

EPIDURAL ANAESTHESIA DURING LABOUR

This patient advisory is intended to provide you with general information. It is not a substitute for advice from your anaesthetist. You are encouraged to discuss the benefits and risks of anaesthesia with your anaesthetist. This is an abridged version of the ASA patient education pamphlet: Epidural anaesthesia and pain relief during labour – a guide for patients. The complete pamphlet is available from your anaesthetist.

Childbirth is a natural process, but many women need medical assistance to control or reduce pain. Your obstetrician may recommend epidural anaesthesia for pain control.

Epidural anaesthesia has been used during childbirth in millions of women. It has an excellent safety record when administered by specialist anaesthetists or other specially trained medical practitioners. Doctors regard it as the most effective means of reducing the pain of childbirth.

The epidural is effective in relieving backache and contraction pains. It may allow the mother to feel some sensation at the time of delivery.

The procedure

The anaesthetist numbs a small area of the lower back by injecting local anaesthetic under the skin. Using a special needle, the anaesthetist inserts a thin plastic tube (catheter) through the spinal ligaments between two vertebrae in the lower back (see figure). The catheter is made of soft, flexible plastic.

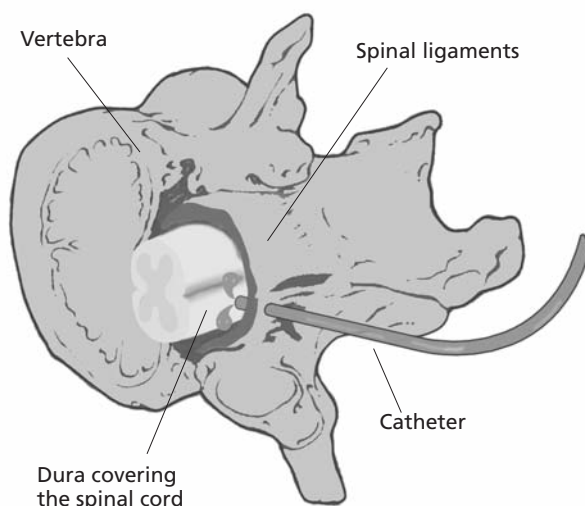
A local anaesthetic is injected through the catheter to temporarily numb spinal nerves. After anaesthetic solution is injected, pain relief takes about 10 minutes. The catheter remains in place throughout labour.

The first dose usually wears off after one or two hours. As each woman is different, it is not possible to predict how much epidural anaesthetic a woman will require during labour.

Other benefits of an epidural

- It does not cause sedation.
- It may be necessary during the management of some obstetric complications.
- It can reduce stress caused by pain.
- As the catheter stays in place, more epidural anaesthetic can be administered easily if another procedure is necessary.
- It can be used for further pain relief, especially after caesarean section.

CATHETER PLACEMENT



The decision to have an epidural

Decisions about an epidural anaesthetic are made after discussion with your anaesthetist and obstetrician. Although the choice is normally up to the mother, the obstetrician may recommend an epidural for medical reasons.

Before the epidural anaesthetic

Your anaesthetist needs to know your complete medical history. Your obstetrician and anaesthetist will advise you about medications that you may need to continue or stop taking. Tell your anaesthetist if you have had:

- a bad reaction to anaesthetic drugs or any other medicine
- a bleeding disorder or easy bruising
- any long-term or recent illnesses
- surgery to the lower back.

Possible risks and complications of epidural anaesthesia

Modern anaesthesia is very safe. Although uncommon, side effects and complications for mother and baby are possible. These risks are more fully outlined in the complete ASA patient education pamphlet on pain relief during childbirth. If you are concerned about any of the risks or have any questions about the medical methods of pain relief and anaesthesia, please discuss these with your anaesthetist. ©