

## Coping with pain during labour

Most women use some pain relieving methods to help them during labour. Discuss with your midwife or doctor the advantages and disadvantages of each so that you can make an informed decision about what is right for you and your baby.

Pain-relieving method	Effects
Breathing and relaxation techniques	May help you cope with labour No unwanted effects
Being in water during labour, in a bath or birthing pool	Provides good pain relief You can leave the water at any time Reduces the need for an epidural No unwanted effects
Massage by your birth partner	May relieve pain No unwanted effects
Gas and oxygen ('Entonox'), a drug which you breathe in	Gives some pain relief Can be used while you are in water, can be stopped easily if you don't like it and side effects quickly wear off Could make you feel sick and light-headed
Pethidine, or similar drugs which are given by injection	Gives limited pain relief Could make you feel drowsy Could make you feel sick but you will be offered a drug to help this You will not be able to get into water for 2 hours or longer if you feel sleepy Could affect your baby's breathing immediately after birth Could make the baby drowsy for several days which may interfere with breastfeeding
Epidural – a local anaesthetic that is injected into your spine to numb your lower body. A fine tube is left in place in your spine which makes it easier for the anaesthetist to give you more pain relief if needed. An anaesthetist must	The most effective type of pain relief; it should give total pain relief within 30 minutes You and your baby will need careful monitoring Does not increase your chances of a longer first stage of labour or caesarean section Could make the second stage of your labour longer and increase the chance of assisted birth (for example, using forceps) Is not linked to long-term backache If your epidural is in place for a long time, it could affect your baby's breathing immediately after birth and make your baby drowsy

Some women find acupuncture, acupressure, or hypnosis helpful. Usually the women will arrange this for themselves after discussion with the midwife or doctor.

Adapted from: NICE clinical guideline 55: *Intrapartum care: care of healthy women and their babies during childbirth: Understanding NICE guidance*. National Institute for Health and Clinical Excellence, UK.  
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