

What to expect during your postnatal stay:

The postnatal stay following a caesarean section at Wellington Hospital is usually **2-3 days** and you may transfer to Kenepuru or Paraparaumu Maternity Units after 24 hours if: you feel well, a bed is available, and the doctors are happy you and baby are well enough to transfer there. Someone will need to drive you and you will need a baby car seat for transporting your baby safely.

The IV (intravenous) drip in your arm will be removed when your medical team is happy you no longer need it. (This is usually in the first 24hrs).

If you feel sick when you start eating, stop and let your midwife know. It is advisable after your caesarean to drink as you would normally and have a light meal or snack.

Your baby will be in the cot next to your bed; you can bring your baby into bed with you for feeding and cuddles, but make sure someone is with you at first as you will have had some medications that can make you sleepy. You must be careful not to fall asleep with baby in the bed with you. Once you are more mobile, usually after 12 hours, you can continue to do more for your baby yourself.

What to expect from your body:

Feeling emotional

After your caesarean section you may feel shocked or upset, especially if the caesarean section was not planned. You may be concerned about your baby, particularly if they are unwell. These are normal emotions to have; it is common to get flashbacks, intense dreams, and to cry without warning.

Rest as much as possible and when you are ready, talk things through with your Lead Maternity Carer (LMC). Feel free to ask any questions and make sure you understand what happened and why. You may find it difficult to remember things in the first few days, so ask your support people to assist, and write things down if this helps. Most commonly these feelings pass and you can enjoy being a mum to your new baby. If they continue after you go home, talk to your LMC again, as there are services that can help.

Pain Control

It is important for your recovery to remain as pain free as possible, so that you can move around easily. If the pain is preventing you from moving let your midwife or nurse know, as there are additional medicines that can be given. These medicines work best if given early rather than waiting until the pain is very severe.

It is usual to continue to take mild pain relief like paracetamol (Panadol) and Ibuprofen for the first few weeks after a caesarean section.

Getting Moving

Moving around is an important part of your recovery, as it reduces the chance of complications like blood clots, and

chest infections. It will also help your body return to normal quicker, including your bowel and bladder function.

When resting in bed move your feet up and down and make complete circles with your feet from the ankle. This will help the blood circulation in your legs.

Take slow deep breaths right down to your tummy and as you let each breath go relax fully; this will expand your lungs and increase oxygen to your body.

You can start doing these exercises on the same day as your caesarean section.

Staff will assist you to get out of bed and start moving around within the first 12 hours after your surgery. This usually involves getting you out of bed and into a chair on the same day as your caesarean. Do not attempt to get out of bed without support initially, until you are confident that you are not going to faint.

Follow these instructions when getting out of bed:

- Brace your lower abdominal muscles. Roll onto your side with knees together, and lower your feet off the bed, pushing up to a sitting position with your hands.
- Don't pull yourself up on the bedrails, or thrust forward.
- Once you are sitting, move to the edge of the chair or bed. Part your feet and lean forwards. Brace your abdominal muscles as you stand up.
- Stand tall, with a natural curve in your spine. Relax your shoulders and gently tuck your tummy in.

Once you feel able, regular short walks around the room or up and down the ward corridor are ideal.

Going to the toilet

Once the catheter (tube) in your bladder has been removed, you should be able to go to the toilet normally. The catheter tube placed in your bladder before your caesarean will be removed early morning after your CS.

Your midwife will measure how much urine you pass the first couple of times. Let your midwife know if you find it difficult to pass urine or you feel constipated.

- Bend forward from your hips to rest your forearms on your knees while sitting on the toilet.
- Relax your tummy muscles and support the wound with your hand if uncomfortable.

Caesarean section wound

Your caesarean section wound is usually on your lower tummy, and is likely to feel very tender. Support your wound with your hand if you want to laugh or cough.

The doctors use different types of stitches. Normally these are dissolvable.

A waterproof dressing will be covering your wound and will remain on for up to 7 days. Let the staff know if you notice

any staining or bleeding on your dressing. If it becomes soggy after showering it will need to be removed or replaced.

Please wear loose comfortable clothing and cotton underwear that has a high elastic band, so the top of your underwear will sit above your wound.

Some women may have a special PICO dressing; this dressing has a small pump attached that provides a light suction on the wound removing any ooze and helping to keep the wound dry. The PICO dressing stays on for 7 days and then can be taken off and thrown away (including the pump pack).

After the dressing is removed

You should shower daily with soap and let the water run over the wound to keep it clean, pat the wound dry with a **clean** towel. A clean small cloth like a face cloth is good. The scar generally heals well to a pale white line or raised pink line (it depends how your skin normally heals).

How do you know if you have a wound infection?

With any surgery there is a risk of wound infection. If you notice any of the following you may have a wound infection:

- An unpleasant smelling odour from the wound
- Discharge or drainage from the wound (a little discharge at the beginning is normal)
- Feeling feverish or a temperature above 38°C
- If the incision progressively seems puffy, red, and more painful to touch
- If your lower abdomen seems harder or more firm
- If you develop flu-like symptoms



Please alert staff or your LMC if you have any signs of a wound infection.

Vaginal bleeding (lochia)

It is usual to have light bleeding, this changes from red to pink to brownish loss, for up to 6-weeks after the caesarean section. Only use pads not tampons during this time. As your uterus goes back to its normal size, the bleeding slows and finally stops. If you have been up and very active, the bleeding may become a little heavier. This usually slows again when you rest.



If the lochia has a bad smell, is very heavy, becomes red again after being light, you pass clots, or you have a temperature above 38°C. Please alert staff or your LMC.

What to expect at home:

Recovery

It takes at least 6 weeks to recover from a caesarean section. It is important that you get rest when your baby is sleeping to give your body time to heal. This can be difficult with a new baby. Ask for help from whanau and friends and help yourself by making time every day for a sleep. If you feel tired or sore you need to rest.

Once you are eating normally, make sure you concentrate on eating healthy foods that are high in iron to treat anaemia, and protein that will help your wound repair. If your iron stores are low you may need iron tablets. Your LMC will prescribe these for you.

Lifting

You should not lift anything heavier than the weight of your baby in the first 6 weeks. Start with light housework such as

cooking and dishes, and let people help you with anything heavy like hanging washing.

Return to exercise (See the Postnatal Advice and Exercises patient information sheet)

This information sheet will explain returning to exercise and pelvic floor exercises. Pelvic floor exercises are especially important in the first few months for all women after any birth. A physiotherapist will visit you in hospital and talk with you about these exercises after your surgery. Take the time to watch the education channel on the hospital television or the DVD if you are at Kenepuru or Paraparaumu Maternity unit as it has lots of useful information.

Driving

A caesarean section injures your abdominal muscles and leaves them weak, making it difficult to stop the car in an emergency. As a guide, before you start driving, you must be able to sit and turn your body to look over your shoulder without pain and brake suddenly in order to drive safely. You are advised to avoid driving for the first 6 weeks following surgery. **Before driving, check with your insurance company that your policy will cover you.**

Future pregnancies

Although you have had a caesarean section this time, it does not mean you will have to have a caesarean section for future births. Speak to your LMC or the specialist who performed the surgery for advice on whether a vaginal birth after caesarean (VBAC) will be an option for you next time. If you would like a VBAC in your next pregnancy it is recommended you wait 12 months before becoming pregnant again to allow the appropriate healing of your uterine scar.



When to alert your LMC or Doctor:

If you have any of the following symptoms contact your LMC or Doctor:

- Temperature over 38°C
- Increased pain in your tummy or on your wound, such as:
 - tenderness to touch
 - burning sensation
 - redness
 - discharge or ooze from your wound
 - unpleasant odour from the wound
 - abdomen feels harder or more firm
- Smelly vaginal discharge
- Heavy bleeding that soaks a pad within an hour, or you are passing large clots
- Swollen, red, painful area in the leg
- Burning sensation or pain when passing urine
- Unable to pass urine or you have constipation

If you are at home and require further information please call your LMC or Healthline on: 0800 611 116