

Neuraxial labor analgesia: a literature review: a letter to the editor



Analgesia neuraxial para parto: revisão da literatura: carta ao editor

Dear Editor,

I read the article entitled “Neuraxial labor analgesia: a literature review” with great interest.¹ Labor is one of the most memorable events in every woman’s life, but labor pain can make it one of their most unpleasant experiences. For this reason, in recent decades many pregnant women have tended to cesarean section. Fortunately, though, fighting labor pain by new modalities provided by the anesthesia team have opened up new hopes for mothers. However, the complexity of the best methods, such as continuous spinal epidural analgesia,^{1,2} does not allow all mothers to enjoy the same way. On the other hand, as pain *per se* is a subjective matter, the satisfaction of a mother from applied pain reduction method is strongly influenced by factors such as her socioeconomic level.³ In rural population and in low income territories, resource constraints may force anesthesiologists to choose simpler and cheaper modalities to control labor pain. The single shot intrathecal opioid may be the best method to fit this situation. This method may not completely eliminate pain but can significantly reduce the pain level and make it more tolerable. In other words, we can offer a pain-reduced labor instead of a painless one. Half a loaf is better than none for a hungry man! Additionally, some intrathecal additives, such as midazolam, and minimal concertation of local anesthetics, such as bupivacaine, can strengthen it.^{4,5} Obviously, opioid dosage and the timing of the procedure is of particular importance to avoid unwanted events and to get the most benefits.

Conflicts of interest

The authors declare no conflicts of interest.

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5 July 2019

<https://doi.org/10.1016/j.bjane.2019.12.002>

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