

WHAT TO DO IF YOUR BABY IS BREECH

Most babies have turned to the normal head-down position by 32 weeks of pregnancy. If your baby is breech, he or she is positioned so that the bottom is in the pelvis and head up near your diaphragm. There are three types: complete (sitting with legs crossed), frank (legs in a V with ankles near the ears) and footling (one foot or knee dangles down). The frank position is the most common. Premature births are more likely to be breech. A baby may be breech due to physical reasons such as obstructions (placenta or fibroids) near or over the cervix. These should be ruled out first before trying to get your baby to turn. Many breech babies appear to have no apparent reason for being in that position.

Delivering breech babies vaginally used to be part of a physician's training in years past, but now that the majority of these babies are delivered by elective caesarian, the skill has all but died out. Midwives in Ontario are prohibited from planning a homebirth of a breech baby. For this reason, and because there are risks involved with breech delivery and because most first-time mothers with a breech have an elective caesarian, we try to get a breech baby turned long before a woman's due date. The following is a list of options, starting with the least interventive, that may also help your baby to turn head down.

Music: Play pleasant music (Baroque, acoustic, folk, or "new age" relaxation) near your pubic bone. Some babies like it so much that they will turn just to hear it better. You could also have your partner "coax" the baby down by talking near your lower abdomen.

Visualization: Carl Jones in *Visualizations for an Easier Childbirth* (Meadowbrook, Simon & Schuster, New York 1988) suggests that while the mother is doing the breech Tilt (see below) she imagine the baby floating in fluid, head down and comfortable, resting on a pillow of crystal clear water. Also imagine children tumbling, doing somersaults, clothes turning in a dryer or whatever works for you. You can also imagine the baby tucking his/her head and rolling down towards the cervix. Affirmations such as "My baby is head down, ready for labour" can be repeated during the day. Jones also describes how the mother, after doing a relaxation exercise, can get into touch with her baby, send love to him/her, and then talk with her baby, asking such things as "What do you need right now?" or even ask "Why are you breech?" In this way the mother can attempt to intuit the baby's concerns and thoughts.

Work: If you have a hectic lifestyle, you may need to consider stopping work, or if you are at home with small children, getting help in so that you can take some time for yourself to wind down and relax.

Exercise: Swimming may help your baby turn. Headstands or inversions done completely under water may also be quite helpful.

Acupressure: Points located on the outside of the little toes can be massaged or have pressure applied. These points are also used for acupuncture.

Points 15 are located in the groin creases just off of the pubic bone. These points are good for most complications of pregnancy and they open up the entire reproductive system. Place the pads of your fingers on these points lightly and wait for a "pulse" to present itself. It may take a while at first. Make sure both sides feel even and in "sync" with each other. Do not put pressure; the fingers should just rest on the surface. Someone experienced in acupuncture could do an entire treatment to align the energy meridians of the body and help pressure you for labour.

Breech Tilt:

At 32 weeks gestation or later, the mother can lie down with her bottom propped higher than her head. This can be done lying on an ironing board that is higher at one end, or lying with pillows under the bottom (12-18"). Do twice a day for 10 to 20 minutes at a time. Have someone help you get up if you feel lightheaded. Go for a good long walk, and do some squatting if you think the baby has turned. Have your midwife or physician confirm the baby's position. Do not continue the exercise if you think the baby is head down – the baby may turn around again! Babies usually turn while you're sleeping – not while you're doing the exercises. Also, some babies turn sideways before completing the turn to head down. If so, keep doing the tilts until fully head down.

Another technique is to lie down with the hips elevated and knees flexed and gently roll the hips from side to side.

Kneel with the hips up and the head, shoulders and upper chest resting on the floor. The thighs should not be pressed against the abdomen. This can be done as much as 15 minutes, every 2 waking hours for 5-7 days. The theory behind all these exercises is that the baby's bottom is tipped out of the mother's diaphragm and thus the baby is encouraged to turn head down. Have your partner massage the outside of your little toes during the tilt to encourage the baby to turn.

Homeopathy: This method of healing is based on the principle of "like treats like". That is, substances that create certain symptoms are given to relieve those actual symptoms. The difference is that these substances prepared homeopathically are made to be extremely dilute. It is thought that they work by stimulating the body's immune system to heal itself. Seeing a homeopathic practitioner is the most effective way of achieving results. Because the remedies are so dilute, homeopaths claim there are no side effects if given the wrong remedy, only that the thing being treated will not resolve itself. Pulsatilla (dosage 200) often works to turn a breech baby, or a baby that is in an unusual position. Use 2 doses, 2 days apart after the 32nd week.

Hot/Cold Packs: Place a bag of cold vegetables over the baby's head & something warm over your symphysis. Do this a few times a day; babies do not like the cold.

Chiropractic Adjustments: Some chiropractors are skilled in the "Webster's Technique"; a certain chiropractic adjustment known to align a woman's pelvis and facilitate the baby to turn head down. Ask your midwife for a list of chiropractors.

Moxa: Some people experienced in this technique include acupuncturists and shiatsu therapists. It involves burning an herbal substance near the skin at special points.

External Cephalic Version (ECV): This is when the baby is turned using gentle external pressure on the abdomen. An experienced practitioner, with constant monitoring of the baby's heart, must do it. It is recommended that the mother have an ultrasound prior to this procedure to rule out placental problems or obstructions that might be causing the baby to be breech. If such a problem were noted, the version would not be attempted. Midwives tend to do this procedure earlier in the pregnancy when the baby has more room to turn (+/- 34 weeks). Physicians tend to do it closer to term (37-39 weeks), use drugs to relax the uterus and use more force. As it is done in the hospital, if the baby's heart slows to distress, a caesarian can be performed. Overall, doing ECV can reduce the caesarian section rate by half, thus sparing the mother and baby unnecessary surgery.