

## Patient information

# Physiotherapy advice following abdominal surgery

### Aim of leaflet

The aim of this leaflet is to provide you with information and advice that will help to optimise your recovery. It is intended for patients who have had an abdominal surgery.

### Effects of surgery

Following the operation, you may have a number of attachments such as a catheter, IV, drains and oxygen. These can make it difficult to mobilise.

It is important that you have adequate pain control after your surgery as this will enable your rehabilitation. You will be given regular painkillers during your stay. It is reasonable to expect a certain degree of pain as you had a major surgery. However, please inform the doctors or nurses if your pain is not well controlled.

Following your abdominal surgery, due to immobility and pain you may be tempted to take more shallow breaths which will increase your risk of developing a chest infection. The physiotherapist can therefore teach you breathing exercises to help clear any phlegm off your chest.

The role of the physiotherapist is to assist you in regaining your mobility and facilitating a safe discharge home.

### Breathing exercises

**Position:** Sitting as upright as possible in bed or in a chair.

**Technique:**

- 1) Relax your shoulders and upper chest
- 2) Take a slow deep breath in through your nose if possible

- 3) Hold the breath for 3 seconds
- 4) Breath out slowly through your mouth

**Repetition:** Take five deep breaths as described every hour.

## **Supported cough**

You may find it more comfortable to use a rolled up a towel or a pillow as a support over the wound to cough.

## **Circulation exercises**

Circulation exercises are important to help relieve any swelling, prevent blood clots and increase your circulation.

- Move your feet up and down briskly 10-20 times every 30 minutes.
- Move your ankles in circles
- Squeeze your buttocks together

## **Bed mobility and sitting out of bed**

**When:** It is important to sit out of bed as soon as possible following your operation.

**Why:** The upright position is the best position for your lungs and it will help you improve your circulation and general function.

**Who:** The ward physiotherapists or the nursing staff can help you with this.

**How to get out of bed:** Bend your knees up, roll onto your side. Bring your legs over the edge of the bed and lower your feet to the floor using your elbow to push yourself up into a sitting position.

**Sitting out of bed:** It is important that you sit out for as long as you can tolerate each day following your surgery. Try to increase the time spent out each day.

## **Walking:**

- Promotes independence
- Prevents chest infections
- Reduces risk of blood clots
- Increases your strength, fitness and endurance

**How much:** Try to gradually increase the amount of walking you do each day. Regular short walks are recommended. For example, walk around your bed space, to the toilet and to look out of the window. You may require help initially from staff, depending on the number of attachments you have and your previous level of mobility.

## **Abdominal exercises**

**Start:** Day 2 after your surgery.

**Why:** Help strengthen your deep abdominal muscles, enhance blood flow to the area and promote healing.

Here are 3 exercises to do twice daily for approximately 3 months. Increase repetitions as able:

**Position:** Lie on your bed with your head on a pillow, knees bent and feet flat on the bed.

- 1) **Static abdominals:** Place your hands on your lower tummy. Breathe in through your nose and as you breathe out, gently pull your belly button down towards your spine. Aim to hold this for 5 seconds. Repeat 5 times.
- 2) **Pelvic tilting:** Pull in your tummy muscles. Then push the lower part of your spine down into the bed and curl your bottom up. Hold for 3 seconds and then release gently. Repeat 5 times.
- 3) **Knee rolling:** Keeping your knees together, gently move your knees down towards each side as far as is comfortable. Repeat 5 times each side.

## **Stairs**

The physiotherapist will do a stair assessment with you prior to discharge if this is required.

## **Discharge**

The following is a simple guide. Be sensible and don't over exert yourself. Have regular rests, pace yourself and avoid staying in one position for too long.

### **Week 1:**

- Regular short walks

- Abdominal exercises
- Rest during the day
- Avoid heavy lifting

### **Week 2-5:**

- Continue with exercises and walking: Increase distance as able and as feels comfortable
- Regular rest, ensure you pace activity
- Light housework – light meals and cleaning
- Still no heavy lifting

### **Week 6:**

- Driving (practice emergency stop)
- Cycling on the flat
- Low impact aerobics

### **Week 12:**

- Normal activities
- Preferred exercise should be resumed gradually especially high intensity/competitive sports
- Tennis, running, cycling up hills

## **Physiotherapy contact details**

If you have any questions or need further advice, please speak to the physiotherapist on the ward, or contact the physiotherapy department on 01284 713300.

*If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) <https://www.accessable.co.uk>*

