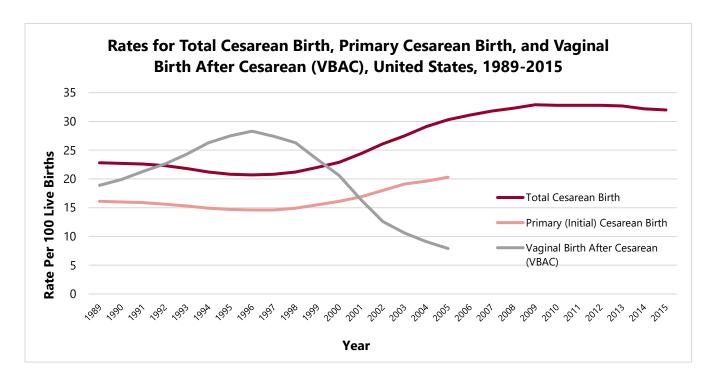
Cesarean Birth Trends in the United States, 1989–2015

MARCH 2017

The final national cesarean rate for 2015 was 32.0 percent of all births. This was a slight drop from the national peak of 32.9 percent in 2009. Cesarean section is the most common operating room procedure in U.S. hospitals. Overuse of this procedure is associated with excess health problems in women and babies. For both commercial and Medicaid payers, total maternal-newborn costs are about 50 percent higher for cesarean compared with vaginal births.



Source: U.S. National Center for Health Statistics

Data are not available to delineate national trends in rates of primary cesarean section and vaginal birth after cesarean (VBAC) from 2005 onward, due to the pattern of adopting the revised (2003) birth certificate form across jurisdictions over time. However, there is widespread concern about overuse of cesarean section and lack of access to VBAC. The following birth certificate data are provided to help understand recent patterns of use. It would be inappropriate to compare figures from year to year due to the changing demographic composition of the cohorts as jurisdictions migrate to the revised 2003 form. For extensive information about the 2003 birth certificate revisions, see cdc.gov/nchs/nvss/vital certificate revisions.htm.





Primary Cesarean and VBAC Rates from Revised (2003) U.S. Birth Certificate, 2005-2015

Year	Primary Cesarean Rate	VBAC Rate	Number of States Using Certificate	Percent of Total U.S. Births
2005	24.3%	10.1%	12	31%
2006	23.5%	8.5%	19	49%
2007	23.4%	8.3%	22	53%
2008	23.8%	8.4%	27	65%
2009	23.8%	8.4%	28	66%
2010	23.6%	9.3%	33	76%
2011	23.3%	9.7%	36	83%
2012	21.5%	10.2%	38	86%
2013	22.8%	10.6%	41	90%
2014	22.3%	11.3%	47	96%
2015	21.8%	11.9%	48	97%

Source: U.S. National Center for Health Statistics

Note: States and jurisdictions have migrated to use of the revised (2003) birth certificate as follows:

By January 1, 2005: Florida, Idaho, Kansas, Kentucky, Nebraska, New Hampshire, New York State (excluding New York City), Pennsylvania, South Carolina, Tennessee, Texas and Washington.

By January 1, 2006: California, Delaware, North Dakota, Ohio, South Dakota, Vermont and Wyoming.

By January 1, 2007: Colorado, Indiana and Iowa.

By January 1, 2008: New York City and Georgia, Michigan, Montana, New Mexico and Oregon.

By January 1, 2009: Utah.

By January 2, 2010: District of Columbia, Illinois, Maryland, Missouri, Nevada and Oklahoma.

By January 1, 2011: Louisiana, North Carolina and Wisconsin.

By January 1, 2012: Massachusetts and Minnesota.

By January 1, 2013: Alaska, Mississippi and Virginia.

By January 1, 2014: Alabama, Arizona, Arkansas, Hawaii, Maine and West Virginia.

By January 1, 2015: Rhode Island

Childbirth Connection, a program of the National Partnership for Women & Families, works to improve the quality, outcomes and value of maternity care in the United States. Learn more at www.ChildbirthConnection.org and www.NationalPartnership.org.

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¹ American College of Obstetricians and Gynecologists and Society for Maternal-Fetal Medicine. (2014 March 1). Safe Prevention of the Primary Cesarean Delivery. Retrieved 2 September 2015, from http://www.acog.org/Resources_And_Publications/Obstetric_Care_Consensus_Series/Safe_Prevention_of_the_Primary_Cesarean_Delivery.

² Truven Health Analytics. (2013 January). The Cost of Having a Baby in the United States. Ann Arbor: Truven. Retrieved 2 September 2015, from http://transform.childbirthconnection.org/reports/cost/.