



Chapter 7

Nursing Management of Pain During Labor and Birth

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Types of Prenatal Classes

- Childbirth
- Exercise
- Gestational Diabetes Mellitus
- Sibling
- Grandparent
- Breastfeeding
- Infant Care
- Vaginal Birth After Cesarean (VBAC)



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- Childbirth Pain
 - Part of normal birth process
 - Woman has several months to prepare for pain management
 - Self-limiting and rapidly declines after birth
- May cause woman to feel vulnerable
- Motivates to assume different positions to assist fetus to descend

- Sources of Pain During Labor
 - Dilation and stretching of cervix
 - Reduced uterine blood supply during contractions
 - Pressure of fetus on pelvic structures
 - Stretching of vagina and perineum

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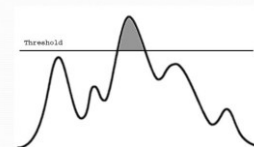
Pain Tolerance

- **Pain tolerance** is the maximum level of pain that a person is able to tolerate

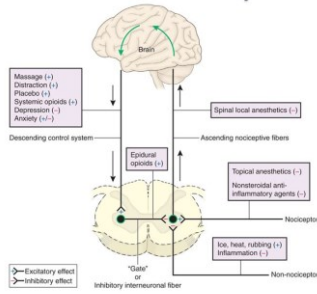


Pain Threshold

- The **threshold of pain** is the point at which pain begins to be felt. It is an entirely subjective phenomenon



Gate Control Theory



Adrenaline

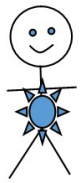


Fight or flight

Causes: Fear, Lack of Control, Feeling Judged

Muscles tighten
Energy sent to limbs
Increased sensitivity to pain
Signs: tension, high pitched voice

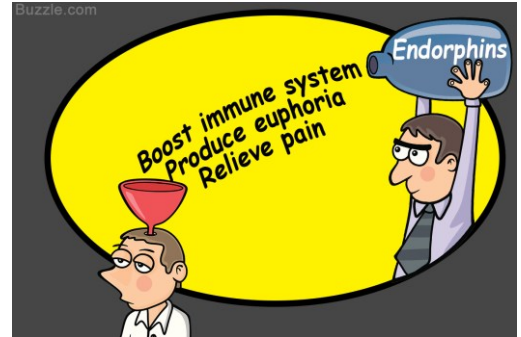
Oxytocin, Endorphins



Collect & Protect
"Love Hormone"

Feeling Loved, Safe, Supported, Skin to Skin Contact, Privacy

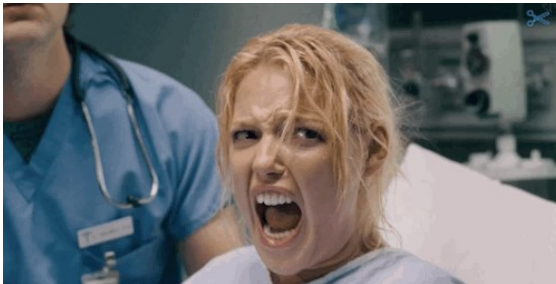
Muscles relax
Energy sent to uterus
Decreased sensitivity to / awareness of pain
Signs: relaxation, rhythm, low husky voice



During labor, stimulated by exercise, light massage, and touch.

Box 7-1

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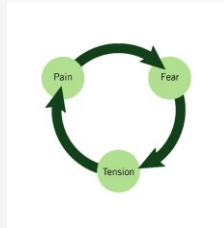


Sources of Pain

- **Maternal**
 - **Cervical readiness**
 - **Pelvis**
 - **Labor intensity**
 - **Fatigue**
- **Fetal Presentation & Position**
- **Interventions**
- **Psychosocial Factors**



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- Dick Read Method
 - Fear-tension-pain
 - Relaxation to interrupt cycle
- Bradley Method
 - Husband coached birth
 - Abdominal breathing and relaxation techniques
- Lamaze Method
 - Bases of most CB classes in US
 - Relaxation and breathing



- **Non-Pharmacologic**
 - **Advantages**
 - **No harm**
 - **Do not slow labor**
 - **Carry no risk for allergy**
 - **No risk of adverse effects**
 - **Limitations**
 - **Prior rehearsal needed**

NON-PHARMACOLOGICAL TECHNIQUES

positioning

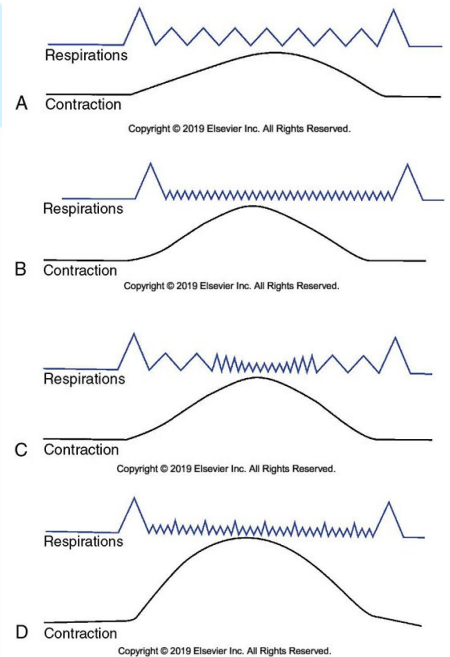
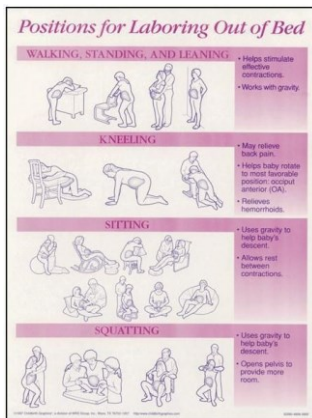
skin stimulation

Diversion
&
Distraction

breathing

relaxation

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Pharmacologic Pain Management

- Opioids
 - Small doses
 - Helps with coping not COMPLETE pain relief
 - Avoided within 1 hr of birth
 - Naloxone is narcotic antagonist
 - Reverses effects
 - Pain will return
- Epidural
 - Procedure
 - Limitations
 - Adverse effects
 - Hypotension
 - SAFETY!!!
 - Check movement and sensation before ambulation

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Pharmacologic Pain Management

Local/Pudendal Block

- Injected in the perineal area or pudendal nerve

Adverse Effects

- Check allergies
- Vaginal hematoma
- Abscess

General Anesthesia

- Emergency CS or CS birth if epidural or spinal block doesn't work

Adverse Effects

- Aspiration

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Nursing Care Plan – Woman Needing Pain Management During Labor

Safety Alert p. 177