The epidural space was first described in 1901 by Corning, and in 1921 Fidel used epidural anaesthesia in human beings. The first epidural was performed in the United Kingdom in the 1940s and since then numerous improvements in both equipment and drugs have taken place. Over the past two decades epidurals have become increasingly popular and versatile, with applications in adult surgery, trauma, obstetrics and paediatric practice. Epidural analgesia has been described as the gold standard of pain control, and, as relief of pain should be a fundamental objective of any health service, an epidural ward based provision is an essential addition to the analgesic armamentarium of every hospital.

Establishments such as the National Institute for Health and Clinical Excellence (NICE) provide evidence based guidance for the provision of care that is patient centred, cost effective and will attempt to reduce existing variations in practice. Currently NICE has not issued any such guidance for epidural practice, therefore the best practice guidelines presented within this book are designed to offer direction primarily to registered nurses, midwives and student nurses (but also to other members of the multidisciplinary healthcare team) in order to encourage a consistent and cohesive approach to epidural care.

The best practice guidelines were based on a document produced by the concerted inspiration and hard work of members of the South Wales Pain Nurses’ Forum in collaboration with the Welsh Acute Pain Interest Group (my grateful thanks to all members of these two groups). A consensus development conference approach was used to collate and review epidural analgesia policies, protocols and practices from 11 hospitals in South Wales to identify commonalities and themes of clinical practice. Where literature was available it was critically appraised and in the absence of research evidence expert consensus of the group was reached. Thus best practice was agreed upon and the guideline document produced.

The purpose of this book of best practice guidelines for epidural analgesia in acute pain management is to promote the benefits of epidural analgesia
while helping to minimise the risks. It is hoped that the information provided will be used as a basis for promoting effective interdisciplinary team working, to serve as a measure for quality in postoperative pain management and in doing so will help develop and improve patient care. It is also anticipated that the guidelines will stimulate learning among nursing teams and highlight ideas and priorities for nursing research.

The book can be used as a quick reference guide for clinical practice or as a framework for developing individual local epidural practice guidelines. The information provided is not intended to guide practice in palliative care or in the specialist management of persistent non-malignant pain.