Information on Pain Relief

This leaflet is to help you to understand what pain relief is available to you when you go into labour. It is important to remember that everyone’s experience of labour and the pain associated with it are very different. The different forms of pain relief that are available will affect everyone in varying degrees, because of this.

It may be helpful for you to attend antenatal classes, as they will have sessions that will cover labour and ways for you to help yourself relax when you are in labour. Your midwife will give you details of your nearest classes.

The midwife teaching at these classes will also discuss:

- Breathing methods,
- Relaxation techniques,
- Other ways of coping with childbirth.

It is not possible to tell you exactly what kind of pain relief you will need until you are in labour or are ready for delivery. Many factors, including your well-being and that of your baby, and how well your labour is progressing will affect your choice. It is best to keep an open mind. Remember, you may not always be able to have medication just when you feel you need it.

This leaflet discusses the different kinds of pain relief that are available for labour and delivery at The James Cook University Hospital and Friarage Hospital. Speak to your midwife if you want further advice about particular types of pain relief and whether they may be suitable for you.
What affects your feeling of pain?

As previously mentioned everyone’s feeling of pain in labour is different, some feeling it worse than others. Things that can affect your pain are:

- Being alone
- Fear of pain
- Being over tired
- Fear of the unknown
- Feeling anxious and tense

What can you do to relieve discomfort during labour?

- Use relaxation and breathing techniques taught in antenatal classes
- Ask your partner to massage your lower back
- Change positions often
- When the contractions become stronger, rest in between them and take longer and deeper breaths
- If you feel warm use cool moist cloths
- Stay relaxed in labour by listening to music, playing games, watching television
What other forms of pain relief are there?

You may not need any further pain relief. However, if you do, at The James Cook University Hospital and Friarage Hospital there are several that you might consider: aromatherapy, water birth, TENS, entonox, pethidine, meptid, and epidural.

**Aromatherapy:**
Aromatherapy in labour using essential oils helps to relieve the pain by encouraging you to relax. At The James Cook University Hospital there is a midwife aromatherapist who will advise you. A small charge is made for any oils prescribed. A small number of oils are available on the Marton Suite for the use of midwives trained in massage and to use for patients in the bath. The aromatherapist has prescribed these oils previously.

The Friarage Hospital currently do not provide this service, but lavender can be provided.

**Hydrotherapy:**
The use of water is a way of coping with the sensations you feel in labour. The use of a bath or birthing pool is to make the birth process easier and to reduce medical interventions and/or painkillers.
**Water Birth:**
Both James Cook University Hospital and Friarage Hospital maternity units have a birthing pool. It has been found to be helpful to some women and found to shorten labour. There are however strict criteria that you must meet before you are able to use the pool. These are:

- That you are following the low dependency pathway
- That you are more than 37 weeks pregnant
- That your baby is in the normal position for birth (head down)
- That you have gone into labour on your own
- That there is no history of complications in previous deliveries
- That you have a Body Mass Index (BMI) of less than 35

If you feel that you would like to use the birthing pool for labour your midwife can advise you.

**TENS (Transcutaneous electrical nerve stimulation):**
A small battery-powered stimulator sends a gentle electric current through four flat pads that are stuck to your back. It works by making your body produce natural painkillers called ‘endorphins’. Although in studies it has not been shown to be effective pain relief, some women still find it very useful, particularly if used in early labour. Most will need to use another form of pain relief at a later stage of their labour. It is not known to have any harmful effects on the baby. Ask your midwife for details.
**Entonox (‘gas and air’):**
This is a mixture of oxygen and nitrous oxide (laughing gas) that you inhale through a mouthpiece or face mask. It has been shown to be effective in reducing the pain you feel. You are in control of using this form of pain relief, and it works within 30-40 seconds of beginning to breathe it in. It provides extra oxygen for you and your baby, and is not known to have any bad effects on the baby. You can also use it for the whole of your labour. It may make you feel a little sick or dizzy.

**Pethidine (provided at The James Cook University Hospital):**
This drug is known as an ‘opiate’ and is given by injection into your leg or bottom. The drug works within 20 minutes of you being given it, and lasts for several hours. It works by reducing pain, and by relaxing you to help you cope with the pain of labour. **You should not eat or use the birthing pool if you have had pethidine.**

**Advantages:**
- It is a powerful painkiller
- It can be administered by your midwife

**Disadvantages:**
- It can make you feel sleepy or sick
- It can delay the establishment of breastfeeding
- It can make your baby sleepy
- It delays stomach emptying, which can be hazardous if you need to go to theatre for any reason and have a general anaesthetic.
Meptid:
Meptid (meptazinol) injection is used at both The James Cook University Hospital and the Friarage Hospital. It is an ordinary analgesic or painkiller. It can be taken during the first stage of labour when you need some extra help to cope with strong contractions.

Advantages:
- It is a powerful painkiller
- It can be administered by your midwife
- Doesn’t affect your baby’s breathing as much as pethidine
- It can be given at any time during first stage of labour
- You can use the birthing pool 30 mins after taking it
- It doesn’t delay the establishment of breast feeding

Disadvantages:
- May make you feel sick
- May make you feel dizzy
- It will take about 15 minutes before the drug starts working

Paracetamol (intravenous):
This is a pain killer offered only if intravenous access is established. It is an effective pain relief and has less side effects such as feeling sleepy and sick. It can enable you to remain mobile.
Epidural:
Epidurals are the most effective pain relief for labour, but if you have one you will need to be looked after on the high dependency delivery suite so that the midwife can monitor both you and your baby’s well being more closely.

The epidural is the most complicated form of pain relief, and relies on placing a very fine plastic tube (or ‘catheter’) into your back. It is performed by an anaesthetist, who will need to spend some time with you beforehand, explaining the procedure and the risks involved, and asking for your consent.

Before you can have an epidural you will need an intravenous fluid ‘drip’ in an arm vein. When the epidural is being put in, you will need to be either sitting or lying on your side. To place the epidural catheter, a patch of skin on the lower back is numbed with local anaesthetic and a small hollow needle is inserted through it. You will need to keep still for this part of the procedure. The catheter is then threaded through the hollow needle. The needle is taken out, but the catheter stays in place. This can all take several minutes.

Once the catheter is taped securely to your back, you can move about again. Pain relieving drugs are then injected through the catheter. The anaesthetist will give one or two doses of painkiller to get you comfortable. This can take several more minutes. After that, you will be given a button that controls an electronic epidural pump. You are then in control of how much painkiller you receive, but the pump has built-in safety limits to protect you.
Advantages of an epidural:

- It is the most effective of all forms of pain relief
- It has little effect on your baby
- It has no effect on breastfeeding
- It should not make you feel drowsy or sick
- If you need a caesarean, the epidural can often be used for the operation. The anaesthetist injects a stronger mix of drugs into the epidural catheter to ensure that you do not feel any pain.

Disadvantages of an epidural:

- It takes time to insert and get it working
- It may cause a temporary drop in your blood pressure. Your midwife will monitor this, so it can be treated if necessary
- It may make your legs feel heavy
- It can cause itching
- You will not be able to walk about whilst in labour, but you can usually move around the bed
- You may need a bladder catheter to help you pass urine
- It can make it more difficult to push
- The risk of needing an instrumental delivery (ventouse or forceps) is slightly increased
- The second stage of labour may be prolonged, usually by only a few minutes
- Sometimes the painkilling effect of the epidural is not complete. The anaesthetist may need to reposition the tube in this situation
• There is a small risk (1 in 100) of a headache after the epidural. If this does not get better on its own, the anaesthetist may need to do a second injection into your back to seal the leak.

• Severe complications of an epidural are extremely rare.

There is now good evidence that epidurals do not cause backache, although your back may feel a little sore for a few days afterwards.

Acknowledgement

We are grateful to the Obstetric Anaesthetists’ Association (OAA) for allowing us to base some of this leaflet on their leaflet of the same name, although responsibility for the content here rests with us. The original leaflet is available to download at the OAA’s website, www.oaa-anaes.ac.uk, including foreign language versions.
Comments, compliments, concerns or complaints

South Tees Hospitals NHS Foundation Trust is concerned about the quality of care you receive and strives to maintain high standards of health care.

However we do appreciate that there may be an occasion where you, or your family, feel dissatisfied with the standard of service you receive. Please do not hesitate to tell us about your concerns as this helps us to learn from your experience and to improve services for future patients.

Patient Advice and Liaison Service (PALS)

This service aims to advise and support patients, families and carers and help sort out problems quickly on your behalf.

This service is available at The James Cook University Hospital and the Friarage Hospital Northallerton, please ask a member of staff for further information.