

## Anesthesia and Analgesia

Childbirth pain

Factors affecting labor pain

- Fear
- Physical causes-
  
- Culture
- Support
- Previous experience

Increases Pain	Promote Comfort/Decreases Pain

## Nonpharmacologic Management of Pain

- Prepare
- Safer
- Team effort
- Communicate

## **Pharmacologic Methods**

- Difficult choice
- Goal is maximum relief with minimal risk

## **Sedatives**

- False labor or early labor
- Minimal analgesic effect
- Examples
  - Seconal (secobarbital)
  - Ambien (zolpidem tartrate)
  - Phenergan (promethazine)
  - Vistaril (hydroxyzine)
  - Benadryl (diphenhydramine)
- Nursing Care
  - Assess mom
  - Assess fetus
  - NO driving
  - Teach

## **Systemic**

- Diffusion
- Fetus is greatly effected
- Anaglesia
- Administration

- Common Agents-Nubain(nalbuphine hydrochloride), Stadol (butorphanol tartrate), Demerol ((meperidine hydrochloride)
- Route: IV or IM
- Side Effects
  
- Nursing care
  - Void
  - ⊖ Administer at peak of contraction
  - Precipitate withdrawal
  - Assessments
  
  - Beware if nearing delivery
  
  - Narcan reverses narcotic effect

### **Regional Anesthesia**

- Local anesthetic into tissue
- Remains awake

### **Pudendal**

- Into pudendal nerve
- Relief of perineal stretching
- absence of SE
- Operative delivery

### **Epidural**

- Medication placed into the epidural space
- Narcotic and/or local anesthetic

- Compartmentalization
- Epidural Anesthesia
  - Increased SE, complications, and risks
  - Toxic Reaction-LOC, convulsions, cardiovascular collapse
- Epidural Analgesia-
  
- Preferred Method of labor pain relief
  
  
- Pain relief onset
- Types-single injection, multiple injections, or a continuous infusion
- Major Side Effect
  - Maternal Hypotension
    - May present as pale, dizzy, n/v
    - Inadequate placental perfusion
  
- Nursing Procedure with placement
  - Evaluate labor progress, fetal status, and maternal status
  - IV in place
  - Void prior
  - Assist with positioning during:
  
- Nursing Care after placement
  - Positioning-lateral tilt
  - Voiding
  - Monitor for hypotension with frequent VS checks
  - Treat-admin O2, IV bolus, trendelenburg, elevate legs, notify anesthesia, administer ephedrine
  - Monitor pain

- Itching
- Ambulation

## **Anesthesia for a Cesarean Delivery**

### **Spinal**

- injected into spinal fluid in the subarachnoid space
  - Motor and sensory block below zyphoid process
- Risks and Complications
  - High Spinal
  - Intubation & mechanical ventilation
  - Hypotension
  - Spinal Headache-debilitating headache
    - Can effect bonding and recovery
    - Leakage of spinal fluid
    - Different from a regular headache
    - Treatment

### **General**

- Emergency C/S or difficult spinal/epidural
- Mother not awake
- Complications
  - Fetal Depression