

Pain relief during labour and birth, for people with scoliosis

This information is for you if you:

- Have scoliosis.
- Are pregnant, or plan to become pregnant, and
- Plan to give birth at BC Women's Hospital.

What is scoliosis?

Scoliosis is a sideways curve in the spine. The spine may also be rotated or twisted.

Scoliosis can be **mild**, **moderate** or **severe**, depending on the curve (Cobb Angle) in the spine. A doctor measures the Cobb Angle with an x-ray.

People with moderate or severe scoliosis may have uneven shoulders, an uneven waist, or rib cages at different heights. Severe scoliosis can cause heart or breathing problems.

People with severe scoliosis may need a back brace or surgery to straighten the spine.

What causes scoliosis?

In 70% of people with scoliosis, the cause is unknown. This is called **idiopathic** scoliosis.

Rarely, babies have scoliosis at birth. Illness or injury may also cause scoliosis.

How common is scoliosis?

Mild scoliosis is common. About 2 in 100 people (or 2%) have a slight curve in their back. Many people first notice the curve in childhood. A health-care provider may also notice the spinal curve.

Moderate or severe scoliosis is rare. It is more common in women than in men. About 2 in 1000 people (or 0.2%) have moderate or severe scoliosis.

How does scoliosis affect pregnancy and birth?

Mild or moderate scoliosis usually does not affect pregnancy or birth.

If you have severe scoliosis:

- You may have increased back pain, discomfort, or difficulty breathing in late pregnancy.
- You are more likely to need a forceps or cesarean (C-section) delivery. Severe scoliosis can affect the position of your hipbones (pelvis). This makes a vaginal delivery more difficult.

Do I need to meet with an anesthesiologist before the birth?

You should meet with a pain relief doctor (**anesthesiologist**) if you have severe scoliosis, or have had surgery for scoliosis. If you have mild or moderate scoliosis, you do not need to see the anesthesiologist in clinic.

At the Pre-Anesthesia Clinic at BC Women's, an anesthesiologist will:

- · Ask you about your medical history,
- Examine your back,
- Look at scans (x-rays and CT scans) of your back, and
- Discuss your plan for pain relief during labour and birth.

Can I have an epidural for pain relief during labour?

An **epidural** is a common type of anesthesia for labour.

Most people with scoliosis can have an epidural in labour, even after surgery on their spine. If you are considering an epidural, please ask to speak with an anesthesiologist early in your labour.

The anesthesiologist will position you carefully on the bed. They may use an ultrasound to see a picture of your spine.

In people with scoliosis, an epidural may:

- Take longer to insert
- Need more than one attempt
- Take longer than usual to relieve pain
- Not take away all of your pain

Sometimes, it is not safe to give an epidural to a person with scoliosis. If you cannot have an epidural, or need more pain relief, your anesthesiologist can help. They can suggest other forms of strong pain relief.

What anesthesia will I have for a cesarean section?

Spinal anesthesia (sometimes called a **spinal**) is the most common type of anesthesia for cesarean section. The anesthesiologist will position you carefully on the bed. They may use an ultrasound to see a detailed picture of your spine.

Scoliosis or previous back surgery can make it difficult to insert spinal anesthetic. It may take longer than usual. Your anesthesiologist may need to try more than once.

If you cannot have a spinal, you may need a **general anesthetic**. General anesthesia is medicine that puts you to sleep for surgery. You may need a general anesthetic if an epidural or spinal is unsafe or not working well, or in an emergency.

Where can I learn more?

Scan the QR code or visit the webpage for general information about pain relief during labour, epidurals and spinal anesthesia.

If you have questions about scoliosis and your pregnancy, please ask your obstetrician, midwife or family practitioner. They may refer you to the Pre-Anesthesia Clinic at BC Women's. At the clinic, you can meet with an Obstetric Anesthesiologist, and discuss pain care for labour and birth.



http://www.bcwomens.ca/our-services/labour-birth-post-birth-care/labour-birth/pain-relief-in-labour