

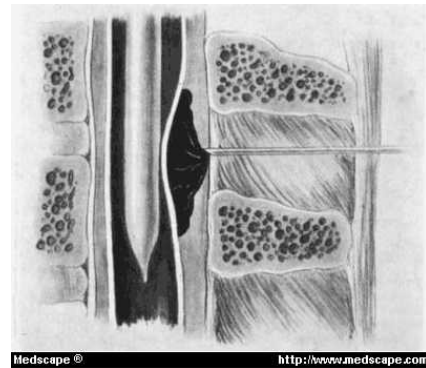
# The Facts About Anesthesia and Analgesia For Labor

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Although a natural birth is usually the healthiest choice for both mom and her baby, there are times when medical interventions are useful. It is important, when considering interventions, to understand the risks and benefits.

## **Epidural Anesthesia**

Epidural anesthesia is a process in which a narcotic or local anesthetic is injected into the back, just outside the dura, which is the membrane that protects the spinal canal. To administer the epidural, a woman is first given intravenous fluids to help prevent a drop in her blood pressure. She is then asked to lie on her side or sit with her back arched. A local anesthetic is injected into the skin to numb the area



and prepare it for the epidural. A needle is then inserted between the vertebrae in the woman's back and a catheter is inserted through it into the epidural space. Medication is continuously injected through the catheter. The epidural is usually administered after the woman's cervix has dilated to 4 or 5 centimeters.

A walking epidural combines the traditional epidural procedure with a spinal to help reduce the amount of medication needed and allow more sensation of the legs. In a walking epidural, before the catheter is inserted, a tiny needle is inserted through the epidural needle and it punctures the dura. A small amount of anesthetic is then injected into the spinal canal. The spinal needle is withdrawn and the catheter is then inserted into the epidural space, as with a traditional epidural.

## Benefits:

- Usually provides effective pain relief
- A small amount of medication is used, so the woman remains mentally alert
- Safer than general anesthesia and can be used for cesarean sections.
- Requires less time to recover than with general anesthesia

## Risks to the Mother:

- May provide inadequate or patchy pain relief
- Possible fever
- Possible serious drop in blood pressure
- Causes immobility (less so with the "walking epidural")
- May increase the likelihood of malpresentation
- Has been shown to prolong labor by an average of 2 hours
- Since it may interfere with progress, increased need for pitocin
- Increased need for forceps and vacuum extraction
- May increase the need for cesarean section (The studies are contradictory on this point)
- Possible shivering or itching
- Possible severe post birth headache ("spinal headache")
- Increased risk of long-term backache
- Usually requires urinary catheterization
- Requires continuous monitoring to detect complications and gauge progress
- Reduces the experience of birth
- Severe complications are extremely rare, but include seizures, paralysis of the lungs and heart and death

## Risks to Baby

- Medication crosses the placenta
- Risk of septic workup and NICU care if maternal fever develops
- Increased risks due to forceps, vacuum or cesarean section
- Possible respiratory depression
- Increased likelihood of fetal distress if mother's blood pressure drops
- Possible short-term neurobehavioral changes including irritability and inconsolability.

## **Spinal**

In a spinal, pain medication is injected directly through the dura into the spinal canal. It is a one-time shot that usually wears off in about an hour or two.

### Benefits:

- Easier to perform than an epidural
- Takes effect much faster, making it a better choice for cesarean section in some cases.
- Usually eliminates the sensation of pain completely

### Risks to Mother:

- All the same risks as an epidural
- Spinal headache

### Risks to Baby:

- Same as epidural

## **Narcotic Analgesics**

Narcotic analgesics like Stadol, Demerol, Numorphan, etc. are administered through an IV or injected directly. They do not eliminate pain, but are meant to “take the edge off.” They are sometimes tried before more invasive anesthetics.

### Benefits:

- May “take the edge off” pain
- May promote relaxation, especially between contractions

### Risks to Mother:

- Drowsiness, confusion
- Nausea, vomiting
- May slow the progress of labor
- May reduce coping abilities
- Possible respiratory and central nervous system depression

### Risks to Baby:

- Possible depressed fetal heart rate
- Possible respiratory depression
- Possible lack of responsiveness for up to a week