1: Study Flow Chart



**Figure 2.** The number of women with severe recalled pain (A), preference for elective CS (B) and delivery by elective CS (C) among 1,244 pregnant women of the ABC study. \*Significantly associated with C (p value <0.05)