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Pain relief in labour: How do the options compare?

Methods with medication	Entonox (Gas and air)	Pethidine or diamorphine injection	Patient - controlled intravenous analgesia (PCIA)	Epidural or combined spinal epidural (CSE)
What is it?	A gas mixture of nitrous oxide and oxygen.	Pethidine or diamorphine is injected into the muscle in your arm or leg.	Small dose of fentanyl or remifentanil given from a pump into a drip in your hand.	Local anaesthetic and a painkiller given through a fine tube in your back to numb your nerves. May not be recommended very early or late in labour.
What do you do?	Breathe it through a mask or mouthpiece with a valve.	Have an injection in your arm or leg.	Press the button to give yourself a dose every time you feel a contraction starting.	Sit still in a curled-up position for five to 10 minutes while the tube is put in.
How much pain relief?	Moderate help.	Often mild. May reduce anxiety.	The amount of pain relief varies. Women often need to use Entonox as well.	Usually very good. One in 10 times, it may not work well and may need replacing.
How long until it starts to work?	Immediate.	Five minutes to prepare the injection, then 30 minutes before it starts to work. The effects last a few hours.	10 to 15 minutes to set up then works in a few minutes.	Up to 20 minutes to set up. Then 20 minutes for epidural to work (a CSE will be quicker than this as you will also have a spinal injection).
Any extra procedures?	None.	None.	You will be on a drip. You may be connected to a monitor to check your baby's heartbeat. Checks on your oxygen levels. You may need extra oxygen.	You will be on a drip. You may have a urinary catheter. You may be connected to a monitor to check your baby's heartbeat.
Risks to baby?	None.	May be slow to breathe. May be drowsy and find it difficult to feed at first.	May be slow to breathe at first.	You may have low blood pressure and this can affect your baby's heart rate if not treated.
Side effects for mother?	Some nausea. Can feel 'spaced out'. Can be tiring and make your mouth dry.	Feeling sleepy or sick. Delay the rate at which food is digested so you get a full stomach. May slow your breathing.	Feeling sleepy or sick. Slow breathing - you will have to stop using it if it makes you too sleepy. Stopping breathing or slowing your heart rate (rare).	Low blood pressure is common. Difficulty passing urine. Bad headache (one in100 women). Increase in temperature. Temporary nerve



				damage (one in 1000 women). Permanent nerve damage (one in 13,000 women). Severe complications (one in 250,000 women).
Effect on labour and delivery?	None.	None.	May increase the need for forceps.	Can make it harder for you to push. May increase the need for forceps.

Physical Methods	Water Pool	TENS	Alternative Therapies
What is it?	A birthing pool or bath filled with hot water	A gentle electrical current is passed through pads on your back.	Acupuncture, acupressure or hypnotherapy.
What do you do?	Lie in water during your labour and sometimes while your baby is born.	You press a button to control the strength of the current.	You will need to arrange for a therapist to be with you during the birth.
How much pain relief?	May help you relax and make the contractions seem less painful.	Mild. Tingling feeling helps reduce the pain. Ideal to reduce backache in early labour.	May help you relax and make the contractions seem less painful.
How long until it starts to work?	Immediate	Five minutes to put on the pads and set up.	Works as soon as the therapy starts.
Any extra procedures?	None.	None.	None.
Risks to baby?	Breathing problems and infections carried in the water (rare).	None.	None.
Side effects for mother?	None.	None.	None.
Effect on labour and delivery?	None.	None.	None.

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Registered Charity No. 1111382. Registered No. 5540014 (England). Date of publication: 05/10/14, Version 4. Please also see the following website http://www.labourpains.com which is managed by the OAA and contains useful resources for pregnant women including further information on pain relief in labour.

We are grateful to the charity Translators without Borders for providing this translation.



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