

Regional Anesthesia for Labor and Delivery

Patient Education Guide



Table of Contents

Introduction	2
Regional Anesthesia Overview	2
Epidural Block	3
Spinal Block	4
Combined Spinal Epidural	5

Introduction

There are many ways to manage pain in labor. There are medicine and non-medicine options available. Talk to your care team about what options may be available at your local hospital.

Pain Medicine

Pain medicine can be given as a pill or through a small plastic tube in a vein in your arm (called your IV).

- These medicines can usually be given more than once depending on the length of your labor.
- Some of these medicines can make baby sleepy or make it hard for them to breath if you get the medicine within a few hours of delivery.
- These may be a good option to consider, especially if you are not allowed to get any of the regional anesthesia described in this book.

Talk to your care team about any pain that you may have trouble tolerating.

Regional Anesthesia

For many patients, regional anesthesia is a safe way to control pain during labor and delivery. The following pages have information about the different types of regional anesthesia options that might be available.

Regional Anesthesia Overview

What is regional anesthesia?

Regional anesthesia options help control pain during labor and delivery. Options include epidural nerve blocks, spinal blocks, and peripheral nerve blocks.

What are the benefits of regional anesthesia?

You should need fewer doses of strong pain relief medicine through your IV. With fewer doses of strong pain medicine, your breathing should be better, you should have less nausea or vomiting, and baby will get less medicine before they are born.

What is general anesthesia?

Sometimes a c-section is needed for the safety of the pregnant person and baby. You may need to “go to sleep” for the c-section. This is called general anesthesia. A breathing tube is used for your safety during general anesthesia.

- General anesthesia may be used in an emergency when there is not enough time for regional anesthesia.
- It may also be used if you cannot get regional anesthesia due to a medical condition.

Who performs anesthesia?

The anesthesia care team is made up of several different specially trained professionals. You may get anesthesia care by any combination of these people, so they are referred to as “anesthesia providers.”

Anesthesiologist	A medical doctor who specializes in anesthesia care and pain management. They are in charge of all anesthesia.
Anesthesiology Resident or Fellow	A medical doctor who is getting specialty training in anesthesia care. They are supervised by an anesthesiologist.
Certified Registered Nurse Anesthetist (CRNA)	An advanced practice nurse with special training in anesthesia care and procedures. The care they provide is under the direction of an anesthesiologist who is always available to help if needed.



Epidural Block

What is an epidural block?

An epidural block is a catheter placed in your back so numbing medicine can be given to you during labor and delivery. It allows you to be awake and comfortable for the birth of baby.

If you have an epidural tube put in during labor, it can sometimes be used for a c-section.

- You will get an extra dose of strong medicine to make you numb from your breasts to your toes.
- You will still be able to feel pressure and tugging during surgery, but you will not feel anything sharp.

How is it done?

1. The anesthesia provider cleans and numbs the skin on your back where the catheter will be placed.
2. They then use a needle and place the catheter (tiny plastic tube) into your back near the nerves.
3. Once the catheter is placed, the needle is removed.
4. An epidural pump is then used to give you numbing medicine continuously. It may take some time before you start to feel the numbness and pain relief.
 - The pain relief and numbness last as long as the pump is active.
 - When the pump stops, full feeling comes back within a few hours.

What will I feel?

- You may feel numbness in your belly and legs, along with pain relief.
- Your legs may feel heavy.

Can anyone have an epidural?

An epidural may not always be possible for everyone. Your anesthesia provider will work closely with your doctor or midwife to decide if it is safe for you. Some people may have thin blood because of pregnancy conditions, so an epidural may not be possible. Make sure you talk to your care team if you:

- Take blood-thinning medicine, such as warfarin
- Have a blood clotting problem
- Are allergic to local anesthetic pain relief medicine
- Have a spine deformity
- Have an infection in your back
- Have had a previous surgery on the spine with metal placed in your back
- Have had problems with a spinal or epidural in the past

What are the risks?

An epidural is safe. There are small risks, such as:

- Infection
- Bleeding
- Nerve damage
- Drug allergy
- Nausea or vomiting
- It could lower your blood pressure and may need treatment
- The epidural tube may not be in the right spot, it might move, or it might not work well. Sometimes, you may need your epidural replaced.



Spinal Block

What is a spinal block?

A spinal block is a similar type of anesthesia to the epidural block. The anesthesia medicine is injected right into the fluid that surrounds your spinal cord nerves to numb you and provide pain relief. It allows you to be awake and comfortable for the birth of baby.

A spinal block is typically used for c-sections if you do not have an epidural already or if the epidural is not good enough for surgery. You will still be able to feel pressure and tugging during surgery, but you will not feel anything sharp.

How is it done?

1. The anesthesia provider cleans and numbs the skin on your back.
2. They then use a needle to inject numbing medicine into the fluid around your spinal cord nerves.
 - They are very careful to not touch your spinal cord nerves.
 - A catheter is not usually left in place for this type of block.
 - Numbness and pain relief will come on much faster but will not last as long as the epidural block.

What will I feel?

You will feel numbness in your belly and legs, along with pain relief.

Can anyone have a spinal block?

Your anesthesia provider will work closely with your doctor or midwife to decide if a spinal block is safe for you. Some people may have thin blood because of pregnancy conditions, so a spinal may not be possible.

Make sure you talk to your care team if you:

- Take blood-thinning medicine, such as warfarin
- Have a blood clotting problem
- Are allergic to local anesthetic pain relief medicine
- Have a spine deformity
- Have an infection in your back
- Have had a previous surgery on the spine with metal placed in your back
- Have had problems with a spinal or epidural in the past

What are the risks?

The risks of a spinal block are small and include:

- Infection
- Bleeding or bruising
- Nerve injury
- Drug allergy
- Headache
- Nausea or vomiting
- It could lower your blood pressure and may need treatment



Combined Spinal Epidural

What is a combined spinal epidural (CSE)?

A CSE is the same as an epidural block where a catheter is placed in your back, but some medicine is also given into the fluid that surrounds the spinal cord. This helps so you have immediate pain relief, and then the epidural will provide relief as long as it is needed. It allows you to be awake and comfortable for birth of baby. This type of anesthesia is sometimes used for labor and sometimes for a c-section.

How is it done?

1. The anesthesia provider cleans and numbs the skin on your back where the catheter will be placed.
2. They then use a needle and place the catheter (tiny plastic tube) into your back near the nerves. The anesthesiologist uses this same needle to give you the medicine to put medicine in the fluid around your spinal cord to provide pain relief right away.
3. Once the catheter is placed and you get the medicine, the needle is removed.
4. An epidural pump is then used to give you numbing medicine continuously. It may take some time before you start to feel the numbness and pain relief.
 - The pain relief and numbness last as long as the pump is active.
 - When the pump stops, full feeling comes back within a few hours.

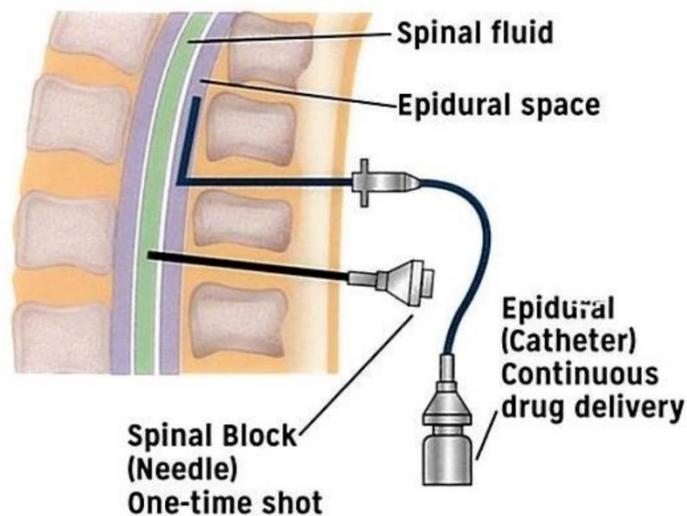
What will I feel?

- You may feel numbness in your belly and legs, along with pain relief.
- Your legs may feel heavy.

What are the risks?

There are small risks, such as:

- Infection
- Bleeding or bruising
- Nerve damage
- Drug allergy
- Headache
- Nausea or vomiting
- It could lower your blood pressure and may need treatment
- The epidural tube may not be in the right spot, it might move, or it might not work well. Sometimes, you may need your epidural replaced.



**HENRY
FORD
HEALTH®**

henryford.com



©2025