



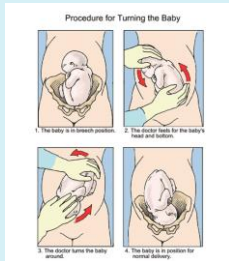
Evidence-based management of external cephalic version in the UK: findings from the 'Think Breech' study

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Background: Breech and ECV



- Breech 3-4% pregnancies
- UK 25-30,000 per year
- 16% of all CS
- Maternal age ↑
- First time mothers ↑
- ECV guidelines
- Term Breech Study

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Objectives

To identify support for evidence-based management of singleton term breech in UK maternity units

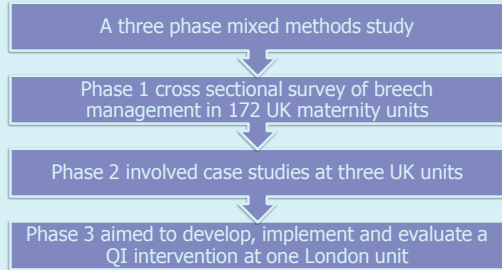
Explore how units support evidence-based identification and management of breech pregnancies

Develop, implement and evaluate a quality improvement (QI) intervention to increase term breech diagnosis and ECV uptake in one London unit

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Methods



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Phase 1 UK wide survey

- 172 UK units (124 units, 72% responded)
- 117 (68%) stated ECV routinely available
- Only 54 (31%) could provide details of the number of women who were offered, accepted or had a successful ECV

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Phase 2 results

- Audit and feedback
- Efficient referral systems to confirm breech presentation
- Routinely offering ECV to all eligible women
- Supporting vaginal breech if ECV is declined or unsuccessful

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Phase 3 results: Barriers to introducing evidence-based practice



Conclusions

Phase 1 highlighted poor uptake of evidence-based term breech management in the majority of UK units.

Phase 2 showed units could be evidence-based to support best practice and importance of leadership.

Phase 3 identified the importance of exploring and addressing organisational barriers prior to attempting to change practice.

Acknowledgements



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Participants

Research supervisors

Project advisory group
