



JOSEPH BRANT
MEMORIAL HOSPITAL

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EPIDURAL INFORMATION SHEET

During labour, most women have painful contractions. Using breathing techniques and the various different comfort measures will help you to handle the discomfort. For some women, an injection of a painkiller may help, but if these are not enough, you may want an epidural.

WHAT IS AN EPIDURAL?

An epidural is a way to relieve the pain of your labour contractions. It involves inserting local anaesthesia through a thin plastic tube into the epidural space near the spine. This numbs the nerves coming from the lower part of the body so that pain relief occurs. An epidural can be used during your labour and the birth of the baby.

WHAT HAPPENS BEFORE THE PROCEDURE?

You will sign a consent form called *Consent to Operate* before the epidural is started. An intravenous will be started in your arm to give you extra fluids. The Anaesthetist will review your blood test before you can have an epidural. Epidurals are done in the same room as the one you have your baby in. Your nurse will stay with you during the procedure. Husbands/support persons are asked to leave for 15-20 minutes during administration.

HOW IS IT DONE?

1. You will be positioned lying on your side or sitting up.
2. The Anaesthetist will wash your back with a sterile solution.
3. The skin in the lower back is made numb by injecting local anaesthetic or freezing with a small needle. This feels like a bee sting.
4. A second needle goes between the bones in your back until the “epidural” space is reached. You will feel quite a bit of pressure as this is done.
5. A thin plastic tube is threaded through the needle so that the tip is left in the space after the needle is removed.
6. The tube is taped to your back and you are often not even aware of it being there.
7. Local anaesthetic or freezing solution is injected into the tubing. This will relieve pain and numbs the lower half of your body. It may make your legs weak.

The procedure is very safe with little effect on you and your baby. However, like all medical procedures it carries with it a small risk of possible complications. You will be watched closely so that any complications can be detected and treated if necessary.

1. The epidural can cause the blood vessels in your legs to dilate (open up) and your blood pressure may go down. The nurse or Anaesthetist will check your blood pressure frequently and you will have an intravenous in your hand or arm so that the blood pressure drop can be treated, if necessary.
2. Very infrequently, the epidural needle can go in too far and cause a headache, which can last for several days. This may require being flat in bed until the headache is gone.
3. Some women experience temporary back discomfort in the area where the needle was inserted. This is due to bruising around the area and soon goes away.
4. Very infrequently, there may be some injury to nerves and most of these are temporary.
5. There are few situations where it is not possible to give an epidural safely and on these occasions, the Anaesthetist will discuss this with you.
6. Shivering, which may occur as the epidural begins to work, is usually short-lived and is treated with warm blankets, etc.

We would like to stress that most epidurals have been shown to be a safe and effective way of controlling discomfort during labour and delivery.

WHAT IF A CAESAREAN SECTION IS NECESSARY?

Your epidural can be used for pain control during a Caesarean Section. You will be given extra local anaesthetic into your epidural before your surgery.

Produced by the Department of Anaesthesia for the Labour & Delivery patient.