
Does vaginal delivery contribute to pelvic floor dysfunction?

Ehab Samir Sayed Mohamed

The belief that vaginal birth damages women comes largely from the observation that women have weaker pelvic floors in the early weeks and months after vaginal birth, that some women develop urinary stress incontinence (lose urine when cough, sneeze, laugh, or lift something heavy) or anal incontinence (gas incontinence, urgency, or fecal incontinence) in connection with childbirth, and that many older women experience uterine prolapse, urinary, or anal incontinence. Recently, obstetricians have been pointing to studies showing stronger pelvic floors after C.S compared with vaginal birth. But this does not mean that vaginal birth is at fault or that C.S is protective. The major cause of pelvic floor weakness and genital injury during vaginal birth is obstetric management. Our studies clearly show that episiotomy (cutting the vaginal wall), fundal pressure (pressing on the mother's belly to expel the baby), and vaginal instrumental delivery are potent sources of weakness and permanent injury.