

# **ECV**

## Breech Presentation and External Cephalic Information for Mothers

#### After the procedure:

The baby's heartbeat will be electronically monitored. You will need to have an injection of anti-d, only if you are rhesus negative blood group.

If all is well then you will be allowed to go home and you will be given a follow up appointment.

If the baby remains in a head down position you should be able to go into labour normally.

If the procedure has not been able to turn your baby, then an appointment may be made for an elective caesarean section.

Should the baby turn to a head down position spontaneously before or on admission to the ward, then there will be no need to have a caesarean section.

#### Are there any risks?

The risks of ECV are very small (less than 1%) and are reduce by careful ultrasound scanning of the baby before and after the procedure.

Rarely the following can occur from the procedure:

- Premature Labour.
- Premature rupture of the membranes.
  - Small blood loss.
- Fetal distress leading to an emergency caesarean section.

#### What alternatives do I have?

Caesarean delivery is the main alternative, but this is not without risk such as bleeding, infection and longer hospital stay for you and your baby.

#### Step 1

Beginning the forward roll. The doctor places his or her hands on the abdomen, moving the baby up out if the pelvic bone.



Step 2
The baby is turned either forwards or backwards.



Step 3 ...until the baby is in the vertex (head-down) position.



#### **How Successful is it?**

The procedure works in about half of all cases. Occasionally the baby can turn back. If the procedure is not successful then we tend to offer a caesarean section, because of the problems associated with a breech vaginal delivery.

### **The Procedure**

On the day of your appointment

- Have a light breakfast before 6am, then nothing to eat or drink after that.
  - Contact delivery suite to confirm appointment time.
    - Attend delivery suite at your appointment time.

#### On admission you will:

- Have your abdomen felt and scanned to check the baby's position.
- If the baby is breech you will then be given either a tablet or a small injection before the procedure to help relax the womb.
- There may be some discomfort during the procedure, but it should not be painful.
  - Ultrasound scanning will be used during the procedure.

#### **Breech Presentation – What is it?**

This is when your baby is not "head down" (cephalic) in the womb (uterus) like most babies are in the last few months of pregnancy. In pregnancy many babies are breech and turn spontaneously.

#### What is the problem?

There are increased risks of complications to the breech baby being delivered vaginally. One way to avoid this is to have a "external cephalic version" (ECV). It is recommended that this be offered to all women with uncomplicated breech at 36 weeks.

#### ECV - What is it?

It is a way to try to turn a baby from a breech to a head down position from the outside of the 'tummy'.

If you have any questions or concerns, please ask to see a midwife and they will be able to give you further information or refer you directly to a consultant obstetrician.

**Delivery Suite Contact Number:** 

<u>01922 656 246</u>