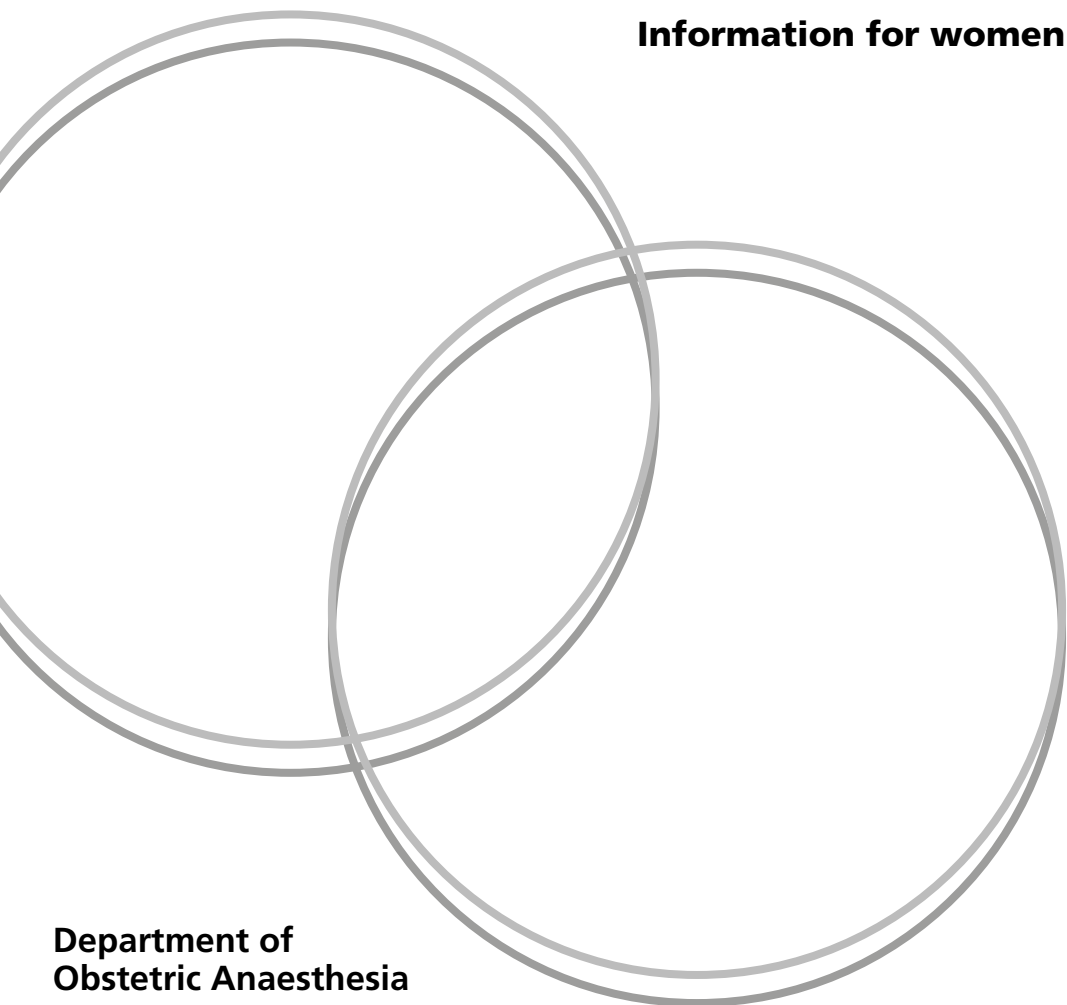




Oxford University Hospitals
NHS Foundation Trust

Epidural pain relief in labour and signs to look out for after childbirth

Information for women



**Department of
Obstetric Anaesthesia**

What to expect from an epidural in labour and for delivery

We hope that your epidural provides you with good pain relief during labour and for the birth of your baby.

Once your epidural has been inserted and the anaesthetist has connected the epidural pain relief pump, your contraction pain should become less sharp and you should start to feel more comfortable over the course of 20-30 minutes. You may still feel the contractions as a mild “tightening” sensation, and you may also feel pressure sensations as your baby moves downwards in your pelvis. However, if you are still feeling pain or the contraction pain returns, please ask your midwife to contact the anaesthetist to review your epidural.

The epidural may make the top of your legs feel slightly heavy, and you may feel a warm or tingling sensation in your back or legs. Unless you receive a stronger epidural top-up from the anaesthetist, it is unlikely that your legs will get very heavy, or that you will be unable to move on the bed. In fact, we encourage you to try to keep mobile in labour with your epidural (always with your birth partner or midwife to support you), and to change your position on the bed.

Some women need to go to an operating theatre for delivery of their baby, either for an assisted vaginal delivery or for a caesarean section. In either of these situations the epidural can be topped-up by the anaesthetist in the operating theatre to allow you to be awake, but comfortable, for the birth of your baby.

What to expect when an epidural is removed

Your midwife or one of the anaesthetists will remove the epidural catheter (tube) from your back after your baby is born. This should not be painful, and simply involves removing the dressings from your back and gently pulling out the epidural tube. Depending on how much of the epidural pain relief you received, and whether you had an extra top-up by the anaesthetist, you should start to get the normal feeling back in your tummy and legs between 2 and 6 hours after the epidural is removed.

Sometimes you may notice some very mild bruising on your back where the epidural was inserted, and your back may feel a little sore at the insertion site. These symptoms usually resolve in a few days. If required, pain killers such as paracetamol or ibuprofen may help. Having an epidural is not associated with developing chronic back pain. Long-term back pain is usually the result of hormone changes in pregnancy which can soften the ligaments in the back combined with changes in posture both before and after delivery of the baby.

Signs to look out for after an epidural for pain relief

Headaches are common after childbirth, affecting up to 50% of women. They can arise for a number of reasons. An epidural is rarely the cause of a postnatal headache. An epidural will cause a headache in approximately 1 in 100 women who have epidural pain relief.

If you develop a headache in the first few days after birth please speak to a member of staff. If you have already left hospital, contact your community midwife or GP. If the headache is thought to be the result of an epidural, they will arrange for you to see an anaesthetist.

Serious long-term complications from epidural pain relief are rare and affect less than 1 in 10,000 women. Infection or bleeding can cause pressure on nerves and should be treated urgently.

If at hospital you develop any of the following uncommon symptoms in the days following your epidural, it is important that you speak to a member of staff as soon as possible:

- Severe and worsening back pain
- High temperature and neck stiffness
- Numbness, weakness or any change in sensation in your legs
- Inability to pass urine or control your bowels
- Severe headache
- Swelling, tenderness or redness from the epidural site on your back

If you experience any of these symptoms after you have been discharged from hospital, please contact your community midwife or GP as soon as possible (outside of normal working hours, please contact the Maternity Assessment Unit on **01865 220 221**).

How to contact an anaesthetist

There is always an anaesthetist present on the Oxford Delivery Suite 24 hours a day. Please use the following contact telephone number.

The anaesthetist will be able to arrange further follow up in person if required:

Tel: **01865 221 994** (first choice contact number)

or

Tel: **01865 221 988**

For more information please visit:

www.labourpains.com/home

If you need an interpreter or would like this information leaflet in another format, such as Easy Read, large print, Braille, audio, electronically or another language, please speak to the department where you are being seen. You will find their contact details on your appointment letter.

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