

EPIDURAL FOR LABOUR PAIN

ALL YOU NEED TO KNOW

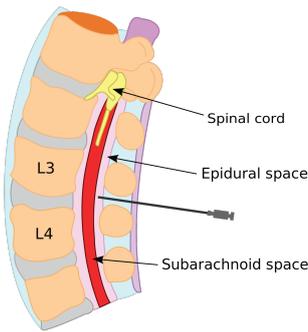




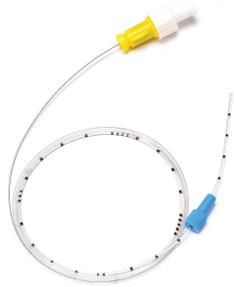
Hello! I'm your Anaesthesiologist!
I'm specially trained to make you comfortable by relieving your pain of labour and delivery and make your experience memorable.
Let me walk you through this.

WHAT IS EPIDURAL?

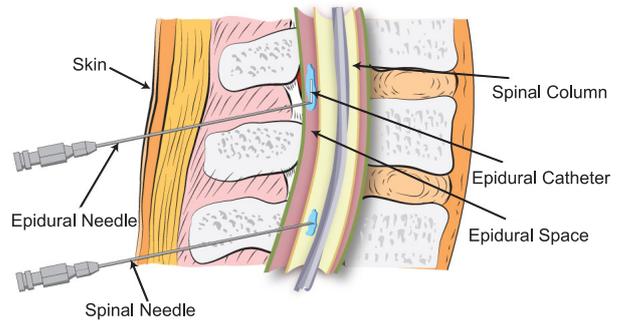
An epidural involves putting in a thin plastic tube (called a catheter) into a very small space outside the lining of your spine called the "epidural space". This space contains nerve fibres that carry pain sensation to your brain.



EPIDURAL SPACE



EPIDURAL CATHETER



EPIDURAL INJECTION

BEFORE STARTING THE EPIDURAL PROCEDURE



I.V. FLUIDS

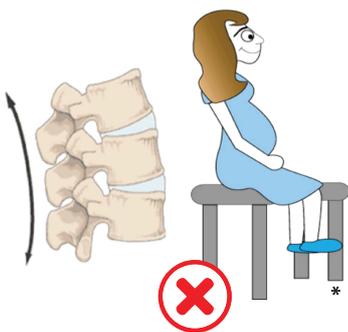


ANTISEPTIC

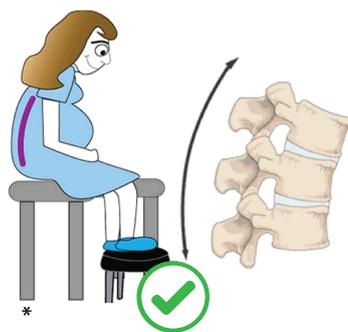


PREPARATION

WHAT YOU NEED TO DO



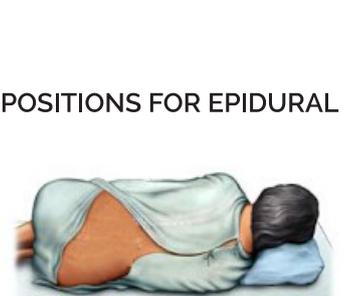
KEEP THE BACK STRAIGHT



PUSH THE LOWER BACK OUT



SITTING



OR LATERAL

POSITIONS FOR EPIDURAL

KINDLY CO-OPERATE WITH YOUR DOCTOR BY MAINTAINING THE CORRECT POSITION AND STAYING STILL DURING THE ENTIRE PROCEDURE

*Image: Courtesy - www.painfreebirthing.com

Hey, Doc - How long will it take for me to be pain-free after the epidural is given?
What else can I expect from the procedure?



HERE'S HOW LONG IT WILL TAKE

20
MINUTES

+

20
MINUTES

=

40
MINUTES

PROCEDURE TIME

MEDICATIONS TO ACT

PAIN RELIEF!

THE REAL SCENE



CAREFUL & METICULOUS PROCEDURE



CATHETER AND FILTER

SOME COMMON SIDE EFFECTS



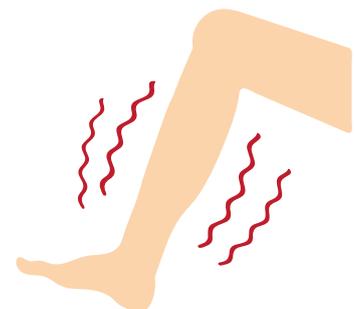
ITCHING
(MILD AND SELF LIMITING)



SHIVERING



OCCASIONAL DROP IN
BLOOD PRESSURE
(CAN BE MANAGED EASILY)



MILD NUMBNESS
(TEMPORARY & REVERSIBLE)

Hey, Doc - Is there anything I should be concerned about or anything I should be aware of?



SOME UNCOMMON SIDE EFFECTS



HEADACHE



INADEQUATE PAIN RELIEF



EPIDURAL MAY NOT WORK

FREQUENTLY ASKED QUESTIONS

WILL I EXPERIENCE LONG TERM BACK PAIN?



NO, THERE IS NO SCIENTIFIC EVIDENCE TO SUPPORT THIS MYTH

IS THIS PROCEDURE SAFE FOR MY BABY?



YES!

CAN I ASK QUESTIONS DURING THE PROCEDURE?



I WILL BE HAPPY TO ANSWER ALL YOUR QUESTIONS. WE RECOMMEND THAT YOU CLEAR ALL YOUR DOUBTS BEFORE THE PROCEDURE!

HAPPY BIRTHING!

Rest assured, with Epidural as your companion, the journey here on will be one of pure joy and pleasure!



(Mumbai Chapter)

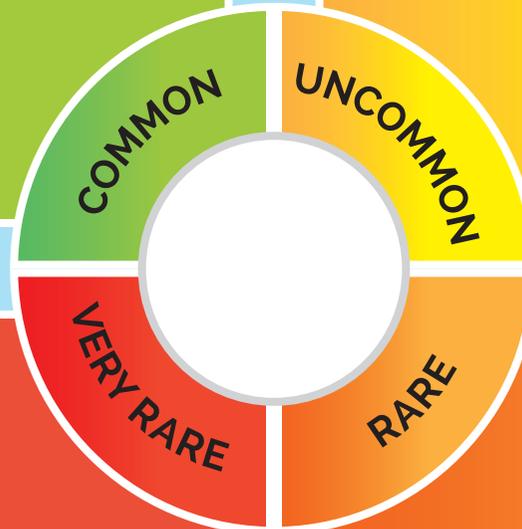
RISKS OF AN EPIDURAL FOR PAIN RELIEF DURING LABOUR AND DELIVERY

MILD ITCHING
TEMPORARY SHIVERING
DROP IN BLOOD PRESSURE
NUMBNESS IN LEGS

EPIDURAL MAY NOT WORK PROPERLY
MILD TO SEVERE HEADACHE
TEMPORARY NERVE DAMAGE

MENINGITIS (INFECTION)
HAEMATOMA (BLOOD CLOT)
UNCONSCIOUSNESS
PARALYSIS

EPIDURAL ABSCESS
PERMANENT NERVE DAMAGE





VERY COMMON

1:10

Around 1 in 10 chance
Someone in your immediate family

COMMON

1:100

Around 1 in 100 chance
Someone in your building or friend circle

UNCOMMON

1:1000

Around 1 in 1000 chance
Someone in your locality or neighborhood

RARE

1:10000

Around 1 in 10,000 chance
Someone in a live concert in your city

VERY RARE

1:100000

Around 1 in 1,00,000 chance
Someone in a cricket stadium in your city

EXTREMELY RARE

1:2500000

Around 1 in 1,50,000 to 2,50,000 chance
An extremely rare, yet a theoretical probability

EPIDURALS IN LABOUR - WHAT YOU NEED TO KNOW

WHAT IS AN EPIDURAL?

Epidural is the most accepted and widely used method of pain relief for labor & delivery. It is always performed only by a physician, anesthesiologist, who is specially trained to provide such pain relief using various combination of pain-relieving medications.

The procedure is complicated and involves putting in a thin plastic tube (called a catheter) into a very small space outside the lining of your spine called the "epidural space". Pain medication, when administered through this tube, numbs the nerves (coming from your uterus and birth canal) and blocks the contraction pain from reaching the brain, giving you pain relief.

A FEW FACTS ABOUT EPIDURAL INJECTION

- Epidural is the most effective method available for pain relief during labor & delivery.
- For an epidural, the anesthesiologist inserts a needle into the lower part of your back and uses it to place an epidural catheter (a very thin tube) near the nerves in your spine. This epidural catheter is left in place and the needle is taken out.
- This catheter is used to give you painkillers during your labor as and when required without repeatedly injecting a needle in your back.
- The painkillers may be a local anesthetic to numb your nerves, small doses of opioids, (a superior pain killer) or a mixture of both.
- An epidural on an average, takes 30-40 minutes to give pain relief from the time the process starts. Usually, it takes 15-20 minutes to set up & test the epidural catheter and another 15-20 minutes for you to be comfortable and pain -free.
- An epidural gives you a positive birth experience without being drowsy or fatigued.
- An epidural can be easily topped up to provide pain relief if you need vacuum or forceps for delivery or a Caesarean section.
- An epidural will have hardly any effect on your baby.
- Some epidurals do not work fully and may need to be adjusted or replaced.

CAN EVERYONE HAVE AN EPIDURAL?

- Most people can have an epidural, but certain medical problems like bleeding disorders, brain tumors, spine surgeries, etc. may mean that it is not suitable for you.
- If you have a prolonged or complicated labor, your obstetrician may suggest an epidural to you, as it may be of some benefits to you or your baby apart from just pain relief. It can also come in handy if you need an emergency C-section.
- In overweight people, placing an epidural may be more difficult and may take longer time to setup. It may not work as satisfactorily and may need adjustment or redoing it.

WHAT IS THE PROCEDURE OF SETTING UP AN EPIDURAL?

- First, an intravenous cannula (a fine plastic tube) will be put in a vein in your hand or arm, and you will have a drip of intravenous fluid. You may also need a drip in labor for other reasons, such as to give you medication to speed up your labor or if you are being sick or to make the uterus contract and stop bleeding after delivery.
- You'll be asked to curl up on your side or sit bending forwards during the procedure. Your anesthesiologist will explain every step to you as he/she goes along.
- Your anesthesiologist will thoroughly clean your back with an antiseptic solution.
- It is NOT painful to have an epidural as a local anesthetic will always be injected into your skin to numb the area before performing the epidural procedure, & inserting the epidural needle so that it does not hurt you at all.
- **It is very important to keep still while the anesthesiologist is putting in the epidural.**
- Let the anesthesiologist know if you are having a contraction during the procedure. They will wait for the contraction to pass before continuing with the procedure.
- **This procedure cannot be performed without your help & cooperation.**
- Once the epidural catheter is in place, you will be given painkillers only through it after your anesthesiologist performs certain tests to confirm its correct placement.
- Once the epidural catheter is fixed in place with tape, you will be free to move in bed.

WHAT TO EXPECT ONCE THE CATHETER IS IN PLACE

- Your anesthesiologist will monitor that medications are working on the right nerves.
- Once full dose of painkillers is given you will be very comfortable in 15-20 minutes.
- Your midwife will monitor your blood pressure, oxygen and baby's hear beats.
- Sometimes, (in about 1 in 8-10 cases), the epidural doesn't work well at first instance and it may need to be adjusted or may need extra dosage. Very rarely, one may need to remove the epidural catheter out and replace it but eventually the epidural will make you pain-free and comfortable.

WHAT ARE THE RISKS OF HAVING AN EPIDURAL?

- Your legs may feel slightly numb and tingly while the epidural is working.
- You may develop low blood pressure, itching or shivering during the epidural.
- The epidural injection spot may be tender but usually only for a couple of days.
- You may find it difficult to urinate. If the bladder becomes full then you may probably need to have a tube passed into your bladder (a bladder catheter) to drain the urine.
- Between 1 in 100/200 women who have an epidural may get a headache.
- Permanent nerve damage is very rare with an epidural about 1:24,000
- The second stage of labor (after your cervix is fully dilated) may be slightly prolonged.
- Epidural has NO ill effects on your baby or cause any Long-term Backache.

HOW DO THEY KEEP THE EPIDURAL WORKING ONCE IT HAS BEEN PUT IN?

Once the epidural catheter is in place, pain relief with epidural can be extended as long as we want till you deliver. During labor, you can have extra doses of painkillers through the epidural catheter either as a bolus injection (a top-up), or a slow, steady flow using a pump. After each epidural top-up, the midwife will monitor your blood pressure regularly in the same way as when the epidural was started.

WHAT IS A MOBILE EPIDURAL?

A mobile epidural is where the pain of labor is reduced without making the lower part of your body very numb or making your legs feel weak. It only blocks the pain and not touch or pressure. So, it is possible that you may feel the tightening or discomfort under the ribs or rectal pressure. This actually, helps rotation of your baby's head and helps you to push when you are ready for the delivery. You may be able to take a stroll under the supervision of our staff if and only after the anesthesiologist has given you clearance.

HOW CAN AN EPIDURAL BE USEFUL FOR ME IF I NEED A CAESAREAN?

If you have taken an epidural for pain relief in labor and need a Caesarean section, a stronger local anesthetic is injected into your epidural catheter to make the lower half of your body very numb for the operation. This is safer and better than a general anesthetic for both, you and your baby. Rarely, the epidural may not work well enough to be used for a C-section so, another form of anesthesia may be used for your safety and comfort.

WILL HAVING AN EPIDURAL MAKE IT MORE LIKELY TO HAVE A CAESAREAN?

Evidence suggests that epidural, does not increase your chance of needing a Caesarean section. In fact, in certain situation taking epidural may prevent a caesarean section.

WILL HAVING AN EPIDURAL AFFECT MY BABY?

Epidural has no direct, documented side effects on the baby. It will not affect the condition of your baby when it is born. In fact, it improves blood supply to the baby and may benefit in some situations.

HOW CAN AN EPIDURAL GIVE ME A HEADACHE?

In about one in every 100-200 women who have an epidural, the bag of fluid which surrounds their spinal cord may get punctured by the epidural needle (this is called a 'dural puncture'). If this happens to you, you could get a severe headache for a few days that can be treated with medication or may need special treatment.

WILL HAVING AN EPIDURAL MAKE IT MORE LIKELY FOR ME TO HAVE A BACKACHE LATER?

There is no evidence suggesting increased chance of long-term backache with epidural. Backache is common during pregnancy and often continues afterwards. You may have a tender spot in your back after an epidural which, very rarely, may last for a week or so. Some evidence suggests that 8-10% of pregnant women develop new backache post-delivery irrespective of epidural, due to poor ante-natal habits & post-natal care.