

A cross-sectional study of breech birth in New Zealand, 2000-2014

Abstract

Background: Breech birth has been a controversial topic since the mid-twentieth century. The publication of a randomised controlled trial dubbed the Term Breech Trial in 2000 dramatically altered practice internationally when it published findings that vaginal breech birth is unsafe and that elective caesarean section should be the recommended mode of birth. Since 2000 there has been a rapid decline in vaginal breech birth despite further robust research finding no statistical significance in significant neonatal outcomes. This has had negative implications to both maternal health and mid and long-term neonatal outcomes, as well on health economics and health literacy levels on a complex multifactorial issue.

Methods: A cross-sectional study was undertaken analysing anonymous data from the National Minimum Dataset from 2000- 2014. Epi Info 7 was used to perform statistical analysis. *Results:* The incidence of breech birth in New Zealand from 2000-2014 was 3.1%, vaginal breech birth being achieved in less than 0.5% of all births in 2015. The incidence of breech birth increases with parity. Being of Maori, Pacific or of Asian descent is protective against breech birth RR=0.53 (95% CI 0.50-0.54), RR=0.75(95% CI 0.72-0.79), and RR=0.94 (95% CI 0.90-0.98) respectively. There was a trend of increasing length of hospital stay with breech birth compared to all births. *Conclusion:* Breech birth services need to be reviewed to reflect current and robust research that is focused on women centred care and informed choices. In updating health policies and clinical guidelines affecting breech presentation and birth it is imperative to promote collaborative practice, continuing education and development of both clinical skills and theory on breech presentation (including ECV services) and birth.

Keywords: Breech birth, health literacy, health policy, New Zealand.

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