

Pain Management And Help Through Labor Progression

Pain Management After Cesarean Section (CS)

Most commonly, cesarean section (CS) is performed under regional anesthesia; either a spinal or epidural anesthetic may be used. A long acting (up to 24 hours) pain medication called duramorph can be added to the spinal or epidural to help provide pain relief after the CS. If the duramorph does not take care of your pain adequately, other pain medication (either IV, IM, or by mouth) will be offered to you. In the event that your CS is done under a general anesthetic, you will also be offered either IV, IM or oral pain medications.

How Can You Help

As a patient, we encourage you to talk with your doctor and caregivers about:

- Personal expectations about labor pain
- Your plans for pain management
- Options for pain relief
- Any concerns you have regarding the labor and delivery process

Remember to remain flexible. As your labor progresses and your pain changes, so may your plans about what types of pain management options will work best for you. A successful childbirth is one you feel good about.

The decision about which pain management options are used is a personal one, to be decided by the laboring woman herself, with support from her partner and caregivers. Our goals are the same — a healthy mother, a healthy baby and a positive childbirth experience.

Assessing Pain

To understand more about your pain and to help you during the labor process, your care providers may ask:

- What is your goal for managing your pain?
- What is your pain rating?
- Where does it hurt?
- What exactly does the pain feel like?
- How well is this intervention working?

What Can Affect Your Pain?

Pain and discomfort are very individual experiences, as is the birthing process. Many aspects can affect how you experience pain during and after your labor and delivery.

Some of them are:

- Cultural and spiritual beliefs
- Personal expectations
- Fear and anxiety
- Physical exhaustion
- Availability of emotional support systems



Providing the Best Care
for You and Your Baby



Pain Management

For Labor, Delivery & Postpartum



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Pain Management

The labor process is usually accompanied by pain and discomfort. People often think this pain is something they have to endure. Although no method will offer complete pain control, there are many options available that can help relieve your labor pain and post-partum discomfort.

The health care providers at St. Mary Mercy Livonia's Birthing Center are committed to helping you meet your goals for pain management. You will receive information about pain and pain relief, before, during, and after your labor. Managing your pain is important for your recovery as well as your well-being and that of your baby.

Patient Rights

As a patient, you can expect that:

- You will be asked regularly about your pain.
- Your caregiver will respond quickly to reports of pain.
- Your pain management plan will be effective.

Reporting Pain or Discomfort

Your health care providers will ask you to rate your pain using a pain scale (0-No Pain / 10-Worst Pain Possible). You will be asked to rate your pain before and after receiving pain medication. Your ratings tell us how well your pain relief plan is working.

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Ways To Manage Your Pain During Labor And Delivery

Unmedicated Methods of Pain Relief

An unmedicated labor does not mean a labor without pain relief. There are many ways to help you cope, which do not involve medications. Recognize that certain medical conditions may exist which require close monitoring and some of the methods may not be options for you. We encourage you to find out more about these options and always talk with your doctor and health care providers to see what is best for you.

Some unmedicated options for pain relief:

- Having a supportive labor partner
- Use of breathing techniques
- Use of cool compresses and ice packs
- Massage therapy
- Water or hydrotherapy (showers)
- Aromatherapy (use of scented oils)
- Visualizations or affirmations
- Hypnosis
- Use of position changes (walking, rocking chair, birthing ball)
- Making your environment comfortable (bringing your own pillows, music and dimming the lights)



Medicated Methods of Pain Relief

There are different types of pain medications that your doctor may offer. You might choose only one type to manage your pain, or you may choose a combination.

Nitrous Oxide

Nitrous oxide is a blend of 50 percent oxygen and 50 percent nitrous oxide. It is a patient controlled analgesic that is available to mothers during labor, delivery and postpartum. The patient holds the mask over their nose and mouth, creating a sufficient seal to activate the flow of nitrous oxide. Inhaling deeply for approximately 30 seconds, while slowly inhaling and exhaling into the mask throughout the contraction or procedure, will help relieve pain and anxiety.

Narcotics

Narcotics are pain relievers that help reduce pain, anxiety and tension in early labor. They can be given directly into the vein (IV/intravenously), into the muscle (IM/intramuscularly), or as a combination. Morphine sulfate and Nubain are the most commonly used medications in labor.

Epidural Pain Medication

Epidural anesthesia is one of the most commonly used pain relief techniques during labor. The medications used are given through a tiny tube (catheter) that is placed in your back by an anesthesiologist. A labor epidural is designed to minimize labor pain while leaving the feeling of pressure from the contraction. An epidural works best for the active phase of labor and is a very effective method of relieving your pain.

How is the epidural block performed?

An epidural block is given in the lower back. You will either be sitting up or lying on your side. The skin over the spine will be cleansed with an antiseptic solution. The anesthesiologist will use local anesthesia to numb the area of your lower back. A special needle is placed in the epidural space just outside the spinal sac. A tiny flexible tube called an epidural catheter is inserted through this needle. Occasionally the catheter will touch a nerve causing a brief tingling sensation.

Once the catheter is positioned properly, the needle is removed and the catheter is taped in place. You are not allowed to eat or drink after that. Pain relief will begin to occur 5 -15 minutes after the medication has been injected. Because your obstetrician wants to preserve your ability to push once cervical dilation is complete, you may feel rectal and vaginal pressure as the baby is descending.

What are the risks of labor epidural analgesia?

Although not common, complications and side effects can occur: backache and headache are rare occurrences and could be related to the epidural

needle. Headaches may need further treatment. Most headaches and backaches are from the demands of labor and delivery and not from the choice of pain control. There is potential for other very rare complications that can be discussed with your anesthesia team when you meet with them.

Certain people's anatomy, for example scoliosis or severe obesity, can make the epidural difficult or impossible to place. In the rare occasion of an ongoing emergency the anesthesia team may not be immediately available to insert the epidural catheter. In case of c-section, epidural, spinal or general anesthesia could be used based on your general situation that will be discussed with your obstetrician and anesthesia team.

Will the epidural block affect my baby?

Considerable research has shown that epidural analgesia and anesthesia are safe for both mother and baby. Should you choose to proceed with epidural analgesia for your labor and delivery, our team of qualified, board certified and experienced anesthesia providers will be happy to provide this service and answer any questions you may have.

Pain Pills

You may be taking medication by mouth to control your pain. Pain pills take about 30 minutes to start working. They will work best if taken prior to activity that may increase pain. If possible, take them with food.

Intravenous: You may be given pain medication directly into your IV. This type of pain relief works within minutes and can control even severe pain.

Topical: You may be given pain medication in the form of a skin patch. Each patch releases a constant amount of medication over an extended period of time. This medication is absorbed through the skin. Additional pain medications may be needed during the initial 24 hours of patch application.