

## Cesarean delivery on maternal request in the United States from 1999 to 2015: a comment

**TO THE EDITORS:** Community physicians are appreciative of the original research, which helps guide their daily practices. However, there are certain aspects of the maternal outcomes in this study that must be questioned.<sup>1</sup> One would assume that most cesarean deliveries on maternal request (CDMRs) would be performed on a scheduled, elective basis (most likely at 39 weeks of gestation) in the absence of ruptured membranes.<sup>2</sup> Therefore, the more than 6-fold increase in sepsis is not logical as chorioamnionitis is the most common precursor to sepsis in this setting.<sup>3</sup> In addition, as postpartum hemorrhage is almost 65% less likely in CDMRs, it does not follow that the transfusion rate is 3.5 times greater.<sup>1</sup> These inconsistencies bring into question the other statistics, perhaps because of the study's retrospective nature. ■

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