

How to Turn a Breech Baby

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Most babies settle into the head-down position by 32 weeks, but about 3-4% remain bottom-first, causing understandable concerns for expecting parents. Before you assume you'll need surgery for a breech baby, here are some tips for turning a breech baby naturally.

Disclaimer: This information is not intended to replace professional medical advice. Always consult your healthcare provider to discuss the best course of action. Some babies are in the breech position to accommodate their unique situation, such as a short cord. These techniques do not force the baby into a position they can't or shouldn't be in.

Natural approaches

The Breech Tilt: This seemingly simple exercise can be surprisingly effective. Lie on your back with your hips elevated above your heart using pillows or an inclined board. This position creates more space for your baby to move and can encourage them to tuck their chin, a crucial step in turning head-down. Aim for 10-15 minutes, three times a day.¹

Positions: Gravity can be your friend! Spend time on your hands and knees, kneel forward on a chair, or try lunges. These positions create space in your pelvis, potentially making it easier for your baby to move into the optimal position.²

Sound: Did you know your baby can hear in the womb as early as 18 weeks? Use this to your advantage! Play calming music or a recording of your voice near the bottom of your belly to attract your baby's attention and encourage them to move towards the sound.³ Have your partner place their mouth on your lower abdomen and talk to the baby, encouraging the baby to move towards the sound of their voice. This is also a good way for your partner to bond with the baby.

Temperature: Babies, like most of us, tend to move towards warmth. Try placing a warm compress (not hot!) on your lower abdomen and a cool cloth on your upper belly. This temperature difference might entice your little one to explore the warmer "downstairs." You can also sit in a warm bath with the lower part of your abdomen immersed in the warm water and put an ice pack at the top of your abdomen. The ice pack should be wrapped in cloth or placed on top of a cloth so it's not too cold!

¹ Source: [Spinning Babies](#)

² Source: [Cleveland Clinic](#)

³ Source: [Verywell Family](#)

How to Turn a Breech Baby (continued)

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Get in the Pool. Swimming and doing crouches and flips in the pool can help a baby turn into the vertex position on their own. Be sure to have a spotter nearby if you try the following pool exercises:

- Crouch on the bottom of the pool in deep water, and then push off and reach your hands up as you break the surface of the water.
- Swimming around the pool can encourage the baby to move (and feels really good during the final weeks of pregnancy). The front crawl and the breaststroke may be especially helpful.
- Front and back flips in deep water. This will relax your muscles and make it easier for the baby to roll over on their own.
- Handstand: If you have good balance, you can also try doing an underwater handstand and holding it for as long as you can hold your breath.

Good Posture: It's important to pay attention to your posture in your day-to-day life, even if you're not pregnant! When you're pregnant, good posture will help provide the maximum amount of room available in the uterus so the baby can turn into the correct position on their own. For perfect posture, use the following guidelines:

- Stand straight with your chin level to the ground, not looking down at your phone, for example.
- Allow your shoulders to drop naturally. If you are standing up straight with your chin in the proper position, your shoulders will drop and align naturally. Don't throw your shoulders back.
- Pull in your abdomen. Don't stand with your belly pouched out.
- Pull in your butt. Your center of gravity should be over your hips.
- Position your feet properly. Put your feet shoulder width apart and spread your weight evenly over your feet.

Complementary Therapies:

Many of my clients have had great success with these techniques and none have had any negative outcomes, although not every baby has turned.

Moxibustion: Moxibustion is a traditional Chinese technique which uses burning herbs to stimulate acupuncture points. Moxibustion is usually performed by an acupuncturist (sometimes in addition to traditional acupuncture) or a licensed practitioner of Chinese medicine. However, moxibustion sticks can also be purchased for those who wish to try this method at home. To turn a breech baby, an herb known as mugwort is burned beside the pressure point BL 67, located beside the outer corner of the fifth toenail (baby toe).

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Hypnosis: The hypnosis or relaxation tracks, available for free on bestdoulas.com can help you relax and visualizing the baby in the correct position provides guidance for your baby. Some of my clients have successfully turned their breech baby by listening to these tracks every time they take a nap or fall asleep.

Medical Options: Once you pass the 37 week mark, it is unlikely that your breech baby will change position on their own. Ask your doctor about an external cephalic version (ECV). This is a non-surgical procedure, used by a doctor, in a hospital:

- During the procedure, the doctor uses medication to relax the uterus so that they can push the baby, externally, into the vertex position. This is done by applying downward pressure to the lower abdomen. Some women find this to be very uncomfortable.
- The doctor will use an ultrasound throughout the procedure to monitor the position of the baby and placenta, the amount of amniotic fluid, and the baby's heart rate. If the heart rate drops too low, an immediate emergency delivery may be necessary.
- Overall, the researchers found that attempting an ECV at term decreased the relative risk of breech birth by 58% and decreased the relative risk of Cesarean by 43%. There were no differences in any other outcomes, including Apgar scores, neonatal admission, or infant deaths. The studies did not look at maternal satisfaction (Hofmeyr et al. 2015).⁴
- ECV may not be possible due to complications such as bleeding or lower-than-normal levels of amniotic fluid. It is also impossible to perform when carrying twins.

Remember: Turning a breech baby naturally isn't always successful, and that's okay. Your healthcare provider will guide you through the best options based on your individual circumstances. Don't hesitate to ask questions and express your concerns.

Ultimately, trust your body and your baby. By staying informed, exploring natural options, and working closely with your healthcare team, you'll be well-equipped to navigate this journey and welcome your little one into the world, head-down or bottom-first, with love and excitement.

Keep in mind that there ARE doctors and midwives who will gladly work with you to catch a breech baby. The main reasons most doctors aren't willing to do it are that their training doesn't focus on how to catch a breech baby so they may have little or no experience doing it and hospital policies are dictated by insurance carriers who believe that it is a risky procedure. I've personally seen wonderful breech births! If you want your breech baby born vaginally, ask your doula for recommendations to a care provider who will accommodate your wishes.

One last thought ... it's BREECH, not breach – you're not a whale!

⁴ Source: [Evidence Based Birth](#)