

Epidural Analgesia/Anesthesia **Answers to Common Questions**

Your doctor has prescribed epidural analgesia for you. This handout tells you about this type of pain control. Your nurse will go over this handout with you. Please ask questions.

Epidural analgesia/Anesthesia

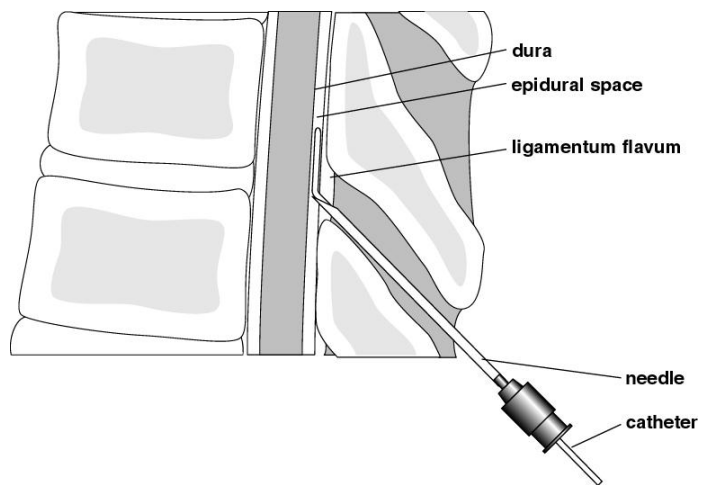
Analgesia is a word that means pain relief. An epidural is one of the ways that this is done. It is often used to treat pain from surgery, childbirth, trauma, and certain illnesses. It provides local pain relief with small doses of pain medicine given into the space that is just outside the spinal cord. It can provide good pain control with fewer of the side effects that are often seen with intravenous (IV) pain medicines.

Anesthesia is a more intense blockage of muscle movement in the surgical area.

How does it work?

Your doctor will insert a small tube called a catheter into your back. The pain medicine goes through the tube into the epidural space. Once in this space, it works to decrease your pain.

This will not make you pain free, but it should allow you to rest and move around with less pain. If you are not able to move around, cough, or deep breathe because of pain, please tell your doctor or nurse. The amount of medicine you are getting may be changed to help you feel better.



Placement of the catheter causes little or no pain. It is held in place with a securing device and tape. You can do the things you always do, except shower.

With the choice of Epidural Anesthesia, you will be given sedation or general anesthesia that allows you to be comfortable during the surgical procedure. We find that it lessens your post-operative pain. You will feel more alert after surgery and have less nausea. You will not see the surgery taking place. You will likely have little recall about the procedure.

Side effects

- Itching is a fairly common side effect of one of the kinds of pain medicine given this way. Ask the nurse for medicine to ease the itching when needed.
- Nausea can occur. It also can be treated.
- Some people have trouble emptying their bladder when they have an epidural. You may need a urine catheter (Foley) until the epidural comes out.
- Pain medicine can cause constipation. This is rare with an epidural. Your nurse may be able to give you something to prevent this.
- Feeling sleepy and breathing slowly are the most serious, but least common side effects. These two side effects happen slowly. Nurses will be checking your sleep level and breathing often. If these side effects are found, we will lower the dose of pain medicine you are getting.
- Numbness and tingling may occur in your feet, legs, or hands. Sometimes, it is due to the epidural. Let your nurse know if you have any numbness or tingling. If you have trouble feeling or moving your legs (or if you feel dizzy or lightheaded), stay in bed and call your nurse. Be sure to ask someone to help you up the first few times you walk.

How long will I have this?

Most often, the tube is left in place for a few days. It will be taken out when your doctors and nurses feel your pain can be eased with pills and when you are ready to take pills. It will not hurt when it is taken out.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©4/2015. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#4322.