

Are league tables controlling epidemic of caesarean sections in South Korea?

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Abstract

Objective To assess the impact of the publication of hospital caesarean section rates on the reduction of these rates in South Korea, and explore associated factors contributing to the decrease.

Design Observational study.

Setting South Korea.

Sample Two hundred and sixty-three hospitals in South Korea.

Methods The caesarean section rates of 263 hospitals, before and after the release of caesarean section rates to the public, were obtained. The factors influencing the reduction in hospital caesarean section rates were also explored using multiple logistic regression.

Main outcome measure Hospital caesarean section rates.

Results After the release of information in 2000, the total (clinic and hospital) caesarean section rates in 2000 and 2001 decreased to 38.6% and 39.6%, respectively, from 43.0% in 1999. Caesarean section rates for hospitals were 45.9%, 42.7% and 44.6% in 1999, 2000 and 2001, respectively. Hospitals with the highest baseline caesarean section rates (OR 9.4, 95% CI 4.2–21.0) and highest number of deliveries (OR 8.1, 95% CI 2.1–31.1) were significant factors contributing independently to a decrease in caesarean section rates. Market share, competition, characteristics of revenue generation and ownership did not significantly influence the change of rates.

Conclusion The public release of information on caesarean section rates in Korea has reversed the ever-increasing trend in these rates. Hospitals with pre-existing high caesarean section rates or a larger number of deliveries were influenced by the information release and could be the main targets for interventions to decrease these rates.