



# PREDICTIVE FACTORS OF CESAREAN SECTION IN LOW-RISK PREGNANCIES

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## Objective

This study aims to determinate the predictive factors of cesarean section in low risk pregnancies

## Design

This is a comparative case-control study conducted between January and March 2024, in maternity and neonatology center of Tunis.

## Methods

We included in our study primiparous patients without pathological history, delivered vaginally and by cesarean section. After their consent, we filled out a questionnaire containing sociodemographic data, pregnancy monitoring, labor progress, and surgical indication. The correlation between the different parameters was established using Pearson's methods for quantitative variables and Spearman's for qualitative variables.

## Results

We included in our study 273 patients. 122 patients delivered vaginally and 151 patients delivered by cesarean section. The average age of patients delivered vaginally was 28.22 years ( $\pm 2.33$ ) and by cesarean section was 32.07 years ( $\pm 2.56$ ) with a significant difference. For patients delivered vaginally, 4.1% delivered preterm. In the case group, premature delivery was noted in 13.24% of cases with a significant difference. In our study we found that 12% of patients delivered by cesarean section and 5.1% of patients delivered vaginally did not have appropriate prenatal follow-up. The main indications for cesarean section were acute fetal distress (31.96%), advanced maternal age (21.31%), preeclampsia (21.30%), infertility (9%) and gestational diabetes (4.91%). In our study, six predictive factors for cesarean section were noted: maternal age over 35 years, induced pregnancy, single mothers, pre-eclampsia, unmonitored pregnancies and gestational diabetes.

## Conclusion

Our study highlights the importance of prenatal monitoring. Implementation of recommendations based on high levels of evidence may reduce prophylactic indications for cesarean section.