ih **Intermountain Health**

# Anesthesia for Labor and Delivery

## Do I need pain medication?

**Labor and delivery are different for every woman.** Many things affect the pain you may feel, including:

- The size and position of the baby
- The strength of the contractions
- How well you can handle pain

The first step in managing pain is to learn about your choices and make a plan with your healthcare provider. But be open to change. The course of a baby's birth can be unpredictable.

**You may not need or even want pain medication.** Some women have babies without pain medication. They manage the intense feelings of childbirth in other ways, including relaxation and breathing exercises, hypnosis, and massage. These methods are often called "natural" childbirth. If you want to give birth without pain medication, it's important to learn and practice the techniques of natural childbirth before you go to the hospital to give birth.

**You may change your mind during labor.** Labor often hurts more than you think it will. Changing your mind about pain relief is not a sign of weakness. Some women find that pain medication helps them feel more in control and less tired during childbirth. Doctors sometimes suggest pain medication to help labor advance or if complications arise.

## What are my choices?

The two main types of pain medications used in labor and delivery are analgesics and anesthetics.

- **Analgesics** [an-uhl-GEE-ziks], such as opioids (for example, fentanyl or morphine), are medications that help relieve pain. They can lessen pain during labor, but do not completely get rid of it. They can also reduce anxiety and help you relax. Analgesics are generally not given during delivery.

- **Anesthetics** [an-ehs-THET-iks] are medications that can block most feeling, including pain. Depending on how and where they're given, they can act on a specific area or region of your body or on your whole body.

  - **Local anesthetics** act only on a specific area of your body.

  - **Regional anesthetics** act on a specific region of the body. These options can be used for both vaginal and cesarean deliveries (c-sections). Epidural [epp-eh-DUR-al] is the most common choice because it doesn't make you as sleepy and can be used all the way through labor and delivery.

  - **General anesthetics** block most sensation, including pain, and put you to sleep. Because they have greater risks than regional anesthetics, they're only used in emergencies.

All types of pain medication may affect your labor and your baby, though most of these effects last only a short time. Use the tables on the following pages to learn about anesthesia and discuss your options with your healthcare providers.

| What it is | How it's given | Actions and potential benefits | Potential risks or side effects |
|---|---|---|---|
| **Epidural block:**<br>A regional anesthetic. | • A local anesthetic is used to numb an area on your lower back.<br>• A needle is inserted into the space around your spinal cord. Then a thin catheter (tube) is threaded through it. The needle is removed and the catheter stays in place.<br>• You must lie or sit completely still while the needle and catheter are being inserted. This helps prevent touching a spinal nerve or vein, or piercing the spinal cord, which can cause unwanted side effects.<br>• It takes 10 to 20 minutes to place an epidural catheter and another 10 to 20 minutes for the medication to take effect.<br>• Once the catheter is in position, you can move around but may not be able to walk. | • Blocks most feeling from your waist down.<br>• Takes 10 to 20 minutes to take effect.<br>• Can be used throughout labor.<br>• Medication can be given through the catheter more than one time, with dosage increased or decreased as needed<br>• With stronger medications, can also be used for c-section. | **For you:**<br>• Numbness may make it more difficult to push and may make it hard to urinate (pee), requiring a catheter to be placed.<br>• Can make your chest numb, which might make breathing seem difficult, causing anxiety.<br>• If the needle pierces the sac around the spinal cord, you may get a bad headache that can last several days. This is treatable.<br>• Your blood pressure may drop. If this happens, you will receive IV fluids and medications to help bring your blood pressure up.<br>• You may feel light-headed, dizzy, nauseous, or hear buzzing in your ears.<br>• If a nerve is touched when the epidural needle is being placed, you may feel an electrical feeling down one leg. Rarely, the needle may cause nerve injury.<br>• If medication goes into a vein, it could cause dizziness or, rarely, seizures.<br>• Though rare, there is risk of an allergic reaction, blood clot, blood vessel injury, epidural abscess, swelling, or infection. |
| **Spinal block:**<br>A regional anesthetic. | • A small needle is inserted directly into the spinal canal in your lower back.<br>• A small amount of medication is then injected into the spinal fluid.<br>• A spinal block is given only once during labor, usually just before delivery or along with an epidural. | • Blocks most feeling from the chest down.<br>• Takes effect immediately, and lasts 1 to 2 hours.<br>• With stronger medications, can also be used for c-section. | • For a spinal block, if labor doesn't progress as expected, it may wear off too soon. However, you can get another dose.<br>**For your baby:**<br>• May make your baby sleepy, which may make it harder to breastfeed immediately after birth.<br>• A drop in your blood pressure may cause your baby's heart rate and breathing to slow down. |

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| **Pudendal block:** A local anesthetic. | Injected into the vaginal area. | Used to numb the vaginal area, usually before an episiotomy. | • Numbs only the vaginal area. Provides no relief from contraction pain.<br>• Rarely causes any negative effects on you or your baby. |
| **Analgesics:** General pain-relieving medications. Includes opioids, such as fentanyl or morphine. | Usually given through an IV or as an injection (shot) into a muscle. The medication moves from the muscle to the bloodstream, so your baby gets it too. How it affects your baby depends on how much and how close to delivery it is given.<br><br>Analgesics can also be injected into the epidural space of the spine or into the spinal fluid. (See "How it's given" under epidural or spinal block.) | • Can lessen pain, reduce anxiety, and help you relax during labor.<br>• Does not block all sensation and feeling.<br>• Does not cause you to lose consciousness.<br>• Does not slow down labor or interfere with contractions. | **For you:**<br>• Does not completely eliminate pain.<br>• May cause drowsiness or trouble concentrating.<br>• May decrease your memory of labor.<br>• May cause nausea, vomiting, or itching.<br>• May decrease blood pressure or slow your breathing.<br>• May give you an unwell or unhappy feeling.<br>• May cause an allergic reaction and difficulty breathing.<br><br>**For your baby:**<br>(if given too close to birth):<br>• May cause sleepiness, which may make it harder to breastfeed ("latch on") immediately after birth.<br>• May slow breathing and reflexes, and make it hard for your baby to stay warm. |