

# BREECH BIRTH

At term, 3-4% of babies will be presenting in the breech position (baby's bottom or feet coming first). Most breech babies in Australia today are born by caesarean surgery. Understanding the issues in breech births will help you to make informed decisions about your care, if you find that your baby is presenting in breech position near the end of your pregnancy.

In recent years, breech has changed from being thought of as a variation of normal to being something highly dangerous. Hospital birth centres usually do not allow natural breech births. The Term Breech Trial (1) led to the widespread belief in maternity care that a breech birth should be a caesarean birth, and a professional culture that may be unsure and deskilled in birthing a breech in a gentle and natural way. The outcomes and recommendations of this research have been challenged in professional literature, and many experienced practitioners believe that natural breech birth can be safe.

Some maternity services provide the option of external version (ECV), in which they attempt to turn the baby to a cephalic (head-first) presentation. This procedure is usually undertaken by an obstetrician in a hospital, with ultrasound and electronic fetal monitoring, and the use of a drug that relaxes the uterus. If the ECV procedure resulted in bleeding or fetal distress, the doctor would probably advise a caesarean birth immediately.

Traditional Chinese practitioners may recommend moxibustion and/or acupuncture to help the baby move to a cephalic presentation.

There are many ways in which a labouring woman and those providing care for her can either work with the natural process, or interfere. Whether to plan for natural vaginal breech birth, or a medically managed (either vaginal or caesarean) birth is an important decision. The options or choices that you have will be influenced by many factors including the position of your baby, the skill of your primary care provider (midwife or doctor), and the environment in which you labour.

**In summary:**

The progression of natural breech birth is likely to include:

- spontaneous labour
- no augmentation
- no ARM (artificial rupture of membranes)
- birth in the upright, active position of your choice
- second stage by maternal propulsion and spontaneous expulsion guided by the practitioner

**This information is intended for consumer guidance, and is not able to provide advice in an individual situation. Decisions should be made in discussion with the practitioner who is professionally responsible for your maternity care at the time.**

**If you are thinking about a natural breech birth here are some important points to remember:**

- If you go into spontaneous labour and have good progress with the baby moving down then it is likely that your baby is going to birth well
- If you do not labour well, or your baby does not move down into the pelvis when in labour, augmentation is not appropriate to aid decent. You should reconsider your birth options at this point.
- "Hands off a birthing breech" is the well-known chant of experienced practitioners and the baby should not be touched unless really necessary\*
- You and your baby work together to aid the mechanism of birth, and you will need to be upright and moving in labour. Your practitioner is there to watch and assist only if required\*
- Water is a good option in both the labour, for pain relief, and birth of a breech baby. During the birth it is easy to keep a 'hands off' approach in the water.

\* What is 'really necessary' or 'only if required' are crucial points of professional knowledge.

If you plan vaginal breech birth, the skill of your midwife or doctor who is taking professional responsibility at the time of birth is highly significant in achieving a good birth. Do not assume that a midwife or doctor will be skilled in this aspect of natural birth. Make sure you talk in detail to the care provider of your choice to see if they can give you the assistance to birth in the best way possible.

**Recommended Reading:**

Maggie Banks, 1998. Breech Birth Woman-Wise. Pub Birthspirit Books, New Zealand.

Mary Cronk, 1998. Midwifery Skills needed for Breech Birth. [www.radmid.demon.co.uk/skills.htm](http://www.radmid.demon.co.uk/skills.htm)

**References:**

Hannah ME, Hannah WJ, Hewson SA, Hodnett ED, Saigal S, Willan AR, Term Breech Trial Collaborative Group. Planned caesarean section versus planned vaginal birth for breech presentation at term: a randomised multicentre trial. *Lancet* 2000; **356**:1375-83.

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