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CAESAREAN SECTION

1. CARE IN HOSPITAL

Eating and drinking

You can suck a small amount of ice for the first four hours after your caesarean section. You may then commence drinking fluids but take it easy initially as nausea can be a problem.

Eight hours after your caesarean section you can commence eating but again take it easy for the first few hours. You should be eating normally within 24 hours of surgery.

Pain relief

In theatre you will have been given your initial pain relief by your Anaesthetist. Ongoing pain relief is then usually a combination of the following:

- Paracetamol (Panadol):

This should be given strictly every six hours until you leave hospital. Initially it is administered through your intravenous drip and then in tablets.

- Ibuprofen (Nurofen):

You should commence taking Ibuprofen in tablet form the morning after your caesarean section and continue this medication on a regular 8 hourly basis until you leave hospital.

- Narcotics:

These may be administered as:

1. Morphine injections which are given every two to three hours; or
2. Morphine via a continuous or patient controlled infusion; or
3. Oxycodone (Endone) tablets which are given every three to four hours; and
4. Oxycontin is a long-acting tablet which is given every 12 hours for the first two days.

- Tramadol:

This medication is given as an injection or capsule every six hours as a supplement to the other pain relief prescribed above.

Whatever combination or form your pain relief takes, it is unacceptable for you to have anything more than mild discomfort. At no time should you be in significant pain; if you are, you need to ask your midwife for assistance.

Antibiotics

You will have been administered antibiotics during the course of your caesarean section. In some circumstances it is necessary for the antibiotics to continue for the 24 hours after delivery. If this is the case I will advise you.

Prevention of deep venous thrombosis

Depending on your level of risk for developing a deep venous thrombosis you may have been given a prophylactic injection around the time of surgery or more likely it will be given to you six hours after delivery. It is quite common for me to prescribe this for several days after delivery until you are fully and completely mobile. If you are at particularly high risk of a DVT you will need to take six weeks of preventive treatment.

Wound care

Your caesarean section wound will have been closed with a continuous Monocryl suture (a very fine almost invisible suture) which will be taped down at the ends with steristrips. Occasionally, staples are used. If you have a Monocryl suture you will also have additional steristrips placed across the wound. Prior to discharge, the Monocryl suture is cut flush with the skin but it is not removed as it is completely dissolvable. The steristrips should stay in place for as long as you can tolerate them. This is normally two to three weeks at which time you can gently peel them off having soaked them in the shower.

If you have staples these will be removed with a staple remover prior to your discharge. Although it sounds daunting the removal of staples should be a virtually painless procedure.

Your wound has been covered with a transparent dressing which should stay in place until the day of discharge. It is waterproof and you are fine to shower with it in place. For the first day this dressing is covered with a heavier white bandage to reduce bruising. It will be removed the morning after your surgery.

Drain tubes

Drain tubes may be required to remove any excess bruising from under the skin. These will normally be removed 24 to 48 hours after the caesarean section. It is uncomfortable but should not be excessively painful to have drain tubes removed. It is a good idea to have pain relief about 30 minutes before they are removed.

Blood loss

Bleeding for the first 24 to 48 hours after a caesarean section is quite heavy. The midwives will be checking you regularly and will notify me if the bleeding is excessive. The blood loss will then ease a little over the next few days.

Fever

It is not unusual to have a low grade fever (below 38 degrees) in the first 48 hours after a caesarean section. Temperatures above 38 degrees are not normal and will require investigation. They are almost always associated with your milk "coming in" and do not require treatment. Occasionally the fever may be related to mastitis, a urinary tract infection or a wound infection. If any problems arise you will be treated in hospital.

Bowels

Constipation is very common after delivery by any means. Because stronger pain killers are used in association with a caesarean section there is a tendency towards constipation. The most important aspect is to prevent constipation and you can do this by ensuring an adequate fluid intake (at least two to three litres of water a day), ensuring an adequate fibre intake and being mobile as quickly as possible. Two glasses of pear juice daily commencing the day after your caesarean section is the best way to prevent constipation. Pear juice is supplied at Frances Perry House although you may need to write it on the menu as a special request. Ask your friends to bring you fruit rather than flowers and be sure to let me know if you are having trouble using your bowels. Kiwi fruit (sliced paper thin with the skin still on) is the best fruit that you can have to prevent constipation.

Breast feeding

Difficulty with breast feeding will be perhaps the most frustrating part of your stay in hospital. It takes some time to sort this out and I encourage you strongly to take all the advice that the midwives offer. Do not expect to be perfect at breast feeding by the time you are discharged. However, you do need to know how to deal with any problems that may arise and you need to know how to seek help if you are having problems at home.

2. CARE AT HOME

Pain relief

You will be supplied with Voltaren and Tramadol on discharge. You should continue to take these for up to a week after discharge, in conjunction with regular Panadol. The hospital will not supply Panadol so make sure you have some at home.. If you need stronger pain relief than this you need to contact me so I can review you.

Blood loss

Bleeding will continue for 6 to 8 weeks after delivery. It can be quite heavy for a few days after you go home but provided you don't have a temperature and the bleeding is not offensive this is not a problem. If you are concerned about your blood loss or have a fever please phone me.

Lifting

You should not lift anything heavier than your baby for the first 6 weeks after a caesarean section. This includes baskets of clothes or nappies or bags of groceries at the supermarket. You should not vacuum or sweep.

Driving

You will generally be physically ready to drive approximately 10 days after you leave hospital. It is essential that you sit in a car and turn the steering wheel and press the brakes as you would in an emergency to make sure that pain will not restrict you in movements when you are driving. You should also check with your insurance company and ensure that they are happy with you driving. Generally they will indicate that they are happy provided that I am happy; I will indicate to you if you should not drive 10 days after leaving hospital.

Exercise

Gentle to moderate walking is reasonable for the 6 weeks after delivery. When you have had your postoperative check with me I will give you the all clear to resume normal exercise. You should avoid swimming until your bleeding has completely stopped.

Sexual relations

You may resume sexual relations when you feel comfortable doing so. This is generally four to six weeks after a caesarean section although it can be sooner. It is very common to have problems with vaginal dryness when you are breast feeding; this is related to low oestrogen levels. If this is an ongoing problem please do not hesitate to let me know because it can be easily treated. It is generally a good idea to avoid any form of oral contraceptive pill for the first 6 weeks after delivery as it can have an impact on milk supply. Although fertility is low in the first 6 weeks it is not impossible to conceive and I advise the use of condoms.

Fever

A temperature above 38 degrees after discharge from hospital is not normal and needs to be investigated. Possible causes include mastitis, a urinary tract infection or a wound infection. All of these would require investigation and treatment and you should contact either myself or your general practitioner to have this managed.

Further Review

You should ring the rooms as soon as possible to organize a postnatal appointment. This will generally be 6-8 weeks after you have delivered although there are circumstances in which I may need to review you sooner. Prior to your review in the rooms do not hesitate to contact me by the usual means if you have any concerns.