MATERNITY CARE

Managing Pain
During Labor & Delivery

MidMichigan
Medical Center
Midland
Managing Your Pain

One of the most common concerns about labor and delivery is pain. How much will it hurt? How will I cope? At MidMichigan Medical Center–Midland, we use a team approach to help you. Your pain management team will include your physician or midwife, the nursing staff, an anesthesia provider—and you.

Together, we will help you manage your pain during labor in a variety of ways. We’ll talk about these different ways to cope with pain in this brochure. But first, let’s look at the factors that influence the feelings of pain.
Understanding Feelings of Pain

All people feel pain in different ways, but there are certain factors that can contribute to feelings of pain. Take some time before you arrive at the hospital to consider some of these factors:

- **Being alone** – During labor and delivery, you may want to have your spouse or loved one with you for support.
- **Being overly tired** – Try to be well rested at the end of your pregnancy so you can better cope with contractions when labor begins.
- **Feeling anxious and tense** – Take advantage of the time between contractions to rest and relax. The techniques you learn in childbirth education classes can help.
- **Fearing a lot of pain** – Take one contraction at a time. Try not to focus on the discomfort of the contractions, but rather on the final result—your new baby.
- **Fearing the unknown and feeling helpless** – Learn as much as you can about childbirth in advance by reading, asking questions and taking childbirth preparation classes. This will help you feel more confident and in control during labor.

Levels of Pain Management

The most effective pain management begins long before your baby is born—with education. Your physician or midwife will review with you the educational opportunities that are available, including classes that teach relaxation, breathing and comfort techniques. Education is one of the most effective ways to manage pain, because simply knowing what to expect helps calm fears and promotes relaxation.

Once your labor begins, a number of additional techniques and treatments are available to help you manage your pain. Some of the most commonly used methods are described in this brochure. Choosing the most effective pain relief method will depend on your personal goals plus some factors that can only be determined during labor and delivery, including how far along your labor has progressed, the location, severity and type of pain you are experiencing and other safety and medical concerns. Our anesthesiologists and CRNAs will work with you and your health care team throughout the process to select the method that is right for you.
Pain Management During Labor

Non-invasive Pain Management Methods
During your pregnancy, you may have been introduced to breathing, relaxation and comfort techniques that can help you relieve pain during labor and delivery. After you are admitted to the hospital, your nurse will advise you about additional non-invasive pain management methods, including massage, walking, whirlpool baths or showers, imagery and music, as well as a variety of positioning techniques to help you and your support person manage your discomfort. Many women successfully manage their pain without anything more than education and these non-invasive pain management methods.

Analgesics
Should you feel you need additional pain relief, your physician or midwife may order an analgesic. An analgesic is a drug that provides some pain relief, typically without loss of sensation. The side effects of analgesics are minor, but they may cause you to feel drowsy or have difficulty concentrating.

Systemic Analgesia – This is often given as an injection into a muscle or vein. The medication takes effect on your whole nervous system, rather than one area of the body. This will help relieve the pain, but will not cause you to lose consciousness or sensation. Sometimes, other drugs are given along with systemic analgesics to relieve tension or reduce nausea. If delivery is close at hand, these medications are generally avoided, since they may slow the baby’s reflexes and breathing at birth.

Intrathecal Analgesia – This procedure involves injecting medication into your spinal fluid. You can move and even walk with intrathecal pain relief, so it doesn’t interfere with your ability to push. This method generally takes effect quickly and can be repeated if necessary. The most frequent side effect is itching.
**Epidural Analgesia or Epidural Block** – This procedure involves injecting medication into an area called the epidural space, which surrounds your spinal cord. You remain awake and alert, but it may cause some or complete loss of sensation in the lower half of the body, depending on your needs and the type of medication injected. An epidural may take about 30-40 minutes to effectively relieve pain, so it typically is given earlier in the labor process. Side effects may include headache or decrease in blood pressure. You should let your doctor know if you experience dizziness, rapid heartbeat or difficulty pushing.

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1Source: Pain Relief During Labor and Delivery, American College of Obstetricians and Gynecologists, July 2004.
Additional Pain Management During Delivery

Many women do not need any additional pain management methods or treatment during delivery, but additional options are available to your physician for the following needs:

**Episiotomy**

When you are ready to deliver, your physician or midwife may decide to perform an episiotomy to enlarge the birth opening. For this procedure, a local anesthetic is used.

**Cesarean Section**

If you require a cesarean section, a spinal anesthetic will most likely be used, unless an epidural catheter is already in place. In this procedure, local anesthetic is injected into the spinal fluid, relieving all pain and sensation in the lower portion of the body, from the nipples to the toes. You will be awake during the delivery; however, you may receive a sedative after you have had a chance to hold your baby.

A cesarean section performed in an emergency situation may require general anesthesia. This form of anesthesia involves going to sleep with intravenous medication and breathing anesthetic vapors with a special breathing device during surgery.
Be Prepared, Be Flexible

As you prepare for the birth of your baby, keep in mind that every woman’s labor and delivery experience is unique. Although some women have little need for pain medication, others feel that some type of pain medication allows them to feel more in control during childbirth. You should learn as much as you can to prepare yourself, but be flexible. You and your health care providers can always discuss changes regarding use of pain medications as your labor progresses. As always, be sure to discuss your questions, concerns and preferences with your physician or midwife.

Pain Management at MidMichigan

As a patient, you may expect the assessment and appropriate management of pain. This includes:

• Information about pain and pain relief measures.
• A concerned staff committed to pain prevention and management.
• A health care team who is responsive to your pain.
• Your reports of pain will be believed.
• Effective pain management.
• A dedicated health care team, educated on safe and effective pain management.
Let Us Know How You Feel

As a patient, we expect that you will help us assess and manage your pain by:

• Providing information about your pain to help us develop a plan to manage your pain. This includes reporting any history of chronic pain and any pain relief therapies used.

• Discussing pain relief options with your health care team to develop a pain management plan.

• Asking for pain relief, if needed, when pain first begins.

• Helping us assess your pain.

• Telling us if your pain is not relieved.

• Telling us about any worries you have about taking pain medication.

• Discussing with us any specific cultural, spiritual and personal beliefs associated with pain relief measures.
Rating Your Pain

The following scale was developed by a nurse to help patients better communicate their feelings of pain. This scale has been tested and proven helpful for women nationwide. We will ask you to rate your pain by identifying the number or face that best describes your pain.

**Glossary**

**Analgesic:** Medication given to relieve pain, typically without loss of sensation.

**Anesthesia:** Medication given to relieve pain with loss of sensation.

**Anesthesiologist:** A physician who is an expert in anesthesiology and pain management during surgery, labor and delivery.

**Certified Registered Nurse Anesthetist (CRNA):** An advanced-practice nurse with specialized training in anesthesia and pain management for surgery, labor and delivery.

**Epidural Analgesia:** A procedure where medication is injected into the epidural space surrounding the spinal cord. It relieves labor pain and may cause some or all loss of sensation in the lower half of the body.

**Episiotomy:** A surgical incision made into the perineum (the region between the vagina and the anus) to widen the vaginal opening for delivery.

**Inhaled Anesthetic:** An anesthetic vapor that is given through a special breathing device producing a loss of consciousness and removing pain sensation.
**Intrathecal Analgesia**: A procedure where an analgesic is injected into the spinal fluid in the spinal canal. It relieves labor pain in the lower half of the body without removing sensation or muscle function.

**Local Anesthetic**: A medication often described as a “numbing medication” that blocks all nerves to an affected part of the body, including those nerves that affect pain, touch and muscle movement.

**Non-invasive**: This term refers to medical procedures, such as massage or exercise, that do not enter the body. (Compare with “invasive” procedures, such as injections.)

**Pudendal Block**: A local anesthetic given as an injection in the vagina that relieves pain and feeling in the vaginal area during delivery.

**Sedative**: A drug that works to reduce anxiety and relax the patient.

**Spinal Anesthesia**: A form of anesthesia where local anesthetics are injected into the spinal fluid, relieving pain and sensation in the lower half of the body (or from the nipples to the toes in the case of a cesarian section).

**Systemic Analgesia**: Pain relief medication that affects the whole nervous system, not just one area of the body.
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