Classification of Caesarean Section According to Robson Criteria: An Approach to Optimize Caesarean Section Rates at Tertiary Care Hospital in Western India

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ABSTRACT

Introduction: Caesarean section (CS) rates have been increasing worldwide. For proper assessment of CS rate, the ten group Robson classification is recommended by WHO. We are analyzing the CS rates by classifying the caesarean sections using Robson's ten group classification. The aim of this study is to perform an analysis based on Robson's ten group classification system and to identify strategies to optimize CS rate in our institution.

Materials and Methods: This was a retrospective observational study conducted in the department of obstetrics and gynaecology between July 2022 to December 2022 at SardarVallabhbhai Patel Institute of Medical Sciences and Research (SVPIMSR) in Ahmedabad, western India. **Results:** Total number of deliveries during the study period was 3121. The total numbers of CS were 1078 (34.55%) and total vaginal deliveries were 2043 (65.45%). The main contributors to overall caesarean section rate were group 5 (previous CS) (14.03%) and group 2 (nullipara, singleton cephalic,>=37 weeks) (11.40%). Women with one previous LSCS contributed majorly to the CS rate.

Conclusions: Robson's classification is easily implementable and an effective tool for surveillance. The results can be compared between Institutions, states and countries. By using Robson classification, groups identified which contributed the most to the overall CS rate and approach to reduce the same has to be our prime objective. Any reduction in CS in nullipara group affect the CS rate in the total group of nulliparous women with a potential for vaginal birth and would also reduce number of women in group 5 (previous CS).

Keywords: Caesarean section, Robson classification, Vaginal deliveries