

## External Cephalic Version

Turning a breech baby in the womb

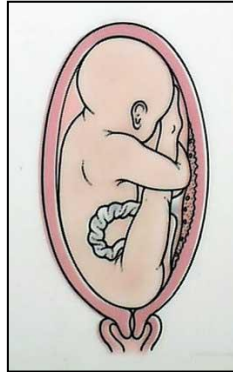
### Patient information Leaflet



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### **What is a breech position?**

Breech position means that your baby is lying bottom first in the womb instead of in the usual head first position.



**Most babies are born head first but at the end of pregnancy, around 2% are found to be breech, 30% of babies being breech at 28 weeks and around 25% being breech at 32 weeks.**

Before 37 weeks it doesn't matter if your baby is breech, as there is a very good chance that the baby will turn spontaneously. After that time there are some babies that will turn themselves but it becomes less likely. If your baby remains in a breech position, an appointment will be made with an obstetrician to discuss your birthing options

### **What does external cephalic version mean?**

External cephalic version (ECV) is a procedure used to turn a baby from a breech (bottom first) to a Cephalic (head down position). This procedure takes place in a room on the Central Delivery Suite

### **How can ECV help?**

If you have had a baby before it may be possible to have a vaginal breech Birth and you can discuss this with the obstetrician. If this is your first baby, and it is breech, it is generally considered safer to deliver by elective caesarean section.

If this is your first baby or you do not wish to give birth with your baby bottom first, we can offer an ECV that is performed after 36 weeks to enable you to attempt a normal vaginal delivery. If it is your 2<sup>nd</sup> baby, ECV will be offered after 37 weeks

### **What are the risks of ECV?**

All treatments and procedures have risks. The risks of ECV are low, however about one in 200 (0.5%) babies need to be delivered by emergency caesarean section immediately after an ECV because of bleeding from the placenta and/or changes in the baby's heartbeat.

### **What will happen if I choose not to have an ECV?**

If you decide not to have an ECV we will support your decision. It will be necessary for us to discuss with you how you wish to give birth to your baby and if this is your first baby it is generally considered safer to deliver by elective caesarean section.

### **What alternatives are available?**

There is no scientific evidence that lying down or sitting in a particular position can help your baby to turn. Always ask if you are unsure or want further information.

### **How should I prepare for an ECV?**

As there is a very small risk of you needing a caesarean section we would advise you bring an overnight bag for you and your baby.

### **What happens during an ECV?**

An ultrasound is carried out to determine:

- Your baby's position
- Location of the placenta
- Amount of amniotic fluid

An electronic fetal heart monitoring will be carried out before and after the procedure to monitor the wellbeing of your baby.

Before the procedure you will be given an injection of a medication which relaxes the womb muscle and prevents uterine contractions. When the womb is relaxed the doctor will attempt the procedure to turn the baby

You may wish to change into a gown, to protect your own clothes from the scan jelly and to allow free access to your abdomen.

You will be asked to go to the toilet to pass water before the procedure, as a full bladder may feel uncomfortable and reduce the chance of the ECV being successful and make you uncomfortable

With both hands on the surface of your abdomen – one by the baby's head and the other by baby's bottom, the doctor will push and roll the baby into a head down position.

You may feel some discomfort during the procedure gas and air could be provided to ease the discomfort. You will be monitored post procedure for a short time and if all is well you can go home and resume normal activities. You will have a blood test to ensure there has been no transfer of blood from the baby to your blood.

### **What should I expect after ECV?**

You may notice some mild abdominal discomfort following the procedure. You should telephone the delivery suite on **0161 922 6173/ 6172** if you have bleeding, abdomen pains, contractions or reduced movements of your baby after ECV.

**If you are rhesus negative you will need an Anti D injection post procedure.**

### **Can my baby turn back?**

Unfortunately a small number of babies will turn back to a breech position after a successful ECV. If this happens you can have a repeat ECV if you wish.

### **Where can I get more information?**

**[www.rcog.org.uk](http://www.rcog.org.uk)**

If you have any questions you want to ask, you can use this space below to remind you

If you have a visual impairment this leaflet can be made available in bigger print or on audiotape. If you require either of these options please contact the Patient Information Centre on 0161 922 5332

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#### Document control information

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