



ANZCA
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**The Royal Australian
and New Zealand
College of Obstetricians
and Gynaecologists**
Excellence in Women's Health

Statement

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Epidural anaesthesia

Joint statement by the ANZCA President Dr Vanessa Beavis and RANZCOG President Dr Vijay Roach

Tens of thousands of women in Australia and New Zealand benefit from pain-relieving epidural anaesthesia during childbirth each year.

Epidurals remain the most effective form of pain relief in labour and, in some cases, their use is necessary for the safety of mothers and babies.

We believe it is important to reassure the public that a recent US retrospective database study "*Association Between Epidural Analgesia During Labor and Risk of Autism Spectrum Disorders in Offspring*" does not, in our view, provide credible scientific evidence that epidurals used for pain relief during childbirth cause autism.

The findings of the paper should be interpreted with caution, as stated by the authors.

Epidural anaesthesia continues to be a safe and viable option for many women who do not require general anaesthesia during childbirth. Across Australia and New Zealand, between 25 and 40 per cent of women choose an epidural for pain relief in labour.

As a retrospective study the research paper does not, and cannot, show a causal relationship between epidurals and autism. Association is not causation and we hope this study does not create anxiety or alarm.

The study's authors failed to take into account a range of possible causes of autism in their analysis. Important information is missing from the study, including details of the delivery and any difficulties encountered.

The study only focused on women who had vaginal deliveries and did not include the estimated one third of women whose babies are born by caesarean section.

When an epidural is administered during childbirth the levels of drug exposure are very low and there is no scientific evidence that this affects the development of the baby's brain.

We will continue to review emerging evidence regarding the safety of epidurals. While we welcome ongoing research in anaesthesia, gynaecology and obstetrics there is no need to change current advice or practice regarding the administration of epidural anaesthesia during childbirth.