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# Do the findings of the Term Breech Trial apply to spontaneous breech birth? (editorial)

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# Editorial

## *Do the Findings of the Term Breech Trial Apply to Spontaneous Breech Birth?*

I am privileged to live and work in Newcastle where at the John Hunter Hospital, under the leadership of Dr. Andrew Bisits, selected women may be supported to have spontaneous vaginal breech births. The woman are supported by skilled and experienced midwives and obstetrican/s. The watch words is 'hands off the breech'. Writing in the European Obstetric literature in 1936, Dr. Eric Bracht, first described the obstetrician's role in spontaneous breech birth as one that involved minimal handling.[1] His technique was adopted and "subjected to extensive trials in Germany, France, Spain, Holland, and South America, with fetal mortality figures suggesting its considerable superiority over more active management, the procedure seems to have been overlooked in the United Kingdom and the United States". [2] Spontaneous breech birth occurs best with the woman is active, upright and un-medicated; Maggie Banks book provides clear and specific details. [3] Spontaneous breech birth, if it ever occurred in major maternity units in Australia, had certainly died out by the time I began my Midwifery training in the early 1970s. There are a couple of probable reasons to explain why. One explanation is that English speaking obstetricians usually only read other English speakers and the message about the importance of 'hands off the breech' just didn't get into to practice in Australia. Alternately or

synergistically this quote provides further reason for actively assisting breech labour and birth:

> "The art of waiting is a difficult one, and not many obstetricians have either the courage or the patience to sit idly by whilst the breech delivers spontaneously; this becomes even more difficult if the impatient obstetrician has a century of tradition as well as the words and writings of all contemporary teachers behind him." [4]

Whatever the reasons, when I was a junior midwife at the Women's Hospital, Crown St, Sydney, a baby presenting by the breech was considered a variation on 'normal' and they were vaginally 'delivered'. The women were placed in stirrups, all babies were subjected to traction and the Loveset's manoeuvres for the shoulders and forceps were applied to the after-coming head. In the 1980s and '90s the rates of planned breech deliveries steadily declined in most maternity units the USA, Canada, Australia and New Zealand with the obstetricians' preference to perform a relatively simple planned caesarean section rather than the more complex assisted breech delivery. Concurrently, carefully selected women continued to have spontaneous breech births in some parts of Australia, New Zealand, the UK and Europe, Israel and the developing world. [1] In 1997 the Term Breech Trial (TBT) was commenced in this context of very low skill levels in many of the 121 participating maternity. [5]

The Term Breech Trial set out to test the safety of two treatments: 'caesarean section' and 'vaginal breech birth.'[5] The researchers in the Term Breech Trial used the word 'vaginal breech birth' but the concept that they have of

what that phrase is very different to the concept that midwives and some obstetricians, particularly Northern European ones, hold for the same phrase.[2,3] These opposing understandings of the term 'vaginal breech birth' are summarised and presented in Table 1.

| ***Table 1: What is a Vaginal Breech Birth?*** | |
|---|---|
| ***Meaning in the Term Breech Trial*** [5] | ***Midwifery Meaning*** [3] |
| - Induction and augmentation of labour allowed<br>- Woman usually nil by mouth<br>- Intermittent (15 mins) auscultation of FHR or continuous CTG<br>- Use of EDB and other drugs allowed<br>- Woman usually supine during labour and birth<br>- Assisted breech delivery requiring no participation from the woman; including 'gentle' traction once the body born to umbilicus, controlled delivery of the head using forceps or | - Spontaneous onset of labour<br>- Woman in a warm safe environment<br>- Known, skilled birth attendants<br>- No drugs are used<br>- Woman eats and drinks in labour<br>- Woman active throughout<br>- Woman upright or semi-upright for birth<br>- Spontaneous birth of the baby 'hands off the breech'<br>- No traction, no matter how 'gentle'<br>- Controlled delivery of the head using |

| | |
|---|---|
| Maurice-Smellie-Veit manoeuvre.<br><br>- Total breech extraction was forbidden. | the Maurice-Smellie-Veit manoeuvre with maternal cooperation. |

As this discussion shows, the safety of spontaneous vaginal breech birth was not tested by the Term Breech Trial and therefore, the results of the trial cannot be applied to women having spontaneous vaginal breech births attended by skilled and experienced maternity care providers.

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