

Department of Anaesthesia

Headache after Epidural or Spinal Anaesthetic: Information for patients

Headaches may occur normally after childbirth. This leaflet describes a special sort of headache that can occur after having an epidural or a spinal anaesthetic.

After having an epidural you have a 1 in 100 chance of developing a “post dural puncture headache”. This risk is reduced to 1 in 200 after a spinal as a smaller needle is used. The headache typically occurs after 24 hours but may occur up to a week later.

What type of headache occurs?

The headache can be severe, is felt at the front or back of the head, is worse on sitting or standing and improves when lying down. In addition you may experience neck pain, nausea or vomiting and a dislike of bright lights. Some patients describe it as being like a bad migraine.

What causes the headache?

Your brain and spinal cord are surrounded by Cerebro-Spinal Fluid (CSF) contained within in a bag which is called the dura.

When an epidural is sited, a needle is used to inject local anaesthetic just outside the dura. In some patients the needle can accidentally pass through the dura. The risk of this happening increases in larger patients, patients with spinal abnormalities (e.g. Scoliosis) and when epidurals are placed during active labour.

When a spinal is given, a fine needle is deliberately inserted through the dura to inject local anaesthetic into the CSF. A much smaller needle is used so if a headache does develop it is less likely to be severe.

If too much fluid leaks through the hole in the dura, the pressure of the remaining fluid around your brain decreases. If you sit up, the pressure is reduced even more. This low pressure causes the typical headache.

What can relieve the headache?

Simple measures

The hole in the dura usually closes within a few weeks but can take longer. Lying flat and taking simple painkillers such as Paracetamol or Ibuprofen may help. If you are not breast feeding you may also be able to take Codeine. Drink plenty of fluid – tea, coffee or cola (caffeinated drinks) may be particularly helpful. Avoid lifting and straining.

A severe post dural puncture headache may not settle with the above treatment and may require an ‘epidural blood patch’.

Epidural Blood Patch

Having a blood patch is like having an epidural and takes about 30 minutes. The anaesthetist will take blood from a vein in your arm and inject it near the hole in the Dura where it will clot and usually plug the hole.

In 70-80% of patients the blood patch will cure the headache. Most patients feel a significant relief of symptoms soon after the injection. Blood patches have been shown to be more effective if performed after 48 hours; because of this we do not do them within 24 hours of your initial epidural or spinal anaesthetic.

After a blood patch we recommend that you lie flat for 3 hours and do not lift anything heavy for at least two days. You may need someone at home with you to help with your daily activities. You can eat and drink on the day of the procedure, and you do not need to stop breastfeeding.

What are the problems associated with a blood patch?

In some patients the blood patch may be only partially successful or may not work at all. If you still have a headache after 24 to 48 hours your doctor may advise you to have a second blood patch. It is rare to need more than two blood patches - your anaesthetist will discuss this with you.

The most common complications include bruising in the area where the anaesthetist put the needle into your back and temporary backache which lasts a few days. Epidurals have been shown not to cause long-term backache.

There is a chance (1 in 100) of the needle creating another hole in the Dura similar to the one that caused the post-dural puncture headache in the first place. This would make the headache worse.

Other complications may occur, but they are very rare. Nerve damage (numbness or weakness in your legs) may be caused by insertion of the needle (1 in 13,000). Infection or bleeding into your back are very rare but serious complications. We will not perform a blood patch within 12 hours of you having a blood thinning injection or if you have any signs of infection.

If you experience problems with passing urine, or loss of sensation or weakness in your back or legs, or severe back pain then you must contact the on-call anaesthetist on Delivery Suite immediately. The number you should call is 01603 287328

After discharge we will phone you at home to make sure you are ok. If you subsequently have problems or wish to speak to an anaesthetist about anything, please call the number above.

We have produced this leaflet to give you general information about the headache that may develop after your spinal or epidural injection and what treatment may be offered to you. If you need more advice on post-dural puncture headaches or epidural blood patches, please speak to your anaesthetist when he or she comes to assess you.

Further information

For more information, please contact the Department of Anaesthesia, Norfolk & Norwich University Hospital, Colney Lane, Norwich NR4 7UY. Tel: 01603 287086 or the Delivery Suite on 01603 287328.