

RUH

Patient information: External Cephalic Version (ECV) – your questions answered



This leaflet contains some useful information about what can be done if your unborn baby is in breech position

What is External Cephalic Version?

External Cephalic Version (ECV) is a procedure for turning your baby from breech (bottom down) to a cephalic (head down) position.

Why is this attempted?

Several good studies show that ECV reduces the number of breech deliveries, either vaginal or by caesarean section, both of which are associated with increased problems compared with normal 'head down' vaginal birth.

After arriving on the central delivery suite, the baby's heart will be recorded to check that the baby is healthy and an ultrasound scan will check the baby's position and the amount of fluid surrounding it. The doctor will then 'massage' the baby round either in a forward or a backward somersault.

This will only be attempted on one to three occasions and will take a maximum of ten minutes. Sometimes a tiny injection under the skin of your arm will be recommended before starting because this relaxes the womb and gives the baby a little more room for turning.

After the procedure, the baby's heart beat will be checked again and then you may go home. The whole hospital visit is usually a couple of hours.

If the ECV is successful, you should see your midwife a few days later to check that the baby has not turned back to the breech position. However, this would be unlucky because only 5% (one in twenty) of babies who are turned will return to the breech position.

When is ECV performed?

As many breech babies will turn by themselves before 37 weeks, we recommend that ECV is not attempted until after this time.

Can ECV be attempted on all breech babies?

We do not like to attempt ECV if:

- the baby is small for the number of weeks of pregnancy
- the amount of water surrounding the baby is markedly reduced
- there has been recent bleeding or blood pressure problems.

How often is ECV successful?

There are many factors that influence the success rate. These include the position of the placenta, the position of the baby's back and legs, whether the baby's bottom has descended into the pelvis, the amount of water around the baby and whether you have had any previous children. Overall, up to 50% of babies can be turned.

Is ECV painful?

The procedure is sometimes very uncomfortable but if it is too painful, we will stop immediately. We obviously do not wish to hurt you or your baby.

Contact telephone numbers

Monday-Thursday 9am-5pm and Friday 9am-1pm:

- **Antenatal Clinic** **01225 824659**
- **Antenatal Reception** **01225 824645**