

Patient Guide to Obstetric Regional Anesthesia



all for you



Henry Ford Medical Group
Department of Anesthesiology,
Pain Management & Perioperative Medicine
Division of Obstetric Anesthesiology

WHAT IS REGIONAL ANESTHESIA?

Regional anesthesia includes epidural nerve blocks, spinal blocks, and peripheral nerve blocks. These blocks help control pain during labor and delivery.

With regional anesthesia, you should need fewer doses of strong pain relief medication through the IV. With fewer doses of strong pain medications, your breathing should be better, you should have less nausea and vomiting, and your baby will get less medication before he or she is born.

Sometimes, a cesarean section is necessary for the safety of the mother or the baby and you may need to “go to sleep” for the surgery. This is called general anesthesia. A breathing tube is used for your safety during general anesthesia.



TYPES OF REGIONAL ANESTHESIA

Epidural Block

An epidural block involves the anesthesiologist using a needle to place a tiny plastic tube (called a catheter) near the nerves in your back. The doctor will clean and numb your skin where the catheter will be placed. The needle will not remain in your back after the catheter is placed.

Numbing medications are given through the catheter to give you pain relief during labor. You may experience numbness in your belly and legs in addition to pain relief. Your legs may feel heavy. Most people do not find these sensations to be unpleasant, just a little strange.

An epidural pump is used to give pain relieving medication continuously through the catheter. The pain relief will last as long as the pump is active. When the pump is stopped, full feeling will return within a few hours.

What if I don't have an epidural?

If you decide not to have an epidural, pain relief medications can still be given into your IV line, or you may choose not to take any medication at all.

Every effort will be made to keep you as comfortable as possible.



Can anyone have an epidural?

An epidural is not possible for some people. Please talk to your obstetrician and anesthesiologist if:

- You take blood-thinning drugs, such as warfarin.
- You have a blood clotting problem.
- You are allergic to local anesthetic pain relief medications.
- You have a significant deformity of the spine.
- You have an infection in your back.
- You have had previous surgery on the spine with metal placed in your back.
- You have had problems with a spinal or epidural in the past.

Also, some women will have thin blood due to pregnancy conditions. In this case an epidural may not be possible. Your anesthesiologist will decide whether an epidural would be safe in this case.

Are there any risks of the epidural?

There are small risks such as:

- Infection
- Bleeding
- Nerve damage
- Drug allergy
- Headache



Spinal Block

A spinal block may be used for cesarean section or instead of an epidural for vaginal delivery. This type of anesthesia is similar to epidural anesthesia except the anesthetic medication is injected into the fluid that surrounds your spinal nerves. Care is taken not to touch the spinal cord nerves. A catheter is not usually left in place for this type of block. With this technique, the numbness and muscle weakness will come on much faster, but will only last for a limited time.

Are there any risks of the spinal block?

The risks are the same as when you receive an epidural block. These risks are small and include:

- Infection
- Bleeding or bruising
- Nerve injury
- Drug allergy
- Headache



Combined Spinal Epidural (CSE)

A combined spinal epidural (CSE) is the same as an epidural block where a needle is used to place a tiny plastic tube in the back, but some medication is also given into the fluid that surrounds the spinal cord, like a spinal block. The medication is given through the same needle that is used to place the epidural.

When medication is injected into the spinal fluid this helps to lessen the pain right away.

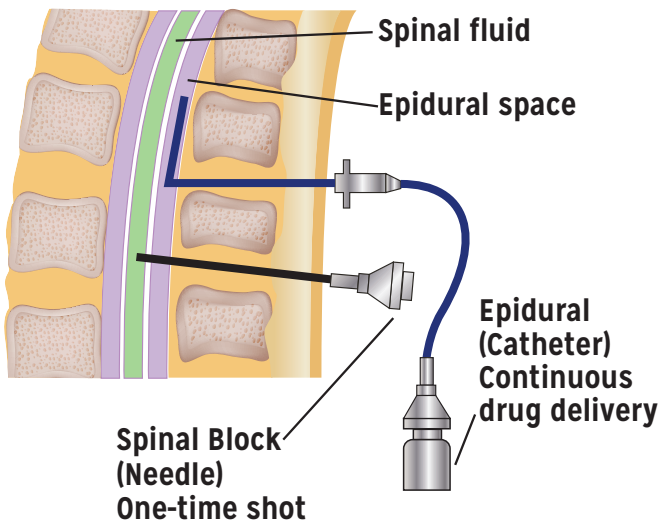
The epidural will still stay in place so numbing medication can be given for as long as needed.

You may have some itching from the medication. You may also experience numbness in the belly and legs and your legs may feel heavy.

Are there any risks of a CSE?

The risks are the same as when you receive an epidural block. These risks are small and include:

- Infection
- Bleeding or bruising
- Nerve injury
- Drug allergy
- Headache



Peripheral Nerve Block

A peripheral nerve block involves the anesthesiologist injecting pain relief medication directly around nerves going to your belly. Sometimes patients receive a Transversus Abdominus Plane (TAP) nerve block which involves injecting pain relief medication directly around nerves going to the abdominal wall.

This medication works just like the numbing medication you get at the dentist's office. A TAP block can be done right after a cesarean section while still in the operating room to help with pain.

How is the peripheral nerve block done?

Your belly will be cleaned. An ultrasound machine will be used to find the nerves that need to be numbed.

A needle will be used for the injection.

You will feel some numbness, heaviness, and/or tingling in your belly where the block was done.

Can you do the nerve blocks when I am asleep?

It is safer to have these nerve blocks done while you are awake and can speak with the doctors.

Are there any risks to the nerve blocks?

The risks are the same as when you receive an epidural or spinal, without the risk of headache. There are small risks such as:

- Infection
- Bleeding
- Nerve damage
- Drug allergy



Please feel free to contact us for any further questions.



henryford.com/services/anesthesiology