

## Patient information

# Caesarean section: a guide to general anaesthetic

## What is a general anaesthetic?

Most women are able to have a spinal anaesthetic (an injection in their back causing their lower body to be numb) and are awake for their caesarean section. However, sometimes this is not possible, and a general anaesthetic is needed. This would mean that you will be asleep for your caesarean section.

## Why would I need a general anaesthetic?

- In an emergency situation there may not be enough time for a spinal / epidural.
- The spinal / epidural space cannot be found or the injection doesn't work properly.
- Spinal / epidural should be avoided eg certain medical conditions where the blood does not clot properly, abnormalities in your back or infection.
- It is your preference to be asleep.
- Sometimes we may need to convert to a general anaesthetic during the caesarean section if you find the sensations distressing or painful.

## What does a general anaesthetic involve?

Your anaesthetist will visit you before your operation and will ask about your general health. They will also talk to you about the anaesthetic and give you a chance to ask questions. If your caesarean section needs to occur under general anaesthesia because it is very urgent, then this discussion will be very brief.

You and your baby will be fully monitored whilst you are in the operating theatre. You will need a cannula (a thin plastic tube inserted in your vein). You will be given a medicine to drink which gets rid of your stomach acid. There will be lots of people in theatre who are essential for the care of you and baby.

Before going to sleep, you will need to breath oxygen from a facemask. Your anaesthetist will tell you when the whole team is ready, and then they will send you to sleep by giving some medicines into your cannula. At the end of the operation, you will be taken to recovery so you can be monitored whilst you wake up.

## **Can my partner be present in theatre while I am asleep?**

Unlike having a spinal anaesthetic (where you are awake), your birthing partner will not be able to accompany you to theatre. They will be asked to wait in your room on the labour ward. This allows the team in theatre to fully focus on caring for you and your baby.

## **What happens to my baby once they are born?**

Most of the time, baby will be taken back to your partner on labour ward once they have been checked over. Sometimes, after a general anaesthetic, the baby needs closer monitoring from the paediatric doctors. You will be able to meet them once you leave the recovery area and return to labour ward.

## **What types of pain relief will I have?**

- **During the caesarean section:** The anaesthetist will give you strong pain-killers through your drip and a local anaesthetic can be placed into the muscle layers of your tummy which will help to keep you comfortable when you wake up.
- **After the caesarean section:** Your midwife will offer you oral pain killers, for example paracetamol, ibuprofen or oramorph.

## **Can I breastfeed my baby after a general anaesthetic?**

Yes you can. It is safe to breastfeed your baby as soon as you are awake enough to hold them safely. Your midwife will be able to help you with feeding in case you feel drowsy. For further information on breastfeeding after a general anaesthetic, please see the 'Anaesthesia in Breastfeeding Mothers' leaflet, available from

[www.labourpains.com](http://www.labourpains.com)

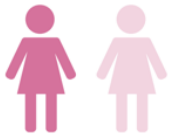
# Is there a chance I could wake up during the operation?

This is known as 'accidental awareness under general anaesthetic', and it is uncommon (1 in 212 to 1 in 670). Your anaesthetist takes this risk very seriously, and every precaution will be taken to prevent this. Should you feel that you have experienced this, please mention it to your midwife who will contact the anaesthetist. The anaesthetist will discuss your concerns and ensure that further support and follow up is arranged for you.

## What are the risks of having a General Anaesthetic for Caesarean section?

### Very Common or Common

Sore throat:



1 in every 2 women

Shivering:



1 in every 3 women

Muscle pain:



1 in every 3 women

Feeling sick:



1 in every 10 women

### Uncommon or Rare

Awareness of procedure:

• 1 in every 670 women<sup>[1]</sup>

Stomach acid going into lungs:

• 1 in every 1,000 women

Damage to teeth:

• 1 in every 4,500 women

### Very Rare

Severe allergic reaction:

1 in every 10,000 women

Similar to the chance of a person being struck by lightning in their lifetime.<sup>[2]</sup>

Brain damage or death:

1 in every 100,000 women

Similar to the chance of a person dying during a sky dive.<sup>[3]</sup>

## References

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Obstetric Anaesthetists' Association. *Risks of Regional Anaesthesia (epidurals & spinals) and General Anaesthesia Explained*. Available at: [https://www.oaa-anaes.ac.uk/assets/managed/cms/files/ACCEA%202014/Labour%20pain%20infographic\\_July%202019.pdf](https://www.oaa-anaes.ac.uk/assets/managed/cms/files/ACCEA%202014/Labour%20pain%20infographic_July%202019.pdf)

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