

# Your Spinal Anaesthetic

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## Your Spinal Anaesthetic

Rare side effects include:

- Nerve damage- temporary loss of sensation, pins and needles and sometimes muscle weakness may last for a few days or even weeks but almost all patients make a full recovery in time.
- Permanent nerve damage is very rare (approximately 1 in 50,000)

### What happens when I reach the ward after a spinal anaesthetic?

- Your nurse will make sure that the numb area is protected from pressure and injury until sensations return, which takes about 2-4 hours.
- The anaesthetic wears off from waist downwards to the toes. As the sensations return you will become aware of some pain at the operation site. Please ask for pain relief before the pain becomes too obvious.
- You can normally drink fluids within an hour of the operation and may also be able to have a light diet.

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5. At the end of the injection, the anaesthetist will remove all needles from your back, apply a dressing and lay you flat.

6. The spinal works quickly and you feel your legs going warm, numb and weak. Within a few minutes you will be unable to move your legs or feel any pain below the waist.

### How will I be sure that the Spinal is working?

Your anaesthetist may use a range of simple tests to see if the spinal is working properly. These include using very cold spray on the skin over your legs and asking you to try and move your legs. Only when the anaesthetist is satisfied that the anaesthetic has taken effect will he/ she allow the surgery to begin.

### What are the advantages of a spinal anaesthetic?

- Excellent pain relief during surgery for several hours afterwards
- Less confusion after surgery in older people
- Less sickness and vomiting
- Less risk of chest infection after surgery
- Less effect on heart and lungs
- Earlier return to drinking and eating after surgery
- Less need for strong pain relieving drugs during and after your surgery.
- You can communicate with doctors and nurses and may even be able to watch the operation on television, if you wish!

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### Do I have to stay awake?

No. You can choose to remain fully conscious or have some sedation during the surgery. The amount of sedation can be adjusted so that you are sleepy and relaxed but not unconscious. It is also possible to combine a spinal with a general anaesthetic.

### Will I feel anything during the operation?

Your anaesthetist will not permit the surgery to proceed until you both are convinced that the spinal anaesthetic is working properly. During the operation you will not feel any pain although you might be aware of other sensations like pressure or movement as the surgical team operates.

### Will I see and hear anything?

Normally a screen is placed across your chest so you cannot see anything, but in some keyhole surgeries you can opt to see the surgery on the television screen. You will be aware of the hustle and bustle of the operating theatre when you come in. However, once the surgery begins, the noise levels usually drop. You can listen to music if you wish during the operation. Feel free to bring your own music, with headphones.

### Can I refuse to have a spinal anaesthetic?

Yes, if following discussion with your anaesthetist, you are still unhappy about having a spinal anaesthetic, you can always say no. You will never be forced to have any anaesthetic procedure that you do not want.

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### What are the risks associated with Spinal anaesthetics?

Common side effects include:

- Low blood pressure- As the spinal anaesthetic takes effect it can lower your blood pressure and make you feel faint or sick. This can be controlled by giving fluids through your drip and some medications to raise your blood pressure
- Itching- This is common when the spinal anaesthetic includes morphine like drugs in addition to local anaesthetics. It is usually self-limiting, but can also be treated by drugs.
- Difficulty passing urine (urinary retention) - You may find it difficult to pass urine for as long as the spinal lasts. You may need a catheter to be placed in your bladder temporarily to aid the passage of urine. Bowel function is not affected by the spinal.
- Headache- Severe headache may occur after a spinal anaesthetic. In young women having a spinal for childbirth it happens in around 1 in 250 spinals, although, it is much less common in older people. This headache gets worse on standing or sitting and improves if you lie down. If this happens to you, you need to see an anaesthetist for assessment and further management.
- Pain during spinal injection- You should inform your anaesthetist immediately if you feel pain in your legs or bottom as this may indicate irritation or damage to a nerve. The spinal needle would need to be withdrawn and repositioned.