

Epidural pain relief in labour

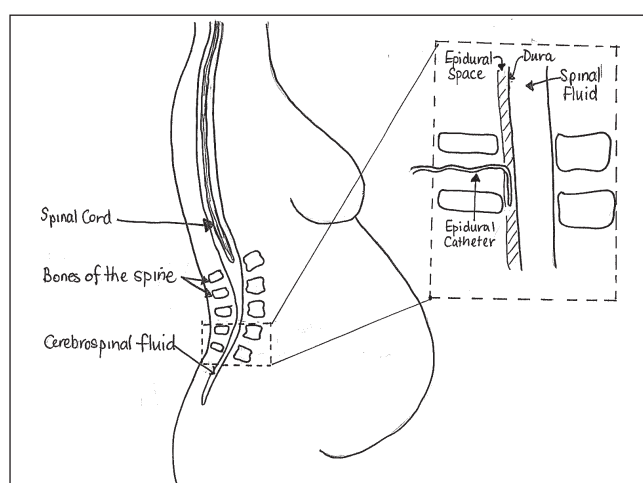
Information for mothers

What is an epidural?

A working epidural is the most effective form of pain relief for labour.

An epidural catheter (a fine plastic tube) is inserted into the lower part of the back through a needle. The needle is removed, leaving the catheter in the epidural space. The epidural space is an area next to the fluid sac that surrounds the spinal cord and nerves.

Local anaesthetic and other pain medications are then given down the epidural catheter, reducing the pain sensation from contractions.



Most of the time, an epidural is simple to place and works well. Sometimes placement is difficult and may take longer, and sometimes the epidural fails to provide adequate pain relief.

Not everyone can have an epidural for pain relief in

labour. Some women are unable to have an epidural because of certain medical problems or medications. Your anaesthetist will discuss this with you.

Who performs an epidural and how do I ask for one?

An epidural is performed by a doctor with specialist training in anaesthesia.

Requesting an epidural is easy. It is best to read this information and ask any questions before labour starts. When you are in labour you simply need to ask your attending midwife or obstetrician to arrange an epidural for you.

At what stage of labour should I ask for an epidural?

If you decide that you want an epidural in labour, you may request one at any time once labour is confirmed. You do not have to wait until you have made a certain amount of progress. If you wait until very late in your labour, however, you may reach a point where we are unable to successfully administer epidural pain relief.

Will an epidural slow down my labour?

Epidural analgesia does not prolong the first stage of labour (the stage during which the cervix opens).

An epidural may lengthen the second stage of labour (pushing stage) by 15 – 30 minutes.



Will an epidural affect how I deliver the baby (will I need a caesarean)?

Having an epidural does not affect the likelihood that you will have a caesarean section.

If you have an epidural in labour, you are more likely to need an assisted vaginal birth (vacuum or forceps to help baby be born).

Will an Epidural make my legs weak?

An epidural numbs the nerves that carry pain information. As part of this process, the epidural may also numb the nerves controlling your leg muscles.

For this reason, temporary leg weakness (also known as motor block) is occasionally a side effect of epidurals. This may affect your ability to stand up or walk around in labour. It may also limit the positions you can be in for the delivery of your baby.

Will I need a urinary catheter?

An epidural may affect your ability to pass urine and women having an epidural are advised to have a urinary catheter to prevent bladder distension (full bladder). This is an expected and temporary side-effect.

Will an epidural cause me harm?

With every health care intervention there is risk of harm.

Minor side-effects:

Low blood pressure sometimes occurs with epidurals but is usually easily managed with intravenous fluids and medication.

Long-term back pain can occur after pregnancy and childbirth. An epidural does not increase your risk of back pain. It is possible that you will experience some bruising where the epidural was placed.

Epidurals may result in an elevated temperature in the mother (fever). The reason for this is unknown. This may result in more investigations for you and your baby but has not been demonstrated to cause harm.

Major side-effects:

Dural puncture headache. If the epidural needle passes into the spinal fluid, this can cause a severe headache. This headache is uncommon (1 in 200) but may need an injection of blood in the epidural space (blood patch) to treat it. There is no evidence that an epidural increases your overall likelihood of having a headache after delivering your baby.

Transient neurological injury (numbness or weakness that is temporary) is possible but rare. The incidence is approximately 1 in 6,700

Very rarely bleeding or infection or trauma can result in permanent damage to the nerves. The risk of permanent nerve damage is in the region of 1 in 240,000.

Very rarely the local anaesthetic may be injected into the cerebrospinal fluid or bloodstream which may be life threatening.

Will an epidural harm my baby?

Having an epidural will not cause your baby harm. Women with an epidural have continuous monitoring of the baby in labour.

A small number of people (10 – 20%) may experience a lowering of the baby's heart rate after the epidural is started but this has not been shown to result in worse outcomes for the baby.

References

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This publication has been reviewed and approved by Townsville HHS health consumers.



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