Breech Birth

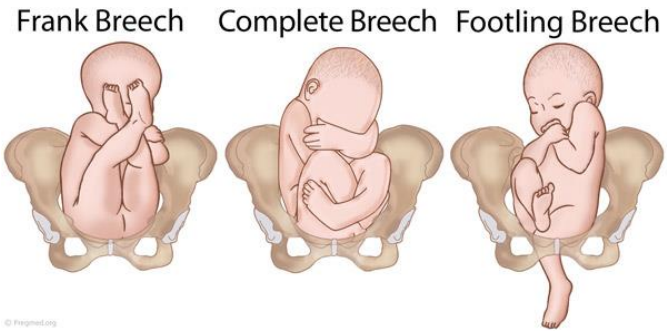
July 2026

Breech (bottom down) birth

It is common in early pregnancy for your baby to be in a breech (bottom-first) position. Most babies will turn head-first (cephalic) by the time you are 38 weeks. Around 3 in every 100 babies are still breech from 37 weeks on.

Often, there is no clear reason why a baby is breech or stays breech. Your care provider will look into possible reasons and talk with you about them. This may affect the choices you make about how your baby is born.

There are a few types of breech positions your baby may be in: frank breech, complete breech, or footling breech.



When deciding how to give birth, there are a few things to think about:

- Your preferences
- The type of breech position
- How much amniotic fluid is around your baby
- Where your placenta is located
- Your medical and pregnancy history

Your care providers will give you the information that you need to make an informed choice.

Vaginal breech birth

International studies show that planned vaginal breech birth is safe for many women. About 60-70% of women who plan this will have a vaginal breech birth. The other 30-40% will have a caesarean birth at some point during pregnancy or labour.

Vaginal breech birth works best when:

- Labour starts on its own after 36 weeks
- Your baby is normally grown
- Your baby is in a frank or complete breech position (see picture)
- You and your baby are healthy and well
- Your baby's heart rate is monitored throughout labour and birth without concerns
- The midwives and doctors caring for you are skilled in supporting vaginal breech birth

What can I expect during a vaginal breech birth?

Women wanting a vaginal breech birth are encouraged to use different active birthing positions during labour. This helps baby to get into a good position and move down the birth passage. We recommend continuously monitoring your baby's heart rate in labour using a CTG machine.

During a vaginal breech birth, your baby's bottom then body come out first, with the head born last. This usually happens without any problems. Sometimes your doctor midwife or doctor may need to use extra techniques to help.

It is important that you feel safe and involved in your care. Throughout your labour and birth, our team of midwives and doctors are there to support and care for you and your baby. Babies born vaginally in a breech position may seem a little shocked right after birth and have lower APGAR scores. Just to be safe, we suggest having a specialist newborn doctor at your birth.

Date of Review: JULY 2026 Date of Next Review: JULY 2030
Consumer Participation National Standards endorsed
South Eastern Sydney Local Health District
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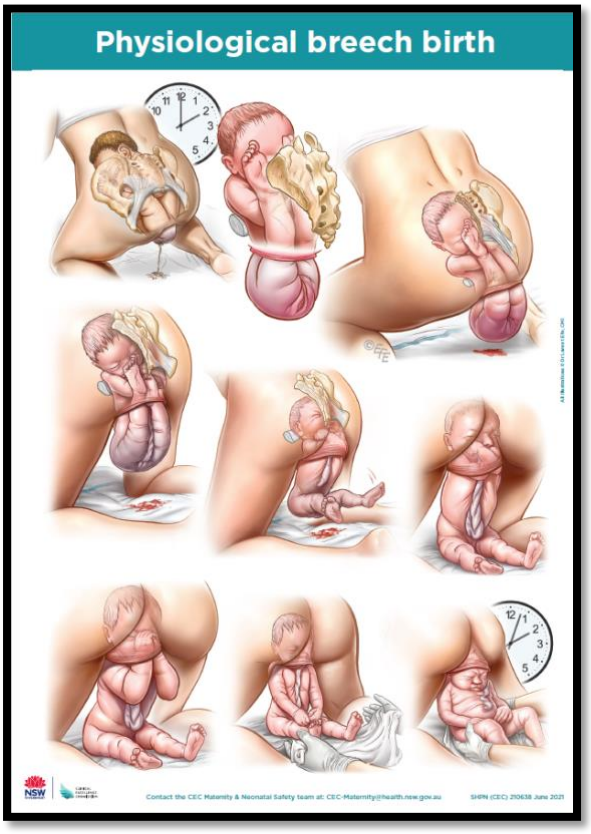

Frequently asked questions

Which is safer for your baby, vaginal or caesarean birth?

Both vaginal breech birth and caesarean birth have benefits and risks. The risk of your baby having complications from a vaginal breech birth is low.

Studies show that the chance of losing a baby around the time of birth (perinatal mortality) can vary slightly depending on how the baby is born:

- Vaginal birth, head-first (cephalic) - 2 in 2000 (0.1%)
- Vaginal birth, bottom-first (breech) - 4 in 2000 (0.2%)
- Caesarean birth - 1 in 2000 (0.05%)

The rate of perinatal injury to a baby (like a broken bone or nerve damage) is also different:

- Vaginal birth, head-first (cephalic) - 1-2 in 100 (1-2%)
- Vaginal birth, bottom-first (breech) - 2-3 in 100 (2-3%)
- Caesarean birth - 0.5-1 in 100 (0.5-1%)

Studies show these injuries don't cause long-term problems for babies.

Can my baby's head get stuck?

It is very rare for a baby's head to get stuck. After 36 weeks, your baby's head and hips are close to the same size.

Once your baby's hips are born, the head is usually born within 5-7 minutes. If there is delay, your midwife or doctor may use certain techniques to help.

What pain relief can I use in a vaginal breech birth?

You're encouraged to try different ways to manage labour pain. Staying active and upright can help labour progress. Helpful positions to try including kneeling, squatting, standing, being on all fours, sitting on a birth stool.

Note: Epidurals are not usually recommended for vaginal breech birth. Your midwife will talk with you about this during your pregnancy.

Can I have a waterbirth?

You can use water and stay in the bath during labour. But your care providers will ask you to get out of the bath for the actual birth, in case they need to help guide your baby out.

Does continuous monitoring stop me from being upright and active?

Our monitors are wireless and waterproof, so you can still move into positions that feel comfortable. You can even use the shower or bath while wearing the monitor.

Who will be at my birth?

Our midwives and doctors respect your space while making sure you and your baby are safe. We recommend having two midwives, two doctors, and a specialist newborn doctor or nurse at your birth.

Questions I would like to ask