

# Headache after Childbirth

Headaches after childbirth are very common. Not getting enough sleep, not drinking enough fluids, irregular food intake and hormonal changes can all contribute to headaches. This leaflet offers more information about a headache after childbirth caused by an epidural or spinal procedure.

**If you have any further questions, please speak to a doctor or nurse caring for you.**

## What is a post dural puncture headache and why have I got it?

A post dural puncture headache can **only** happen after an epidural or spinal procedure. The chance of this happening is about 1 in 250 procedures.

Your brain and spinal cord are surrounded by a fluid filled bag. The bag is called the dura. A spinal procedure makes a tiny hole in the dura to administer our medicine. When we are putting in an epidural, we can accidentally make a tiny hole in the dura. The fluid can leak from the tiny hole (puncture site) of the dura. If the puncture site does not seal quickly enough, you can suffer from a headache: this is called a post dural puncture headache.

If we think you might have this type of headache after an epidural procedure, we will review you whilst you are in hospital. We will contact you by telephone after discharge from hospital.

## What are the signs and symptoms?

- Headache starting from one day to one week after your procedure.

- Headache that is worse when sitting up or standing but better when lying flat.
- Other symptoms **can include** neck pain, nausea and vomiting, hearing loss, dizziness, ringing in the ears, double vision or a dislike of bright lights.

### **Do I need any tests to confirm the diagnosis?**

There are no specific tests to confirm the diagnosis. You need to be seen by the obstetric anaesthetist on call. Please contact us (details below).

### **What treatments are available?**

- You can take paracetamol every six hours, to a maximum of four times a day.
- You can take ibuprofen three times a day if you are not intolerant to it.
- Drink lots of fluid and drinks containing caffeine (tea, coffee, Coca-Cola).

If your headache is not getting better and you are finding it difficult to manage taking care of yourself and your baby, we may offer you an epidural blood patch.

- **Epidural blood patch** procedure is a similar procedure to having an epidural. This involves taking a sample of your blood and injecting into your back to seal the tiny hole in the dura. You can discuss this with the anaesthetist.

### **What happens if I do not get treatment?**

Three quarters of these headaches will get better by themselves after about a week. A small percentage will continue for up to six weeks and for sometimes longer on very rare occasions. It is important that you are seen by an anaesthetist especially if your

headache is not getting better.

### **Is there anything I can do to help myself?**

- Take regular pain killers.
- Avoid heavy lifting and straining.
- Drink lots of fluid.

### **What should I do if I think I have a post dural puncture headache?**

Please alert your midwife and ask them to contact the Obstetric Anaesthetist on duty. If you have been discharged and you think you have a post dural puncture headache please speak to your community midwife or call the Delivery Suite and ask to speak to the Obstetric Anaesthetist on duty (contact details below).

### **Useful sources of information**

More information on [www.labourpains.org](http://www.labourpains.org) a public information website.

Our Epidural Blood patch leaflet can be accessed on [ANA ABP.pdf](#)

### **What should I watch out for?**

There are other rare but serious causes of headache, which are not a post dural puncture headache. **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.

## 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](http://www.stgeorges.nhs.uk)**

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## Additional services

### Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available:

Monday, Tuesday and Thursday between 10am and 4pm

Friday between 10am and 2pm.

The Walk-in and Advisory telephone services are closed on Wednesdays.

Please contact PALS in advance to check if there are any changes to opening times.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

**Tel:** 020 8725 2453 **Email:** [pals@stgeorges.nhs.uk](mailto:pals@stgeorges.nhs.uk)

## NHS UK

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. **Web:** [www.nhs.uk](http://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 our services by searching 'St George's Hospital' on the AccessAble website ([www.accessable.co.uk](http://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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