UNOFFICIAL COPY 18 RS BR 270

1	A CONCURRENT RESOLUTION recognizing the need to lower the rate of
2	cesarean delivery in the Commonwealth.
3	WHEREAS, a cesarean delivery or surgical birth is an extraordinary major
4	abdominal surgical procedure that has saved many lives all over the world; and
5	WHEREAS, cesarean surgery is currently the most common major surgical
6	procedure performed in hospitals in the United States, with the total United States
7	cesarean delivery rate reaching 32 percent of all births in 2017, rising 60 percent from the
8	most recent low of 20.7 percent in 1996, according to the most recent data from the
9	Kentucky Hospital Association and the Centers for Disease Control; and
10	WHEREAS, Kentucky's rate of cesarean delivery is the seventh highest in the
11	nation, standing at 34.6 percent of all births as of 2016 and is as high as 40 percent of all
12	births in some Kentucky hospitals; and
13	WHEREAS, while cesarean delivery can be life-saving for the fetus, the mother, or
14	both, the rapid increase in the rate of cesarean births without evidence of concomitant
15	decreases in maternal or neonatal morbidity or mortality raises significant concern that
16	cesarean delivery is overused; and
17	WHEREAS, increasing rates of cesarean delivery are one possible factor leading to
18	the increase in the national maternal mortality rate from 18.8 in 2000 to 23.8 per 100,000
19	births in 2014; and
20	WHEREAS, the World Health Organization found that cesarean section rates
21	higher than 10 percent are not associated with reductions in maternal and newborn
22	mortality rates and in the United States, and the United States Office of Disease
23	Prevention and Health Promotion Healthy People 2020 objectives include a 10 percent
24	reduction in cesarean delivery for first time births, from 26.5 percent to 23.9 percent; and
25	WHEREAS, planned cesarean delivery is associated with significantly higher risk
26	of maternal severe morbidity and mortality compared with planned vaginal delivery; and
27	WHEREAS, every subsequent pregnancy following surgical birth carries increased

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1	risks of maternal and newborn mortality and morbidity, including placenta abnormalities
2	such as placenta accreta, a life-threatening condition with a rate that has grown along with
3	the rate of cesarean surgery; and
4	WHEREAS, according to the National Institutes of Health and the American
5	Congress of Obstetricians and Gynecologists, vaginal delivery after cesarean delivery is a
6	safe and reasonable option yet according to the Centers for Disease Control, Kentucky's
7	rate of vaginal delivery after cesarean delivery is the 10th lowest in the United States with
8	over 91 percent of mothers who have given birth by cesarean going on to deliver all
9	subsequent pregnancies by cesarean section, often due to hospital policies that prohibit
10	vaginal delivery; and
11	WHEREAS, the American Congress of Obstetricians and Gynecologists has
12	advised that increasing women's access to nonmedical interventions during labor such as
13	education and support, continuous labor support from a doula, and limiting interventions
14	during labor and birth; and
15	WHEREAS, midwifery care may reduce the rates of surgical birth but is not easily
16	accessible for most Kentuckians at this time; and
17	WHEREAS, the Commonwealth of Kentucky is the largest payer of birthing costs
18	through Medicaid; and
19	WHEREAS, cesarean delivery costs a significant amount more than vaginal
20	delivery;
21	NOW, THEREFORE,
22	Be it resolved by the Senate of the General Assembly of the Commonwealth of
23	Kentucky, the House of Representatives concurring therein:
24	→ Section 1. The General Assembly recognizes the benefits that lowering the rate
25	of cesarean delivery may provide to the lives of Kentuckians regardless of previous
26	cesarean history, and affirms that the Commonwealth should work to ensure that barriers

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Jacketed

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to vaginal delivery are removed.

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Section 2. The General Assembly encourages all state agencies and providers of maternity care to strongly support and encourage nonoperative vaginal delivery by striving to provide resources and information that are shown by evidence to reduce the rate of cesarean delivery.

Section 3. The General Assembly strongly encourages all state agencies that

administer programs providing maternal or child health services to provide information about how to reduce the likelihood of cesarean delivery to program participants, and to encourage and support program participants' access evidence-based care that may decrease their risk of cesarean delivery.

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10 → Section 4. The Clerk of the Senate is directed to deliver a copy of this
11 Resolution to Senator Julie Raque Adams.