

Information for Patients

Your Anaesthetic for Egg Collection or Embryo Transfer

Prior to the covid-19 pandemic egg collection was typically done under a moderate to deep sedation or occasionally a general anaesthetic. This can sometimes mean we do a type of anaesthetic that generates aerosols, which we know can spread viruses. Although the risk of spreading virus is very low presently, during the current pandemic we have been performing anaesthetics that avoid the potential for aerosols. One such technique that offers excellent pain relief is a spinal anaesthetic.

We continue to offer sedation or a general anaesthetic where this is appropriate for certain groups of patients.

What is a spinal anaesthetic

A spinal anaesthetic is the injection of numbing medicine into your lower back, which makes the lower part of your body numb so you don't feel the pain of the operation and can stay awake. Sometimes a bit of light sedation is offered as well if the patient requires it.

Your anaesthetist can help you decide which is the best type of anaesthetic for you on the morning of your egg collection or embryo transfer.

What happens on the day?

You will be connected to a monitor so that we can observe your heart, blood pressure and pulse during your operation. A cannula (small tube) will be inserted into a vein, this is normally on the back of your hand and used to give you drugs if necessary during your operation. You will then usually be asked to sit up, but you may be able to lie on your side if this is more comfortable for you. Your back will be cleaned with a cold solution and then local anaesthetic will be injected into the skin of your back to numb it, this may sting for a few seconds. The spinal anaesthetic will then be injected. You may feel your bottom, legs and abdomen go numb.

Your legs will be heavy and difficult to move for approximately 1 hour, during which time you will need to stay in bed. As sensation returns you may feel some tingling. You should not attempt to get out of bed until full sensation has returned and a member of staff is near your bedside. You must not drive for at least 24 hours after your anaesthetic.

Typically it can take some time to pass water after a spinal anaesthetic. Rarely this can mean you stay a little longer and sometimes stay overnight. Your nurse can advise you on the day if this affects how long you stay after the procedure.

What are the side effects and risks?

Everything a doctor does is a balance between the treatment and minimising the side effects or risks that all treatments have. Your anaesthetist will tell you more about this before your operation and answer any questions you have.

Common side effects or risks (and short-lasting)

- Low blood pressure
- Itching
- Difficulty passing water
- Pain during injection
- Headache

Rare Complications

- Permanent Nerve damage occurs in between 1 in 23,000 and 1 in 54,000 patients and is typically a numb patch or some weakness in movement.
- Paraplegia occurs in about 1 in 250,000 cases (you are more likely to be paralysed in any car accident than from this).

Further Information

If you would like more details about spinal anaesthetics there is a patient leaflet available at:
<https://rcoa.ac.uk/patient-information>