

The Charité cesarean birth: a family orientated approach of cesarean section.

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Abstract

Abstract Objective: To evaluate the safety and patients delivery experience of the Charité Cesarean Birth (CCB), a modified cesarean section (CS). Parents are actively integrated in the delivery process by direct visualization of the birth, cutting the umbilical cord and early skin-to-skin contact(STS). **Methods:** Women with an indication for a planned primary CS at term were included. Trial was conducted at the Charité University Hospital Berlin as a prospectively randomized controlled trial. Parameters of perinatal outcome for both mother and infant were assessed using modified Likert-Scales and a standardized questionnaire. Primary outcome measures were birth experience and satisfaction for parents. Parameters of breast feeding and consecutive problems. APGAR Scores, blood loss, perioperative complications were secondary outcome measures. **Results:** Birth experiences were rated significantly higher in the CCB group compared to a classical caesarean section ($p < 0.05$). There were no significant differences between APGAR Scores, need for admission to an intensive care unit. Also perioperative blood loss and cardiovascular disorders did not differ between the two groups. Early STS was achieved in the 72% of the cases with higher rates of breast-feeding in the CCB group. **Conclusions:** The CCB leads to a significantly better birth experience. The procedure seems to be safe for both mother and infant. Patients become an active part of the CS by direct visualization of the birth and cutting the umbilical cord. The presented modification is a useful and safe option when a CS is medically indicated and necessary. It improves the breast-feeding and the early mother-infant interaction.

KEYWORDS:

Birth experience; breast feeding; caesarean section; early-skin-to-skin contact