

Breech Babies

By 36-37 weeks of pregnancy, most babies will be head down. Some babies may be bottom down or 'breech'. Breech babies are a variation of the norm, they are just a lot less common than head down babies but this is not usually a problem. If baby is not head down by 37 weeks there is still time for baby to turn before labour begins. Only 3-4% of babies are breech at the time of delivery. People used to deliver breech babies vaginally all the time many years ago. At some point caesareans began to be recommended and over time as this became common, care providers lost confidence in how to support breech birth as many had never been in attendance at a breech vaginal delivery. Research shows that having a confident and experienced care provider in attendance is proven to have a huge effect on the safety of breech vaginal delivery.

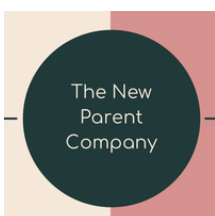
Options with a breech baby

ECV- External Cephalic Version

ECV is performed by a healthcare professional applying firm pressure to the outside of the bump to encourage baby to turn head down. Often a muscle relaxant is given via injection to relax the stomach and give baby more room to move during the procedure, ECV is more successful with this method. Before ECV there is usually an ultrasound to check that baby is breech and then another one after the procedure to check if baby is head down. The pulse and BP of the parent is checked before beginning. The baby's heart rate will be monitored during and after the procedure and there is a 1 in 200 chance that an emergency caesarean may be required after ECV due to changes to baby's heart rate or bleeding from the placenta. Overall ECV is successful in 35-57% first pregnancies and 52-84% of subsequent pregnancies. Read up on the procedure before deciding whether to go ahead with it.

Planned Caesarean

Some people may choose to book a caesarean to birth their breech baby. This can be booked for a certain date, an elective caesarean or just planned for when labour begins, a planned caesarean. Some people prefer to have some idea of when their baby will be born and others like to know that a) their baby was not going to turn head down on it's own before labour and b) that their baby is born when they are ready. It is up to the birther to decide what option they are most comfortable with and discuss it with their care provider.



Vaginal breech birth

Many people will choose to plan a vaginal breech birth. If this is their preference they should discuss their specific circumstances with their care provider. They should take into consideration the position of the placenta, the presentation of baby and any special circumstances. The risks associated with a breech vaginal delivery are a small chance of baby's head or shoulders becoming stuck on a part of the parent's pelvis and requiring some maneuvers to help them out. There is also a chance of the cord coming out first, cord prolapse. In the case of cord prolapse an emergency caesarean would be recommended to prevent the cord being trapped by baby's body and reducing the oxygen to baby. If the birther is informed about their options and the pros and cons of each then they should choose whatever method of birth they feel is best for them. The birther should ask about their care providers experience with breech vaginal birth to ensure that those in attendance will be confident on the day. Breech vaginal birth is often most successful when the birther is in a hands and knees position and the care providers remain as hands off as possible. If planning a vaginal breech birth then get informed about breech birth, read positive stories and ensure you create a breech specific birth plan to help you smash it! Don't forget to do a head down birth plan too in case baby decides to flip before the big day!

Other things to try

If baby is in a breech position then www.spinningbabies.com will have positions and exercises to help encourage baby to turn, it's worth doing these to encourage a head down position in the third trimester. Other things that people try to turn babies are moxibustion, acupuncture, visiting a chiropractor and hypnosis. Look into each of these things before undertaking them and discuss with your midwife if unsure if recommended for your circumstances.

Resources

RCOG- Breech Baby Information Leaflet

Sara Wickham- New Research on Upright Breech Birth

FB group- Breech Birth UK

Podcast- Birth Kween's Episode 72: Breech Birth with

Nicole Morales

