

Frequently Asked Questions

What is assisted vaginal delivery?

Assisted vaginal delivery is the vaginal birth of a baby performed with the help of **forceps** or a **vacuum device**. It is also called assisted vaginal birth.

How common is assisted vaginal birth?

Today, assisted vaginal birth happens in about 3 in 100 vaginal deliveries in the United States.

What are the types of assisted vaginal birth?

There are two types of assisted vaginal birth: 1) forceps-assisted birth and 2) vacuum-assisted birth. The type of delivery that is done depends on many factors, including the experience of your **obstetrician–gynecologist (ob-gyn)** and your individual situation.

How is forceps-assisted birth performed?

Forceps look like two large spoons. They are inserted into the **vagina** and placed around the fetus's head. The forceps are used to apply gentle traction to help guide the fetus's head out of the birth canal while you keep pushing.

How is vacuum-assisted birth performed?

A vacuum device is a suction cup with a handle attached. The suction cup is placed in the vagina and applied to the top of the fetus's head. Gentle, well-controlled traction is

used to help guide the fetus out of the birth canal while you keep pushing.

Why might assisted vaginal birth be done?

Some of the reasons why an assisted vaginal birth may be done include the following:

- There are concerns about the fetus's heart rate during labor.
- You have pushed for a long time, but the fetus's head has stopped moving down the birth canal.
- You are very tired from a long labor.
- A medical condition (such as heart disease) limits your ability to push safely and effectively.

What factors will be considered before choosing assisted vaginal birth?

Before recommending this option, your ob-gyn should consider a number of factors, including

- your fetus's estimated weight
- where your fetus is in the birth canal
- whether the size of your pelvis appears large enough for a vaginal birth

Before an assisted vaginal birth, your [cervix](#) should be fully dilated, and the fetus's head should have dropped down into your pelvis.

What are the benefits of assisted vaginal birth?

One of the main advantages of assisted vaginal birth is that it avoids a [cesarean birth](#). Cesarean birth is major surgery and has risks, such as heavy bleeding and infection. If you are planning to have more children, avoiding a cesarean birth may help prevent some of the possible future [complications](#) of multiple cesarean births. Recovery from a vaginal birth generally is shorter than recovery from a cesarean birth. Often, assisted vaginal birth can be done more quickly than a cesarean birth.

What are the risks for me if I have assisted vaginal birth?

Both forceps-assisted birth and vacuum-assisted birth are associated with a small increased risk of injury to the tissues of the vagina, [perineum](#) , and [anus](#) . A very small number of women may have [urinary incontinence](#) or [fecal incontinence](#) as a result of these injuries. Incontinence may go away on its own, or treatment may be needed. (See [Urinary Incontinence](#) and [Accidental Bowel Leakage](#).)

What are the risks for my baby if I have assisted vaginal birth?

Although the overall rate of injury to the baby as a result of assisted vaginal birth is low, there still is a risk of certain complications for the baby. These possible complications include

- injuries to the baby's scalp, head, and eyes
- bleeding inside the skull
- problems with the nerves in the arm and face

There is no evidence that assisted vaginal birth has any effect on a child's development.

What are the chances of having a repeat assisted vaginal birth in a future pregnancy?

If you have had one assisted vaginal birth, you have an increased risk of having one in another pregnancy. But the chances are good that you will have a [spontaneous vaginal birth](#) the next time. Some of the factors that increase the risk of another assisted birth include a long time (more than 3 years) between pregnancies or a fetus that is estimated to be larger than average.

What can I expect after having an assisted vaginal birth?

After an assisted vaginal birth, you may have perineal pain and bruising. It may be hard to walk or sit for a time. If you have had a [perineal tear](#) , it may require repair with stitches. Minor tears may heal on their own without stitches. You likely will have a few weeks of swelling and pain as the perineum heals.

What can I do to help relieve pain and swelling after an assisted vaginal birth?

To help ease pain and swelling after delivery, try the following:

- Take an over-the-counter pain reliever. Ibuprofen is preferred if you are breastfeeding. Acetaminophen also is a good choice.
- Apply an ice pack, cold pack, or cold gel pads to the area.
- Sit in cool water that is just deep enough to cover your buttocks and hips (called a sitz bath).
- Try putting a witch hazel pad on a sanitary napkin. Witch hazel is a liquid made from certain plants and has a cooling effect. Witch hazel is available over the counter at the pharmacy.
- Use a “peri-bottle” while using the bathroom and afterward. This is a squeeze bottle that sends a spray of warm water over your perineum. It can help you urinate with less pain and is a great alternative to using toilet paper for clean-up.
- Ask your ob-gyn or other member of your health care team about using a numbing spray or cream to ease pain. Some of these sprays are available over the counter without a prescription.
- If sitting is uncomfortable, sit on a pillow. There also are special cushions that may be helpful.

Read [Postpartum Pain Management](#) for more information on healing after giving birth.

Glossary

Anus: The opening of the digestive tract through which bowel movements leave the body.

Assisted Vaginal Delivery: The use of forceps or a suction device to help guide the fetal head out of the birth canal. Also called assisted vaginal birth.

Cervix: The lower, narrow end of the uterus at the top of the vagina.

Cesarean Birth: Birth of a fetus from the uterus through an incision (cut) made in the woman's abdomen.

Complications: Diseases or conditions that happen as a result of another disease or condition. An example is pneumonia that occurs as a result of the flu. A complication also can occur as a result of a condition, such as pregnancy. An example of a pregnancy complication is preterm labor.

Forceps: An instrument placed around the fetus's head to help guide it out of the birth canal during birth.

Fecal Incontinence: Involuntary loss of control of the bowels. This condition can lead to leakage of solid stool, liquid stool, mucus, or gas. Also called accidental bowel leakage.

Obstetrician–Gynecologist (Ob-Gyn): A doctor with special training and education in women's health.

Perineal Tear: A tear that occurs in the area between the vagina and the anus. A tear can happen at the time of vaginal delivery.

Perineum: The area between the vagina and the anus.

Regional Anesthesia: The use of drugs to block sensation in a region of the body.

Spontaneous Vaginal Birth: A vaginal birth that occurs without assistance from forceps or a suction device.

Vacuum Device: A suction cup that is applied to the fetus's head to help with birth.

Vagina: A tube-like structure surrounded by muscles. The vagina leads from the uterus to the outside of the body.

Urinary Incontinence: Involuntary loss of urine.

If you have further questions, contact your ob-gyn.

Don't have an ob-gyn? [Learn how to find a doctor near you.](#)

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Last updated: May 2021

Last reviewed: May 2022

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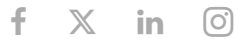
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