

The Road Forward - Recovering After a Caesarean Birth

Recovering After Caesarean Birth Information Pack

Brought To You By the Australasian Birth Trauma Association

ThinkNatal™
ANTENATAL EDUCATION & SUPPORT

About ThinkNatal™

THINKNATAL™ is a series of educational resources aimed at providing support and information on a variety of topics that are often excluded or underrepresented in existing antenatal education. This is in collaboration with consumers and a range of clinicians involved in maternity care, such as midwives, obstetricians, pelvic health physiotherapists and mental health clinicians.

Introduction

Whether it was planned or an emergency, a caesarean section (or c-section) is a major physical and emotional event requiring plenty of tender, loving, care afterwards. Women often go into birth not knowing much about what a caesarean involves, or what recovery from a caesarean might feel like. This information pack provides information on what to expect after a caesarean, and advice for a healthy recovery, both physically and psychologically.

After your surgery

After having a caesarean, most women stay in hospital for 3-5 days. Depending on how you feel, you may be in a rush to get home, or you may prefer to stay longer in the care of your doctors and midwives. Our advice is to take advantage of this extra time, and get as much rest as possible before the real hard work begins at home!

MAJOR ABDOMINAL SURGERY



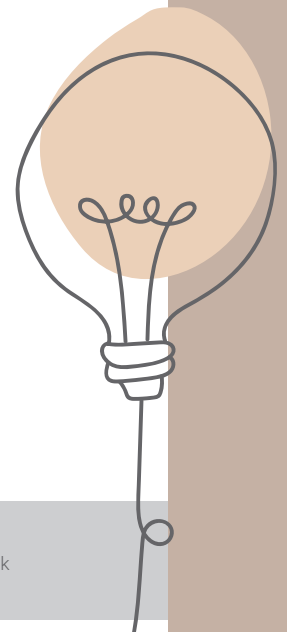
Lifting

When your anaesthetic wears off following your surgery, you will probably need help lifting your baby and sitting up in bed. It may also hurt to laugh, cough and sneeze. You can help this by supporting the wound (over your bandage) with your hands, or by holding a pillow over your tummy.

After surgery, you will be given pain relief medication so you can get back to normal activities as soon as possible. The type of pain medication offered will depend on a few factors, such as the circumstances of your birth, the type of anaesthetic you had (general or spinal/regional) and any other medical conditions you might have.

Pain relief works best if you have it before the pain kicks in – don't wait for your pain to become unbearable, and be sure to call for a midwife if your next dose is due. If the pain relief offered is not enough, or the pain is getting worse, tell your care team so they can make sure there are no complications. If your recovery goes well, you should be off most pain medication after a week to 10 days.

Sometimes, if your caesarean was an emergency, your doctors may have first tried to help your baby out using a vacuum (also known as ventouse) or forceps. If so, you might have a sore area between your vagina and anus (perineum), especially if you've had stitches. If this is uncomfortable, talk to your care provider about which pain medications are most effective for this.



This guide explains some of the typical physical and emotional changes and challenges that can happen following a caesarean birth, as well as tips and advice for a healthy recovery. You can use this information to help guide conversations with your healthcare providers, family and friends, and ask informed questions.

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Going to the toilet

For the first 12 to 24 hours after your surgery, you will have a urinary catheter (a narrow tube running from your bladder, through your urethra, into a collection bag) in place to empty your bladder for you. Once you are able to move, the catheter will be removed – it may be a little uncomfortable when it's taken out, but it shouldn't hurt. Once it's out, the amount of urine you pass may be checked several times to ensure your bladder is back to normal.

Once the anaesthetic has worn off and the catheter has been removed, you will be encouraged to get out of bed and gently walk around. It may feel like you can't (or don't want to!) but it's worth the effort as early movement reduces the likelihood of blood clots forming in your legs (venous thromboembolism). Make sure you have enough pain relief, as guided by your care providers, to mobilise comfortably.

Changes in your body

As with a vaginal birth, you will likely experience some of the following bodily changes following a caesarean:

Your breasts

Your breasts will be larger at first, and while you're breastfeeding regularly. If you don't intend to breastfeed from the start, you don't need to do anything. But on the third or fourth day, your breasts may become tender because they are still producing milk. Wearing a firm, supportive bra may help. Your breasts should get smaller again in a week or so. Speak to your midwife if you're very uncomfortable and please know that it is very common for there to be some difficulties when adjusting to breastfeeding, there is support available.

Your abdomen

Don't be surprised if your belly is still large. Even though you've given birth to your baby (plus the placenta and a lot of fluid), you'll still be quite a lot bigger than you were before pregnancy. This is partly because your muscles have stretched and partly because it takes time for your uterus to return to its normal size.

Breastfeeding can help the uterus contract and get smaller. In fact, you may feel cramps or period-type pain while you are breastfeeding. Placing a heat pack over your lower abdomen can help these symptoms.

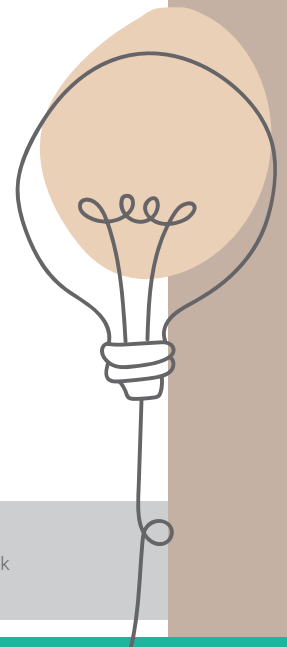
Having difficulty doing poo (known as constipation) is very common after birth, but births that require strong pain relief afterwards, such as caesareans and vaginal births resulting in tears, may increase the likelihood of becoming constipated. In particular, opiate-based medications like oxycodone may cause constipation and other digestive problems. To help get things moving, your care providers may give you a laxative to help soften your stools e.g. Movicol or Lactulose. It also helps to drink plenty of water (up to two litres per day) and eat healthy whole foods such as fruit, vegetables, salads and wholegrains.

if you've had stitches. If this is uncomfortable, talk to your care provider about which pain medications are most effective for this.

LISTEN TO YOUR BODY

Bleeding

You'll need to use maternity pads after your caesarean, because you will have some bleeding from your womb just as you would after a vaginal birth (although the blood loss may be lighter). This bleeding can last for around 2-6 weeks.



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Postpartum cramps (contractions)

What is it? In the postpartum period, it's common to experience contractions – it's how the uterus shrinks back to size. These contractions feel like short, sharp cramps in the abdomen – sort of like menstrual cramps or labor contractions. They should decrease in intensity each day postpartum.

Ask for help



- sensitivity
- itchiness
- numbness

Wound will be SORE

Your scar

The size and location of your scar largely depends on the circumstances of your birth, such as whether or not your caesarean was planned, or done in an emergency.

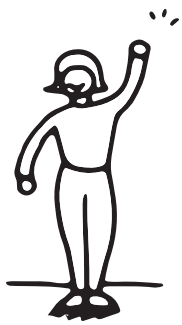
GENTLE MOVEMENT

Most of the time, the scar is along the bikini line, underneath the pubic hair. It will probably look very red and lumpy at first, but as the weeks and months go by it will fade, soften, and turn white. As your scar heals, it may be sensitive and itchy.

Any numbness on or around your scar usually gets better a few months after the operation, although it can carry on for longer. If your scar becomes very sore, red, or inflamed, you may have developed an infection. Tell your midwife or doctor if this happens.

The caesarean wound/cut may feel numb or tender, you may also notice sensations of tightness or pulling on one side as it heals. Once the scar has started healing and if there are no complications (wound separation, infection or swelling), you may want to gently massage the area, this is usually around 10-14 days. The aim of the massage is to reduce adhesions and scar tissue, promote healing and desensitise the incision area.

If you can access a women's health physiotherapist, they can show you how to massage your scar, you will need to use a small amount of oil (olive oil works well), or cream of your choice. Apply a moderate amount of pressure over and around your scar, it should be tolerable enough to breathe comfortably, and feel more comfortable as you continue. Aim for 3 minutes daily once your incision has fully closed and you've had it checked by your GP or obstetrician.



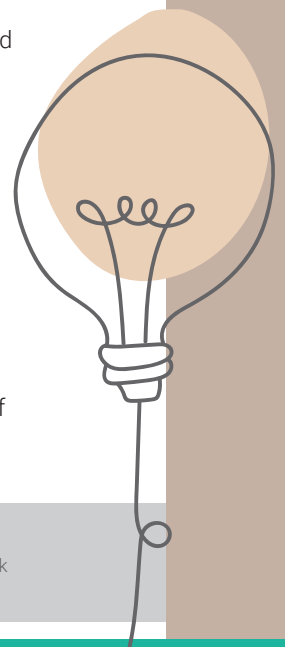
PHYSIOTHERAPIST

We highly recommend all women have a six-week postnatal assessment with a specially trained pelvic physiotherapist, regardless of delivery type. The postnatal assessment will allow your physiotherapist to tailor a recovery plan specific to your needs, and help you return safely to the activities you enjoy.

Things to watch out for

- Redness, discharge, a wound that is hot to the touch, worsening pain, or separation in your wound may be signs that you have an infection.
- Heavy or irregular bleeding.
- Smelly discharge or a fever after the birth may indicate an infection in your vagina.
- Pain low down in your tummy or groin, a high temperature, chills, and confusion may be symptoms of a urinary tract infection or uterine infection.

Contact your midwife or doctor if you feel feverish, or if you have any of the above symptoms.



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If your birth didn't go as planned

Women, birthing people and their partners often talk about feeling 'emotionally numb' after the birth. Sometimes this can affect how they bond with their new baby. Sometimes the real feelings about the birth don't arrive until weeks or months later, when the new parent has had time to think about what happened. Sometimes the feelings come in a rush and can be overwhelming. If this happens to you, you are not alone, and there is help available.

Receiving clear information from your health professionals about the details surrounding the birth can help. Sometimes during the birth process, things might be rushed and you may not understand what is happening or what you are consenting to. You might experience feelings of powerlessness.

If you have a trusted midwife, obstetrician, doctor or maternal child health nurse, talk to them about your birth experience.

It may be helpful to work out who will be in your recovery team after your baby is born. Examples include;

Health Professionals

- Paediatrician
- Doctor
- Midwife
- Pelvic health Physiotherapist
- Maternal child health nurse/clinic
- Mental health support (such as social worker, psychologist, or psychiatrist).

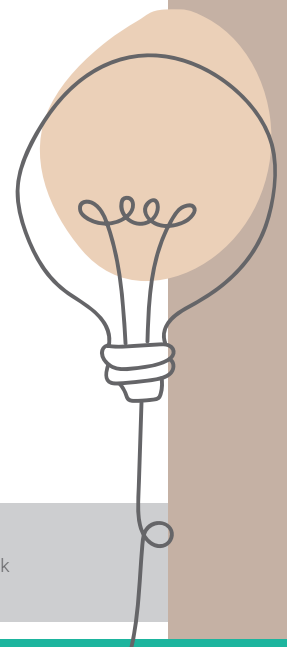
Support Groups

- Parent support group
- Birth Trauma support
- Local play groups
- Breastfeeding support group
- Mental health support group
- Online support groups.

What can partners do?

There are some wonderful ways you can support your partner and help recovery:

- Check in regularly with your partner every day - listen and don't try and fix
- Encourage them to take time out.
- Support their efforts to look after themselves
- Be active in caring for your baby, such as helping with bathtime. The positive effects for your whole family will last the rest of your lives.



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