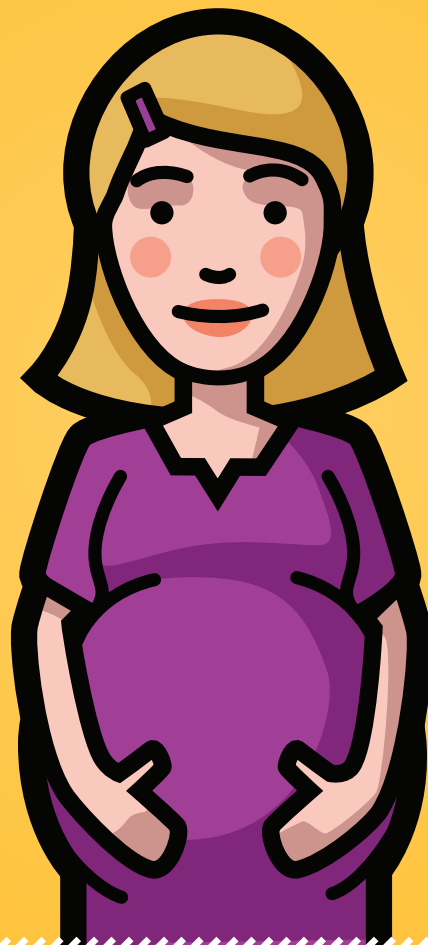


Coping with
LABOR PAIN
menu of pain relief options

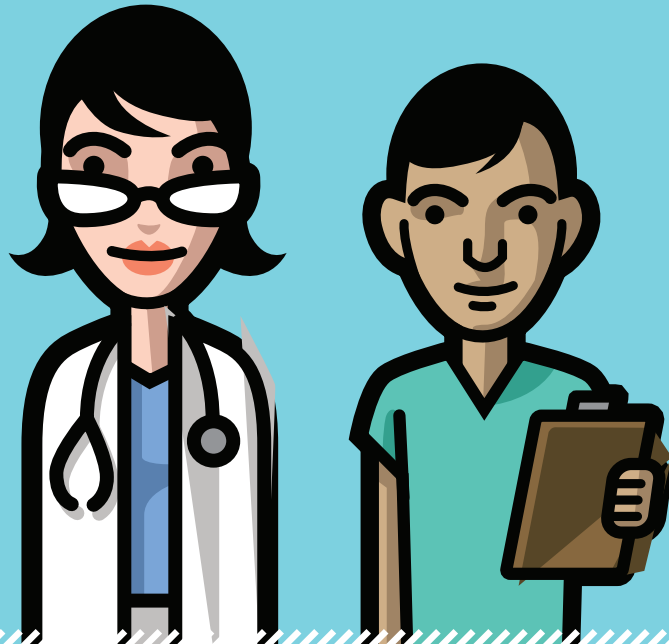


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LABOR PAIN MANAGEMENT METHODS

type	definition	method	effect on baby	how long does it take/last?	will the procedure
non-medicated	Methods of managing labor pain that do not include medications	<ul style="list-style-type: none"> • focused breathing • change positions • massage • bath/shower • meditation/hypnosis • music • hot/cold therapy 	None	May be practiced throughout labor and delivery	No
medicated					
nitrous oxide	Nitrous oxide is a gas that can be used to help cope with pain during labor. It is the same gas that is used at the dentist, commonly called "laughing gas."	It is inhaled during contractions through a mask you hold.	No evidence of adverse effects on baby	Begins to work in 30-60 seconds, lasts for short periods of time	No
opioids (fentanyl)	Opioids are a type of medication that reduces pain. They offer pain relief and help you to rest.	Opioids are given either by an injection (usually in the hip) or put into your IV (needle in a vein). Maximum of three doses, typically.	Opioids cross the placenta and can cause your baby to be less alert at birth and affect baby's interest in breastfeeding shortly after birth.	Shots are ordered by your doctor or midwife and given by your nurse. The shot itself only takes 1-2 minutes. Effects begin in 10-15 minutes and usually last 1-1.5 hours, less if given in an IV.	You may sting when shot or w the IV.
regional					
intrathecal narcotic (ITN)	An ITN is an injection (shot) of medication into your back to help control pain during labor.	You sit up with your legs over the side of the bed and arch your back toward the anesthesiologist (doctor who specializes in managing pain). You get a shot to numb your skin. A needle will be put into your back. A small amount of narcotic (a pain relief drug) is injected into your spinal fluid.	ITNs are considered safe for babies. There may be a brief, temporary change in your baby's heart rate within 10-15 minutes of the shot.	The procedure takes about 15 minutes. The medication becomes effective in about 5 minutes and lasts from 1-7 hours. Most women get pain relief for 2-4 hours. You will be able to receive a second shot, but it may not work as well the second time.	You may sting when shot.
epidural	An epidural is a procedure in which a small tube is placed in the lower back. You get pain medicine through the tube to the nerves that sense labor pain. This procedure is done by an anesthesiologist (a doctor who specializes in managing pain).	You will sit up with your legs over the side of the bed and arch your back out toward the doctor. You will get a shot to numb your skin. A needle will be put between the bones in your spine in your lower back, through which a small tube is passed. The needle is removed and the tube is taped to your back. Medication is given through the tube which stays in place throughout labor and delivery.	Epidurals are considered safe for babies. May affect baby's interest in breastfeeding shortly after birth.	The procedure takes about 10-15 minutes. You will notice a decrease in pain within 10-20 minutes. Pain relief lasts throughout labor and delivery.	As the ep placed, y brief sting. After this feel only your bac procedure

Does the procedure hurt?	effect on pain	side effects <i>rare side effects in italics</i>	risks	benefits
	Varies	None	May not provide pain relief. Some methods may require advance preparation.	These techniques can help labor progress, and you avoid the side effects of medication.
	<ul style="list-style-type: none"> • pain relief varies • can help you relax • can help you not focus on pain 	<ul style="list-style-type: none"> • nausea/vomiting • dizziness • drowsiness • machine may be noisy • some people may be sensitive to plastic smell 	The gas can lessen but not eliminate the pain of labor.	The effect occurs only while the gas is being inhaled and disappears rapidly when the mask is removed.
You may feel a slight numbness when you get the medication with the start of labor.	These medications dull your pain and help you rest between contractions. They take the edge off of pain.	<ul style="list-style-type: none"> • nausea/vomiting • dizziness • itchiness • disorientation (feeling sleepy or sedated) 	May cause side effects in mother and baby. May not be a good option for those with drug addiction challenges.	Opioids are a good option for early labor and before receiving an epidural, or for those not wanting regional pain management.
You may feel a slight numbness when you get the medication.	You will usually get good pain relief, but this does not mean you will be pain-free. Women differ in how they respond to medications. Sometimes it is not possible to get enough pain relief.	<ul style="list-style-type: none"> • nausea/vomiting • itchiness • not able to urinate • tenderness at injection site • <i>nerve injury - temporary or permanent</i> • <i>temporary slowing of baby's heart rate</i> • <i>seizure</i> • <i>heart attack</i> • <i>emergency c-section</i> 	You may need a catheter and IV fluids. You may have limited walking after receiving an ITN. ITNs are not usually recommended for first-time mothers whose labor is progressing slowly. Pain relief may wear off while you are still in labor. You may not be able to get an epidural if you are on certain medications, have low platelets, have back problems, or are very overweight.	You will feel significant pain relief within five minutes.
An epidural is a numbing agent that you will feel a tingling or burning on the skin. When you get the epidural, you should feel a decrease in pressure in your back during the procedure.	Epidurals make the contractions feel less strong and easier to manage. Having an epidural does not mean that you will have no pain. May require repositioning to be most effective.	<ul style="list-style-type: none"> • difficulty placing the epidural • lack of effective pain relief • headache/spinal headache • decrease in blood pressure • vaginal pain • not being able to urinate • tenderness at the epidural site • prolonged labor • <i>mild fever</i> • <i>nerve injury - temporary or permanent</i> • <i>infection</i> • <i>seizure</i> • <i>heart attack</i> • <i>emergency c-section</i> 	You cannot get out of bed after receiving an epidural. You will need IV fluids and may need a catheter. You may not be able to get an epidural if you are on certain medications, have low platelets, have back problems, or are very overweight.	The epidural can provide long-term pain relief; it can greatly decrease pain but not take it away. You have the option to control the dose of your medication. It may be helpful for prolonged labors. Pain relief may vary.



We are happy to discuss all types of pain relief options with you. Please let your nurse or provider know which options you would like to hear more about.

Thank you for choosing Regions Hospital Birth Center. Please let us know how we can help make this very special experience even better for you!

To learn more about labor pain management, please visit our website at regionshospital.com/birthcenter.



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