Manchester University
NHS Foundation Trust
Saint Mary's Hospital
Maternity Service

Information for Patients

External Cephalic Version (ECV)

During the final weeks of pregnancy, your baby will usually turn so that it is in the head down position ready for the birth. However, in about 1 in 30 pregnancies, the baby does not turn and remains in a breech presentation (bottom or feet first). Your doctor will discuss the options available to you and help you decide how best to deliver your baby safely. These include: aiming to deliver your baby normally in a breech position, trying to turn your baby before labour so that is in a 'head down' position (external cephalic version) or planning a caesarean section. Current recommendations are that a 'normal' birth can be made safer and also more likely by having an **external cephalic version (ECV)**.

What is an ECV?

This involves one of our specially trained doctors encouraging the baby to turn so that it is head down (*'cephalic presentation'*), by means of pushing on the mother's tummy, which makes the baby do a forward or backward roll.

An ECV is usually done at around 37 weeks of pregnancy, although it can be done later – even in early labour. For first time mothers an ECV may be offered from 36 weeks of pregnancy.

What happens?

Your baby's heartbeat will be checked using a heart rate monitor (a 'CTG') to make sure that your baby is well. You will be given some medicine (Terbutaline) by a small injection into your arm to relax the womb a little. This is safe for your baby and makes the ECV more likely to work. The baby's position and condition are checked by ultrasound scan, then the doctor will apply pressure on your tummy to try to encourage your baby to turn around.

This part only lasts a few minutes and you may experience some discomfort whilst pressing on your tummy. You will be given the option to use gas and air (pain relief you breath in and out) to help with this but if you become too uncomfortable the doctor will stop.

Your baby's heartbeat will be monitored throughout and after the procedure.

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If the ECV is successful, you may not even notice that the baby has turned, just like when turning occurs by itself.

Note: Women who are Rhesus negative will need a blood test and Anti-D injection after the procedure to prevent complications related to this blood group. If you are Rhesus positive, you won't need this.

Is ECV Safe?

Yes. Your doctor will only offer an ECV as an option for you if it is safe to do so and the complication rate is very low. There is plenty of scientific evidence which shows that ECV does not cause harm to your baby or its placenta and careful monitoring before, throughout and after the procedure reduces the chance of complications.

There is a slight risk (less than 1 in 200) that the baby may become distressed and a very small chance that delivery by caesarean section will be necessary.

What is the chance of a successful ECV?

About half of babies will turn successfully, but it is very difficult to predict which babies will turn. Once a baby is successfully turned, very few turn back to breech again (about 1 in 40).

After ECV – what then?

If the ECV is successful then you can continue to have the rest of your antenatal care as usual, whether that be with your community midwife or in the antenatal clinic.

If your baby does not turn then your doctor will discuss your options for delivering your baby safely. It is safe to try and have another ECV if the first one was not successful.

If after your ECV you are worried about anything (for example pain, bleeding, change in your baby's movements) then please contact:

Maternity Triage Department : (0161) 276 6567

If you have any further questions, please feel free to discuss these with your midwife or doctor. Alternatively, you can contact:

Antenatal Assessment Unit on: **(0161) 276 6404; 9.00 am – 6.00 pm.**

For more information on breech babies at the end of pregnancy we recommend that you read the Royal College of Obstetricians and Gynaecologists (RCOG) on-line leaflet – 'Information for you - Breech baby at the end of pregnancy'

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