

# INFORMATION ABOUT EPIDURAL ANALGESIA



## The procedure of the epidural

- An epidural catheter (plastic tube) will be placed in the epidural space of the spine through a needle.
- While the epidural catheter is being inserted it is important that you do not move and let the anesthetist know if you are having a contraction.
- Placing the epidural catheter usually takes 20 minutes and another 20 minutes for the medication to be effective.
- Some epidurals do not work correctly and have to be readjusted or replaced.



## Advantages

- Most epidurals provide an excellent pain relief.
- Sometimes the dose may be adjusted in order to allow mobility of your legs.
- Generally, the epidural anesthesia does not affect the baby.
- If required, the epidural dose can be adjusted in order to perform a c-section using the same epidural catheter.



## Complications that could happen

- The epidural could prolong the duration of the second stage of labour (pushing stage)
- The administration of the epidural medication could make your blood pressure low, make your skin itch, numbness on your legs or high temperature.
- Pain on your back is not always caused by the epidural technique as it is common after any pregnancy. You may feel some discomfort on the area for several days.
- The administration of recurrent doses could cause temporal weakness of your legs and increase the risk of an instrumental delivery.

On the reverse are the most important risks of epidural anesthesia. If you need additional information, you can consult the website [www.oaformothers.info](http://www.oaformothers.info).

You can also consult any questions with the anesthetist before performing the technique.

Recommendations adapted from [www.labourpains.com](http://www.labourpains.com)



# Risks of the epidural to reduce the pain in labor



Type of risk	How often does the occur?	It is frequent?
Low blood pressure	One in 50 women	Occasional
Delay in the progress of labour	One in 8 women	Common
If ac-section is needed and the pain is not well controlled with the epidural, it might be required to put you under general anaesthesia	One in 20 women	Sometimes
Intense headache	One in 100 women (epidural)	Uncommon
Nerve damage (numbness in one leg, legs weakness...)	Temporary - One in 1.000 women	Rare
Minor neurologic side effects lasting more than 6 months	Permanent - One in 13.000 women	Rare
Epidural abscess (infection)	One in 50.000 women	Very rare
Meningitis	One in 100.000 women	Very rare
Epidural haematoma	One in 170.000 women	Very rare
Decreased conscious level	One in 100.000 women	Very rare
Major injuries, including paralysis	One in 250.000 women	Extremely rare

The information available from the published documents does not give accurate numbers for all these risks. The numbers above are estimations and may vary in different hospitals.

