

Epidural or Spinal Anaesthetic – Aftercare

Information and advice for patients

Surgery and Anaesthetics

Introduction

During your stay in the maternity unit, you might have received an epidural or spinal anaesthetic to help manage pain during labour and delivery. These techniques differ slightly in the following ways:

- **Epidural** - a small tube is placed in your back with a needle to provide pain relief.
- **Spinal anaesthetic** - a single injection into the back that numbs the lower body, commonly used for caesarean sections or operating theatre procedures.

Side effects are rare after an epidural or spinal anaesthetic, but it is important to know what to look for. While you are in the hospital, the midwives and anaesthetists will watch over you. This leaflet will help you understand any problems that might happen after you go home.

What are the complications?

Headache

Minor headaches are common after surgery and childbirth, even if you did not have an epidural or spinal anaesthetic. Sometimes, a severe headache can happen after an epidural or spinal anaesthetic. This usually starts between one day and one week after the anaesthetic. The headache is often very painful, felt more at the front or back of your head, and gets worse when you sit or stand, but feels better when you lie down.

In addition to headaches, you might experience neck pain, nausea, and sensitivity to bright lights. The discomfort can be intense enough to interfere with your daily activities. To lessen these symptoms, try lying flat. You can take pain relief medicines such as paracetamol or ibuprofen if needed. Follow the instructions on the packet or from your healthcare professional. Do not exceed the recommended dose or frequency. Keep yourself hydrated and avoid strenuous activities such as heavy lifting or straining.

If the headache is severe, or does not improve after 24 hours, you should seek medical advice. Call the Midlands Metropolitan University Hospital Maternity Triage on 0121 507 4181 and ask to speak to the on-call obstetric anaesthetist. Explain that you have had an epidural or spinal anaesthetic recently. You may need to return to the hospital for another injection in your back.

Nerve damage

After giving birth, it is common to experience minor nerve damage that leads to numbness or tingling in certain areas. This typically happens due to pressure from the baby's head on the nerves during delivery, the use of suction or forceps, or fluid retention. Minor nerve damage can also be caused by a spinal or epidural anaesthetic. Most nerve injuries heal fully within six months. Permanent disabling nerve damage is a serious but very rare side effect of having an epidural or spinal anaesthetic. It is usually caused by either an infection or bleeding within the spine.

Infection

An infection can develop at the site of an epidural or spinal injection. This is rare happening to less than 1 person out of every 47,000 people. This infection may occur either on the skin's surface or deeper, near the spinal cord and surrounding nerves. The infection can lead to the formation of an abscess within the spine. This may compress the spinal cord or nerves and cause damage. It needs urgent treatment with antibiotics, and sometimes surgery, so you should seek medical attention for advice via your GP, 111 or your local emergency department.

Bleeding

In very rare cases less than 1 person in 100,000 people experience bleeding within the spine. This can lead to a build-up of blood known as an epidural or spinal haematoma. This accumulation may compress the spinal cord and nerves, causing damage. Urgent surgery may be needed to relieve pressure in these cases. If you suspect a haematoma, you should seek medical attention for urgent advice via your GP, 111 or your local emergency department.

What should I look out for at home?

It is important to be aware of any signs that could indicate a serious complication following your epidural or spinal procedure. You may require urgent medical attention. You should, therefore, look out for:

- Redness, swelling or pus around the site on your back where the epidural or spinal anaesthetic was given.
- Fever.
- Neck stiffness.
- Changes in the feeling and/or strength in your legs.
- Any new moderate to severe pain around the site on your back where the epidural or spinal anaesthetic was given.
- Difficulty passing urine or loss of control of your bowels or bladder.

If you experience any of the symptoms mentioned above, it is essential to seek medical advice immediately by:

- Telephoning Midlands Metropolitan University Hospital Maternity Triage on 0121 507 4181 and asking to speak to the on-call obstetric anaesthetist.
- Attending your nearest Accident and Emergency Department. Explain that you have recently had an epidural or spinal anaesthetic.

Where can I find out more?

For more details about epidurals and spinals, visit the Royal College of Anaesthetists website: www.rcoa.ac.uk Search under information for patients.

Alternatively, further information following a spinal or epidural anaesthetic is also available on the LabourPains website: www.labourpains.org

(Websites checked 09 December 2025)

Contact us

If you have any questions, or if there is anything you do not understand about this leaflet, please contact Midlands Metropolitan University Hospital Maternity Triage on 0121 507 4181 and ask to speak to the on-call obstetric anaesthetist.

If you would like to suggest any amendments or improvements to this leaflet please contact SWB Library Services on ext 3587 or email swbh.library@nhs.net.



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