Chapter 7

Nursing Management of Pain During Labor and Birth

**Key Terms**

- Cleansing breath
- Effleurage
- Endorphins
- Focal point
- Pain threshold
- Pain tolerance

Education for Childbearing

Ideally, educational preparation for childbirth begins prior to conception

Types of Classes Available

- Gestational diabetes mellitus
- Early pregnancy
- Exercise for pregnant women
- Infant care
- Breastfeeding
- Sibling
- Grandparent
- Adolescent childbirth

Variations of Basic Childbirth Preparation Classes

- Refresher
- Cesarean birth
- Vaginal birth after cesarean
- Adolescent
- Content of Childbirth Preparation Classes
- Changes of pregnancy
- Fetal development
- Prenatal care
- Hazardous substances to avoid
- Nutrition
- Common discomforts
- Work, benefits of exercise
- Coping with labor and delivery
- Childbirth and Pain
  - How childbirth pain differs from other pain
    - Part of a normal birth process
    - Woman has several months to prepare for pain management
    - Is self-limiting and rapidly declines after birth
- Factors that Influence Labor Pain
  - Pain threshold
  - Sources of pain during labor
  - Central nervous system factors
    - Gate control theory
    - Endorphins
  - Maternal conditions
— Cervical readiness
— Pelvis
— Labor intensity
— Fatigue

• Fetal presentation and position

• Nonpharmacological Pain Management

• Advantages
  — Nonpharmacological methods do not harm the mother or fetus
  — They do not slow labor if they provide adequate pain control
  — They carry no risk for allergy or adverse drug effects

• Methods of Childbirth Preparation
  • Dick-Read method
  • Bradley method
  • Lamaze method

• Selected Nonpharmacological Pain Relief Measures
  • Relaxation techniques
  • Skin stimulation
  • Effleurage
  • Sacral pressure
  • Thermal stimulation
  • Positioning
• Diversion and distraction
• Breathing
• Skin Stimulation
• Breathing
• First stage
  — Slow-paced
  — Modified-paced
  — Patterned-paced
    • Constant pattern
    • Stairstep pattern
• Second stage
  — Used when pushing
• Breathing Patterns
• How to Recognize and Correct Hyperventilation
• Signs and symptoms
  — Dizziness
  — Tingling of hands and feet
  — Cramps and muscle spasms of hands
  — Numbness around nose and mouth
  — Blurring of vision
• Corrective measures
  — Breathe slowly, especially when exhaling
— Breathe into cupped hands
— Place a moist washcloth over the mouth and nose while breathing
— Hold breath for a few seconds before exhaling

• Nursing Tip
• If a woman is successfully using a safe, nonpharmacological pain control technique, do not interfere
• Pharmacological Pain Management
• Relationship of Pregnancy to Analgesia and Anesthesia
• Pregnant woman at higher risk for hypoxia
• Sluggish GI tract can result in increased risk of vomiting and aspiration
• Aortocaval compression increases risk of hypotension and shock
• Effect on fetus must be considered
• Pharmacological Methods
• Advantages
  — Using medications during labor allows the mother to be more comfortable and relaxed.
  — Increased relaxation will aid in her ability to participate in her care.
• Pharmacological Methods (cont.)
• Limitations
  — Any medication used must be considered for its potential impact on the condition of the fetus.
• Analgesics and Adjunctive Drugs
• Narcotic (opioid) analgesics
  — Avoid if birth anticipated within 1 hour
• Narcotic antagonist
• Adjunctive drugs
• Regional Analgesics and Anesthetics
  • Regional anesthesia usually involves placement of anesthetic in epidural or subarachnoid space
• The meninges around the spinal cord
  — Dura mater
  — Arachnoid mater
  — Pia mater
• Types of Anesthesia for Childbirth
• Anesthetic method
• Local infiltration
• Pudendal block
• Epidural block
• Subarachnoid (spinal) block
• General anesthesia
• Epidural and Spinal Anesthesia
• Epidural Blood Patch
• General Anesthesia
• Adverse effects in the mother
— Regurgitation with aspiration of gastric contents
— Can result in chemical injury to lungs

• Adverse effects in the neonate
  — Respiratory depression
  — Aggressive resuscitation may be necessary

• Pharmacological Techniques

• The nurse’s role
  — Begins at admission
  — Woman’s preference for pain relief
  — Keep side rails up
  — Provide education regarding procedures and expected effects
  — Observe for hypotension

• Question for Review

• What is the most important nursing responsibility after an epidural or spinal block analgesia during labor and delivery?