

Spinal anaesthetics: risks and side effects

About spinal anaesthetics

A spinal anaesthetic is a single injection into your back. It numbs the lower part of your body and you remain awake during the procedure. It can be used for caesarean birth or for other surgery. It can also be used for pain relief after surgery.

You can get more information about spinal anaesthetics for childbirth on the LabourPains website: <https://bit.ly/PainRelief-Labour>.

You can read more about spinal anaesthetics for surgery or pain relief after surgery on the RCoA website: www.rcoa.ac.uk/patientinfo/your-spinal-anaesthetic.



About risk and spinal anaesthetics

Everyone is different and it is not possible to know who will experience a side effect or risk.

Knowing about risks can help you discuss options with your healthcare team and make decisions about your care.

The risks in this leaflet are averages obtained from research studies. You can find out about the research that we used in our regional anaesthesia and risk evidence table, which you can view on our website: www.rcoa.ac.uk/patientinfo/spinal-evidence-table.

Your risks might be higher or lower than these numbers. If you are thinking about having a spinal anaesthetic, your anaesthetist will discuss with you the risks that are more likely or significant for you.

Since labour can be unpredictable, you may require a caesarean birth with a spinal even if you hadn't planned to. Reading this leaflet and others on the LabourPains website can help you prepare for the unexpected and think about any questions you might have.

Do spinal anaesthetics increase the risk of complications during and after childbirth?

According to the latest evidence, spinal anaesthetics:

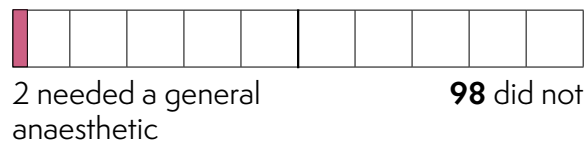
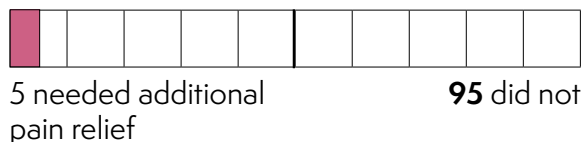
- **do not** cause backpain after childbirth
- **do not** make your baby drowsy or cause them long-term harm.

What happens if the spinal anaesthetic does not work?

Most spinal anaesthetics work well. They usually take about 10 minutes to work. The anaesthetist will do checks to make sure that your spinal is working well enough for surgery. If it is not, they may:


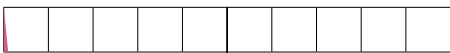

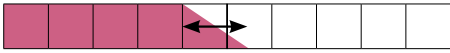



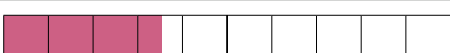


- need to repeat the spinal injection or offer you an epidural
- suggest a different type of anaesthetic, such as a general anaesthetic.


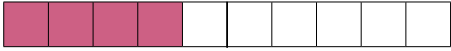

Out of 100 people who had a spinal anaesthetic for caesarean birth



Risks and side effects associated with spinal anaesthetics

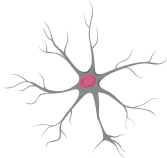
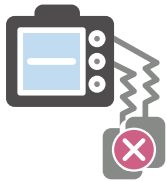
These numbers are out of every 100 people who had a spinal.

What happened?	For how long? Can it be treated?	How many? Out of every 100 people (one hundred people)
 <p>Headache (post-dural puncture headache)</p>	<p>It can happen between one day and one week after a spinal anaesthetic.</p> <p>It can be mild and get better within a few days with over-the-counter pain relief, or it can be severe and require treatment in hospital.</p> <p>You can get more information about post-dural puncture headaches on our website: www.rcoa.ac.uk/patientinfo/headache-spinal-epidural</p>	 <p>0.5–1 did 99–99.5 did not</p>
 <p>Shivering</p>	<p>It can happen for 2–4 hours after the spinal anaesthetic. Shivering is usually a side effect of the spinal anaesthetic. It's not due to feeling cold, but you can have a blanket to make you more comfortable. Shivering stops when the spinal anaesthetic wears off.</p>	 <p>40–55 did 45–60 did not</p>
 <p>Low blood pressure</p>	<p>It can happen immediately and last for a few hours, soon after the spinal anaesthetic. It can make you feel sick, dizzy or drowsy. Your healthcare team can give you medicine to improve your blood pressure.</p>	 <p>About 70 did About 30 did not</p>
 <p>Feeling sick (nauseous)</p>	<p>It can happen immediately and last for a few hours, soon after the spinal anaesthetic. Your healthcare team can give you anti-sickness medicines if it happens.</p>	 <p>About 35 did About 65 did not</p>
 <p>Being sick (vomiting)</p>	<p>It can happen immediately and last for a few hours, soon after the spinal anaesthetic. Your healthcare team can give you anti-sickness medicines if it happens.</p>	 <p>About 20 did About 80 did not</p>


	Itching	It can happen immediately and usually wears off after a couple of hours. Your healthcare team can give you medicine to treat the itching.	
	Difficulty passing urine	You might not be able to feel if you need to go to the toilet after a spinal. The healthcare team sometimes recommends a urinary catheter, a thin tube to drain the urine directly from your bladder. This might stay in until the next day.	<div> <div>About 40 did</div> <div>About 60 did not</div> </div>

The risks below are rare.



These numbers are out of every 20,000.

What happened?		For how long? Can it be treated?	How many? Out of every 20,000 people (twenty thousand people)
	Weak, numb, tingly leg, buttock or foot (nerve damage)	Temporary damage (days or weeks) and normally gets better by itself. Permanent damage.	<div> <div>About 10 did</div> <div>About 19,990 did not</div> </div> <div> <div>About 1 did</div> <div>About 19,999 did not</div> </div>
	Loss of consciousness or cardiac arrest (when the heart stops beating)	The anaesthetist will treat you immediately and give you a general anaesthetic if this happens.	<div> <div>1–7 did</div> <div>19,993–19,999 did not</div> </div>

These numbers are out of every 50,000.

What happened?		For how long? Can it be treated?	How many? Out of every 50,000 people (fifty thousand people)
	Meningitis symptoms are headache, fever and vomiting	Meningitis infection can happen days or weeks after the spinal. This can be treated with antibiotics.	<div> <div>1 did</div> <div>49,999 did not</div> </div>

These numbers are out of every 200,000.

What happened?	For how long? Can it be treated?	How many? Out of every 200,000 people (two hundred thousand people)
 Infection in or around the spine	It happens days or weeks after the spinal. It is treated with antibiotics or sometimes surgery to drain the abscess.	2 did 199,998 did not
 Blood clot around the spine (vertebral haematoma)	This is a serious complication which may require emergency surgery. It can cause leg paralysis if not treated quickly.	1–2 did 199,998 did not

These numbers are out of every 500,000.

What happened?	How many? Out of every 500,000 people (five hundred thousand people)
 Becoming paralysed	2 did 499,998 did not

More information on the risk of nerve damage after an epidural or spinal is available here:
www.rcoa.ac.uk/patientinfo/nd-after-spinal-epidural.

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