

An assisted instrumental delivery

One in eight pregnant women will need an assisted instrumental delivery.

The purpose of an assisted birth is to mimic a normal birth with minimum risk to the baby. To do this, an obstetrician uses instruments like vacuum extractor or forceps to help the baby to be born. There are different reasons for an assisted birth but the most common are when the baby needs a quick delivery due to fetal distress or the baby is not moving from the birth canal due to an incorrect position of the head. This is very stressful for the parents but the attending birth obstetrician is usually familiar with the procedure and he will choose the type of delivery most suitable for you, the baby and your situation.



Ventouse or forceps are both safe and effective when used by an experienced obstetrician. A ventouse is less likely to cause damage to the birth canal of the mother and is used as the instrument of choice. It is also well tolerated by the baby as well. However, it is not suitable if the baby is less than 34 weeks because the baby's head is softer.

Forceps is more successful in completing the delivery vaginally. If a ventouse is used and the suction cup has come off, or if delivery has not been successful after a few pulls, an obstetrician may then decide to deliver the baby by forceps or caesarean section. Predicting which delivery will be instrumental is not possible before labour but at the time of applying it a mother can choose it to be avoided only by having a caesarian section which is a difficult procedure with increased risks of excessive bleeding and extensions of the wound.

If you need an assisted birth in your first pregnancy, it is unlikely that you will need one in your next pregnancy. Most women have a normal birth next time.

A few women may be traumatised by their experience of birth. Speak with your obstetrician or midwife, if you feel worried about this.