

EPIDURAL ANESTHESIA



PLEASE SCAN FOR THE LOCATION



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DEPARTMENTS

Accident & Emergency Anesthesiology Cardiology Clinical Nutrition Dental Centre Dermatology ENT General Surgery Insurance Internal Medicine Laboratory Services Neurosurgery Ophthalmology Obstetrics & Gynaecology Orthopedics Patient Affairs





DIGITAL VERSION

WHAT IS EPIDURAL ANAESTHESIA?

• Epidural anaesthesia is generally given for procedures involving lower limb, pelvis and lower abdomen. It is administered either alone or in combination with general anaesthesia in patients of all ages. It is one of the gold standard techniques in pain management for both intra-operative and post-operative period. It is also a recommended technique for providing labor analgesia thereby bringing pain relief to the expectant mother in her peripartum period.

• Epidural is a small space surrounding the spinal cord. Nerves emerge from the spinal cord and pass through the epidural space to reach pelvis and lower limbs.

• Drug(local anesthetic) is injected into this potential space around the spinal cord ro achieve pain relief. The local anesthetic injected will block the nerve signals passing through the space thus providing relief from pain. Therefore, administering the local anesthetic will minimize the feeling of pain while in labor.

HOW IS THE EPIDURAL DONE ?

• The patient will be asked to either sit or lie down on her side bending forward to curve her back. The space for injection is identified at the lower back. Local anesthetic is given over a small area on the skin of the identified space to make the skin numb. An epidural needle is pushed through this numb area of the skin and a very thin catheter(epidural catheter) is pushed through the epidural needle to reach the epidural space. The needle is then removed leaving only the catheter on the patient's back. The anaesthetist will then inject the local anesthetic through this catheter into the epidural space.

WHAT WILL THE PATIENT FEEL ?

• The initial local anesthetic injection will sting briefly. The epidural procedure is fairly painless since it is performed after the anaesthetising the skin.

• The patient may feel a slight discomfort as the catheter is passed into the epidural space.

• The anaesthetic action starts within 10-15 minutes after injecting the drug.

• A gradual numbness and sensation of warmth develops in the lower limbs, and the patient's legs will feel heavy and become increasingly difficult to move.

• The numbness however is temporary, and it will wear off once the action of the anaesthetic stops.

WHAT ARE THE BENEFITS ?

- Effective pain relief (80-90%)
- Active participation of mother during labor
- Easy and rapid conversion to anaesthesia for Caesarian section, if needed.

CAN ALL PATIENTS GET EPIDURAL ANAESTHESIA ?

• The decision to administer epidural anaesthesia is taken by the anaesthetist after assessing the condition of the patient. The patient has to inform the anaesthetist, in case she has the following problems:

- Blood clotting abnormalities
- History of allergy to local anesthetics
- Anatomical deformities of spine
- Local infection at the back
- Side Effects and Complications
- Backache There is no association

between epidural analgesia and a new onset of backpain.

• Nausea and vomiting

• Urinary retention - This is a temporary effect seen in a minority of patients, and the bladder function returns to normal when the effect of the anesthetic wears off

- Hypotension
- Headache
- Itching
- Chances for instrumental delivery (vacuum, forceps)
- nadequate pain relief or patchy block



