

EXTERNAL MANUAL VERSION

INFORMATION FOR PREGNANT WOMEN

Your physician or your midwife has referred you to the high-risk pregnancy clinic (GARE) to have your baby's position changed by external manipulation, called version. You will find that the following information will answer some of your questions and prepare you for your appointment.

WHAT IS EXTERNAL MANUAL VERSION?

External manual version is a technique that consists of turning a baby to a head first presentation. This technique is performed by an obstetrician-gynecologist from the 35th week of pregnancy or later. The technique is done with the hands by manipulating the abdomen to rotate the baby.

WHAT ARE THE ADVANTAGES?

The final objective is to reduce the cesarean section for a breech. The vaginal birth is possible with specific criterias but have a higher rate of complication than normal vaginal birth with the head down.

Version statistics

- Successful version reduce the likelihood of cesarean section.
- The overall success rate varies between 30% and 80%.
- 2.5% of successful version result in the fetus returning to its original position.
- About 4.3% of unsuccessful version result in a spontaneous version of the fetus.

(AMPRO 2022)

ARE THERE RISKS OR DISADVANTAGES?

A version is a regular intervention that is simple and safe in most cases. **Very rarely**, certain incidents may occur during or after the procedure: rupture of the bag of waters, vaginal bleeding, uterine contractions, and irregular heart rate for the baby. These incidents are mostly harmless, but sometimes may require hospitalization for **temporary observation**.

In exceptional circumstances, an emergency caesarean may be performed. This type of situation remains **rare** because the majority of versions are carried out with no complications.

Before the version, you will be able to discuss the risks related to this procedure during your consultation with the obstetrician-gynecologist.

WHAT ARE THE STAGES IN THE PROCEDURE?

- The baby's heart rate is recorded for a period of 20 to 30 minutes.
- Consultation with the obstetrician-gynecologist.
- Fetal ultrasound.
- Version
- After the version, the baby's heart rate will be monitored again for an hour.
- If your blood group is Rhesus negative, you will be given an injection of an Anti-D gammaglobulin called "WinRho".

If the version is successful: You will be authorized to leave and your physician or midwife will continue with your follow-up.

If the version is unsuccessful: the obstetrician-gynecologist will discuss with you the most appropriate delivery method (vaginal or caesarean).

IS IT PAINFUL?

The manipulations are generally well tolerated. Some mothers may experience slight discomfort.

ARE THERE ANY CONTRA-INDICATIONS?

Certain conditions constitute a contra-indication to a version. Here are a few examples: pregnancy with twins, severe amniotic fluid (bag of waters) insufficiency, and abnormality of the uterus or placenta.

Your physician or midwife will assess with you the criteria that can rule out the possibility of a version.

APPOINTMENT

The nurses at the GARE clinic will contact you to give you the date, time and place of your appointment.

CONSENT

The information, advantages and risks of the external manual version have been explained to me.

User

Date : _____ Name : _____ Signature : _____

Witness

Date : _____ Name : _____ Signature : _____

For more informations and see video of version :

Go to; <http://www.cisss-outaouais.gouv.qc.ca>

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