

An Audit of External Cephalic Version at the Homerton University Hospital

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BACKGROUND

This was a retrospective review of the electronic notes of all patients admitted for ECV between January to October 2020. To assess the management and outcome in women who were booked for ECV between January - October 2020 on the delivery suite.

METHODS

The admission details of the booked patients were collected from the Electronic Patient Records and K2 System. The analysis of collected data was done using an Excel spreadsheet.

RESULTS

A total of 80 women were counselled and booked for ECV, 29 were excluded from the analysis due to reasons such as spontaneous version at the time of the procedure (13), Five (5) women declined on the day of the procedure, spontaneous rupture of Membranes. The data analysis was performed on 51 eligible women.

Most of the procedures (70%) were performed at 37 weeks in both primigravida and multigravidae.

The overall success rate of ECV was 43% , Primigravidae 34.7% (8/23), Multigravidae 53.8% (14/28).

There were no procedure-related complications noted-0%. Pre and Post Procedure CTG monitoring of the babies was performed in all women-100% and all women Eligible for anti-D had this administered. The reversion to breech after ECV was seen in 1 woman (2%).

DISCUSSION

The outcome in women who had undergone Successful ECV: 22/51, 15 had a vaginal delivery (70%), 6 had EMCS in labour for other obstetric reasons (27%), and 1 ELCS for spontaneous reversion after successful ECV (2%).

On the other hand, out of the total unsuccessful ECV- 29/51, 3 (10%) opted for/had vaginal breech delivery.

Interestingly, 7 women (8.7%) had 1 previous Caesarean section.

CONCLUSIONS

The guideline was followed appropriately, 55% received tocolytics. Parity appeared to influence success rates. 63% of the procedure was performed by consultants. Perhaps an ECV dedicated clinic may improve the success rates and also improve the skills among Junior doctors.