Exploring the psychological impact of cesarean section.

Nazafarin Nichols*

Obstetrics and Gynecology Department, Airlangga University, Indonesia

Abstract

Cesarean section, commonly known as a C-section, is a surgical procedure used to deliver a baby through incisions made in the mother's abdomen and uterus. While a C-section can be a necessary and life-saving procedure for some women and babies, it can also have significant psychological impacts on the mother.

Keywords: Cesarean section, Anxiety, Depression, Postpartum mood disorders, Body image issues.

Introduction

Cesarean section (C-section) is a common surgical procedure used to deliver babies when a vaginal birth is not possible or safe. While it can be a life-saving intervention, it is also a major surgery that carries risks and requires significant recovery time. Beyond the physical impacts, cesarean section can also have a significant psychological impact on new mothers [1].

Women who undergo cesarean section are at a higher risk of experiencing anxiety and depression than those who deliver vaginally. This may be due to a variety of factors, including the stress of surgery, fear of complications, and feelings of disappointment or failure if they had hoped for a vaginal birth. Additionally, the hormonal changes that occur after birth can contribute to postpartum mood disorders. Women who have had a previous traumatic birth experience, such as a previous cesarean section or a difficult vaginal delivery, may also be more susceptible to anxiety and depression [2].

Cesarean section can also have a significant impact on a woman's body image and self-esteem. The surgical incision and scar may be a visible reminder of the procedure, and women may feel self-conscious or ashamed of their scar. Additionally, the recovery process can be lengthy and physically challenging, which may further impact body image and self-esteem. Women who have had multiple cesarean sections may also feel that their body has been ruined by the procedure, leading to feelings of shame and inadequacy [3].

The physical recovery period after cesarean section can make it more difficult for women to bond with their babies and establish breastfeeding. Pain, fatigue, and medication can all interfere with the natural bonding process, and women may feel disconnected from their baby as a result. Additionally, the surgical procedure can delay the initiation of breastfeeding, making it more difficult to establish a good milk supply. Women who have had a difficult or traumatic birth experience may also be more susceptible to postpartum depression, which can further impact bonding and breastfeeding [4].

There are several ways that healthcare providers and loved ones can support women who have undergone cesarean section. Encouraging open communication and providing emotional support can help women feel heard and validated in their experiences. Healthcare providers can also offer resources for postpartum depression and anxiety, including counselling and medication if necessary. Encouraging skinto-skin contact and early breastfeeding can also help promote bonding and establish a good milk supply [5].

Conclusion

Cesarean section is a common surgical procedure used to deliver babies, but it can also have a significant impact on a woman's psychological well-being. Anxiety, depression, body image issues, and bonding difficulties are all potential consequences of the procedure. Healthcare providers and loved ones can support women through this experience by offering emotional support, resources for postpartum depression and anxiety, and encouragement for bonding and breastfeeding. By acknowledging and addressing the psychological impacts of cesarean section, we can help women have a more positive postpartum experience.

References

- 1. Fenech G, Thomson G. Tormented by ghosts from their past': A meta-synthesis to explore the psychosocial implications of a traumatic birth on maternal well-being. Midwifery. 2014;30(2):185-93.
- 2. Moxey JM, Jones LL. A qualitative study exploring how Somali women exposed to female genital mutilation experience and perceive antenatal and intrapartum care in England. BMJ open. 2016;6(1):e009846.
- 3. Gianni ML, Lanzani M, Consales A, et al. Exploring the emotional breastfeeding experience of first-time mothers: Implications for healthcare support. Front Pediatr. 2020;8:199.

Received: 03-May-2023, Manuscript No. AACRSIP-23-97907; Editor assigned: 06-May-2023, PreQC No. AACRSIP-23-97907(PQ); Reviewed: 20-May-2023, QC No. AACRSIP-23-97907; Revised: 24-May-2023, Manuscript No. AACRSIP-23-97907(R); Published: 31-May-2023, DOI:10.35841/aacrsip-7.3.145

Citation: Nichols N. Exploring the psychological impact of cesarean section. Case Rep Surg Invasive Proced. 2023;7(3):145

^{*}Correspondence to: Nazafarin Nichols, Department of Ophthalmology, Stanford University School of Medicine, Palo Alto, California, E mail: nichols@naz5.id

- 4. Słabuszewska-Jozwiak A, Ciebiera M, Sarecka-Hujar B, et al. Pediatrics consequences of caesarean section: A systematic review and meta-analysis. Int J Environ Res Public Health. 2020;17(21):8031.
- 5. Van Reenen SL, Van Rensburg E. The influence of an unplanned caesarean section on initial mother-infant bonding: Mothers' subjective experiences. J Psychol Afr. 2013;23(2):269-74.