

# Educational Insights into Risk Perceptions of Vaginal Breech Deliveries: A Survey of Clinicians and Medical Students

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## Background

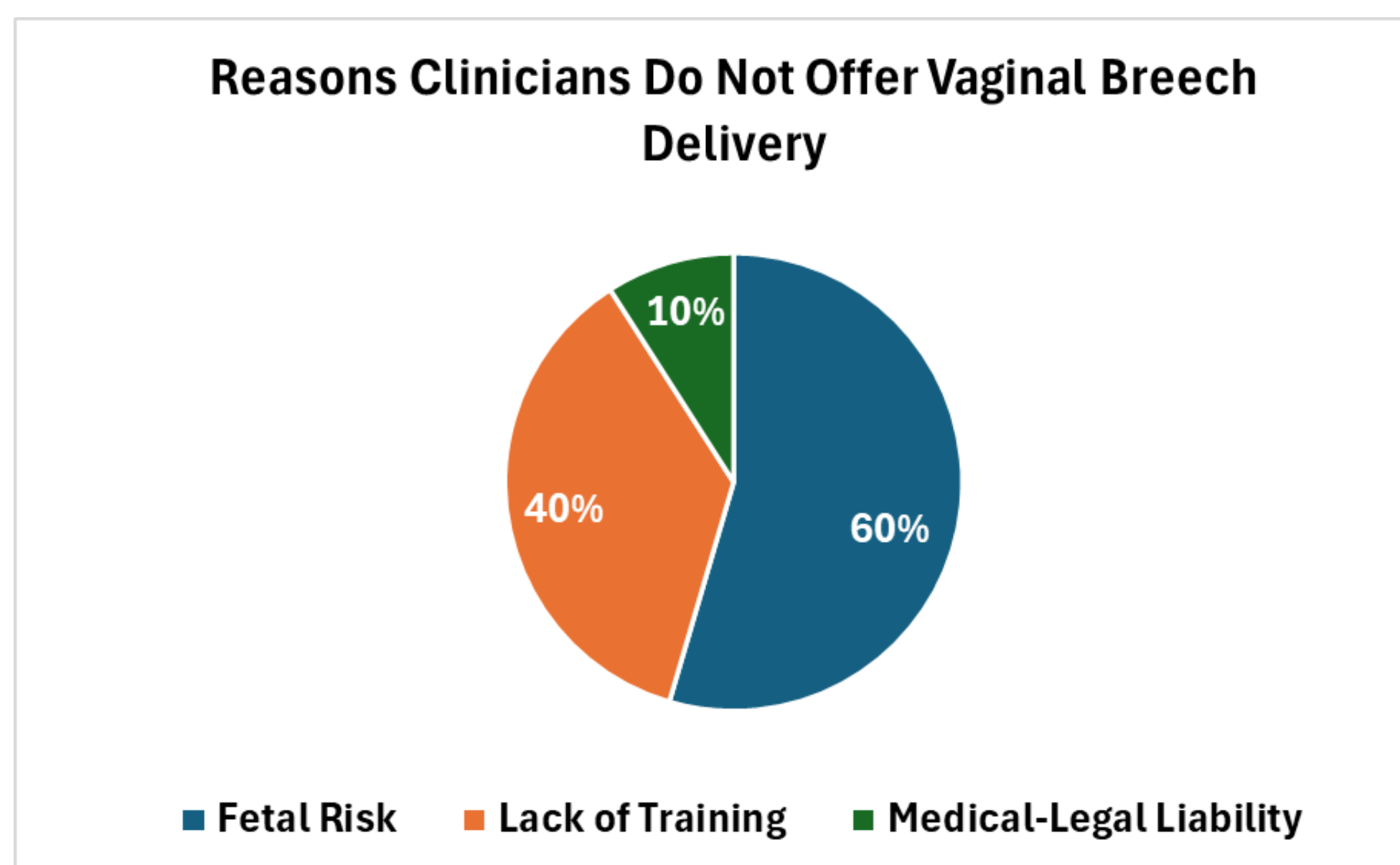
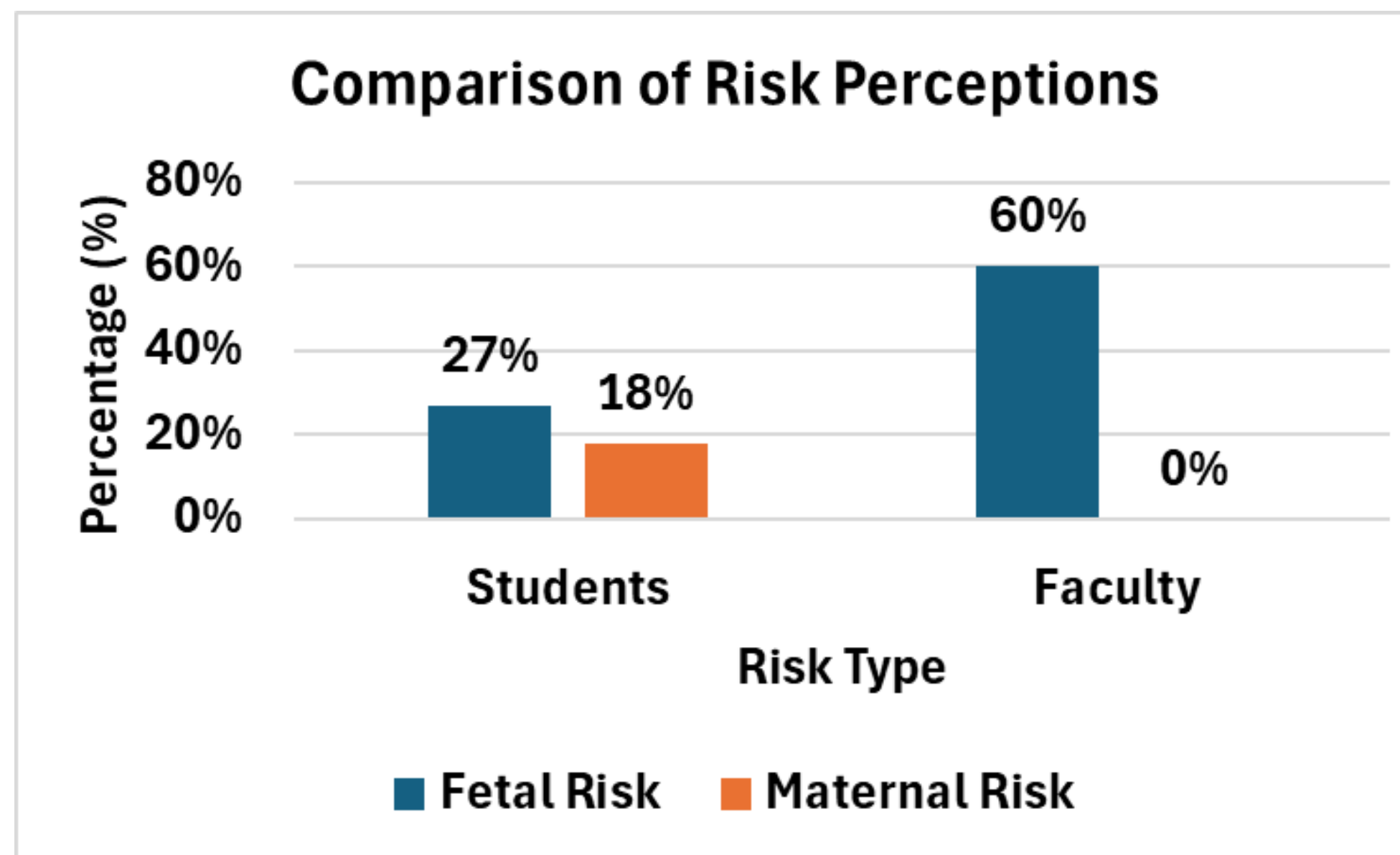
- Breech presentation occurs in 3-4% of full-term pregnancies [1].
- Cesarean is the most common management strategy for breech presentation.
- Vaginal breech delivery (VBD) is a less common but viable option under appropriate conditions.
- Medical students need comprehensive exposure to all delivery options, including VBD, to ensure proper patient counseling.

## Objectives

- To understand the delivery methods medical students and clinicians offered to patients with breech fetal presentation.
- To understand hesitations to vaginal breech delivery
- To identify attitudes towards VBD and factors influencing these views to inform education and training.

## Methods

- Survey of 59 clinical preceptors in Oregon and California and 328 medical students after OB-GYN rotations.
- Three waves of survey invitations sent.
- Survey focused on perceptions of risks in frank breech delivery at term.



## Results

The response rates were 17% for clinical faculty and 12% for students.

- None of the clinicians offered Vaginal Breech Delivery.
  - Fetal risk was the primary reason noted
  - 40% highlighted lack of training
  - 10% were concerned about medical-legal liabilities.
- In contrast, almost 15% of students considered recommending VBD at term.
- Less than half the students believed VBD presented significant fetal risk, while, interestingly, 18% thought VBD carried greater risk for the mother than a cesarean delivery.

## Conclusions

- Clinicians were hesitant to offer VBD due to fetal risk concerns and lack of training.
- Students were more open to VBD options, though some were concerned about maternal risks.
- Opportunity to address education gaps in VBD training for both students and faculty.

## Citations

1. [1] Hickok, D. E., et al. "The frequency of breech presentation by gestational age at birth: A large population-based study." American Journal of Obstetrics and Gynecology (1992): 851-852.