

Consideration of External Cephalic Version in the Setting of Fetal Skeletal Dysplasia: A Case Report

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Background/Synopsis

Osteogenesis imperfecta is an inherited connective tissue disease involving abnormal synthesis of type I collagen, which affects bone integrity. Many phenotypes can be diagnosed in utero using ultrasonography. Prior studies have not found a difference in the bone fracture rate of fetuses with OI delivered vaginally versus those delivered by elective cesarean section. Elective cesarean section increases the risk of maternal morbidity during delivery, as well as in future pregnancies. Successful external cephalic version and vaginal delivery has not been reported previously for a fetus with a prenatal diagnosis of OI.

Objectives/Purpose

This case presents a patient who chose to undergo an external cephalic version in order to attempt a vaginal delivery instead of undergoing a cesarean section.

Design/Methods

This is a single case report of one patient.

Results

A femur fracture was noted in the ultrasound following ECV, however the maternal risks were decreased by avoiding cesarean section and the infant did not suffer any additional long-term complications as a result.

Conclusion

Based on our case, we find it reasonable to offer an ECV to patients with pregnancies complicated by fetal skeletal dysplasia and breech presentation.