Mass General Brigham

Information about labor epidurals

Adapted from SOAP Patient Education Sub-Committee

- Every pregnant woman should receive accurate information about pain during labor.
- · Every woman's labor is different.
- The decision to get an epidural is your choice. You are free to change your mind at any point during labor.
- It is important to discuss labor pain with your healthcare professionals and have your questions answered.

What is a labor epidural?

 A labor epidural is a thin plastic tube ("epidural catheter") that goes into your back. The catheter sits near nerves. Pain medication is put into the catheter to block nerves and pain signals. The catheter does not touch the spinal cord.



- An epidural is the most effective method to lower pain during labor. At Mass General Brigham, most patients (around 70-90%) receive an epidural for childbirth.
- An epidural can also be used if you need to have a C-section.

How long does it take to get pain relief?

It takes 20 minutes to put an epidural in the lower back. Once the epidural is in the right place, it takes 5-20 minutes for the medication to work. More pain medication can be put in the epidural catheter during labor.

How long does the pain relief last?

- If an epidural catheter is put in your back, pain medication can be given by a pump through the epidural catheter for as long as you need. You may even be able to press a button to give yourself doses of pain medicine when you need it.
- There are other similar options like a spinal or a combinedspinal epidural, where less time is needed for you to get pain relief. For a spinal, one dose of pain medicine is given and the pain relief lasts for 90 minutes. You can discuss these options with your anesthesiologist.

What are the benefits of getting an epidural?

- Epidural pain relief is the most effective type of pain relief for childbirth.
- It lets you be fully awake during the birth experience, and reduces the stress of pain on your body.
- Only a tiny amount of pain medication gets into your blood. This means that it is safe for your baby.
- If there is an emergency and you need a C-section, the epidural can be used for the C-section and you may avoid general anesthesia (being put to sleep).

What are the side effects?

Possible side effects are:

- A drop in blood pressure. This is monitored and treated if it happens.
- Epidurals do NOT cause long lasting back pain, but you may have some back soreness. You could also have some back pain that is normal for pregnancy and childbirth.
- Other side effects that are rare include itching, fever, and heaviness in the legs.

What are the risks?

All procedures have risks. If complications occur, most are easily treated without bad effects for you or your baby. In this case, the benefits are much greater than the risks.

Less serious risks	How common?
No pain relief or one-sided pain relief needing epidural replacement	5/100 (common)
Bad headache (very easy to treat, sometimes does not need to be treated)	1/100-1/200 (uncommon)
Catheter in wrong location, causing accidental injection of medication into spinal fluid or blood vessels	Rare
Serious risks	How common?
Blood clot around the spine (labor epidural hematoma)	1/1 million (extremely rare)
Infection in the spine ("abscess") or around the brain ("meningitis")	Extremely rare
Severe nerve damage	Extremely rare

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How is the procedure done?

- Epidural catheters (thin tube) are placed in the delivery room. Before the procedure, an IV will be placed in your arm or hand.
- Your blood pressure, heart rate, and oxygen levels will be monitored. Your baby's heart rate and your contractions may be monitored too.



- You will either be sitting up or lying on your side with your back curved. We will pick the best position for you.
- The procedure is sterile (clean), so the anesthesiologist will wear a mask and sterile gloves. They will clean your back with soap.
- Numbing medication will be put in your back with a very small needle. It is normal to feel a quick poke or burning sensation.
- After the area in your back is numb, a second needle will be used to locate the correct space in your back. It is normal to feel pressure during this part of the procedure.
- Once the needle is in the right place, the epidural catheter is put in place and the needle is removed. Nothing sharp stays in your back.
- It can take several minutes (~20 mins) to place the epidural in your back.
- It is important to stay still and not make sudden movements.

Will it limit the ability to eat, move, walk around or the ability to push?

- You must stay in bed because your legs may be numb and you are at an increased risk of falling.
- · You are also only allowed to drink clear liquids.
- An epidural can make the pushing stage of labor longer by about 30 minutes.
- An epidural can also take away your urge to urinate when you have a full bladder. A tube is placed to drain your bladder.

Is there any reason I can't get an epidural? Does the timing matter?

- Some medical conditions (like problems with blood clotting or a bad infection) can make it unsafe or very difficult to place an epidural.
- A woman can get an epidural at almost any time during labor. If the baby is close to being delivered, then it could be too late.

Will it increase my risk of having a cesarean delivery?

An epidural will not increase the chance of a C-section. It could slightly increase the chance of the obstetrician delivering the baby with special tools like a vacuum or forceps.

Will there be any harm to my baby?

Epidurals are safe for your baby. Less medication gets into your blood and to your baby with an epidural than with other IV or inhaled medications.

Will it affect my ability to breastfeed?

An epidural will not prevent you from breastfeeding your baby.





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