

An Audit of External Cephalic Version Outcomes within the Townsville University Hospital Obstetric Department

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Introduction: It is approximated that 3-4% of full-term singleton pregnancies are of breech presentation, with up to 90% of these presentations result in caesarean section delivery (CSD). External Cephalic Version (ECV) is a procedure performed where the aim is to turn a breech fetus to cephalic position with the goal of achieving a vaginal delivery.

Aim: The aim of this project is to examine of the use of External Cephalic Version within the Townsville University Hospital Obstetrics and Gynaecology Department between January 2019 to July 2022, and the associated maternal, fetal, procedural and delivery outcomes in singleton pregnancies.

Methods: The study was a retrospective cohort study where patient data was collected from the electronic medical records system.

Results: Overall, there were 86 patients that met the specified criteria. It was determined that there was a 45% success rate of ECV, where nulliparous women had a success rate of 34% and multiparous had a success rate of 59%, with 82% of these women achieving a vaginal birth. There was evidence that elevated BMI was associated with decreased success of ECV. There was a major complication rate of 3.5% (fetal bradycardia resulting in CSD) and minor complication rate of 5.8% (fetal tachycardia / rupture of membranes / PV bleeding).

Discussion: The recommendations is that ECV should be a routine part of antenatal care with breech pregnancy. In the future, we would like to examine whether women booked for an elective caesarean for breech are offered an ECV.

