

Information for Patients

Epidural Anaesthetic



This leaflet gives you information about pain relief with an epidural after your operation.

It is much easier to get help for pain before it gets bad. It is best to ask for pain medicine as soon as you feel pain and have it often.

Is a spinal the same as an epidural?

No. They both involve an injection of local anaesthetic between the bones of the spine. The injections work in a slightly different way

How does the epidural work?

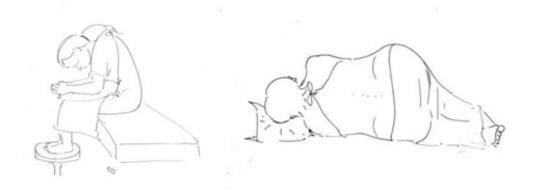
A very small plastic tube (catheter) is put into the space around the spinal cord in your back. This is the epidural space. Medicine is pumped through this tube all the time. It will numb the nerves that send pain signals to the brain.

When is an epidural anaesthetic used?

An epidural anaesthetic may be safer for you than a general anaesthetic. This depends on the type of operation and your current health problems.

How is an epidural done?

- 1. Epidurals are usually put in when you are awake. Sometimes we may put you into a light sleep.
- 2. To be able to give you fluids we will put a needle into your hand or arm.
- 3. For the epidural you will either sit on the side of the bed with your feet on a low stool or lie on your side, curled up with your knees tucked up towards your chest.
- 4. Before we give the injection, we will numb the skin.
- 5. A thin plastic catheter is put through a needle into your epidural space. The needle is then removed, leaving only the catheter in your back.
- 6. The tube is then held in place with a clear sticky plastic dressing



What will I feel?

Usually, an epidural should not be too uncomfortable. It should only take a few minutes to work.

- 1. The local anaesthetic stings for a short time.
- 2. You may feel discomfort in your back as the needle or catheter is put in.
- 3. You may have an electric shock-like feeling or pain when the needle or catheter is put in. If this happens, try to stay still and tell your anaesthetist straight away.
- 4. A feeling of warmth and numbness slowly spreads. You may still be able to feel touch, pressure and movement.

Care when an epidural catheter has been left in place for pain relief

The nurses will take your pulse and blood pressure often. They will ask you about your pain and how you are feeling. They will check the movement in your arms and legs. They will also look at your back where the epidural is and test how it is working by using a cold spray on your skin

The Acute Pain nurses will check that your epidural is working properly.

Can anyone have an epidural?

No. An epidural may not always be possible if the risk of complications is too high. The anaesthetist will ask you if:

- 1. you are taking blood thinning medicines, such as Warfarin and Clopidogrel.
- 2. you have problems with blood clotting
- 3. you have an allergy to local anaesthetics
- 4. you have bad arthritis or problems with your spine
- 5. you have an infection in your back

Side effects and complications

Common

- 1. Not able to pee. The epidural affects the nerves that supply the bladder. A tube (catheter) may be put in to drain the pee away. You should be able to pee as normal after the epidural wears off
- 2. Low blood pressure
- 3. Itching
- 4. Feeling or being sick
- 5. Pain, backache or bruising at injection site
- 6. Pain relief that does not work. Other pain relief will be available if the epidural does not work

Rare

- 1. Sometimes you can have a bad headache after an epidural. This is because the lining space surrounding the spinal cord has been accidently punctured. This is called a dural tap
- 2. permanent nerve damage
- 3. Infection (epidural abscess) or blood clot (epidural haematoma)

You can talk about these risks with the Anaesthetist.

They can give you more information.

Tell the nurse straight away if you have tingling that lasts, heaviness or weakness in your legs or pain in your back after the epidural has worn off. They will contact a doctor or the acute pain team to see you as soon as possible. If you have left hospital, contact your GP straight away.

When will the epidural be stopped?

Most patients have their epidural running for 24 to 72 hours. After this time, it will be stopped and taken out. You will carry on having other pain medicines.

Acute Pain Nurses

The nurses are available Monday to Friday, 8.30am to 3.00pm. They will come to see you after the operation if you have an epidural or are having problems controlling your pain.

Further information is available from; sath.pain.nurses@nhs.net

This leaflet has been created using information from the Royal College of Anaesthetists information booklets, which were written by patients, patient representatives and anaesthetists, working together.

Notes:

Further information is available from:

Feedback

We appreciate and encourage feedback which can be shared in a number of ways through the hospital website. Scan the QR code to give feedback. www.sath.nhs.uk/patients-visitors/patient-experience/feedback-hub/

Patient Advice and Liaison Service (PALS)

PALS will act on your behalf when handling patient and family concerns, they can also help you get support from other local or national agencies. PALS, is a confidential service.

Royal Shrewsbury Hospital, Tel: 0800 783 0057 or 01743 261691

Princess Royal Hospital, Tel: 01952 282888

Other Sources of Information

NHS 111

A fast and easy way to get the right help, whatever the time. NHS 111 is available 24 hours a day, 365 days of the year.

111 (free from a landline or mobile) www.nhs.uk

Self Help & Support Groups

A selection of websites providing access to good quality health information, local organisations and community groups is available from the library. www.library.sath.nhs.uk/find/patients/

Information in Other Languages or Formats

If you require this information in a different way such as easy read, a different language, larger print, audio or braille please tell a member of staff or contact the Patient Experience Team;

sath.patientexperience@nhs.net or 01743 261000 ext. 2503.

Your information

Information about you and your healthcare is held by the NHS. You can find out more about how we hold your information and how it is used on our website: www.sath.nhs.uk

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Information Produced by: Acute Pain Team Date of Publication: August 2024

Due for Review on: August 2027

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Version: 2

ID: MC/216



