

Patient Information

Breech Birth

Definition:

Most babies adopt a "head down" position in utero, in such that they may exit the pelvis and vagina in this manner. However, the baby may present with buttocks or feet first. This is what we call a breech presentation.

Here are the 3 possible breech variations:



Frank breech: The baby's buttocks are aimed at the birth canal with its legs sticking straight up in front of his or her body with the feet near the head.



Complete breech: The buttocks are pointing downward with the legs folded at the knee and feet near the buttocks



Footling breech: At least one foot is pointing downwards, which means that the legs would need to come out first.

Which is the method of birth when the baby is breech?

In the majority of births, it is the head of the baby that presents first, if your baby is breech, nothing formally prevents you from having a vaginal birth; however, there are certain favorable conditions that are desired by the Society of Obstetricians and Gynaecologists of Canada (SOGC).

- Estimated full-term fetal weight between 2,500 to 4,000 grams (determined by ultrasound)
- Normal flexion of the fetal head (determined by ultrasound)
- Frank breech or complete breech
- Pelvis clinically adequate
- And mostly, your willingness and authorization, as your cooperation throughout labor and delivery is essential.

Previously, in Canada, the method of delivery for babies that presented breech was to deliver by a caesarean section. Today, health professionals recommend that, in certain circumstances, we deliver a breech baby vaginally. A vaginal birth presents advantages to the health of the mother which include a quicker recovery, less pain and higher chances to have a vaginal delivery in subsequent pregnancies.

The risks of a vaginal breech birth are no higher than a scheduled caesarean, knowing that certain risks of injury or lack of oxygen are not always avoidable, even when the baby is head down.

What is the process if I choose to have a vaginal breech birth?

It is very important to know that the final decision will be taken by the obstetrician on call during your labour/delivery who may very well be a different doctor than the physician you saw throughout your pregnancy. This decision will be taken with your consent. The method

of delivery can change depending on how your labour evolves. Your labour will be attentively monitored like with any other patient. An epidural is possible and is even recommended. The cervix should dilate regularly and harmoniously.

When the baby presents breech, the birth may be more difficult for him or her. The head is the largest part of the baby's body. When the baby presents head down, the head is delivered first and when the baby is breech the head is delivered last.

During a vaginal breech birth, you will push your baby's legs and body out of your vagina. After, the doctor will support your baby's body while an assistant applies pressure on the lower abdomen. This will facilitate the passage of your baby's head into your pelvis while you are pushing. In certain circumstances, it is possible for the doctor to use other maneuvers or forceps to facilitate the birth of your baby's head.

Even if you and your doctor decide to attempt a vaginal breech birth, it may be necessary to have a caesarean birth for your and/or the baby's wellbeing if the labour does not progress properly. This is why a vaginal breech birth must be done by a doctor that is experienced in breech deliveries, in the hospital where it is possible to have a caesarean if it were to be needed, and this, within a reasonable delay.

A caesarean is recommended during labour if:

- The labour is not progressing normally
- The baby's umbilical cord is presenting before the baby
- The baby is not presenting in complete breech or frank breech
- The baby's heart rate rhythm is abnormal

Advantages and disadvantages of a planned caesarean delivery?

A planned caesarean birth prevents an unplanned caesarean during labour and reduces, but does not completely reduce, the risks of traumatic lesions that could occur during a vaginal delivery.

A caesarean is a surgical intervention that has higher risks than a vaginal birth (infection, hemorrhage, thrombosis...). Post-operative pain can persist for many weeks. During your next pregnancy, the existence of a scar on your uterus increases your risk of uterine rupture (1% of cases), which could lead to a maternal hemorrhage and even more rarely a survival risk for the baby (1 case per 1000)

What can I do to help my baby move into a head down position before labour?

Certain positions can be shown to you to help make room for the baby to turn.

Most babies are in a head down position in the last 4 weeks of pregnancy. However, if your baby is breech after the 36th week of gestation, your medical professional can attempt to turn the baby so that the head can engage in the pelvis. A technique called an external cephalic version can be attempted to help gently turn the baby so that the head can be in the optimal position for labour and delivery. To perform this maneuver, the doctor must place his/her hands on your stomach and then will push or lift the baby. It may be possible that we administer a medication that can help your uterus relax to facilitate the version.

During the maneuver, we will monitor the baby's heart rate and we shall confirm baby's position with an ultrasound. In very rare cases, the version can have a negative effect on the baby's heart rate or can lead to preterm labour. Your doctor will be ready to deliver the baby by either a vaginal birth or by caesarean if the need arises.

Sometimes, the baby will turn back into a breech position. If you believe your baby is once again breech, please discuss this during your next appointment. It is possible that the doctor may attempt another version; however, as the baby continues to grow in the last weeks of pregnancy, there will be less space in the uterus for the maneuver.

Finally...

A breech presentation does not necessarily mean you will have to have a caesarean birth. Your doctor will help you understand the options that are available to you so that you may make the best possible decision for your health as well as the health of your baby. To learn more about breech births, please consult the following resources:

- *Healthy beginnings, giving your baby the best start, from preconception to the birth*
- *Society of Obstetricians and Gynaecologists of Canada on breech birth*

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Websites : <http://sogc.org/publications/breech-childbirth/>