



Continuous Epidural Infusions

An epidural is a very good way to control pain. For an epidural infusion, we:

- Place a small tube (catheter) in your child's back, near the nerves that sense pain. An anesthesiologist (sleep doctor) will place this tube while your child is sedated or asleep in the operating room.
- Give pain medication continuously through this tube, using an electronic pump.
- Can give extra pain medication if your child or teen needs it.

What medication is given through the epidural?

The dosage of medications depends on your child or teen's weight.

Through the epidural, we can give:

- Freezing medication (local anesthetic)
- Freezing medication and pain medication (opioid) together (like Fentanyl® or Dilaudid®)



How long will the epidural infusion last?

Children and youth usually have the epidural in place for 2-4 days, until they're able to take medication by mouth. Before we remove the epidural, we'll start your child or teen on other medications to control pain.

What are the benefits of an epidural infusion?

A continuous epidural infusion:

- Gives a steady amount of pain medication for better pain control;
- Brings pain medication right to the pain sensing nerves;
- Allows us to give lower doses of other pain medications, with fewer side effects;
- Makes patients more comfortable, so they can move sooner after surgery.

Are there any risks?

Just like with any procedure where the skin is pierced, there is a small risk of bleeding or infection. Very rarely, an epidural can cause damage to the nerves in the spinal cord. Your anesthesiologist will discuss this with you ahead of time. Once in a while, the epidural doesn't work as well as it should. If this happens, the anesthesiologist can often solve the problem so the epidural works well. If we can't get the epidural to work well, there are many other ways we can control your child's pain.

Are there any side effects?

During the infusion, some patients experience nausea, vomiting, mild itchiness or trouble passing urine (going pee). We are able to treat all of these side effects, if they happen. We watch patients who have epidurals very closely.

Nurses will:

- Check your child or teen every hour
- Assess how well your child or teen can move before getting out of bed (some patients notice their legs feel a bit 'heavy' or 'numb')

The Acute Pain Service (APS) will:

- Visit your child or teen every day
- Assess how well the epidural is working, and check for any side effects

Questions?

Ask your nurse to contact the:
Acute Pain Service Nurse Practitioner
or the:
Acute Pain Service Anesthesiologist or
Resident

