Caesarean section, particularly under spinal anaesthesia, has become routine for many anaesthesiologists. However, adverse events associated with this practice are still regularly highlighted in the anaesthetic literature.

Much of current teaching concentrates on the known avoidable factors that lead to adverse outcomes, such as aortocaval compression, excess dosing and the prediction and management of failed intubation. However, many of the drugs that are utilised in Caesarean section have significant effects beyond those intended. These effects can lead to adverse outcome.

The most prominent of these in the recent literature is the direct vasodilatory effects of excessive bolus doses of oxytocin. This lecture aims to highlight this and other similar problems seen in the drugs utilised at Caesarean section and to give suggestions for the safe utilisation of such agents.

The following points will be highlighted:

**General items**
- Oxytocin and vasodilation
- Breastfeeding, bonding and anaesthesia
- Antibiotics: maternal infection and foetal infection

**Issues unique to spinal/epidural anaesthesia**
- Hyperbaric vs. normobaric local anaesthesia
- Dosing of local anaesthetics
- Intrathecal opiates
- Vasopressor choice and maternal/foetal wellbeing

**Issues unique to general anaesthesia**
- Opiates and the neonate