

Patient Information Leaflet

After your Epidural/Spinal Anaesthetic



Your Anaesthetist will have discussed the common risks with you before siting your epidural/ spinal anaesthetic. Whilst epidural/ spinal anaesthesia can provide excellent pain relief, very rarely serious complications can arise even after you have been discharged from hospital.

Headaches¹

Headaches can be very common after childbirth, but it is possible to get a more severe, persistent headache after having an epidural/ spinal anaesthetic. This can happen between 1 in 100- 500 patients after having had an epidural/ spinal anaesthetic. It most often begins between day one and one week after the epidural/ spinal anaesthetic injection. The headache is commonly felt at the front or back of the head. It might lead to neck pain, being sick and having a sensitivity to bright lights.

Many women find that lying flat relieves the pain. Additionally, taking your regular pain relief, such as Paracetamol or Ibuprofen and drinking plenty of fluid, especially caffeinated drinks such as tea, coffee or cola, can be useful. If, however the pain persists, these headaches are often treated with an epidural blood patch.

If your headache does not improve with the above measures please contact us immediately on the numbers below.

Nerve Damage²

Nerve damage is a very rare complication after having an epidural/ spinal anaesthetic and most commonly temporary. Sometimes a single nerve or a group of nerves are injured, leading to patches of your skin feeling numb, strange or even painful.

Leg weakness can also occur and in the rarest and severest cases this weakness can progress to permanent paralysis of one or both legs and/or loss of control of the bowel or bladder.

If you experience any of these symptoms please contact us immediately on the numbers below.

Infection²

Extremely rarely, an infection can develop close to the spinal cord and its' major nerves. Very rarely this can lead to an abscess (a collection of pus) or meningitis. These infections are very serious and require intravenous antibiotics and/or surgery to prevent permanent nerve damage.

If you experience any new, ongoing severe backpain, and/or feel generally unwell please contact us immediately on the numbers below.

Symptoms to be concerned about after you have had an epidural or spinal anaesthetic

- Redness, pus, tenderness or pain at the epidural/spinal site
- High temperature, neck stiffness
- Feeling generally unwell, even though all seems well with the surgical wound
- New severe back pain
- New weakness, increasing numbness or new loss of sensation in your legs
- New loss of bladder or bowel control
- Continuous headache, worse on standing, not relieved by simple pain relief

These rare, but very serious side effects may require urgent treatment to prevent permanent injury. If you experience *any* of these symptoms in the next few days or weeks call the number below and ask to speak to the **on Call Obstetric Anaesthetist**.

Worcester Royal Hospital - 01905 763333

ask for

On-Call Obstetric Anaesthetist, Pager 701

Alternatively, if you have any other concerns in the 2 weeks after you have been discharged from the Maternity Unit please contact the triage desk and if appropriate they will contact the on cal Obstetric Anaesthetist. If it has been more than 2 weeks, please contact your GP and make them aware you had an epidural/spinal anaesthetic.

More Information& References:

1. RCOA: Risks associated with your anaesthetic Section 10: Headache after a spinal or epidural injection

<https://www.rcoa.ac.uk/sites/default/files/documents/2019-11/10HeadachesSpinalEpiduralweb.pdf>

2. RCOA: RCOA: Risks associated with your anaesthetic Section 12: Nerve damage associated with a spinal or epidural injection

<https://rcoa.ac.uk/sites/default/files/documents/2019-11/12-NerveDamageSpinalEpiduralweb.pdf>