

Into the Breech!

My story, by Tara Bungard

I was 36 weeks pregnant with my second child when it was confirmed (as I had suspected for a while; that lump in my ribs felt too hard to be a bum!) that she was breech. The doctor who performed the scan immediately told me “we’ll have to review your birth plan and schedule a C section”. I immediately spoke up against this idea, saying I would still be aiming to birth my baby vaginally and was told it was “NHS policy” that breech babies be delivered by caesarean. I am fortunate in knowing my rights within the NHS and knew better than to just accept this mis-information as my only option but sadly I believe I am in the minority. In my experience most women accept this and allow their caesarean to be scheduled, whatever their feelings might be on the matter. I decided not to argue further with this doctor and to go home and start doing some reading on the subject to enable me to make a fully informed and educated decision for me and my baby.

The more I read, the more sure I was that I still wanted a vaginal delivery. I read studies and articles as well as lots of advice from esteemed and highly breech-experienced midwife Mary Cronk. The risks associated with a vaginal breech delivery were to me no more a cause for concern than the risks associated with an elective caesarean. People talk of the risk of hips being damaged by a breech delivery but the baby is still delivered in a breech position by caesarean so the risk is still present. Damage to the head is also used as an argument for a section but from everything I read it appeared that this risk was on the whole limited to assisted delivery of the head. If the mother’s body was left to deliver the baby on its own, there should be no problem. The risk of cord prolapse is another argument for caesareans but the risk in a cephalic presentation is 0.4% and this only rises to 0.5% with a frank breech presentation which is how my baby was sitting. I read advice on the best positions in which to birth a breech baby and decided that I would opt for all-fours, so enabling my pelvis to be as open as possible and for gravity to help out in the delivery of my baby. I wanted my birth to be as hands-off and uninterfered with as possible. I believed that my body should be allowed to birth my baby in its own way.

In the time between discovering my baby was breech and my next appointment at the hospital I tried a number of methods to turn my baby. I saw an acupuncturist for moxibustion (said to be 80% successful and even recommended by the NHS), had a chiropractor perform the Webster Technique (a technique to restore pelvic balance and function) twice, had reflexology, took pulsatilla twice a day, did countless upside-down yoga positions, tried visualisation – even shone a torch on my pelvis (they say the baby will turn to the light) and held frozen peas on my bump (to try and encourage the baby to move her head away from the cold!). After all this I decided to trust that my baby was in this position for a good reason and to accept it. The hospital offered me an ECV (where they attempt to turn the baby round from the outside) but I declined, not prepared to take the risk (although only 0.5%) that it would result in fetal distress and an emergency caesarean.

At my next appointment I was armed with all my research and fully prepared to fight for my right to birth my baby my way. My consultant talked everything through with me (although keenly arguing for a caesarean and quoting a study which I had read had since been refuted) and performed a scan to check that the baby was a good size (too small runs a risk of cord prolapse during delivery and too big presents the chance of the baby becoming stuck in the pelvis) and in a good position to attempt a vaginal delivery. The scan confirmed that all was favourable, yet I was still being strongly urged to schedule a caesarean. The hospital where I was booked in simply did not have a good quota of staff with breech experience and I was warned that my chances of having to attempt my delivery with inexperienced staff was about 50/50. On hearing this I made the decision to try and find another hospital with a better rate of breech delivery.

I contacted a hospital about 25 miles from me and spoke to a midwife on the labour ward. I explained my situation and she assured me that they often did breech deliveries and on finding out that I was a second-time mum actually said “oh, then it’s a doddle!”. (They are happier to attempt a vaginal birth with a breech baby if it is not your first baby because you have a “proven” pelvis; ie. your body has birthed successfully before). This attitude was so different to the one I had come up against in my local hospital and was totally refreshing. I immediately phoned the antenatal clinic to find out how to arrange a transfer and then started putting everything in place.

I had my first appointment at the antenatal clinic at this hospital at 39 weeks. I left rather disappointed as the consultant I had seen had informed me that my delivery would be managed by use of stirrups,

episiotomy and forceps but once I had strongly enforced my preference for an intervention-free birth he made a note that I wished to be midwife-led and only have a doctor in attendance should a major problem present itself. Much of the reading I had done put this doctor's method forward as the way to handle breech babies but it went totally against my belief that childbirth should be a natural and joyful experience. I had adopted Mary Cronk's preference for a breech 'birth' rather than a breech 'delivery' and was prepared to fight for it.

I had had my first daughter at 38 weeks so throughout my second pregnancy had been hoping for the same this time round. My baby, however, had different ideas and the day after my due date saw me back in the antenatal clinic for another appointment. I had had 3 days of contractions 3 days before this appointment so I asked to be examined to see whether I had started to dilate. A lovely young doctor did my exam and told me that I was 2-3cm dilated and performed a sweep to try and encourage things along. It really drove home the lack of breech experience amongst NHS staff when this fully qualified doctor told me that she had never done a vaginal exam on a breech presentation before! She advised that I stay on the maternity ward for a few hours just in case my contractions started up again as we lived 25 miles away and she was concerned it would take too long to get back if things got going quickly. This turned out to be advice that my husband and I were glad we took as within an hour of the sweep I was contracting regularly.

Once my contractions had got to 6 minutes apart my husband went to ask the midwife looking after us at what stage they would want to transfer us to the delivery suite. She told him that they wouldn't consider examining me again until I asked for pain relief. He told her that I had delivered my first baby with no pain relief and expressed concern that he might find himself delivering the baby himself on the maternity ward and wasn't exactly reassured when she told him that this had been known to happen! After about another hour, by which stage my contractions were incredibly strong and frequent, my husband insisted that she come and talk to me about moving to the delivery suite. She asked if she could examine me but having no experience in breech presentation she was unable to tell how dilated I was as she had no head to gauge it by. Another sad drilling home of the lack of breech experienced staff in NHS hospitals.

Finally I found myself in the delivery suite with a lovely and very experienced midwife. She told me that I was 6cm dilated and asked me what I wanted to do. I asked to use the pool and she immediately went and filled it for me. Then she just sat and watched as my body took over and I gave in to my contractions. Only once she sensed a change in the noises I was making did she ask if I felt like pushing and helped me out of the pool and back to my room to birth my baby. I birthed my baby completely unassisted while this wonderful midwife and her supervisor who had come in to oversee the birth just watched and encouraged me. No-one touched me or my baby and there was certainly no talk of stirrups or forceps. I was left to listen to my body and let it take charge of birthing my baby and it rose to the challenge magnificently.

My beautiful baby girl was born at 9.41pm on Tuesday 4th August and we called her Megan Grace.

I am absolutely sure that my husband and I made the right decision for us in choosing to fight for a vaginal delivery. I believe that every couple should make this choice for themselves and be supported in however they decide to birth their baby. It is a sad state of affairs when hospitals are unable to offer experienced staff to support vaginal breech births and I very much hope that this situation will change in years to come. As it stands at the moment trainee midwives are versed in breech scenarios but will probably never actually witness a real life breech birth. How will the rate of vaginal breech birth ever increase if this continues to be the case? Women have the right to choose to birth their babies in whichever manner they feel to be right for them and I hope that by sharing my experience I can encourage other mums to fight for the birth they want.