



Anaesthesia and having a baby

Being pregnant and giving birth involves temporary but major changes in our bodies. Discomfort or pain during labour is common and some women will require surgery while pregnant. You might not need the care of an anaesthetist when you're carrying and delivering your baby, but it's good to know what your options are.

Can I have anaesthesia when I'm pregnant?

Surgery can be performed while pregnant and breastfeeding. Your anaesthetist will assess you and tailor your treatment to your individual needs. They'll also be happy to talk you through the process and answer any questions you have.

How do I manage discomfort during labour?

Your midwife and obstetrician will help you to manage mild and moderate birthing pain. But if you need stronger, longer lasting relief or require a caesarean delivery they will need to ask an anaesthetist to join your birthing team. Anaesthetists are available at major hospitals, but if you're planning to have your baby at a smaller hospital, you should check with your midwife or GP.

How soon can I breastfeed after having anaesthesia?

You'll usually be able to have skin-to-skin contact with your baby straight away, and start breastfeeding as soon as you feel ready.

Will I need post-natal pain relief?

You may require pain medication after giving birth. Most pain medication will be OK to take while breastfeeding, but your birthing team will discuss this with you at the time.

Did you know...?

Australia and Aotearoa New Zealand are two of the safest places to have a surgical procedure involving anaesthesia, and our anaesthetists are among the most highly trained specialist doctors on the planet.



SCAN ME

As Australasia's leading authority on anaesthesia, ANZCA provides accessible, evidence-based information designed to help you make informed decisions. Scan the QR code to visit our website anzca.edu.au. This information is a guide only and should not replace information supplied by your anaesthetist.



Managing discomfort during labour

Every birth is different, but it's common and natural to experience some degree of discomfort during labour. Your midwife and obstetrician will help you to manage mild and moderate birthing pain, but if you need stronger, longer lasting relief or require a caesarean delivery, they'll invite an anaesthetist to join your birthing team.

Relaxation techniques

To help you with your pain when you go into labour, your midwife will usually suggest starting with some simple relaxation techniques such as stretches, massages, and breathing exercises. These may be familiar to you from antenatal classes. They can help you to feel more comfortable and in control of your contractions. If your partner is with you, they can also get involved.

Happy gas (AKA "laughing gas")

Breathing a mixture of oxygen and nitrous oxide gas (commonly called "happy gas" or "laughing gas") can help you to control your contractions and feel more relaxed. The gas is generally delivered through a mouthpiece which you can put in and take out at any time to control the flow. You'll still be fully aware, and able to move and experience sensation.

Stronger pain medication

If you start experiencing more severe discomfort, your obstetrician can give you an opioid-based pain medication such as morphine. This is generally injected into your muscle tissue. Opioids delivered in this way are generally safe to use at any stage of labour. They allow you to stay fully aware and able to experience sensation. They can provide highly effective and almost instant pain relief, but their effects are relatively short lasting.

More sustained pain relief

If the happy gas and morphine aren't keeping you comfortable enough - or there's a chance you'll require a caesarean delivery - your obstetrician may ask an anaesthetist to join your birthing team to provide stronger, longer lasting pain relief such as epidurals.



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