



SOAP
Society for Obstetric
Anesthesia and Perinatology

**YOUR QUESTIONS
ANSWERED**

A Product of
the SOAP Patient
Education
Subcommittee

Headache after childbirth from the epidural or spinal

What is it and how can I treat it?

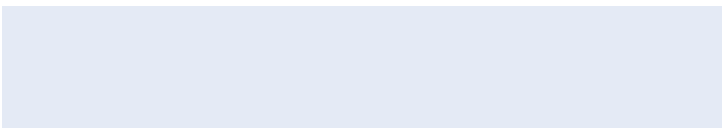
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Headaches after childbirth are common.

Sometimes, the headaches can happen because of the anesthetic (epidural or spinal) you received. That is the kind of headache we will discuss here.

After receiving epidural or spinal anesthesia, the chance of developing a headache is between 1 in 100 to 1 in 200.

The technical term for this headache is a post-dural puncture headache, or PDPH.



WHAT does this headache feel like?

- It usually feels dull and throbbing, and the pain can be from mild to severe.
- The pain is usually located in the front and/or the back of the head or neck.
- **Usually, the headache disappears or gets better when you lie down flat, and it gets worse when you sit or stand up. This is a very important and common feature of headaches related to spinal or epidural anesthesia.**
- This type of headache can also cause dizziness, nausea, being bothered by light, blurry/double vision, ringing in the ears, short-term hearing loss, and painful or stiff neck.
- It is very important to let your doctors know if you are feeling this kind of headache even if it starts after you have gone home.

WHEN does it happen?

- If it is because of your anesthetic, it usually starts the day after you had your epidural or spinal, or within 5 days.
- It is very important that you talk with your nurse or doctor if you have any of the symptoms mentioned above because there are ways to treat them.

WHY does it happen?

There are 2 different ways that this can happen:

- Our brain and spinal cord *are surrounded by a fluid-filled sac called the dura (this fluid is called cerebrospinal fluid)*. When a spinal anesthetic is done, the tip of the small spinal needle intentionally pokes the dura (sac). When an epidural is being done, the epidural needle, which is larger, may accidentally poke the dura (sac).
- The fluid can leak through the hole and can lower the pressure around your brain. The low pressure around your brain is what causes the headache.

HOW do we treat it?

The headache can get better on its own within the first 1 to 2 weeks, although it can take longer; however, it can prevent you from doing the things you need to do at home - including caring for your baby.

- Lying down flat will make you feel better, but is not recommended for a long time since it is best to keep moving after childbirth.
- Over-the-counter pain medication, such as ibuprofen or acetaminophen, may help.

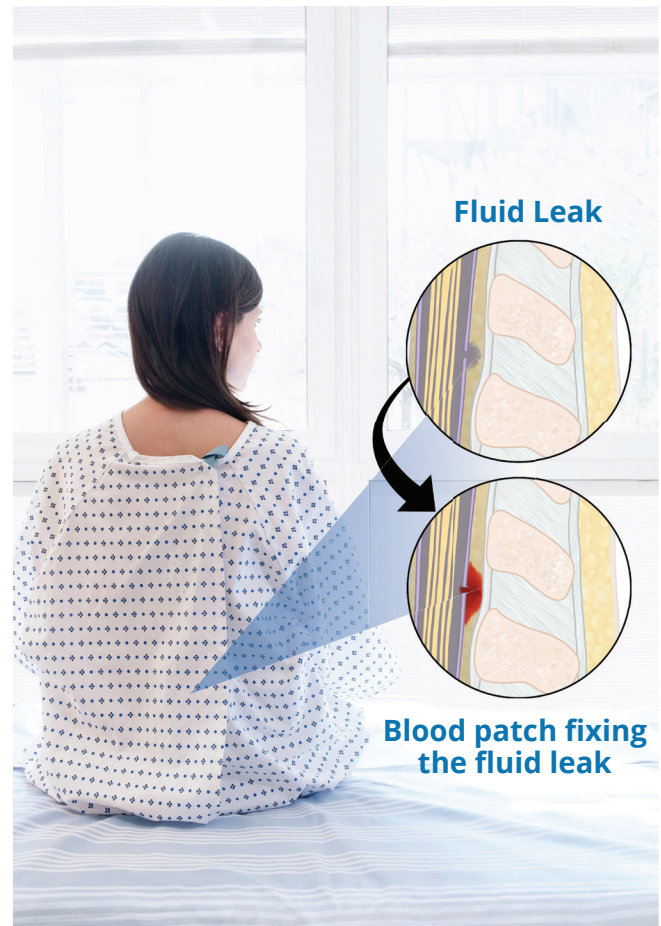
- It is important to drink lots of fluids. Drinks containing caffeine, such as coffee, tea and some caffeinated soft drinks can give you some relief of the symptoms temporarily.
- Lifting heavy objects and straining should be avoided.
- If these simple steps do not relieve the pain, your doctor may recommend a procedure called an **EPIDURAL BLOOD PATCH**.

WHAT is an epidural blood patch?

- This procedure is very similar to the one you had for your epidural or spinal anesthetic.
- Once the epidural space is found in your back, the anesthesiologist, or an assistant, will draw blood from a vein (usually your arm or hand) after cleaning it with soap and inject the blood slowly into your back.
- Usually the headache goes away very quickly, but it may take a few hours. You will be asked to lie flat for an hour or so, after the procedure. You should be allowed to go home after that if you are ready for discharge from the hospital or if you came to the hospital from home for the procedure.
- In 8 out of 10 women the headache is cured or significantly improved by the blood patch.
- A second epidural blood patch might be needed if the first one does not work or if the headache returns.
- Nerve damage, infection or bleeding in the back, and a repeat accidental dural puncture are rare complications.
- An epidural blood patch can cause local bruising or pressure, even pain, in the back for a few days.
- An epidural blood patch should not cause long-term back pain, fever, difficulty passing urine or stool, severe pain, or loss of strength or sensation in your legs.
- Make sure to get instructions from your anesthesia provider about how to contact the hospital if your headache comes back or you have other symptoms such as back pain that gets worse or leg weakness or numbness or loss of control over your ability to pee or poop.

Are there any risks if I don't get an epidural blood patch when it has been recommended?

- The decision to have an epidural blood patch is made by you and your anesthesia provider and they will be able to explain further if needed!



CONTACT YOUR DOCTOR IMMEDIATELY IF YOU HAVE A HEADACHE AND:

Fever | Drowsiness | Confusion | Vomiting

These could be signs of a serious condition that needs to be taken care of right away.