

SECTION OF ANESTHESIA

Information About Epidural Analgesia -

INTRODUCTION

All women experience a certain amount of discomfort during labour and delivery and some may require large doses of pain relieving drugs if indicated.

Certain women may not be suitable candidates for epidural analgesia.

An epidural may be able to relieve your pain by "freezing" the nerves that carry the pain sensation from your womb.

Who performs the epidural?

The epidural procedure is performed by an anesthesiologist who is requested by your physician to do so

How is the epidural given?

The epidural is performed by placing drugs around the nerves just outside the spinal canal, using an epidural catheter. This is a small tube placed in your back, outside the spinal cord. This tube is attached to a pump which delivers local anesthetic slowly and continuously, providing continual relief of pain.

After the epidural, you will be requested to spend equal length of time (about every 30 minutes) on either side.

Are there any complications?

The epidural is a safe way of providing pain relief. However, like all medical procedures, it carries with it the risk of certain complications, which usually cannot be anticipated.

These complications need not be life-threatening, provided they are recognized and treated immediately. Your doctor and nurses are trained to manage any complications associated with this procedure.

1. Occasionally the epidural catheter enters the space around the spinal cord. If this occurs the level of anesthesia may go to a higher level than required.
2. If the needle that is used to place the catheter or the catheter itself enters the space around the spinal cord, the patient may experience a severe headache in the days following delivery.

3. Very occasionally, the freezing may enter directly into a vein. If this occurs, you will notice a peculiar sensation in your head. Your ears will ring and you will have a "tingling" feeling in your face. You may also have a metallic taste in your mouth and throat. If this occurs, inform your nurse or doctor immediately.

What other complications may arise?

- Other complications may arise which are more serious, but which occur very rarely. The most serious of these, as with any medical procedure is, death. This is extremely rare and occurs in less than 1 in 100,000 cases. Slightly more frequently, permanent nerve damage, up to and including paralysis may occur.

The anesthesiologist can discuss all these complications with you if you wish.

Occasionally, an epidural may not work at all or it may prove technically impossible to insert needle or catheter.

You must understand that all precautions are taken to avoid complications and to ensure that you and your baby are safe during labour and delivery.

Can I move about in bed with an epidural?

Yes: You will be able to move about in the bed and turn from side to side with little or no assistance with this epidural.

Consent for procedure

After you read this pamphlet, if you wish to discuss any points, please indicate to your physician and he/she will make arrangements for you to meet with an anesthesiologist. You will be informed of the risks of the procedure, and have an opportunity to ask questions of an anesthesiologist. You will be required to sign the form indicating that you consent to having the procedure performed. Please understand that the final decision as to whether or not you have an epidural anaesthetic rests with you and your anesthesiologist who is performing the procedure. This decision will be based on what the anesthesiologist in consultation with you and your other physicians feels is best for you and your baby.

Section of Anesthesia

I acknowledge I have read this pamphlet --

Signature of Patient

Date

PLEASE BRING THIS DOCUMENT, APPROPRIATELY SIGNED, WITH YOU TO THE HOSPITAL AT THE TIME OF YOUR ADMISSION