Update on elective cesarean section for term breech delivery

Atualização em cesariana eletiva na apresentação pélvica em gestações a termo

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- 1. Regarding term breech delivery, it is correct to affirm that:
- **a.** Its incidence is 0.5% of pregnancies to term.
- **b.** It is the fifth most common presentation.
- c. Nulliparity is an associated factor.
- **d.** The complete presentation is the most common.
- 2. The term breech trial (TBT), which compared the elective cesarean section with planned vaginal delivery, found:
- **a.** Reduced risk of neonatal hypotonia with cesarean delivery.
- **b.** Increased risk of neonatal seizures with cesarean delivery.
- **c.** Increased perinatal morbidity and mortality with vaginal delivery.
- **d.** Reduced perinatal morbidity and mortality with cesarean delivery.
- 3. In maternal morbidity and mortality, comparing the elective cesarean section with planned vaginal delivery, it can be said that:
- **a.** There is a significant increase in maternal mortality with vaginal delivery.
- **b.** There is a significant increase in maternal morbidity with cesarean delivery.
- **c.** There is a reduction of maternal morbidity and mortality with cesarean delivery.
- **d.** Results are controversial.
- 4. Regarding neonatal morbidity and mortality, comparing the elective cesarean section with planned vaginal delivery, it can be said that:
- **a.** There is a significant reduction of maternal mortality with vaginal delivery.
- **b.** Results are controversial.
- **c.** There is a significant reduction of maternal morbidity with cesarean delivery.
- **d.** There is an increase in maternal morbidity and mortality with cesarean delivery.

5. What is the recommendation for the mode of delivery in patients with a TBT?

- **a.** Planned vaginal delivery is recommended, in selected cases, and under ideal conditions (professionals experienced in maneuvers for breech presentation).
- b. Cesarean delivery is mandatory in all cases.
- **c.** Planned vaginal delivery may be indicated provided that a C-section is contraindicated.
- **d.** There is no specific recommendation and the procedure is at the discretion of the obstetrician.

Answers to clinical scenario: update on cesarean on request [published in RAMB 2015; 61(4)]

1. What is the correct approach to maternal request for cesarean section?

Know with greater emphasis personal values and preferences of the mother and approach them in a process of shared decision (Alternative **A**).

2. Does cesarean section on maternal request or with no indication increase the risk of bleeding complications?

Yes, it increases the absolute risk of bleeding complications with statistical significance (Alternative **A**).

3. Does cesarean section on maternal request or with no indication increase the risk of infectious complications?

Yes, it increases the absolute risk of infectious complications with statistical significance (Alternative **A**).

- 4. Does cesarean section on maternal request or with no indication increase the risk of which outcomes? Hemorrhagic, infectious and breastfeeding complications, and respiratory complications for the newborn (Alternative A).
- 5. What is the period when the cesarean section should be done in case of vaginal delivery refusal? After week 39 (Alternative A).