

If you have questions or concerns, please talk with your physician or nurse.

Epidural Analgesia

Good control of your pain is an important part of your care. Epidural analgesia is a safe and effective method of pain control. Often, epidural analgesia is used during and after surgery to control pain at a specific site. Regional (epidural) anesthesia lessens many of the side effects common with general anesthesia. Many patients receiving epidural analgesia:

- Recover faster and feel less drowsy after their surgery.
- Have pain that is well controlled.
- Are less likely to have nausea and vomiting.

This brochure describes regional (epidural) anesthesia for both the surgery and nonsurgery patient. Carefully follow any added instructions provided by your physician and nurse.

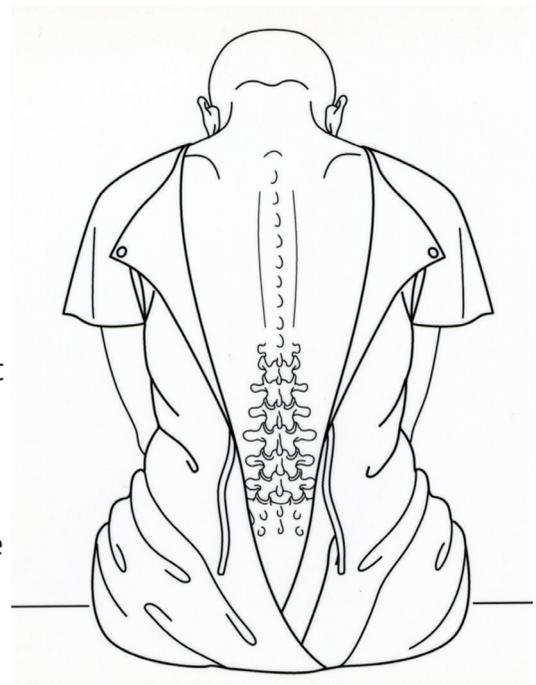
Anesthesia plan

The goal of anesthesia is to keep you comfortable and to provide you with pain control. Pain control is an important part of your treatment. As a patient, you have a right to pain control.

For surgery, epidural anesthesia is often part of a 2-step process:

- Epidural anesthesia to prevent pain during surgery.
- Sedation or light general anesthesia to ensure that you are asleep and unaware of what is going on around you during surgery.

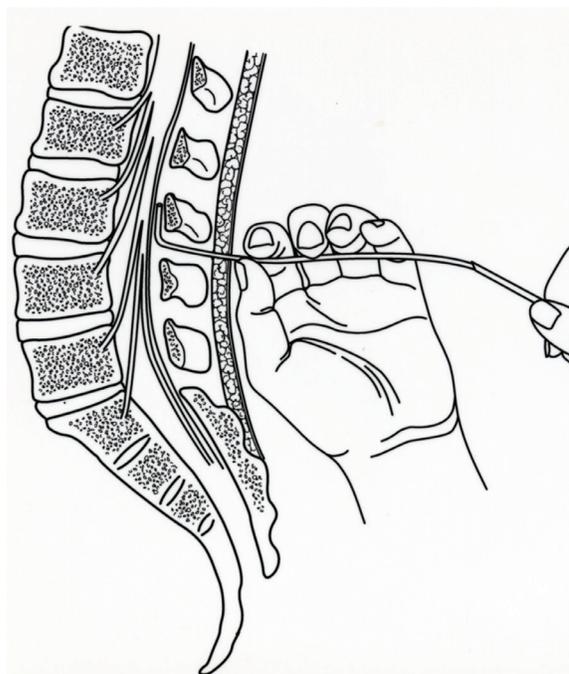
Before surgery, an IV (into the vein) catheter (small plastic tube) is placed in your arm or hand. A medicine is injected into the IV to relax you. Once you are relaxed, the epidural or epidural/spinal anesthesia is given.



Procedure

Under sterile conditions, a catheter is placed in the epidural space located around the spinal cord in your lower back. The actual catheter does not go near the spinal cord but lies outside the membrane covering the spinal cord.

Numbing medicine (local anesthetic) and a narcotic pain medicine are given through this catheter. They spread to the nerves to control pain. Depending on your surgery, you may be numb from the waist to your toes, and you will not be able to move your legs.



Pain management

Once the epidural catheter is in place, it can be used for either chronic or post-surgery pain management. A small dose of numbing medicine and narcotic pain medicine is given continuously through a pump. The smaller doses allow you to move your legs without having pain.

The pump allows you to give yourself added medicine by pushing a hand-held button. This button is for patient use only. Family members or visitors should never press the button without your consent. When someone other than you presses the button, they may be placing you at risk of getting too much medicine or medicine you do not need.

Most patients using epidural analgesia have:

- More pain-free movement.
- Fewer complications due to bed rest.
- Longer-lasting pain relief.
- Fewer medicine side effects.

Epidural analgesia may cause some unwanted side effects. Medicine will be given to manage these side effects. Please tell your physician or nurse if you have:

- Problems urinating
- Increased pain
- Nausea
- Itching
- Numbness in your legs, or weakness in moving your legs or feet

If the epidural does not provide needed pain control, it can be easily stopped. An IV or oral pain medicine may be started. Usually, once you are able to eat, the epidural catheter is removed. Then, you will take pills for pain relief.

As always, please tell your physician or nurse if you are having pain or if you have any other questions or concerns.