

PATIENT INFORMATION

Remifentanil PCA – Patient Information Card

What is Remifentanil Patient Controlled Analgesia (PCA)?

Remifentanil is a morphine-like pain killer that can be given in labour. It is set up using a pump called a PCA, which gives a dose of remifentanil directly into a vein when you press a button. This allows you to time the pain relief to your contractions. The PCA pump has a safety timer to prevent you getting too much of the drug. Although remifentanil cannot provide total pain relief, it can significantly reduce pain from contractions.

It is set up by an anaesthetist who will talk you through the process.

How does it work?

You will be connected up to the PCA pump via a drip in your hand or arm. As soon as you start to feel a contraction beginning you will need to press the button to give yourself a dose. The pain relieving effect of remifentanil happens around 30 seconds after pressing the button and will last for a few minutes. It can sometimes take practice to get the timing right with your contractions.

You will be monitored by a midwife while you are connected to the PCA pump and have your oxygen levels measured with a probe on your finger. Initially you will also have regular heart rate and blood pressure readings. You can use the PCA up until the birth of your baby.

Who can have Remifentanil PCA?

Remifentanil can be used from 36 weeks onwards. It is not recommended for women who have any allergy to morphine-like drugs. It cannot be started within four hours of being given pethidine. It is mostly used for women who are unable to have an epidural.

What are the side effects?

As with any morphine-like drugs, remifentanil can have some side effects. Some women may experience itching, nausea, and dizziness. It can also make you feel sleepy. Your body breaks remifentanil down very quickly so these effects are usually short-lived.

Remifentanil can slow down your breathing and sometimes cause your oxygen levels to fall. 1 in 10 women will experience intermittent lower oxygen levels which require oxygen to be given via the nose. Your midwife will monitor this whilst you are using the pump. It is rare that your breathing will slow down so much that you need to stop using the pump.

What is the effect on the baby?

Your baby may be slow to breathe at first if the PCA button has been pressed just before birth, but any effect wears off very quickly. Remifentanil has been shown to be safe in labour and does not affect your ability to breastfeed.

More information about the options for pain relief in labour is available on the labour pains website.



References

Labourpains.com. 2021. FAQs Pain Relief | *Labour Pains*. [online] Available at: <https://www.labourpains.com/UI/Content/Content.aspx?ID=29> [Accessed 23 November 2021].

Labourpains.com. 2021. Pain comparison card | *Labour Pains*. [online] Available at: https://www.labourpains.com/assets/_managed/cms/files/InfoforMothers/Pain%20Relief%20Comparison%20Card/pain%20relief%20comparison%20card%20september%202014.pdf [Accessed 23 November 2021].

Uhcw.nhs.uk. 2021. Department of Anaesthesia. Remifentanil for pain relief in labour. *University Hospitals Coventry and Warwickshire NHS Trust*. [online] Available at: <https://www.uhcw.nhs.uk/download/clientfiles/files/Patient%20Information%20Leaflets/Clinical%20Support%20Services/Anaesthetics/Remifentanil%20for%20pain%20relief%20in%20labour.pdf> [Accessed 23 November 2021].

Nbt.nhs.uk. 2021. *Remifentanyl | North Bristol NHS Trust*. [online] Available at: <https://www.nbt.nhs.uk/maternity-services/pain-management-options/remifentanyl> [Accessed 23 November 2021].

Wilson, M., MacArthur, C., Hewitt, C., Handley, K., Gao, F., Beeson, L. and Daniels, J., 2018. Intravenous remifentanyl patient-controlled analgesia versus intramuscular pethidine for pain relief in labour (RESPITE): an open-label, multicentre, randomised controlled trial. *The Lancet*, [online] 392(10148), pp.662-672. Available at: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31613-1/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31613-1/fulltext) [Accessed 23 November 2021].

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