

# Pain-relief drug halves need for epidural, say scientists

Chris Smyth

Hundreds of thousands of pregnant women should be offered a better pain relief drug that halves the need for epidurals, the first trial of its kind has concluded.

Remifentanil is better at controlling pain than existing opioids while helping women avoid the complications that sometimes come with epidurals, the study found. Women taking the drug were also half as likely to need forceps or suction to deliver their babies, said the researchers, who called for the

drug to be a routine option on the NHS.

Epidurals are the most effective form of pain relief but many women are wary of the spinal injections, which lengthen labour and increase the need for instruments, risking long-term damage.

More than a third of the 700,000 women a year who give birth in Britain receive injections of pethidine, an opioid, as an alternative form of pain relief. It does not work well for all women and has side effects such as nausea.

The researchers compared pethidine to remifentanil, a newer synthetic opioid, in a randomised trial of 400 women

in 14 hospitals. They found that 41 per cent given pethidine went on to need an epidural, compared with 19 per cent of those given remifentanil. Women control their doses of remifentanil through an intravenous pump and only 14 per cent of them needed instruments to give birth compared with 26 per cent on pethidine, according to results published in *The Lancet*. Some 86 per cent said that their pain relief was effective with remifentanil compared with 71 per cent on pethidine.

Matthew Wilson of the University of Sheffield, lead author of the paper, said

that the study gave “conclusive evidence” of the advantages of remifentanil and “really raises question marks about pethidine as standard care if we have evidence there is something much more effective out there”. Many hospitals already use remifentanil for women who cannot have epidurals and Dr Wilson said that they should consider making it available more widely. “If this is something that women planning their pain relief during childbirth want to explore, the first thing is to inform them about whether their local unit offers this.” While more women on remifen-

tanil needed extra oxygen during labour, this did not cause longer-term problems. Professor Christine Mac Arthur of the University of Birmingham, a co-author, said: “The results provide strong evidence that remifentanil [via a pump] should be routinely offered as an alternative to pethidine and should be rolled out at hospitals across the UK.”

Pat O’Brien, of the Royal College of Obstetricians and Gynaecologists, said: “[This] does offer evidence which can be used in discussions when making a decision about which pain relief to use.”