



Ways to Manage Pain During Labor and Delivery

Having a baby is sure to be one of the most exciting experiences of your life! As your due date approaches, you will have a lot on your mind. Some of your thoughts are likely to be *“What will it feel like to give birth to my baby?”* *“How will I handle the pain?”*

Labor and Delivery

Giving birth is a process that includes both labor and delivery. Labor is the body’s way of preparing to give birth. Delivery is the birth of the baby, and also includes delivery of the placenta. Labor and delivery can last from a few hours to more than 24 hours.

Almost all laboring women will feel some pain from the contractions of the uterus during labor. Most women will feel comfortable between contractions. Each labor is unique. The type, amount, and intensity of pain women report varies a great deal.

Preparing for childbirth

Childbirth preparation classes teach you and your partner many skills that can help you manage labor and delivery. These classes also explore the range of physical and emotional changes that are usually a part of labor and birth. Many Kaiser Permanente facilities offer these classes. Class content typically includes:

- **Tips for the laboring woman’s companion(s)** – How the partner, spouse or other close support person can best tell what the woman needs, how to “read” her body language, and the best ways to respond to her during and in between contractions.
- **The benefits of posture changes** – How labor is helped along by the mother trying different positions. Changing positions encourages labor to progress and increases the laboring woman’s comfort.
- **Ways to release tension** – The kinds of touch and massage that are effective in releasing muscular stress that can otherwise make contractions feel more intense than necessary.
- **The why’s and how’s of slow, deep breathing** – This tool is the key to releasing tension, saving energy, and staying centered during contractions.
- **How to enhance the labor environment** – Both at home and in the hospital, many mothers are helped a great deal by simple changes to the space in which they are laboring. Women can benefit from dimmed lighting, pleasant and familiar smells, a warm bath or shower, and listening to soothing music or nature sounds.

Women who have taken childbirth preparation classes are more prepared to manage their labor. However, taking childbirth classes does not mean that you have to deliver your baby without pain medication. Keep in mind that even if you use pain medication and take childbirth classes, it is unlikely that you will be totally pain-free during your whole labor. Rather, the goal is to learn the many ways you can manage what you may feel during your labor. It is also important to remember that the first part of labor usually happens while you are still at home. During this phase of labor, deep breathing, relaxation, and comfort strategies can help you to manage pain. Once admitted to the hospital, medications are an option for most women. Many women can cope better knowing that these choices are available.

Your Labor and Delivery team

Your doctor or nurse midwife in the Labor and Delivery Unit will help you decide whether or not to use pain medication during your labor and delivery.

In addition to the doctor or nurse midwife, a nurse anesthetist may be part of the team. An anesthetist is a registered nurse who has completed a 2-3 year residency and usually has a Master's degree in anesthesia. An anesthetist is always scheduled and assigned to Labor and Delivery. You may also meet with an anesthesiologist. An anesthesiologist is a doctor who has completed special training in anesthesia. Either specialist can give anesthesia to patients.

Choices for pain relief during labor and delivery

Decisions about pain medications during labor will be made with your preferences and comfort as well as your baby's safety in mind.

For most normal (vaginal) deliveries, there are a number of choices for pain relief. All medications have pros and cons that you should think about so you can make informed decisions about whether to use them.

There are 2 main types of pain medications that are used in labor and delivery. They are known as "analgesics" and "anesthetics."

- **Analgesics** are medications that reduce pain without total loss of feeling or use of the muscles. Analgesics can be given through a vein (in an IV) or by an injection directly into a muscle.
- **Anesthetics** block most pain. They also block most feeling and movement. The most common type of anesthetics used in labor and delivery is epidural anesthesia. Anesthetics can be administered as a local anesthetic (numbing a small area of the body), or as a regional anesthetic (numbing a large area of the body). Only rarely, general anesthetic is used so that the person is completely unconscious and pain-free.

Pros and cons of analgesics and anesthetics

• Intravenous (IV) analgesics:

These medications are narcotics that help reduce pain and increase relaxation.

Pros:

- The feeling of pain is lessened (not eliminated)
- The woman is conscious
- The woman may easily proceed to epidural anesthesia if pain relief from analgesia is not enough
- It can help with pain relief after childbirth

Cons:

- May cause the mother to become drowsy or have difficulty concentrating
- May reduce the mother's memory of labor, and/or her baby's birth
- May cause nausea or vomiting
- May not provide enough pain relief
- May slow the baby's breathing if given close to delivery

- **Regional anesthesia or “blocks”**

EPIDURAL BLOCK:

An epidural injection may include an analgesic or an anesthetic type of medication. An epidural can also be used during the birth. With an epidural, the medication is injected through a very thin tube into the “epidural” space, which is a space near the spinal cord. An epidural block takes away the most intense sensations of contractions, but women will still feel pressure. Usually, a thin plastic tube is left in place so that the medication can be continually infused to keep the mother as comfortable as possible until the baby’s birth.

Pros:

- The woman is mostly pain-free from the waist down
- It can be used for hours
- The woman is awake and alert

Cons:

- It requires preparation that takes time (15-30 minutes) before pain relief is felt
- The woman will not be able to walk
- The woman will need a catheter to remove urine from her bladder
- It will probably make the second part of labor (from the time the cervix is completely dilated until the baby is delivered) take longer
- It may increase need for instrument (forceps or vacuum) or surgical (cesarean) delivery
- There is a small risk of headache that may need treatment
- It can cause a drop in blood pressure that may require treatment

SPINAL BLOCK:

A spinal block is similar to an epidural injection. It is usually only given for anesthesia before a C-section. It is also given as an injection through a thin tube in the lower back. Instead of being injected near the spinal cord, it is put directly into the area around the spinal cord and fluid.

Pros:

- Immediate pain relief from the waist down
- The woman remains awake and alert

Cons:

- It can be used only once during labor
- It works for a limited period of time (1-2 hours)
- The woman has no feeling and is not able to walk
- The woman needs a catheter to remove urine from her bladder
- There is a small risk of headache that may need treatment
- It can cause a drop in blood pressure that may require treatment

It is important to know ahead of time that when epidural or spinal anesthetics are used, several different machines will be used to monitor you and your baby. The fetal heart rate, uterine contractions, and the mother's blood pressure are all watched closely. The mother's blood oxygen level and heart rate are also monitored. These are normal safeguards when these anesthetics are used; it is not a sign that there is a problem with you or your baby.

What are my other choices for pain relief?

- **Local anesthetics:** A local anesthetic may be injected into the area of the vaginal opening. This provides some pain relief during delivery. It is most often used if forceps or vacuum delivery or "episiotomy" is needed. An episiotomy is an incision sometimes made by the doctor or midwife in the area of the vaginal opening to enlarge it just before delivery. Local anesthetics do not affect the sensations of a uterine contraction.
- **General anesthesia:** General anesthesia is used for a very small number of surgical deliveries. General anesthesia makes you completely unconscious and pain-free. One drawback of general anesthesia is that it may cause the baby to be quite drowsy after delivery. This can sometimes make it hard for the baby to breathe well when it is born.

How will I know if I need medication during labor and delivery?

- Talk with your doctor, nurse midwife, or other medical professional about how you can get ready for the experience of delivering your baby.
- Attend childbirth preparation classes to learn relaxation and breathing techniques. These can help you manage the sensations of early labor while you are still at home as well as once you are admitted to the hospital in more advanced labor.
- Understand your options for pain medications.
- Share your ideas and preferences with your doctor or other medical professional.

Consider using the *Kaiser Permanente Birth Plan* to outline your preferences for your labor and birth. The *Birth Plan* helps a woman to shape the environment and the care she receives during her childbirth experience. One section of the *Birth Plan* is devoted to helping the laboring woman relay how she would like to be helped through her contractions – whether with or without pain medication. If you have a written *Birth Plan*, it can be especially useful in helping hospital staff know how you would like to manage your labor. Preparing in this way can help make the birth of your baby as rewarding and safe as possible. Ask your doctor for the *Birth Plan* form.

* * * * *

Other resources

- Northern California members can view an interactive online program entitled "Pain Relief for Childbirth" on their doctor's Home Page. Click on the "Prepare for Your Procedure or Childbirth" link on the left side of your doctor's Home Page at kp.org/mydoctor, then register to view "Pain Relief for Childbirth."
- Connect to our Web site at kp.org to access health and drug encyclopedias, interactive programs, health classes, and much more.

- Contact your Kaiser Permanente Health Education Center or Department for health information, programs, and other resources.
- American College of Obstetricians and Gynecologists (ACOG): **acog.org**
- American College of Nurse-Midwives: **midwife.org**
- Your health and your baby's health during pregnancy can be seriously affected by violence or abuse. If you are hit, hurt or threatened by a partner or spouse, there is help. Call the National Domestic Violence Hotline at 1-800-799-7233 or connect to **ndvh.org**.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor.