



EPIDURAL INFORMATION

What is an epidural for labour?

- It is a form pain relief to make your labour less painful.
- A small plastic tube, called an epidural catheter, is inserted between the bones of your spine into the epidural space.
- Pain relieving drugs are given through the catheter block pain nerves in the spine and to provide pain relief until the baby is born.
- An epidural provides the most effective pain relief for labour and birth.

What are the advantages of epidural pain relief?

- If the birth of your baby needs forceps or emergency caesarean section the epidural can often be used and the procedure can start sooner.
- If you already have an epidural inserted, it usually means that you won't need to have a general anaesthetic during a caesarean and can be awake for the birth of your baby.

Research shows that epidurals:

- do not directly affect your baby
- do not increase your chance of needing an emergency caesarean delivery

How is the epidural catheter put in?

The epidural is put in by an anaesthetist and insertion takes about 20 minutes.

- You will need a fluid drip in your hand or arm.
- You will be positioned either lying on your side or sitting up.
- Your back will be cleaned with cold antiseptic solution
- Local anaesthetic will be injected to numb the skin on your back.
- You may feel a pushing sensation in your back while the epidural is inserted. **While this is done you should stay as still as possible to reduce the chance of any damage to the nerves in your spine.**
- You may feel a sensation like an electric tingle in your back or down your legs when the epidural catheter is inserted. This is not dangerous.
- After the needle is removed from your back, the epidural catheter will be securely taped on your skin.
- Once the anaesthetic drugs are given down the tube, it takes about 20 minutes to provide effect.

How does an epidural affect you?

- Your legs may feel heavy so you will need to stay in bed.
- You will need a urinary catheter as epidurals can reduce the feeling of a full bladder.
- You may feel shivery, itchy or warm.
- An epidural can sometimes prolong your labour or increase the need to use forceps to help your baby's birth.
- An epidural can cause changes in your baby's heart rate.

What are the risks?

Further epidural pain relief through the catheter	Common – 1 in 8
Fall in blood pressure (which is easily treated)	Common – 1 in 20
Severe headache	Uncommon – 1 in 100
Temporary nerve damage	Very rare – less than 1 in 13,000
Epidural infection/ meningitis	Very rare – 1 in 50,000
Very high epidural block	Very rare – 1 in 100,000
Epidural blood clot	Very rare – 1 in 170,000
Severe injury / paralysis	Extremely rare – 1 in 250,000

Questions or concerns

Talk to your obstetrician or midwife, who can arrange for you to speak with an anaesthetist.



Interpreter

You have a right to an interpreter. Ask the staff caring for you to contact Language Services and arrange for an interpreter to help you.

Acute Pain Service

T: (03) 8345 2389

All information contained is current at the time of writing.

References

- *Pain relief during childbirth*, The Royal Australian and New Zealand College of Obstetricians and Gynaecologists, Australian Society of Anaesthetists, Edition 1, 14 Dec 2006.
- *Pain relief in Labour*, Obstetric Anaesthetists' Association, 3rd Edition, January 2008.
- Chung SA, Palmer GM, Scott DA, Halliwell R, Trina J (editors); *Acute Pain Management: Scientific Evidence*, 4th edition, ANZCA & FPM, Melbourne.