

*Make this  
labor your own  
experience!*

**Understand** as much as you can about pregnancy and childbirth by reading and taking classes.

**Learn** as much as you can about reducing pain and discomfort during labor and share your ideas with your doctor and partner.

**Be flexible** – remember that plans can change quickly once your labor starts and progresses.

*For more information about labor and childbirth, or any other women's health issues, contact the OB-GYN Department at Bay Area Medical Center*



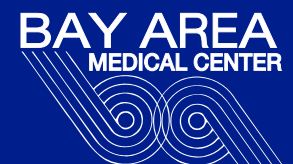
*What You Should Know About*

***Epidural Anesthesia Use  
for Obstetrical Pain Relief  
During Labor***



3100 SHORE DRIVE  
MARINETTE, WI 54143  
(715) 735-4200  
EXT. 4050

[www.bamc.org](http://www.bamc.org)



## What is epidural anesthesia?

Epidural anesthesia is *regional anesthesia* that blocks pain in a particular region of the body. The goal of an epidural is to provide pain *relief*, rather than complete *anesthesia*, which is total lack of feeling. Epidurals block the nerve impulses from the lower spinal segments resulting in decreased sensation in the lower half of the body.

## What are the advantages of epidural anesthesia?

1. Relieving the discomfort of childbirth can help some women have a more positive birth experience
2. Most of the time an epidural will allow you to remain alert and be an active participant in your birth
3. If you deliver by cesarean, an epidural will allow you to stay awake and also provide effective pain relief during recovery
4. An epidural may allow you to rest, relax, get focused and give you the strength to move forward as an active participant in your birth experience.

## How is epidural anesthesia given?

IV fluids will be started before active labor begins and prior to the procedure of placing the epidural. An anesthesiologist will administer your epidural. You will be asked to arch your back and remain still while lying on your left side or sitting up. This position is vital for preventing problems and increasing the epidural effectiveness. An antiseptic solution will be used to wipe the waistline area of your mid back to minimize the chance of infection. A small area on your back will be injected with a local anesthetic to numb it. Then a needle will be inserted into the numbed area that

surrounds the spinal cord in the lower back. A small tube or catheter is threaded through the needle into the epidural space. The needle is carefully removed leaving the catheter in place so medication can be given through periodic injections or by continuous infusion. The catheter will be taped to your back to prevent it from slipping out.

## What are the common side effects of epidural anesthesia?

**Common side effects can include:**

1. Shivering
2. Itching or rash

**Less frequent side effects may include but are not limited to:**

1. Headache
2. Low blood pressure
3. Failure to relieve pain
4. Temporary paresthesias (feeling of nerve sensations)
5. Back pain

**Very rare complications may include:**

1. Infection
2. Drug reactions
3. Paralysis
4. Bleeding into the epidural or spinal space
5. Respiratory arrest
6. Loss of life

*Since epidural anesthesia involves needle placement in the back, there is a natural tendency to assume that any post-delivery nerve problem is due to the epidural anesthesia.*

*However, the majority of nerve problems following labor and delivery are commonly due to the impingement of the nerves by the moving baby along the birth canal, and rarely to regional anesthesia. If you experience any weakness in the legs or other nerve problems, your anesthesiologist will help to evaluate the problem and make sure you have the proper follow-up.*

*While epidural anesthesia is a very safe form of pain relief for laboring, it is not risk-free. These risks apply for both mother and fetus.*

*You will be monitored closely for 12 hours after delivery to assure safety and rapid identification of adverse effects/complications of epidural anesthesia.*