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VAGINAL DELIVERY

Perineal Care

If you have had sutures for a perineal tear or to repair an episiotomy you will notice some swelling for the first few days after delivery. You should keep ice on the area for as much of the first 24 hours as possible.

You will have been administered a Voltaren suppository immediately after delivery which will be effective for up to 12 hours. You should commence oral Voltaren tablets 12 hours after delivery unless they are contraindicated for medical reasons. Voltaren will help keep the swelling to a minimum.

You will also need regular Panadeine or Panadeine Forte for the first few days after delivery. These medications are very effective but are quite constipating so are reduced as quickly as possible providing you are comfortable.

Any sutures that were required will dissolve completely over the next three to four weeks. Occasionally one or two sutures may dissolve more quickly and leave a small gape in the episiotomy. This requires no treatment and the wound will heal perfectly. You can wash the area with soap and warm water but be sure to dry the area thoroughly, using a hair dryer if necessary.

Blood loss

Bleeding for the first 24 to 48 hours after delivery may be 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 but will usually continue for six weeks after delivery.

At home the bleeding can sometimes increase a little 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 telephone me.

Prevention of deep venous thrombosis

If I am concerned that you are at risk of developing a deep venous thrombosis I will prescribe an injection that will be given on a daily basis until your risk has resolved.

Fever

It is not unusual to have a low grade fever (below 38 degrees) around the time your milk "comes in". This does not require treatment. Occasionally a fever may be related to mastitis, urinary tract infection or a wound infection. If this occurs in hospital I will investigate and treat it appropriately; if it occurs after you have returned home you are welcome to call me or to be reviewed by your general practitioner.

Bowels

Constipation is very common after delivery. Strong pain killers will exacerbate the problem. The most important aspect to prevent constipation is 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 delivery 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.

Driving

You will generally be physically ready to drive when you return home.

Exercise

You may resume exercise whenever you feel physically comfortable. The physiotherapy classes that you attended while in hospital will indicate the exercises that are appropriate.

Sexual relations

You may resume sexual relations when you feel comfortable doing so. This is generally three to six weeks after delivery 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 the oral contraceptive pill for the first six weeks after delivery as it can have an impact on milk supply. Although fertility is low in the first six weeks it is not impossible to conceive and I advise the use of condoms.

Review

You should ring the rooms to organize a postnatal review six week after delivery. If you have any concerns or problems before this visit please do not hesitate to contact your general practitioner or to telephone me to discuss these issues.

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