## Information Leaflet



## Regional Anaesthesia for Caesarean Section (CS)

Regional anaesthesia (an epidural or spinal anaesthetic) is a type of pain relief where you have an injection of local anaesthetic in your lower back to completely numb you from the chest down. Your legs will also become numb, and you will not be able to move them. It usually takes between 10 and 20 minutes for the anaesthetic to take full effect.

## **Setting up The Anaesthetic**

- You will first have a drip attached through a needle called an intravenous cannula placed in your hand or arm.
- An anaesthetist will inject local anaesthetic into your lower back.
- You will have a tube called a catheter inserted to empty your bladder.
- Your blood pressure and oxygen levels will be checked frequently.

Your birth partner may be allowed to be with you during this procedure, please check with your Anaesthetist.

## Advantages of a Regional Anaesthesia

This is the commonest form of Anaesthetic for women who need a Caesarean Section. It allows you to be awake for the birth of your baby and the pain relief after regional anaesthetic is usually more effective than after a general anaesthetic.

Possible Problems with a Regional Anaesthesia

- The anaesthetic doctor will check to make sure that you are numb before the operation is started. These checks are not 100% reliable and you may experience unpleasant feelings during the operation.
- It is common to feel pulling and pushing inside your tummy, and you should not be alarmed. Sometimes there may be mild pain which can be treated by giving you a painkiller in the drip or to breathe in through a mask or mouthpiece. Occasionally you may feel severe pain. If this happens, the anaesthetist will probably give you a general anaesthetic very quickly. This will put you to sleep.

• It is common for the anaesthetic to cause your blood pressure to drop. This may make you feel sick or faint. Your anaesthetist will give you medicine to treat this as soon as it happens. Sometimes the medicine is given before you have these symptoms.

Accurate figures are not available for all of these risks and side effects. Figures are estimates and may vary from hospital to hospital.

This information is a summary and is adapted from the Obstetric Anaesthetists' Association website.

More information can be found on this website at www.labourpains.com

If you have any concerns, please discuss them with your anaesthetist.

Risk and Side Effects of Regional Anaesthesia	
Possible Problem	How Common the Problem is
Itching	Common – about 1 in 3 to 10 people,
-	depending on the drug and dose
Significant drop in blood pressure	Spinal: Common – about 1 in 5
	Epidural: Occasional – about 1 in 50
Epidural given during labour not effective	Common – about 1 in 8 to 10
enough to be topped up so another anaesthetic	
is needed for the Caesarean section	
	Spinal: Occasional – about 1 in 20
	Epidural: Common – about 1 in 7
Anaesthetic not working well enough and more	
drugs are needed to help with pain during the	
operation	Spinal: Occasional – about 1 in 50
	Epidural: Occasional – about 1 in 20
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Regional anaesthetic not working well enough	
for Caesarean section and general anaesthetic	
is needed	
Multiple attempts at spinal/epidural	Occasional
Procedure may be performed by a different	
Anaesthetist to the one performing the	
preoperative assessment	
preoperative assessment	
Severe Headache	Epidural: Uncommon – about 1 in 100
	Spinal: Uncommon – about 1 in 500
Nerve Damage (For example, numb patch on a	Effects lasting less than six months:
leg or foot, weakness of a leg)	Quite Rare – about 1 in 1,000 to 2,000
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Please note that most cases of nerve damage	Effects lasting more than six months:
occur due to the birthing process, such as an obstetric palsy	Rare – about 1 in 24,000
Meningitis	Very rare – about 1 in 100,000
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Abscess (infection) in the spine at the site of the spinal or epidural	Very rare – about 1 in 50,000
Haematoma (Blood clot) in the spine at the site of the spinal or epidural	Very rare – about 1 in 168,000
Abscess or haematoma causing severe injury, including paralysis (paraplegia)	Very rare – about 1 in 100,000
A large amount of local anaesthetic being accidentally injected in a vein in the spine	Very rare – about 1 in 100,000
High block- A large amount of local anaesthetic being accidentally injected into spinal fluid, which may cause:	
difficulty in breathing	Quite rare – about 1 in 2,000 Very rare – about 1 in 100,000
<ul> <li>unconsciousness</li> </ul>	

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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