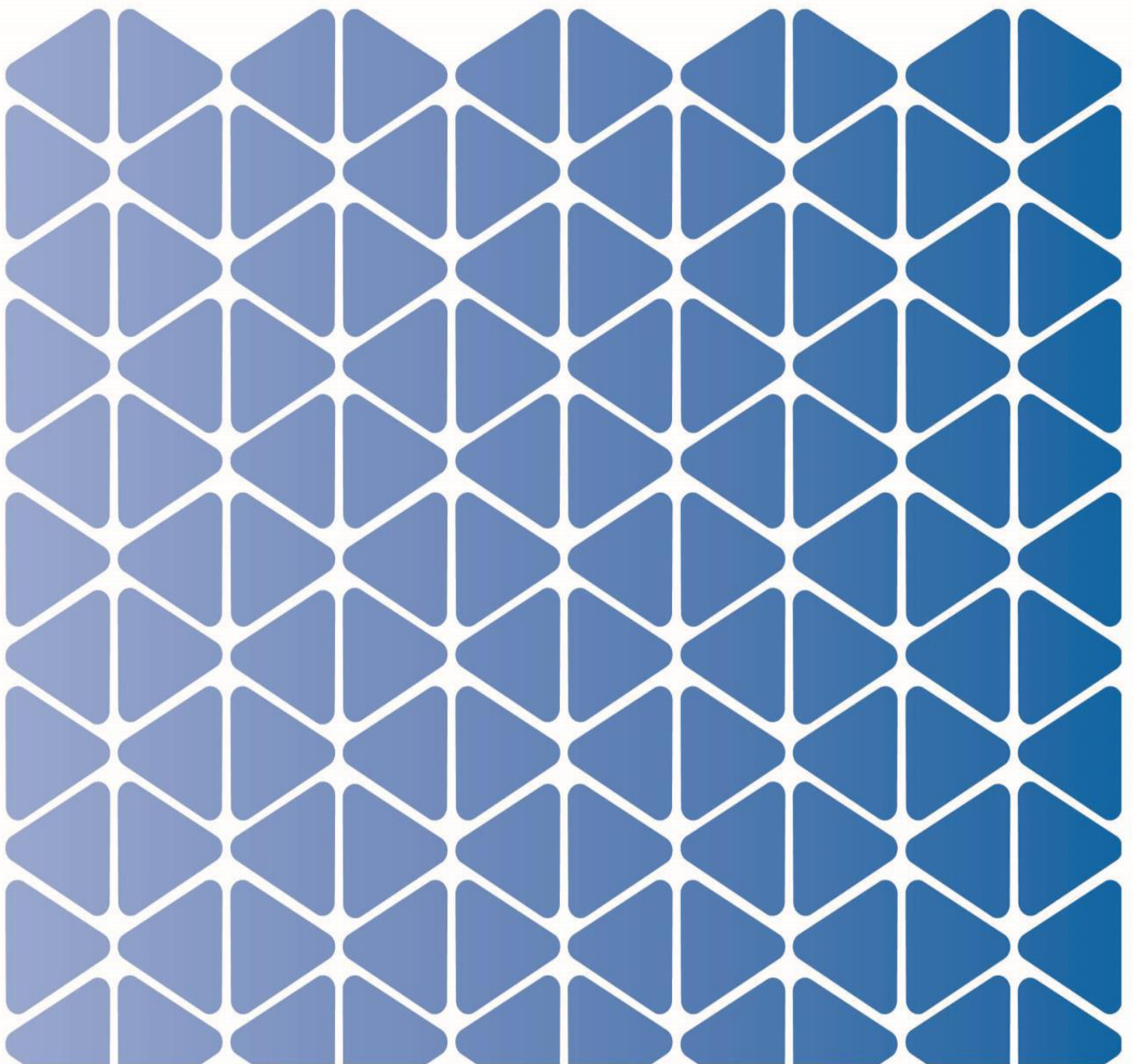


PATIENT INFORMATION

Pain relief options for labour and birth



Nobody knows exactly how labour will feel until it starts. Some find that labour is bearable with little or no pain relief. However, many are likely to want help at some point. Whichever way it is for you, take a look at the options for pain relief. It's useful to read up about your choices early on. You can also discuss the options with your community midwife.

We offer a wide selection of pain relief. This gives you the choice of what to have during your labour whether it's your first baby or your fourth!

Pain relief options fall into two categories: with medication and without medication. You don't have to decide before labour what pain relief you want however it is helpful to know all the options available to you.

Coping skills for labour

You're likely to feel more relaxed in labour and better placed to cope with the pain if you learn about labour – this can make you feel more in control and less frightened about what's going to happen. Talk to your midwife or doctor, ask them questions, and try to attend some antenatal classes.

We know that having a supportive birth partner and continuous one to one care can reduce the need for pain relief using drugs. Bringing a partner, friend or relative to support you during labour can help. Your midwife will also be with you throughout labour providing you the support you need.

It is known that upright positions and walking often help labour to progress. It may help to remain mobile and to try different positions. Use chairs, cushions, and the bed to move between positions that make you feel most comfortable and relaxed.

Sitting on a birthing or exercise ball and rocking gently may help. Lying down on your back can often make labour feel more painful. Relaxation methods and breathing techniques can be really helpful during contractions.

Pain management without medication

Complementary Therapies

Some women may use complementary therapies such as Acupuncture, Reflexology, and Hypnosis. However, if you wish to use one of these you will need to be trained in its use or bring a support therapist with you when in labour.

TENS Machine (Transcutaneous Electrical Nerve Stimulation)

Four small pads are placed either side of the middle of your lower back. Small electrical impulses are then passed from the box through the pad and disturb the pain messages being sent from the womb to your brain. A specific "labour" TENS

machine will have a Boost function enabling you to briefly increase the electrical stimulation during a contraction.



Advantages	Disadvantages
It has no known effects on your baby	Not everyone likes the tingling sensation from the electrodes
It doesn't restrict your movement	It cannot be used in the bath or birthing pool
You control the intensity	It cannot be used if you have a heart pacemaker fitted or if you have heart disease
It can be used at home or in the latent phase right up until your baby is born	

Water

Using a birthing pool during labour can promote relaxation and has been shown to reduce the need for other forms of pain relief. It can help with staying mobile and finding a position that you find comfortable. You can talk to your midwife in your antenatal appointments and when you arrive at the hospital about whether the pool is appropriate for you. Your midwife will ensure that the water temperature remains within a comfortable range, particularly if you choose to give birth in the water. You will be encouraged to drink when you are thirsty when using the pool to avoid dehydration and to leave the pool at regular intervals to empty your bladder. You can also use Entonox (gas and air) whilst in the pool.

At Worcester we have 3 birth pools on our Meadow birth centre and one pool room on delivery suite.



Advantages	Disadvantages
Provides a relaxing and peaceful environment	Use of water during labour and birth is not suitable for everyone. Discuss with your midwife whether a birthing pool would be suitable for you.

You can use gas and air whilst in the pool	You cannot be in the pool if you decide to have other forms of pain relief- for example pethidine, epidural or Remifentanyl.
The water helps you to move into different positions	
You don't have to exit the pool to give birth	

Medication

Oral Painkillers

In addition to the self-help techniques outlined above you may find that simple tablets can help you to cope with the early stages of labour. It is safe to take Paracetamol and up to 1 dose of Codeine, making sure you do not exceed the dose stated on the packaging. Ibuprofen is not recommended for use in pregnancy.

Entonox "Gas and Air"



Entonox, more commonly known as 'gas and air', is a mixture of 50% oxygen and 50% nitrous oxide gas. It can help reduce pain during labour and make it more bearable. You breathe this gas in via a mouthpiece as soon as you feel a contraction coming so you have the full effect when the contraction is at its peak. You then breathe normal air between contractions.

Advantages	Disadvantages
You can use Entonox at home births, on Meadow Birth Centre and on Delivery Suite.	Entonox will not take away your contraction pain completely
It is simple to use, quick to act and wear off and you can use it at any time during labour	It can make some people feel sick or light-headed or make your mouth dry, but if this happens you can stop using it.

You can control the amount you use	
There are no harmful side effects for you or your baby	
It can be used with other forms of pain relief	
You can stay mobile and walk around	

Pethidine

This is a morphine-like drug (opioid) traditionally used to treat moderate to severe pain. It has been used for many years to treat labour pain and for some people it can be effective in helping you to cope with pain in labour. It is given usually as an injection into a large muscle in your bottom or leg; it can make you feel sick and so an anti-sickness medication is often given to you at the same time.

Advantages	Disadvantages
The pain should start to ease about half an hour after the injection and can last a few hours.	It can make you feel sick, but you can be given anti-sickness medicine for this.
For some people, the opioid injection makes them feel more relaxed and less worried about the pain. You can stay mobile but often you are very sleepy so want to rest.	It can make you feel sleepy and can make your baby sleepy, so there is a chance that your baby may need some extra support when they are born. It may affect how well your baby can initially breast feed.
You can have pethidine on the antenatal ward, meadow and delivery suite.	High doses of opioids can slow down your breathing, this is very rare with the doses given in labour.
	You cannot use the pool for a few hours (usually 2-4 hours) after having pethidine.

Epidurals

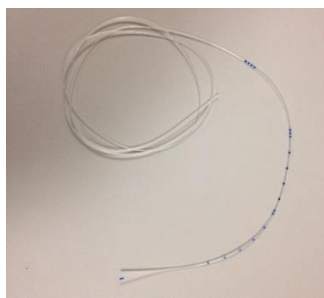
An epidural is a small plastic tube or catheter which is placed in the lower part of your back through a needle. This is done by a specially trained doctor called an Anaesthetist.

A combination of local anaesthetic drug (Bupivacaine) and a morphine-like drug (Fentanyl) are then injected through the tube to produce numbness and pain relief to your tummy and back

In Worcester we use a **Patient Controlled Epidural Analgesia (PCEA) system**. This means that you have a button to press which enables a special pump to give you a dose of painkiller. It means that you can give yourself as much painkiller as you need but also the opportunity to use it less often to reduce side effects such as heavy legs and reduced ability to move around.



Epidural Needle



Plastic Epidural tube



Example of an Epidural pump

Advantages	Disadvantages
Although not 100% reliable, epidurals are the most effective form of pain relief we have to offer you.	Failure to give you adequate pain relief in labour. Your epidural may need to be removed and replaced before it works adequately.
If required, an epidural can be used to make you completely numb if you need either a caesarean or forceps assisted delivery.	The chance of needing an assisted delivery (use of Ventouse cap or forceps) increases if the epidural has made you very numb
Patients are generally more satisfied with their pain relief in labour from an epidural compared to other methods	An epidural can prolong the second stage of your labour after you are fully dilated and pushing the baby out. You

such as pethidine or gas and air (Entonox).	are also more likely to need medication through a drip to make your contractions stronger (Oxytocin).
	You will find it difficult to pass water and may need a tube to be passed into your bladder to drain the urine

There is more comprehensive and detailed information about Epidurals in the leaflet: 'Epidural for labour at Worcester Royal Hospital'

Remifentanil

Remifentanil is available on delivery suite and is a strong painkiller similar to Pethidine (opioid).

How is Remifentanil given during labour?

The pain-relieving effect of Remifentanil comes on very quickly and wears off very quickly. Therefore, it must be given in repeated short bursts targeting the same pattern of your labour contractions. It is given through an intravenous cannula (a drip in your vein) which will be attached to a Patient Controlled Analgesia (PCA) device. This means you will be given a handheld button to press on when you feel the pain. When pressed, a measured dose of Remifentanil will go into your bloodstream, which will act instantly. After a few attempts, you will quickly learn when to press the button to get the peak effect of the drug to coincide with the peak of your contraction pain.

What additional monitoring do I need while using Remifentanil PCA?

Because Remifentanil is a very strong opioid, it can affect the breathing and level of oxygen. Therefore, additional monitoring and precautions are required. The midwife will have to stay with you at all times. Your oxygen levels will be continuously monitored with a probe on your finger. You may need supplementary oxygen whilst using the PCA button. Your midwife will also monitor your blood pressure and heart rate. You will be allowed sips of water but will not be allowed to eat.

What are the side effects of Remifentanil?

Possible side effects include drowsiness, dizziness, nausea, itching and a drop in oxygen level as it might affect your breathing. There has been a small number of reported cases who have stopped breathing, but they all responded quickly to treatment; that is why the midwife will monitor you continuously. It may also slow your heart rate or drop your blood pressure. You can stay mobile while using a remifentanil PCA however you may be restricted as you will be attached to a drip.

Some studies have shown that labouring mothers are quite happy with Remifentanil pain relief for the first part of their labour, but as the contractions intensify, they become less satisfied. You can use Entonox or your TENS machine along with the Remifentanil in this case. Remifentanil has been shown to be safe for babies.

Who can use a Remifentanil PCA?

Apart from a few contraindications, such as allergies, other medication you may be taking that could interact with remifentanil, or health issues such as severe heart or lung disease most patients can have a Remifentanil PCA as an alternative to an epidural. The epidural is still considered the best pain relief we can offer in labour, so we tend to recommend Remifentanil to those who cannot have an epidural or when the epidural is not effective; however, the choice is yours as long as there are no **contraindications**.

Advantages	Disadvantages
It acts quickly and wears off very fast.	It can give you side effects such as drowsiness, dizziness, nausea, itching and a drop in oxygen level as it might affect your breathing.
It can be used as an alternative to an epidural if you can't have one or don't want one.	If it's used for long time, remifentanil may build up in the body which increases the risk of side effects.
Its Patient controlled, so you give yourself a dose when you feel a contraction.	Your baby might be slower to breathe at first; remifentanil has a similar impact on the baby to pethidine.

In research women report it is more effective for pain relief than other opioids like the pethidine injection.	Your movement can be restricted by being attached to a drip and the extra monitoring you will need.
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This link will help you compare the risks and benefits of the different types of labour pain relief:

[Pain relief and anaesthesia choices during labour - Labour Pains](#)

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments, and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice, or support about any aspect of hospital services & experiences.

Our PALS team will consult with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaint's procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.