



# Breech - helping your baby turn to head-down

Adapted from Pomegranate Midwives

Low intervention methods: 32-34weeks

Knee-chest exercise

Get on your elbows and knees, so your hips are higher than your head, and stay in this position for 15-20 minutes a couple of times a day. If the baby is sitting deep in the pelvis, this can bring it high enough that it can move easier and hopefully flip.

Postural inversion or \*breech tilt\*

Lie on your back with your hips propped up 12-18 inches higher than the head, two to three times per day, for between 10-20 minutes at a time. Like the knee-chest exercise, this helps to disengage the baby from the pelvis, and when the baby's head comes up against the inside of the fundus, it is inclined to tuck its head in and do a somersault into the vertex position. It is sometimes recommended to try this with an empty stomach.

### Swimming

Swimming may help to turn a breech baby. This is probably due to a relaxation of the abdominal muscles while being supported by the water, giving baby more room to flip.

# Homeopathy

Homeopathic Pulsatilla causes the muscle fibers in the uterus to even out and may help to turn a breech baby. These are available at most health food stores.

# Hydration

Dehydration can cause low amniotic fluid, decreasing the amount of room for your baby to move around. Make sure that you are drinking adequate fluid to stay well-hydrated, especially before any procedures like massage, acupuncture or ECV.

### Deep relaxation or hypnosis

Practice self-hypnosis – some like to do this in a warm bath with 2 cups of Epsom salts and/or three drops of lavender essential oil. The deep relaxation can help your abdominal muscles/diaphragm/pelvic floor to relax enough to allow the baby to turn. Visualize your baby being head down.

#### Medium intervention methods: 34-36 weeks

TCM: acupuncture &/or moxibustion

A professional acupuncturist will insert needles into acupoint BL67, which is on the outside of the little toe, right next to the nail, to promote breech babies turning. Its effect may be through increasing fetal activity.

Traditional Chinese medicine practitioners also use moxibustion (burning herbs, usually in a cigar shape) to stimulate acupoint BL67. It is possible to buy moxa sticks and try this yourself.

## Massage therapy

An RMT experienced in treating pregnant people, especially those who have treated people with breech babies, will aid in releasing any muscle or fascial tension that has inhibited your baby's ability to move into a vertex position. Often this will be in the mid-back, rib or diaphragm area; it may also include work on your hip flexors such as the psoas.

Chiropractic: The Webster Technique

It is a simple technique, which involves the chiropractor who is trained in this technique working gently on the pregnant person's legs and vertebra, usually requiring a series of two or three appointments.

### High intervention methods: 36+ weeks

External cephalic version (ECV)

ECV involves the external manipulation of the baby, done sometime after the 35<sup>th</sup> week of pregnancy. This is usually done by an obstetrician in the hospital using ultrasound to initially find out exactly how the baby is lying and locate the placenta, and then to monitor the baby throughout the actual procedure. A rare but serious risk associated with ECV is separation of the placenta; this is extremely uncommon due to the guidance of the ultrasound. A common side effect that some people experience is the discomfort caused by the deep pressure used to turn the baby, although some describe it only as a very intense massage.

### After all that, if your baby is still breech...

If your baby remains breech, there may be a good reason why: it may be because of the position of the placenta, or a short umbilical cord that is preventing the baby from moving to the vertex position, or your baby may just be "stuck" with its buttocks so deep in the pelvis that it is unable to move itself around to vertex. These things are not necessarily anything to worry about, and breech may simply be the best presentation for your baby.

If you are interested in the option of a vaginal breech delivery, talk to your care provider about what this would look like. Conversely, if you think you would prefer an elective caesarean delivery, then your care provider can also review with you what this would entail.