

**What is the breech position?**

The breech position is when your baby’s head is up with either “bottom down” or feet down in your pelvis.

**What are my choices?**

Prior to 36 weeks your baby will have lots of room in the pelvis to change positions and will likely do this frequently. Only 3- 4% of babies are breech at 37 weeks.

The vast majority of breech babies are delivered via cesarean section here in Canada due to a study that demonstrated a higher risk to babies who delivered vaginally when in a breech position, however this is changing.

According to the guidelines from the Society of Obstetrician and Gynecologists of Canada, Physicians should no longer automatically opt for caesarean sections in the event of breech birth. This stems from a comprehensive analysis of the research and clinical evidence around the safety and of vaginal breech births. Your decision should take into consideration your individual circumstances and whether there are obstetricians in your community well trained and willing to attempt a vaginal breech delivery. Of course the choice is ultimately yours.

**What can I do to help my baby turn?**

* Knee chest position 15-20 minutes several times a day
* Pelvic rocking while on hand and knees
* Shining a light directly above pubic bone
* Place a bag of frozen peas on the your belly where the back of baby’s head lays
* Hypnosis
* Talking to baby
* Visualization
* Moxibustion- Traditional Chinese medicine to stimulate acupuncture points
* Chiropractic therapy- Webster Technique
* Swimming; knee chest position in water
* Place an ear-bud above your pubic bone and play music very softly
* Sit in a tailored fashion and bend forward as far as possible from the waist several times a day to drive the vertex deep into the pelvis.
* Homeopathy- Pulsatilla 30c daily

External Cephalic Version (ECV)

An ECV is the manual manipulation of your baby from its current position to a vertex position. This is done externally applying varying degrees of pressure to your abdomen.

Studies have shown that ECV’s are safe however there is some risk involved.

* Your baby’s heart rate may decrease however this usually resolves quickly
* There may be a prolapsed cord, injury to the cord or interference with the baby’s circulation
* May stimulate labour
* May cause premature separation of the placenta
* Your water may break prematurely
* The procedure may be uncomfortable

You may not be a candidate for an ECV. Please discuss this with your midwife.

The success rate of an ECV is related to the skill of the person doing the procedure. If the ECV is successful your baby may turn back but the procedure can be repeated if this occurs. If the procedure is unsuccessful you will need to discuss your options and make a decision around giving birth vaginally or planning a c/s.

**Online Resources**

[www.spinningbabies.com](http://www.spinningbabies.com)

<http://www.sogc.org/media/pdf/advisories/CpgBreechJune09_e.pdf>