Using Medication to Cope with Labor Pain



Why will I have pain in labor and how bad will it be?

During labor, you will have pain as your uterus (womb) pushes your baby down and your cervix (the opening of your uterus) and vagina stretch and open. The kind and amount of pain you have changes throughout your labor. Labor pain is different for each woman, and nobody knows ahead of time how painful their labor will be.

What pain management methods can I use during labor?

Lots of things can help you cope with labor pain such as having a support person, massage, changing positions, making a noise during contractions, resting between contractions, and being in a bath or shower. You can also use pain medications to help you cope with labor pain. You can be given pain medication through an IV, nitrous oxide (laughing gas) that you breathe through a mask, or an epidural that takes away most of the pain.

How does IV pain medication work?

The IV pain medication is given into your vein. It takes about 10 minutes to start working. IV medications block the pain signal from getting to your brain. These drugs also make you not care that you are sensing pain.

If I choose IV pain medication, what type will be used?

The IV pain medications are all similar to morphine and are from the family of drugs called opiates. Some last longer than others. Morphine lasts about 4 hours and is usually given early in labor. Fentanyl is the shortest acting IV pain medication and lasts for about an hour, but you can get several doses of it. An in-between type of IV pain medication called Stadol or Nubain lasts for a few hours and is usually only given for one or 2 doses.

How does nitrous oxide work?

A gas mixture that is made of half nitrous oxide and half oxygen is hooked up to a mask. Whenever you breathe into the mask, you breathe the gas. It works in about 30 seconds, and the effect goes away a few seconds after you stop breathing the gas. We are not certain how nitrous oxide works, but it is likely that it blocks the feeling of pain in your brain. It also makes you not care that you are sensing pain.

How does an epidural work?

After you are given some extra fluid through an IV, a very small area on the skin of your back will be numbed. A needle is then placed through this area into a place between the bones of your spine. A small plastic catheter is placed through this needle. The catheter puts a small amount of anesthetic (numbing) medication in an area next to your spinal cord where the nerves from your uterus and legs come into your spine. This medicine blocks the pain signal from getting to your brain. It also blocks your ability to urinate and walk. The catheter is hooked to a pump, which delivers medicine through the catheter throughout your labor.

Will using pain medication in labor affect my labor progress?

- Morphine can slow your labor if it is given very early in labor. It can be used to stop very early labor contractions that are sometimes called false labor. Often after the morphine wears off, your active labor will start.
- The other IV pain medications such as Fentanyl, Stadol, or Nubain do not affect your labor progress, and morphine will not stop your labor progress if given when you are in active labor.
- Nitrous oxide does not have any effect on your labor progress.
- An epidural may make your pushing stage of labor longer, and women who have an epidural are more likely to need Pitocin to make contractions stronger.



Will using pain medication in labor affect my baby?

All 3 types of labor pain medications have been used for a very long time for women in labor, and none of them are known to cause serious problems for babies.

- The IV pain medications can only be given in early and active labor. They are not used during the pushing stage of labor because they can make your baby sleepy if they are given too close to the time of birth.
- Nitrous oxide can be used anytime during labor and for the whole labor if you want it. There are no known side effects for your baby from using nitrous oxide.
- An epidural increases your chance of needing forceps or a vacuum to help give birth. Babies can have some bruising on their heads from the forceps or vacuum. The epidural also increases the chance that you will get a fever in labor. If this happens, there is a higher chance that your baby will need some blood drawn and/or to be watched in the nursery. An epidural does not increase the chance that your baby has an infection, but your baby will need to be watched closely to make sure your fever was not from an infection.

What are the pros and cons of each available pain medication?

Medication	Pros	Cons
IV Pain Medication	epidural and just need some medication in early or active labor to help take the edge off the pain.	 They lessen the pain some but do not take it all away. You need an IV to get these drugs. They cannot be used late in labor. They may cause sleepiness, nausea, and/or itching.
Nitrous Oxide	You can breathe in the nitrous oxide whenever you want it so you manage your pain control. It can be used at any time during labor up until you give birth. You do not need an IV.	 Some women do not like the feeling of a mask on their face. Some women have a strange feeling with nitrous oxide that they do not like.
Epidural	An epidural is the best way to take away most of the pain. Some hospitals set up the epidural so you can push a button to get more medication when you need it.	 You need an IV and usually have a catheter in your bladder. You won't be able to stand and walk around easily because the epidural takes away some feeling in your legs. It may take longer for you to push out your baby. You are more likely to need forceps or a vacuum to help your baby come out. Some women have a small area on their leg or abdomen that does not get pain relief from the epidural. If this happens, that one small spot will continue to be painful.

For More Information

Childbirth Connection: Options for relieving labor pain.

http://www.childbirthconnection.org/article.asp?ClickedLink=264&ck=10185&area=27

Flesch-Kincaid Grade Level: 6.9

Approved January 2016. This handout and "Coping with Labor Pain," which is also published in this issue, replace "Pain during Childbirth" published in Volume 49, Issue 6, November/December 2004.

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