

General Anaesthesia for Caesarean Section (CS)

This card is to give you some information about being put to sleep with a general anaesthesia.

- A general anaesthetic is often needed for an emergency Caesarean section if there is not enough time to put in a spinal anaesthetic or an epidural. It may also be an option for those who would prefer it. This can be discussed with your Anaesthetist.
- You will have a needle called an intravenous cannula placed in your hand or arm.
- One risk of a general anaesthetic is that the acid in your stomach can pass into your lungs when you are asleep. To reduce this risk, you may be given an injection through a drip or into your leg, and you may be given antacid medicine to drink.
- In the operating theatre a mask will be placed over your face for you to breathe oxygen through. The mask may feel tight, but it is important to give you extra oxygen.
- The general anaesthetic will be given into your drip. As you fall asleep, you will feel pressure on your neck. This is to protect your airway and lungs.
- Your birth partner will not be able to be with you to the operating theatre, but they will be nearby.
- You will wake up in the recovery room and can see your baby as soon as you are awake.
- When you wake up, your throat may feel sore, and you may feel sick. More painkillers and anti-sickness medication will be available if you need them.

In the UK each year, 17,000 general anaesthetics are given to women who are having a Caesarean section, and there are few complications. However, there are some risks and side effects of general anaesthetics. These are shown below.

Risks and Side Effects of General Anaesthesia

Possible Problem	How Common the Problem is
Shivering	Common - about 1 in 3 people
Sore throat	Common - about 1 in 3 people
Feeling Sick	Common - about 1 in 3 people
Muscle Pain	Common - about 1 in 3 people
Cuts or bruises to lips and tongue	Occasional – about 1 in 20 people
Damage to teeth	Quite rare – about 1 in 4,500 people
The anaesthetist failing to insert a breathing tube when you are asleep	Uncommon – about 1 in 250 people
Chest Infection	Common – about 1 in 10 people – but most infections are not severe
Acid from your stomach going into your lungs	Quite rare – about 1 in 1,000 people
Being awake during the procedure	Uncommon – about 1 in 400 people
Severe allergic reaction	Rare – about 1 in 10,000 people
Death	Very rare – fewer than 1 in 100,000 (1 or 2 people a year in the UK)
Brain damage	Very rare – exact figures are not known

Accurate figures are not available for all these risks and side effects. Figures are estimates and may vary from hospital to hospital. If you have any questions, you should discuss these with your Anaesthetist.

Data adapted from Obstetric Anaesthetists' Association. For more information please visit: <http://www.LabourPains.com>

This leaflet can be made available in different formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at pals@lwh.nhs.uk

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