

# EXTERNAL CEPHALIC VERSION

ÁREA 1 MURCIA-OESTE  
HOSPITAL CLÍNICO UNIVERSITARIO  
VIRGEN DE LA ARRIXACA



This information is intended to guide and help you to look after your newborn baby. If after reading this document you have any doubts or need any clarifications, do not hesitate to ask your baby's pediatrician or nurse.

This and more information about childbirth at La Arrixaca is available on the website [www.murciasalud.es/partonormal](http://www.murciasalud.es/partonormal)



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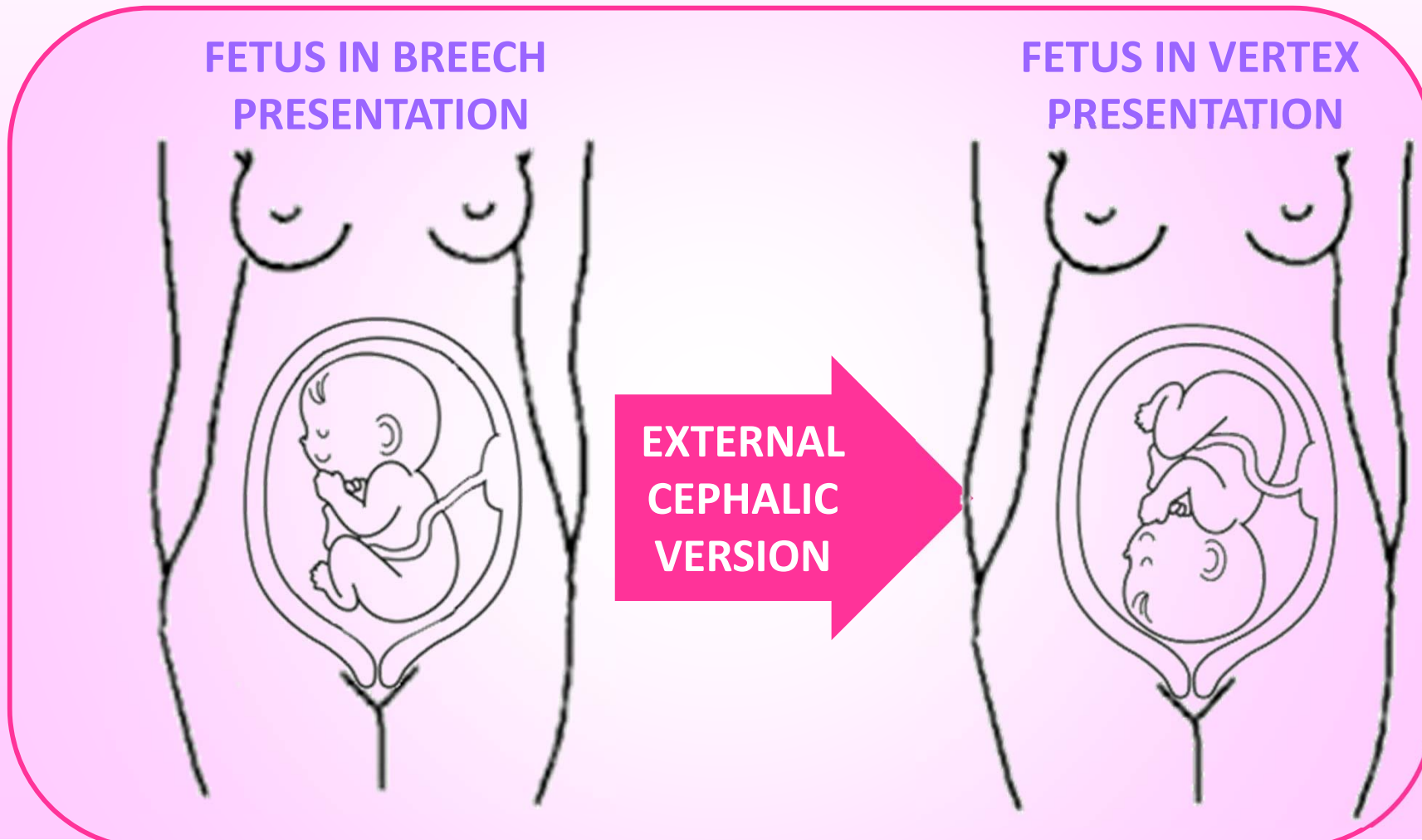
SECRETARÍA GENERAL  
DE INMIGRACION Y  
EMIGRACIÓN

DIRECCIÓN GENERAL DE  
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## External cephalic version. What is it?

It is a procedure that has been used for thousands of years. Using external manoeuvres on the mother's abdomen, the baby is turned from the breech (buttocks-down) presentation to the vertex (head-down) presentation. In this presentation the baby is in a head-down position in the mother's pelvis. It is the optimum position for delivery.



## WHAT ARE THE ADVANTAGES?

Prevent the baby being in the breech position at the time of delivery.

We want to avoid this, because in this presentation both delivery and a Caesarean section (C-section) entail more risk than a delivery in vertex presentation.

A C-section involves major surgery that allows the delivery of a baby through a surgical incision in the abdomen.

Although it is a safe technique for the mother, it requires anesthesia and opening the mother's abdomen. That is why your risk of short and long-term complications is greater than with a vaginal delivery.

## WHERE AND WHEN IS IT DONE?

It is performed at the end of pregnancy, preferably in weeks 37 to 39, although it may be done later.

There is no need to be admitted to hospital for an external cephalic version. It is carried out in the Delivery Unit of our hospital, on an outpatient basis.

## AND HOW?

- Before we begin, you will get an ultrasound to confirm the breech presentation. Also, fetal heart monitoring is used to ensure that the baby is doing well.
- You will be administered medication to relax your uterus. You will then be taken to the operating theatre where you will be given analgesia to avoid pain during the procedure. In this way we prevent the procedure being painful.
- Then the doctor will start the manoeuvres to try to change your baby's position. It does not take very long, usually no more than 5 minutes. During all this time, your baby is controlled by ultrasound.
- At the end of the manoeuvres, the fetal heart rate will be checked. After checking fetal well-being, you will be discharged. Your pregnancy continues normally, following the usual check-ups.

## WHAT POSSIBLE COMPLICATIONS ARE THERE?

External cephalic version is a safe procedure, with a low rate of complications.

The most frequent are: the onset of labour, the breaking of the amniotic sac, and minor bleeding. Exceptionally, it may be necessary to carry out an emergency C-section (less than 1%).

In any case, the risks of version are lower than those of a breech vaginal delivery or a C-section.

## DOES IT HURT?

The perception of pain depends on the mother's threshold of sensitivity and the amount of pressure applied during the manoeuvre.

Without analgesia, it may cause discomfort. That is why the mother is given analgesia in the operating theatre. If the pain becomes unbearable for you, version will be interrupted if you ask us.

## CAN THE BABY GO BACK INTO BREECH POSITION?

It is unlikely. It occurs in less than 5 per cent of cases.

## AND IF VERSION IS UNSUCCESSFUL?

In this case, there are three possibilities:

- In 1-2% of cases it is possible that the fetus positions itself head-down before delivery.
- Version can be repeated after a few days.
- If none of the above occurs, you will be scheduled for a C-section.