

# External Cephalic Version (ECV)

# **Turning a Breech Baby**

## Information for consumers

### What is Breech?

Breech is when your baby is lying bottom or feet first. It is very common in early pregnancy. As pregnancy progresses babies usually turn by themselves into the headfirst position (also known as cephalic) from 36 weeks onwards.



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## What is External Cephalic Version (ECV)?

A vaginal breech birth is more complicated than a normal vaginal birth. Your doctor or midwife may advise trying to turn your baby to a head-first position. This is done using a technique called External Cephalic Version (ECV). Firm pressure is applied to your abdomen. This helps the baby turn to lie headfirst. During ECV a safe medication is used to relax the uterus to help improve the chance of successfully turning your baby. It is usually tried after 36 weeks.

# Is ECV safe for me and my baby?

ECV is generally safe but like any medical procedure complications can sometimes occur. Your baby's heartbeat will be carefully monitored before and after the ECV. About 1 in 200 babies may need to be born by an emergency caesarean section immediately after an ECV because of bleeding from the placenta and/or changes in the baby's heartbeat. Because of this small risk, an ECV should always be performed in the hospital by an experienced clinician.

# Is ECV painful?

ECV can be uncomfortable however if you are experiencing pain you need to tell your doctor or midwife immediately.



## Does ECV always work?

ECV is successful for about half of all women (50%). Your doctor or midwife should give you information about your own individual chance of success.

### What do I need to do at home after an ECV?

You must telephone the hospital if you have any bleeding, abdominal pain, contractions, or reduced movements after ECV

## You should not have an ECV if?

- You need a caesarean section for any other reason.
- You have had vaginal bleeding during the seven days prior to your ECV.
- Your baby's heart rate tracing (also known as a CTG) is abnormal.
- Your uterus is not the usual pear shape (i.e., a 'heart shaped' or bicornuate uterus).
- Your waters have broken.
- You are expecting twins or more.

## Is there anything else I can do help my baby turn?

There is no scientific evidence that lying down or sitting in a particular position, or other "natural methods" can help your baby to turn. Please discuss this further with your doctor or midwife.

# If I say "no" to an ECV what happens next?

If you decide not to have an ECV and your baby remains breech, your options include Vaginal breech birth or elective caesarean birth. Both options involve risks and benefits and may not be suitable for everyone. Your doctors and midwives will discuss each option with you, considering your individual circumstances and will help you to plan a positive experience, either way.

... Or your baby might turn "headfirst" on their own!

### What now?

We are here to help you make informed decisions about you and your baby's care. Take the time to consider the information in this pamphlet.

- If you have questions, ask your doctors and midwives,
- Talk to your partner/support people,
- Make the decision that feels right for you,
- Remember you do have the right to change your mind, before and during procedure.

Always ask if you are unsure or want further information, or please call:

Grampians Health Ballarat Maternity Outpatients phone 5320 4820

Grampians Health Horsham Maternity Outpatients phone 5381 9010