

Patient information

Abdominal gynaecology surgery post-operative information

This leaflet gives you information about your recovery when you go home after abdominal gynaecology surgery. Everyone is different and our bodies all react and recover in different ways. There are a few things that you should and should not do once you go home. The important thing is to strike a balance, try not to be in too much of a hurry, but do try steadily to increase the amount that you do. Listen to your body and do only as much as feels comfortable. If you have a problem within two weeks of your operation, please call the ward (numbers are at the end of this leaflet) and speak to one of the staff nurses. Otherwise please contact your GP for advice.

Compression stockings

Whilst in hospital you might be asked to wear compression stockings, we recommend you continue to wear these after your surgery as much as possible, day and night, until you are able to move around freely. Compression stockings are used after surgery to prevent blood clots developing in the leg, which is known as deep vein thrombosis (DVT).

Movement

- **Walking:** Walking is encouraged from the day following your operation. You should aim to gradually increase your level of physical activity after you go home. Start with a short walk, for about 10 minutes, two or three times a day and increase the distance as you feel able. By about six weeks you should be able to walk for half an hour or more if you could do so before your operation. Always try to walk as upright as you can to avoid backache. You may find climbing stairs tiring or uncomfortable at first. Moving around also reduces your risk of constipation, chest infection and DVT.

- **Sitting:** Try to sit in a chair which is high enough to rise from easily without putting strain on your tummy muscles. Try to sit with your lower back well-supported, maybe with a small cushion or a rolled-up towel at waist level.
- **Activities:** Household chores can involve a lot of bending and stretching and you may find this uncomfortable. Try to get some help with household chores, at least for the first week or two after you go home. You should avoid standing for long periods and movements that involve stretching, pushing or pulling. You should avoid lifting heavy weights at first (including vacuum cleaners, heavy shopping bags and children) and not lift anything heavier than three to four kilos, eg a full kettle. If you need to hold children, try to let them climb onto your lap while you are already sitting rather than lifting them up. Heavy physical activities such as the gym should not usually be undertaken for several months. Swimming should also be avoided until the wound is healed and dry. Once you are fully recovered you can normally undertake most activities. Generally, our advice is to avoid heavy lifting and straining but to do what feels comfortable and not force the pace.

Pain

Following surgery, you will often experience pain or discomfort of one sort or another which can last for some time after your operation. While you are in hospital please speak with the nursing staff if you would like pain relief for discharge to help relieve any discomfort you are experiencing.

Wound care

- **Dressings:** Your dressing will usually be removed prior to your discharge. You may have steri-strips over the wound, please allow them to fall off when they are ready. If the ends of the strips lift you can snip them off with some clean scissors. You may have had stitches or clips to close the wound, your nurse will advise if these are absorbable or if you will need to see a nurse in community to remove them.
- **Cleansing:** It is quite safe to get your wound wet (unless you have been specifically advised not to do so). A shower is best, as we do not want you soaking the wound, unless advised to do so. Once you have showered, pat the wound dry with a clean towel to make sure it is fully dry.
- **Healing:** Your wounds will go through several stages of healing. To start with you may feel tingling, itching or numbness. It may feel lumpy as new tissue forms and there may be some pulling as it heals. It is not unusual for wounds to be slightly red and uncomfortable during the first one or two weeks. However, if the wound is oozy, hot to touch, swollen, very red and/or you feel unwell with a

high temperature, these are signs of infection. Please either call the ward or see your practice nurse at your GP surgery if you have any concerns with your wounds.

Vaginal bleeding

It is normal to experience some vaginal bleeding following your operation. This can last for 7 - 10 days. It is not usually something to be concerned about, and the length of time depends on the surgery you have had.

Nutrition

A balanced, varied diet is recommended. You may find that some foods upset you and cause loose bowel motions. If that is the case you should avoid those foods for the first few weeks following your surgery and reintroduce these foods slowly into your diet. Some general advice is to sip fluids regularly, avoid lots of caffeine, do not skip meals but eat small and often if you are struggling with larger meals. It is important to obtain an adequate amount of protein and calories to help your body heal. If you are losing weight without trying to, or are struggling to eat enough, you may benefit from a consultation with the dietitian. Ask your GP to refer you.

Bowels

Your bowel habit may change after surgery, so please make sure that initially you eat small, frequent meals, three or more times a day. If you do not open your bowels for more than two days, then taking a laxative is advised.

Try to prevent constipation by consuming a balanced diet, include foods such as fruit, vegetables and whole grains. You should drink eight cups or glasses of fluid daily (1.5 - 2 litres daily). Some urgency (needing to go quickly to the toilet) and frequency (having to go to the toilet more often than usual) to open your bowels is common initially after surgery. It is especially important not to strain while opening your bowels after gynaecology surgery, so please take laxatives if needed or you could try adding linseed or flaxseed to your breakfast.

Pelvic floor exercises

It is important that you continue to do your pelvic floor exercises. Women who have had a hysterectomy are at increased chance of developing a vaginal prolapse, so it is important to continue the pelvic floor exercises and lifestyle changes to reduce this. Pelvic floor exercises can help to prevent problems with urinary incontinence (leakage of urine) but also help with healing as when you squeeze the pelvic floor muscle correctly, it brings a good supply of blood to the areas which can aid healing.

If you would like to see a pelvic health physiotherapist to run through pelvic floor exercises with you, then you can self-refer at:

<https://ahpsuffolk.co.uk/Home/SelfReferral/SelfReferralHelp.aspx>

Sexual intercourse

You can start to have sex six weeks after your operation providing you no longer have pain, vaginal bleeding or an unusual vaginal discharge. Many women are concerned that they will no longer be able to have an orgasm after gynaecology surgery. If you were able to have orgasms before your surgery, there is no physical reason why you should not be able to have orgasms again. When you start to have sexual intercourse, use extra vaginal lubrication, such as YES or Sylk vaginal lubrication (you can buy this at any chemist or supermarket or on line). Start off gently. If you find penetrative sex uncomfortable, wait a week and then try again. It is not unusual to feel some discomfort and this should get better over time. If it does not, please contact your surgeon or GP.

Driving

The Drivers' Medical Unit at the Driving and Vehicle Licensing Agency (DVLA) advise you should only drive again when you are free of pain and able to perform an emergency stop comfortably. You should check with your insurance company to make sure you are covered to start driving again.

Returning to work

When you return to work is dependent on the type of surgery you have had and your occupation. The nurse looking after you will be able to arrange a sick certificate to be signed by the doctor. Should you feel you need longer to recover once at home, you can see your GP for a sick certificate review.

Emotional changes

In the days after your operation it is quite normal to feel a little 'blue' and perhaps weepy. This can be caused by the hormonal changes in your body, the anaesthetic you were given and/or your feelings about the operation in general. How long these feelings will last varies from woman to woman. Please do not hesitate to talk to the staff about how you are feeling.

When to contact your doctor

It is fairly unusual to have problems once you are back at home.

Please attend your nearest emergency department (A&E) if you experience any of these issues:

- a sudden feeling of shortness of breath and/or chest pain
- if you have a temperature of 38°C or above (100.4 fahrenheit)
- severe pain or increasing pain
- nausea and vomiting
- increased bleeding from your vagina (bright red blood or clots)
- if you are unable to pass urine
- pain, swelling or redness in your calf

Please consult your GP if you experience any of the following, or attend the emergency department (A&E) if the symptoms are severe:

- constipation which lasts longer than three or four days and does not get better after taking a laxative
- wound pain, or swelling / redness of your wound area
- discharge (pus) from your wound or your wound opening
- offensive smelling, itchy, yellow/green discharge from your vagina
- burning pain or discomfort when passing urine.

For further information

Please contact the Gynaecology Ward.

To speak to a member of the nursing team please call: 01284 713235 or 01284 713236

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (formerly DisabledGo)

<https://www.accessable.co.uk>



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