

Epidural Blood Patch

This leaflet explains more about an epidural blood patch, including the benefits, risks and any alternatives and what you can expect when you come to hospital.

What is an epidural blood patch?

An epidural blood patch is a treatment for a post dural puncture headache. This is a specific type of headache caused by an epidural or spinal procedure. Having a blood patch is similar to having an epidural procedure. It is carried out in our operating theatre.

On this occasion we will take your own blood from your arm and inject it into your back. The blood will clot and form a seal over the tiny hole in the dura. This will relieve the headache.

Why should I have an epidural blood patch?

Your headache may be so serious that it affects how you care for your baby. If that happens, we may consider a 'blood patch' to treat your headache.

What are the risks?

- Temporary pain when the blood is injected into your back.
- Small chance of another accidental dural puncture during the procedure.
- You can have bruising on the back from the injection (lasting a few days).
- You may have significant backache and stiffness lasting a few days. If you are unable to look after yourself and your baby you should return to hospital for review.
- Nerve damage, infection or bleeding are very rare complications.
- No relief from your headache. One in five women may require a second blood patch.

Are there any alternatives?

Taking simple pain killers and drinking lots of fluid including caffeine containing drinks can help with reducing the headache. No other treatment has been proven to be as effective as an epidural blood patch to relieve this type of headache.

How can I prepare for an epidural blood patch?

If you are taking blood thinning injections (Fragmin), inform the anaesthetist so that we can correctly time your procedure. Also, tell the anaesthetist if you have had a raised temperature since giving birth.

You will be admitted to Gwillam ward before your procedure and you can bring your baby. Before you are called to theatre, try to feed your baby and empty your bladder.

After the procedure, when you are discharged home, you may need someone at home with you to help you.

Asking for your consent

It is important that you feel involved in decisions about your care. For an epidural blood patch, you will be asked to sign a consent form to say that you agree to have the treatment and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously. If you would like more details about our consent process, please ask for a copy of our policy.

What happens during an epidural blood patch?

- We will take you to our operating theatre to have the procedure.
- We will take your own blood from your arm and inject it into your back. It is similar to the original epidural procedure.
- It can be done sitting up or lying down if your headache is severe.
- You may feel an instant relief of your headache.

Will I feel any pain?

- We take blood from your arm which feels like a normal blood test.
- We inject local anaesthetic into your back to numb the skin. You then may feel sensation of the epidural blood patch but it should not be painful.
- Some people begin to feel pressure in the back, or temporary pain as the blood is being injected.

What happens after an epidural blood patch?

- You will be asked to lie flat for two hours.
- You can eat and drink as normal.
- You can then move about as normal, avoiding lifting anything heavier than your baby. If you are feeling well after four to six hours we may allow you to go home.
- We will review you by telephone once you are discharged to see how you are. If you still feel a headache after 24 to 48 hours we may need to consider a second blood patch. In most people the headache resolves after the second blood patch.

What do I need to do after I go home?

- Avoid heavy lifting.

- We may advise taking laxatives so that you don't strain when opening your bowels.
- You can continue taking simple painkillers if your headache returns.

Please go to your nearest emergency department if you have any of the following symptoms.

- Drowsiness or confusion
- worsening headache with vomiting
- a high temperature
- neck stiffness (difficulty in bending the neck)
- leg weakness or numbness
- loss of control of bladder or bowel
- severe back pain.

Will I have a follow-up appointment?

We will also follow you up after six weeks to see how you are. This may be by telephone or we may ask you to come in.

Useful sources of information

More information on www.labourpains.com, a public information website.

Contact us

If you have any questions please contact the obstetric anaesthetist on-call.

St George's Hospital: 020 8672 1255 and dial bleep 6392 at voice prompt

Delivery suite direct line: 020 8767 4654

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency.

NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk).

The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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