



Epidurals for Childbirth

This information sheet has been produced as an introduction to epidurals. If you would like more detailed information, you can speak to an anaesthetist at your preadmission clinic.

Please tell us if you have any major medical problems or allergies to medicines.

Benefits of epidurals:

- Relieves labour pain more effectively than any other form of pain relief.
- Usually you can move about and still be able to push your baby out.
- Can be inserted at any stage of labour.
- Is very safe.

Procedure

The process of receiving an epidural is as follows:

- A drip will be inserted into your arm (if you do not already have one).
- It will take about five minutes to set up an epidural, then a further five to 15 minutes if insertion is easy.
- You will be positioned sitting up, (as in the photo) curling over a pillow with your feet supported on a chair.
- It is important that you remain still when we are actually putting the epidural in. We are used to putting epidurals in women in labour and will work around your contractions. Please tell us if you are about to have a contraction.
- Your back is swabbed with an antiseptic solution that is very cold.
- A local anaesthetic injection is given in the area where the epidural needle is to be inserted. This may cause a stinging sensation.
- Generally, five to 15 minutes after your epidural is inserted your pain will be reduced.
- The needle is not left in your back there is only a very small plastic tube which is used to administer the pain relieving medication.



This position makes placing your epidural easier

Following the procedure

- There are different ways to administer the epidural medications.
- We allow you to control how much medication you need by administering it yourself using a push button device.
- Your midwife can administer more medication if this is not working well enough.

Once the epidural is inserted you will need to have continuous fetal monitoring for the rest of your labour. This means two belts around your abdomen and recording of the baby's heart beat and your contractions on a machine (CTG).

Possible side effects

- Your blood pressure may fall after an epidural is inserted. This does not normally cause problems. Your midwife will monitor your blood pressure closely.
- You may need a catheter inserted into your bladder if you have trouble passing urine.
- After the epidural has gone in, you may feel itchy and for a short time, you may shiver.
- The epidural may slow down slightly the progress of your second or 'pushing' stage of labour.
- If it is your first labour, the chance you will need a forceps or vacuum birth is slightly increased. It does not increase your risk of a Caesarean birth.
- When stronger medicine is needed to reduce pain, it may make you numb and stop you from walking for two to three hours.
- You may have a bruised feeling in your back (for a couple of days) where the epidural was inserted.

Occasional complications

- A small amount of women develop a bad headache, usually 24 to 48 hours after an epidural is inserted. This headache is often identified as feeling different from the common headaches that occur after childbirth.
- There is a very small chance of developing a minor skin infection requiring treatment and very infrequently a more serious infection occurs.
- Very rarely epidurals can cause limited nerve damage

After insertion

Inform your midwife if your epidural is not working adequately or it is not meeting your expectations. An anaesthetist is available at all times of the day or night for questions or assistance.

A staff member from the Department of Anaesthesia will come to see you the day after the birth of your baby to check that there are no major problems and to answer any questions that you may have.

For further information or optional reading visit:

www.kemh.health.wa.gov.au/having_a_baby_in_WA/information.htm



This document can be made available in alternative formats on request for a person with a disability.

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