Hospital Sticker

EPIDURAL INFORMATION SHEET

South African Society of Anaesthesiologists, Acacia Branch

Dear _____

An epidural injection can be given for one of the following possible reasons:

1. On the recommendation of an Orthopaedic Surgeon in the management of back complaints.
2. To manage post-operative or labour pain.

A computerized infusion pump that continuously supplies the local anaesthetic drug via an epidural catheter can also be used in the long term management of pain.

Epidural injections are safe and very effective in controlling pain. They are administered by an Anaesthesiologist who will also explain the technique to you. Please ask the Anaesthesiologist during the pre-operative visit to clarify any uncertainty you may have.

Anaesthesiologists exercise extreme care in administering epidural injections and infusions but, as with any medical procedure, complications can occur. The following complications are possible:

Common complications:

1. *Cardiovascular*: Your blood pressure may drop and you may feel lightheaded or dizzy. It is easy to treat this quickly and effectively.
2. *Nausea:* This is also easily treated.
3. *Shivering*
4. *Difficulty in passing urine*: Patients who have had an epidural are not permitted to leave the hospital before they are able to pass urine. Occasionally patients require a urinary catheter and have to be kept in hospital overnight. Patients with an epidural catheter for a constant infusion usually have their bladders catheterized until the epidural is stopped.

Rare complications:

1. *Failed block*: In rare cases the epidural injection may give unsatisfactory pain relief. The dosage of epidural drugs can then be adjusted or alternative methods of pain relief can be employed.

2. *Headache*: In some cases the outer covering of the spinal chord is inadvertently punctured and spinal fluid can leak through the defect caused. This can lead to headache which can respond to bed rest for a few days. If this is not effective a sample of your own blood can be withdrawn and injected aseptically into the space around the spinal chord to stop the leak.
3. *Backache*: You may suffer superficial pain of variable duration at the injection site.
4. *Prolonged or dense block*: We strive to give the minimum amount of local anaesthetic needed to provide satisfactory analgesia without interfering with limb movement. However, sometimes a block can have a prolonged or even a temporary paralyzing effect.

Very rare complications:

1. *Haematoma*(bleeding): Small blood vessels can be damaged during insertion of the epidural needle. In rare cases this can cause continuous internal bleeding. The resultant pressure on the spinal chord can lead to neurological damage and paralysis if not diagnosed and treated timeously. This treatment involves urgent surgical drainage of the haematoma. It is important that the attending Anaesthesiologist is made aware of any medication, including herbal products, that you are taking and that may interfere with blood clotting and thus may increase the risk of a spinal haematoma forming.
2. *Spinal block/high block*: If the unlikely event of the injected local anaesthetic entering the spinal fluid a very dense block that temporarily paralyzes the arms and the muscles of breathing can occur.
3. *Sepsis*: In spite of the strict aseptic techniques used, superficial skin infections or even an abcess close to the spinal chord are possible.
4. *Neurological damage*: This can occur during insertion of the epidural needle or catheter. Any undue discomfort during the procedure must be communicated to the anaesthesiologist immediately.
5. Rarely during removal of the epidural catheter it can be sheared off with a piece being retained in the epidural space. This may require surgical removal.
6. A few other extremely rare complications have also been documented.

Your Medical Aid Fund may pay only part of, or even none of, the fee for an epidural injection. Feel free to discuss this with the Anaesthesiologist.

I declare that I have read and understand the contents of this Information Sheet and that I have discussed any uncertain aspects with the attending Anaesthesiologist.

I hereby consent to having an epidural injection performed on me/ my dependant.

Signed at _____ Hospital on this the _____day of _____200__.

Signature_____ (patient/parent/guardian)