Caesarean Deliveries in Thailand: Cause for Concern

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Abstract

Multi-factorial causes determined the increasing trend of Gaesarean Section (CS) rate observed in developed and developing countries. This paper aims to shed light on the trend of CS rate in Thailand during the period of 1990-96, share of hospital delivery by type of hospitals and determinants of CS. Methodology includes sample survey of different types of public and private hospitals and in-depth interviews of key informants in sample public and not-for profit private hospitals in Bangkok.

The survey response rate was 62%. The result demonstrates a series of hospital birth, profiles in Thailand, showing an increased total CS rate from 15.2% in 1990 to 22.4% in 1996. In 1996, private hospitals having the highest rate of 51.5% and not insignificant 18% share of hospital births played a significant contributing role to the total number of Caesarean cases in the country. Private practice in public hospital where patient voluntarily and unofficially pays for personal attendance of prenatal, labour, delivery and post-natal care to obstetricians also contributes to higher CS rate than non-private patients. This prompts us to investigate more into private practice in public hospitals. We propose further research questions to generate more evidence and intervention research to bring down unnecessary CS. Efforts should be made to work closely with the Royal College in order to translate evidence into policy and clinical practices.

Key words: Caesarean, private practices in public hospitals, Thailand,

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