

Kingston Health
Sciences Centre

Centre des sciences de
la santé de Kingston

What is Spinal Anesthesia?

Information for Patients and Families



Hôpital
Hotel Dieu
Hospital



Hôpital Général de
Kingston General
Hospital

What is spinal anesthesia?

Spinal anesthesia is an injection of local anesthetic, or freezing, into the fluid that surrounds your spinal cord. The freezing will numb the nerves from the waist down, providing excellent pain relief.

How long will it last?

It takes one to four hours for the freezing to wear off. As feeling returns, you may feel some tingling in the skin, and this is normal. As it wears off, you may begin to experience pain from the operation site and you should let your nurse know. Do not try to stand when your legs are numb. You may be unsteady on your feet when you get up for the first time after the spinal wears off. Please ask for help from your nurse for your first time up.

What are the benefits of spinal anesthesia?

1. Excellent pain relief because the nerves surrounding your incision will be numb.
2. Improved pain relief allowing for activities that will promote healing such as deep breathing, coughing, walking, and eating nutritious foods, in turn reducing the risk of complications such as pneumonia or infection.
3. Fewer side effects such as nausea, vomiting, constipation, drowsiness, and confusion.

What if I don't want a spinal?

At the pre-anesthetic visit, your anesthesiologist will discuss your options for post-operative pain control. It is your choice to consent to spinal anesthesia. Other pain relief options include a combination of Tylenol and anti-inflammatory medications, or opioid (narcotic) medications.



Can anyone have a spinal?

No. Spinal anesthesia is not for everyone. You will meet with your anesthesiologist to decide if a spinal is right for you. Be sure to tell your anesthesiologist if:

1. You are taking any blood thinners or have any problems with bleeding or blood clotting
2. You have a history of back problems or diseases affecting your nervous system
3. You have an infection in your back
4. You have an allergy to local anesthetic
5. You have had problems with spinal anesthesia or epidural in the past

How is spinal anesthesia inserted?

First, a nurse will insert an intravenous line in your arm to receive fluids and you will be connected to a monitor to measure your blood pressure, heart rate, and oxygen. You will be asked to sit up or lie on your side and a nurse will help you to bend forward and curve your back as much as possible. Your back will be cleaned with antiseptic solution. The anesthesiologist will then insert a needle into your lower back. Once the needle is in place, the anesthesiologist will inject local anesthetic, or freezing, to numb the nerves from the waist down. The freezing does not work instantly. It will take 5-15 minutes to start feeling a gradual sense of warmth and numbness until eventually you will not be able to move your legs at all.



Will it be painful?

The anesthetist will freeze an area of your back before inserting the needle. The freezing will sting briefly, for about 10 seconds. When the needle is being inserted, you will feel some pressure in your spine, however most people do not find this to be unpleasant, just a bit strange.

Will I be awake during the surgery?

There are different options when having a spinal anesthetic depending on your personal health conditions and the type of surgery you are having. If the spinal anesthesia is working well, you may receive some medication to make you feel relaxed and happy. You may be aware of voices and operating room activity, but you will NOT FEEL ANY PAIN.

Alternatively, the anesthetist may feel that a combination of a spinal and general anesthetic is the best option for you. You will discuss these options at your pre-anesthetic visit.

How does the anesthetist know if the spinal is working?

The anesthetist will ask you to lift your legs off the bed. If you are unable to move your legs, the spinal is working well. They may also test the nerves by rubbing your legs or feet with ice. If you are unable to feel the ice on your skin, the spinal is working well. Your anesthetist will not allow the surgery to begin until they are completely confident the spinal is working.

What are the side effects of spinal anesthesia?

1. **Low blood pressure**
2. **Inability to pass urine:** The nerves in the bladder are affected by the spinal. You will have a catheter to drain urine from the bladder. It is likely that you would require a catheter with or without a spinal anesthetic.
3. **Itchiness:** This is a side effect of the medications used to numb the nerves. Medications can be given to relieve itchiness.
4. **Nausea or vomiting:** Feeling sick is less common with a spinal than with other pain relief medications. Medications can be given before or after surgery to relieve nausea and prevent vomiting.

Are there any potential complications?

1. **Headache:** Your brain and spinal cord are contained in a protective covering that is filled with fluid. When the spinal needle is inserted in your spine, it is possible for the needle to puncture the covering causing fluid to leak out. If too much fluid leaks out, the pressure around your brain can change and a headache can develop. Typical symptoms of spinal headache include;
 - severe pain at the front or back of your head that worsens when sitting or standing and improves when lying flat
 - neck pain
 - sensitivity to bright lights
 - nausea and vomiting
2. **Nerve damage:** Permanent nerve damage is a very rare complication. Statistics show this can occur in 1 out of 50,000 patients receiving spinal anesthesia prior to surgery.
3. **A high block:** Rarely, the spinal anesthetic can spread higher up in your body than what you need for your operation. In this situation, you may experience weakness in your arms, and in rare cases, difficulty breathing. If this happens, the anesthetist will support your breathing until the spinal wears off.



Questions you may like to ask your anesthetist regarding your spinal anesthetic

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together™

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