



Legislation Details (With Text)

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| File #: | Res 1499-2020 | Version: | * | Name: | Informing maternity patients about the risks associated with cesarean section. (S.2888A/A.00318A) |
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| Enactment date: | | Enactment #: | | | |
| Title: | Resolution calling on the New York State Legislature to pass, and the Governor to sign, S.2888A/A.00318A, relating to informing maternity patients about the risks associated with cesarean section. | | | | |
| Sponsors: | Carlina Rivera, Helen K. Rosenthal | | | | |
| Indexes: | | | | | |
| Attachments: | 1. Res. No. 1499, 2. December 10, 2020 - Stated Meeting Agenda with Links to Files, 3. Hearing Transcript - Stated Meeting 12-10-20, 4. Minutes of the Stated Meeting - December 10, 2020 | | | | |

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| 12/10/2020 | * | City Council | Introduced by Council | |
| 12/10/2020 | * | City Council | Referred to Comm by Council | |
| 12/31/2021 | * | City Council | Filed (End of Session) | |

Res. No. 1499

Resolution calling on the New York State Legislature to pass, and the Governor to sign, S.2888A/A.00318A, relating to informing maternity patients about the risks associated with cesarean section.

By Council Members Rivera and Rosenthal

Whereas, According to the American College of Obstetricians and Gynecologists (ACOG), a cesarean birth is the delivery of a baby through incisions made in the abdomen and uterus; and

Whereas, According to ACOG, a cesarean birth may be performed if there are certain concerns about the fetus, problems with the placenta, if the birthing parent has certain medical conditions, and for other reasons; and

Whereas, While cesarean sections can be medically needed, for low risk pregnancies and those who do not medically require a cesarean section, there are benefits to having a vaginal birth; and

Whereas, According to the Mayo Clinic, cesarean sections include risks for both the birthing parent and

baby; and

Whereas, Babies born by scheduled cesarean section are more likely to develop transient tachypnea, a breathing problem marked by abnormally fast breathing during the first few days after birth, and, rarely, babies may experience a surgical injury; and

Whereas, Risks for birthing parents include infection, postpartum hemorrhage, blood clots, wound infection, surgical injury, and other issues; and

Whereas, Individuals who have a cesarean section also require time to recover and additional postpartum care; and

Whereas, Cesarean sections also impact the birthing parent's future maternal health; and

Whereas, Individuals who have a cesarean section face a higher risk of potentially serious complications in a subsequent pregnancy, such as cesarean scar on the uterus rupturing during a future vaginal birth; and

Whereas, According to the New York State Taskforce on Maternal Mortality and Disparate Racial Outcomes, the cesarean delivery rate in the U.S. has risen to over 30 percent, and, when compared to vaginal deliveries, cesarean deliveries carry overall higher rates of maternal mortality; and

Whereas, According to the Task Force's report, from 2012-2014, 66 percent of prenatal related deaths in New York State involved a cesarean section; and

Whereas, According to the New York City 2008-2012 Severe Maternal Morbidity report, maternal morbidity is a continuum from mild adverse effects to life-threatening events or death; and

Whereas, According to the report, the severe maternal morbidity rate was higher among people with a primary or repeat cesarean (474.1 and 492.3 per 10,000 deliveries, respectively), compared to those with a vaginal birth (109.8 per 10,000 deliveries) or vaginal birth after a cesarean (172.7 per 10,000 deliveries); and

Whereas, Although it is difficult to differentiate between morbidity caused by cesarean delivery versus morbidity requiring a cesarean delivery, cesarean sections may have a higher risk of maternal morbidity; and

Whereas, According to the Centers for Disease Control and Prevention, in 2018 the cesarean delivery

rate in New York State was 33.9 percent, tied for the twelfth highest rate in the country; and

Whereas, As the cesarean rate continues to rise, it is increasingly important to ensure that all individuals giving birth are informed of the risks associated with cesarean births; and

Whereas, S.2888A/A.00318A, sponsored by Senator Julia Salazar and Assembly Member Amy Paulin, amends the public health law, in relation to informing maternity patients about the risks associated with cesarean section; and

Whereas, The bill would require maternal health providers to supply individuals with a planned cesarean and those who undergo an unplanned cesarean with a standardized written communication about cesarean sections; and

Whereas, Such written communication would include, but not be limited to, potential maternal injuries, potential injuries to the fetus, the impact of a cesarean delivery may have on future pregnancies and deliveries, and the circumstances in which cesarean delivery may be necessary to save the life of the parent or fetus; and

Whereas, The information would be developed by the Commissioner based on consultations with appropriate health care professionals, providers, consumers, educators, and patients, including the ACOG and the New York State Association of Licensed Midwives; and

Whereas, Such a law would ensure the universal dissemination of information to improve the health and safety of New York's birthing parents and newborns; now, therefore, be it

Resolved, That the Council of the City of New York calls on the New York State Legislature to pass, and the Governor to sign, S.2888A/A.00318A, relating to informing maternity patients about the risks associated with cesarean section

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