Algorithm: Vaginal birth after caesarean (VBAC)

If possible make an assessment before 36 weeks (Antenatal care)

Absolute contra-indications:
- High vertical hysterectomy or poly myomectomy
- Type of incision in inverted T
- History of uterine rupture
- Presence of a contra-indication to vaginal delivery
- Emergency cesarean section non available
- More than one previous cesarean section

Planned caesarean section ≥39 weeks

Admission for spontaneous labor before the planned date of caesarean section

No

Yes

Imminent delivery

Yes

No

Contra-indication to vaginal delivery

Cervix and clinical conditions favorables

Non

Oui

Artificial rupture of membranes

Yes

No

At the admission

Spontaneous labor

Progression of uterine contractions and cervical dilatation

Artificial rupture of membranes

Yes

No

Caesarean section

Good progression of the cervical dilatation, of the descent and fetal well being

Yes

VBAC

Patient informed
Decision of caesarean section

No

Yes

Relatives contra-indications:
- Previous cesarean section < 18-24 months
- Unknown type of previous incision
- Others relatives considerations

No contra-indication or woman in labor

Relative contra-indications:
- Previous cesarean section < 18-24 months
- Unknown type of previous incision
- Others relatives considerations

Yes

No

Planned caesarean section

Source: QUARISMA trial (Nils Chailllet) and opinions of the group of experts