

HEALTH & HOSPITALS

[Women's health]

Delivering pain relief

Forget what you heard about "no pain, no gain" when it comes to childbirth.

Dr. Gilbert J. Grant, director of obstetric anesthesia at NYU Medical Center and associate professor at the NYU School of Medicine, believes that women suffer much too long waiting for the cervix to dilate to the standard four centimeters before receiving pain relief.

"The falsehood that women must wait until their cervix reaches an arbitrary degree of dilation before they can receive epidural or spinal pain relief has resulted in needless suffering for countless women," says Grant, author of "Enjoy Your Labor: A New Approach to Pain Relief for Childbirth" (Russell Hastings Press.)

Recent research published in the New England Journal of Medicine found that when epidural analgesia was given early in labor — before four-centimeter dilation — there was no increase in C-sections and the duration of labor was shortened by about an hour and a half.

On the flip side, being in pain can have side effects such as a higher risk for post-partum depression.

Instead of waiting until you're in excruciating pain and then having to wait the 15 to 20 minutes it takes for the drugs to kick in, Grant says women who want pain relief should get a catheter

inserted ahead of time and start the epidural earlier on.

"When you have the dentist drill your tooth, do you get the numbing shot before the drilling or during the drilling?" he asks. "In labor, everyone gets it during the drilling. Many women are made to feel guilty for taking pain relief even though the modern walking epidural we use will not harm the mother or baby."

Grant gives his mothers-to-be a continuous infusion of pain relief through an electronic pump. Patients have a button they can push to administer additional doses if needed, so they can fine-tune pain control.

"It's called patient-controlled epidural analgesia, and it's the best way to go through labor," he says. "The beauty of the epidural is you're free of pain but you're not sleepy. We use a walking epidural, so you're more numb but you still have mobility — you can walk around and you can push."

