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ACTIVITIES FOLLOWING PELVIC RECONSTRUCTIVE SURGERY

You will either be preparing for or have just gone through incontinence/prolapse surgery and/or a hysterectomy. The following will provide a **general overview** of what to expect:

Nursing staff will keep a careful eye on your progress and in most situations I am likely to see you each day until your discharge home. Depending on what surgery you have had you will be able to go home any time between day one and day five (most women will go home on the second or third day after surgery).

Once you go home

At the time of your discharge from hospital you will have some painkillers to go home with. You should use these to remain comfortable and not wait until your pain, if any, rises. You should use laxatives as required to prevent constipation and straining on the toilet. Protecting your pelvic floor is essential. It may have been damage to the pelvic floor that caused the symptoms that resulted in you having surgery so it is in your interests to do all that you can to allow this to heal in the short term and also protect it in the future. Arrangements may have been made for you to see the physiotherapist during your stay in hospital and as follow-up afterwards.

Protecting your pelvic floor

Position for sitting on the toilet:

Rest elbows on knees and raise feet either by raising heels or putting feet on a small raise. As you lean forwards from the hips the back remains flat. Relax your pelvic floor. Remain in this position until bladder or bowels are completely empty. ***Don't be in a hurry***. Never let yourself strain since this could damage the surgery.

Constipation can usually be avoided by:

- Drinking 1.5 - 2 litres of water each day.
- Eating plenty of fresh fruit, vegetables and cereals.
- Moderate exercise – eg walking.
- Correct positioning on the toilet (as described above).
- Using laxatives as required.

Recovering after going home:

Do no lifting of weights greater than 7kg for the first 2 weeks and then no more than 12kg for up to 2 months.

- Very light ironing, cooking and shopping can commence after 1-2 weeks.
- No lifting baskets of washing or hanging out washing on a line until 6 weeks.
- Do not lift children but sit down and let them climb onto your lap for up to 8 weeks.
- When coughing/sneezing/laughing always tighten your pelvic floor to protect your surgery.

- Do not do anything that causes pain or pressure on your pelvic floor or lower back.
- Avoid straining on the toilet.
- Avoid constipation.
- Drink plenty of water.
- Go for a walk each day, starting around the house and garden. Increasing to longer distances after Week 2.

The first 2 weeks after your operation;

- Get plenty of rest.
- Start gentle walking around the house and garden.
- Keep any housework light.
- Gradually increase your pelvic floor and abdominal exercises (*be guided by your physiotherapist).
- Return to driving as discussed with Dr Onuma. When you first begin to drive it may be sensible to take a short trip with a friend or relative in the car with you.

2-4 Weeks:

- Don't lift anything heavier than 12kg.
- Gradually increase exercise, general activity, regular walking.
- Remember to rest as required if your are tired.

Note:

- No gardening (that involves use of abdominal muscles for 10-12 weeks after surgery).
- Timing of return to gym work really depends on what you do in the gym; discuss with Dr Onuma or your physiotherapist.
- You can recommence penetrative sexual intercourse 6 weeks after your surgery; this will be usually after your 6 week postoperative check-up.

Common sense should prevail! If it feels as if you should not be doing it, then you probably shouldn't! Heavy lifting or heavy gardening may need to be avoided on a permanent basis and it may be worthwhile discussing this with Dr Onuma at your 6 week postoperative check-up.

With surgery there can be some light bleeding that persists for 5-7 days. Occasionally some women will experience a sudden blood loss per vagina about 10-14 days after surgery. This usually settles within 48-72 hours but if you are concerned then please contact Dr Onuma. If you develop a vaginal loss which you consider to have an offensive smell then you will almost certainly need to have some antibiotic treatment and you should phone Dr Onuma's rooms to schedule a review within a few days of noticing this symptom.