Choosing how to have your babies if you have uncomplicated twins

- A 'Decision tool' to help you make your decision

This information is for you if you are having twins and your pregnancy is otherwise uncomplicated. You will be offered an appointment at the twins antenatal clinic at the RVI to discuss your options for birth. This **"Decision Tool"** is aimed at helping you think about your options before your appointment.

To help you make the right choice for you, we recommend that you also read the information in the RVI pregnancy book about having a labour and birth on the delivery suite and about having a planned caesarean section. We hope that you will find it helpful when you start to think about things that are important to you.

If you could fill the decision tool out, after reading the patient information, it will help us to understand how you feel about your decision to either aim for a vaginal birth or have a planned caesarean section. Please bring this completed decision tool with you when you come for your appointment.

We would also like to encourage you to write a list of any concerns or anxieties that you may have as well as any other notes that you have made about your choice.

We do not expect you to have made a firm decision early in pregnancy (although some women have). We will listen to you and talk through things with you to help you gain a clearer picture of what you want to do.

Your Options

1) Plan for a vaginal birth
2) Have a planned caesarean section
3) Plan for a vaginal birth but have a planned caesarean if you don't go into labour before the date that you have been recommended to have your twins i.e. have a caesarean section rather than having labour started off (being induced).

When do I need to make my decision?

At or before your 34 week appointment with a member of your obstetric/midwifery team.

Making a Choice

The risks to you and your babies are small whether you choose to have a planned caesarean section or aim for a vaginal birth. Both ways of delivering are equally safe for your babies. Therefore the way you decide to have your babies is likely not only to depend on the safety of each option but on many other things such as your feelings about childbirth, how you will recover afterwards, the length of stay in hospital and how it may affect breast-feeding. If you think you may have more children after this pregnancy, you may wish to consider the impact of your choice on future births.

To make a choice it is important that you have information about each option since both have advantages and disadvantages. Overleaf is a table comparing the options of a planned caesarean section and a vaginal birth.

Comparisons between Planned Caesarean Section and Vaginal Birth with twins

	Planned vaginal birth	Planned caesarean section
Chance of you having the type of birth planned	56 out of 100 women will achieve a vaginal birth	About 90 in 100 women who plan a caesarean section are able to have one.
Chance of having a type of delivery you have not planned	Around 40 in 100 women who choose a vaginal delivery will have an unplanned caesarean section during labour. A caesarean section will be performed if there are any concerns about you or your baby, or if your labour is not progressing as it should. 3 in 100 women have a vaginal birth for the first baby and then require a caesarean section for the second baby. This would only be done if there were concerns about the second baby.	Around 10 in 100 women that have planned a caesarean section will go into labour and deliver both babies vaginally. If your preference was to have a caesarean section we would always try to accommodate this however if labour is very advanced when you come to hospital you may be advised that it is safer to aim for a vaginal birth at that point.
Chance of health problems for your babies: *Health problems in babies are more common the earlier that babies are born. The figures given here are based on averaged figures for twins born between 32 and 38 weeks*		
Chance of either of your babies dying	The chance of either of your babies dying during or after a planned vaginal birth is very small (less than 1 in 100 babies	The chance of either of your babies dying during or after a planned caesarean section is very small (less than 1 in 100 babies)
Chance of either of your babies being significantly unwell after birth	The chance of either of your babies being significantly unwell after a planned vaginal birth is very small (less than 2 in 100 babies)	The chance of either of your babies being significantly unwell following a planned caesarean section is very small (less than 2 in 100 babies)
Cuts to baby at the time of caesarean section		Between 7 and 31 in 1,000 babies are accidentally cut by the doctor during caesarean delivery. This is more likely during an unplanned caesarean section than a planned caesarean section. The cuts heal well but can occasionally leave a scar.

Chance of health problems for you:	**Planned vaginal birth**	**Planned caesarean section**
Heavy bleeding (Postpartum haemorrhage)	Around 5 in 100 women will have heavy bleeding following birth that will require a blood transfusion	Around 5 in 100 women will have heavy bleeding following birth that will require a blood transfusion
Blood clots in the veins of the legs and lungs	The chance of having a life-threatening blood clot (thromboembolism) that blocks a major blood vessel and travels to the lungs is around 1 in 1,000	The chance of having a life-threatening blood clot (thromboembolism) that blocks a major blood vessel and travels to the lungs is around 4 in 1,000
Wound infection	This occurs in less than 2 in 100 women that have a planned vaginal birth	This occurs in less than 2 in 100 women that have a planned caesarean section
Return to theatre for a reoperation either immediately or in the days following birth	This occurs in less than 3 in 100 women having a planned vaginal birth	This occurs in less than 2 in 100 women have a planned caesarean section
Hospital stay and recovery at home	**Planned vaginal birth**	**Planned caesarean section**
Most women recover well after having either a vaginal birth or planned caesarean section. Recovery after having twins varies from person to person. If you or your babies are unwell, you may have to stay in hospital longer. Your age and health (before childbirth) and any complications will also affect how quickly you recover.	You will usually stay in hospital for one to two days after a planned vaginal birth, sometimes shorter, though you may need to stay longer if your babies require extra support due to prematurity. You may also wish to remain in longer for some extra support. You should be able to get back to your normal activities, including looking after other children, driving, and normal social activities, quickly.	You will usually stay in hospital for two to four days after a planned caesarean section, though you may choose to stay longer for some extra support. It can take four to six weeks to fully recover from a caesarean section although your mobility will be greatly improved by two weeks. While the wound is healing you should not do strenuous exercise, household chores, lift anything heavier than your baby, or have sex. You will be provided with written information by our physiotherapy team . You can usually start doing the above activities again in a few weeks. For some women, it may be longer. Some women may have abdominal pain following a caesarean section which may last six to eight weeks.

Effect on what you can do after your baby is born	**Planned vaginal birth** You should be able to hold and breastfeed your babies immediately after your babies are born. Women can drive as soon as they feel comfortable after a vaginal birth.	**Planned caesarean section** You should be able to hold and breastfeed your babies shortly after a planned caesarean section although you will be lying flat and will need help to do so. You should not drive for several weeks after a caesarean section and you may need longer before you feel comfortable enough to do so. Insurance companies sometimes require that a woman wait a specific number of weeks before driving or that her doctor certifies that she is fit to drive.
Effect on choice in future childbirth	**Planned vaginal birth** If you have a successful vaginal birth this time, your chance of having a successful vaginal birth in the future with a straightforward recovery will be higher. About 94 in 100 women who have a successful vaginal birth have a successful second vaginal birth.	**Planned caesarean section** If you choose a caesarean section, your chance of having a successful vaginal birth in future is much lower. Having multiple caesarean sections may increase the chance that there could be damage to the pelvic organs such as the bladder at the time of surgery. There could also be problems in the future with the placenta being low (placenta praevia) and not separating properly during delivery (placenta accreta). Both can cause very heavy bleeding and prematurity and occasionally a hysterectomy is necessary to control such bleeding.

Making Your Choice

Now that you have read the comparisons between a planned caesarean section and aiming for a vaginal delivery it is worth considering what is most important to you.

Your values:

Choosing how you feel about the statements below will help you think about how important these potential consequences are to you

The most important thing for me is to experience a vaginal birth			
Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐
The most important thing for me is to plan my delivery and be in control			
Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐
The most important thing for me is to avoid a caesarean section for my second twin 3 out of 100 women will have a casarean section for the second twin			
Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐
The most important thing to me is to minimise harm to my babies and me The risks to you and your babies are very small with both a vaginal delivery and caesarean section. Some chances of harm are higher with a caesarean section and others are higher with a vaginal birth. It is up to you to decide which is more acceptable to you. Having multiple caesarean sections carries higher risks for you and your future babies.			
Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐
It is very important that I can hold and breast feed my babies straight after they are born Having a vaginal birth makes it easier for you to hold and breastfeed your babies immediately after birth. You can also usually hold and breastfeed your babies soon after they are born by a planned caesarean section delivery, although you will be lying flat and will need help to do so. Breast milk is sometimes slow in coming after a caesarean section. Also, it can be more difficult to find a comfortable position to breastfeed your babies in the days following a caesarean section because of the pain from the wound			
Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐

It is very important that I can leave hospital shortly after birth

If you have had a vaginal birth, you can usually leave the hospital within 1-2 days of your babies being born unless the babies need to stay for extra care because they are born early. If you have had a caesarean section, you are likely to stay in hospital for 2 - 3 days after the delivery. If there have been any complications whichever way you have your baby you may need to stay longer.

Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐

It is very important that I can go back to everyday activities as soon after childbirth as possible

The main advantage of having a planned vaginal birth is that you are likely to recover faster than if you have a planned caesarean section. You should be able to go home from hospital sooner. You should be able to get back to your normal activities, including looking after other children, driving, and normal social activities, as soon as you feel well enough to do so. The recovery time for a vaginal birth is usually shorter than the recovery time for a caesarean section.

Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐

It is very important that I am able to have a large family

If you want a large family, you need to think about the chance of complications from repeat caesarean sections. The chance of having problems with the placenta or of needing a hysterectomy goes up after each repeat caesarean section. If you are planning to have three or more children, you may want to consider trying for a vaginal birth.

Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐

It is very important that I am able to choose the type of delivery I want in future

If you are successful in having a vaginal birth this time, the chance of a successful vaginal birth in the future is much higher. You can still decide to have a caesarean section in future if you wish. If you have a caesarean section you will be able to choose a planned caesarean section next time

Strongly disagree ☐	Disagree somewhat ☐	Agree somewhat ☐	Strongly agree ☐

MY TRADE-OFFS

Now that you have filled this in/considered your values above, it may be clear to you how you would like to have your babies. However for many women/couples it may still be difficult to know what is best for you and it may be hard to weigh up the pros and cons of each option. You will have an opportunity to go through this decision tool with a member of the obstetric/midwifery team at your appointment who will be able to help you make your decision if necessary.

To help you trade-off which option is best, or worst, for you it may be worth listing in order those values that you feel most strongly about e.g. putting 'Agree strongly' first followed by 'Agree somewhat', 'Disagree somewhat' and 'Disagree strongly'. You can use the 'My Notes & Questions' section at the end of this leaflet to jot down any questions or concerns.

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Making Your Decision

We hope that the information above and the decision aid has helped you and your partner to think about what is important to you and has enabled you to consider how to have your babies.

At this point it is worth reviewing the following:

Do you feel sure about the best choice for you?

YES ☐ NO ☐

Do you know the benefits and risks of each option?

YES ☐ NO ☐

Are you clear about which advantages and disadvantages matter most to you?

YES ☐ NO ☐

Do you have enough support and advice to make a choice?

YES ☐ NO ☐

It may also be worth considering what role you prefer in making a choice?

- I prefer to share the decision with.....
- I prefer to decide myself after hearing the views of.....
- I prefer that someone else decides (who?).....

My/Our Decision

Are you ready to make your decision?

YES ☐ My/our decision is to have a .....

NO ☐ Next Step: This section suggests next steps if you are not able to make a decision. Tick any items you would like to try.

Knowledge (If you feel you do not have enough facts)

List your questions ☐ Find out more about the benefits and risks ☐

Values (if you are not sure what matters most to you)

Review your values to see what influences you most ☐ Talk to others who have made the decision ☐

Support (if you feel you do not have enough support)

Discuss your options with a trusted person (e.g. health professional, family or friends) ☐

Focus on the opinions of others who matter the most ☐

Ask others to complete this guide (eg partner). Find areas of agreement. When you disagree on what matters most, respect the other person's opinion and agree to get more information ☐

Notes and questions prior to your appointment:

Your Final Decision – at or before 34 weeks of pregnancy

My/our decision is to have a:

Planned Caesarean section ☐

Aim for a vaginal birth ☐

Planned caesarean section if I have not had my baby by the date recommended ☐

Signed..... (patient)

Signed.....(name of health professional) Job Title.....

Date.....