C-sections done in state still above U.S. average

By Bill Decker
Staff Writer

BATON ROUGE — Two years after a consumer lobby said Louisiana physicians too often deliver babies surgically, the percentage of surgical deliveries by the state’s Medicaid mothers remains above the national average.

The rate of births by surgery — the procedure is called Cesarean section — in seven Acadia parish is higher than the national average, too.

Cesarean sections are more expensive and require longer hospital stays than vaginal births. So a high C-section rate is bad news for efforts to contain costs.

“Everyone agrees that a lower rate could be done with the same outcome,” said Dr. Gregg Pane, who performed the study for the private Unisys company. “But you have to do it right, because there’s a lot of factors.”

Among those factors: The mother’s race, whether she lives in town or in the country, and whether she delivered by C-section in the past.

Pane presented the study to the Department of Health and Hospitals advisory board on Tuesday in Baton Rouge.

He said the study was recommended by national health-care finance authorities after Public Citizen, part of the organization created by consumer advocate Ralph Nader, released 1980 data showing that Louisiana had one of the highest C-section birth rates in the country.

Medicaid is the joint state-federal health-coverage program for the poor. Rising costs in Medicaid- covered services mean rising costs for taxpayers.

Among the Unisys study’s findings:
- In 1992 and 1993, 28 percent of Louisiana’s Medicaid deliveries were by C-section. The national rate was 23.5 percent in 1991 and 21 percent in 1990, the most recent available figures.
- Acadia C-section rates were higher in urban hospitals than in rural hospitals, following a nationwide trend, Pane said.
- In the Acadia region, the urban rate was 26.6 in 1992 and 25 percent in 1993 — higher than national rate, but lower than the rest of the state. In Acadia rural hospitals, 33.9 percent of Medicaid births were by C-section in 1992, and 33.4 percent in 1993.
- Statewide, about 10 percent of C-sections are performed for the reason often cited by physicians: The mother had already delivered a child by C-section.
- But about 80 percent of the procedures were performed because of breech births, fetal distress, “dystocia” or failure to progress with labor, or a combination of those factors.
- The areas with the highest C-section rates are North Central Louisiana and the parishes on the southern shore of Lake Pontchartrain, where more than a third of urban-hospital births happen with surgical help. And in those areas, the percentage of repeat C-section deliveries are higher than average, too — all between 24 and 31 percent.

- C-sections keep mothers in the hospital for an average of more than four days, compared two days for vaginal delivery. The longer the stay, the more is paid — $1,120 to a physician for a cesarean delivery compared to $860 for a vaginal delivery.

Pane said that in small, rural hospitals, problems such as transportation and access to care might help raise the C-section rate.

Dr. Steve Chatelain, a perinatologist or birth specialist at Women’s Hospital in Baton Rouge, told the advisory board that factors from bigger babies to malpractice risk to inadequate prenatal care for the poor are raising the rates.

“We feel like a lot of non-clinical factors figure into this, including patient choice,” Chatelain said.

The Unisys study recommended:
- Establishing a task force to figure out how to reduce unnecessary C-sections.
- Work with the Tulane School of Public Health to analyze information about C-sections.
- Release regional C-section rates as a way to educate the public.
- Change Medicaid reimbursement to reduce the extra money a doctor gets for performing a C-section.