

Short Note

Premature vaginal delivery with breech presentation

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Received: May 13, 2019; Accepted: May 22, 2019; Published: June 10, 2019;

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Only a few cases of extreme premature deliveries with breech presentation are described in the literature. An unavoidable delivery with a premature child before gestationweek 26–28 whether there is a caput or a breech presentation, there are reasons to prefer a vaginal delivery. You can't change in worst case a very poor prognosis for the child in relation to psycho and somatic development. If you choose a cesarean section there are higher risks for the mother compared with vaginal delivery in mortality, aspiration, thromboembolic diseases, amnion emboli, higher risks for bleeding under the operation and infections subsequent. In the future you may see complications with adhesions and infertility, following births often end with placenta accrete, placenta previa and ablatio placenta, rupture of uterus and higher frequencies of caesarean section.

Whether the mode of delivery is vaginal or cesarean section, there will be risk of traumatic complication in the delivery of the foetus. Higher risks after cesarean section are neonatal meconium aspiration, respiratory distress, hypoxia, and in the childhood allergic and bowel diseases.

In the choice of delivery – vaginal or cesarean section-you are giving the mother a much better prognosis in a vaginal delivery and in any way you can't chance a poor prognosis to the child.

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Citation:

Hanne Christensen (2019) Premature vaginal delivery with breech presentation. *Integr Gyn Obstet J* Volume 2(3): 1–1.