

Major Post Operation Information on Discharge

This information is for you, if you are recovering from gynaecology surgery. You may find this information useful for your recovery and you may want to share it with your family to support your recovery.

Pain and Discomfort

You can expect some pain and discomfort in the first few weeks after surgery. When leaving hospital, if you need them, you can be provided with painkillers for the pain. We do not routinely dispense paracetamol and ibuprofen as these can be bought over the counter. Painkillers can make you feel sleepy, slightly nauseous and constipated; (refer to 'Keep your bowels working' and leaflet 'High fibre diet to prevent constipation'). Taking painkillers as prescribed will enable you to get out of bed sooner, stand up straight and move around - all of which will speed up your recovery and help to prevent the formation of blood clots in your legs or lungs.

Trapped Wind

Your bowels may temporarily slow down causing air or 'wind' to be trapped. This can be extremely uncomfortable until it is passed. Getting out of bed and walking around will help. Peppermint tea and possibly an over the counter medicine containing Simethicone and/or peppermint may ease your discomfort, once your bowels start to move the trapped wind will ease. Ask your pharmacist for advice if unsure which products contain this medicine.

Wound Care

Staples and certain types of skin sutures are usually removed within 5 to 10 days either by the Practice Nurse or the District Nurse. Please advise the Ward if you need them to help you arrange this. The Ward Nurses can usually arrange the District Nurse, however, out of area referrals can be a problem.

Sutures under the skin or inside the vagina do not need to be removed.

If you go home with a dressing on this can be removed 48 hours after surgery. Tape strips can start to be removed approximately one week after surgery. This needs to be done gently and left alone if still firmly attached as just pulling away may open the wound edges. Soaking in warm water may make them easier to remove and prevent damage to the wound edges below.

Abdominal incisions should be kept clean and dry. It is not necessary to put soap on the incision, plain tap water is adequate and avoid scrubbing the area. Unless directed by your surgeon, do not apply creams, ointments, or other substances to the wound. If the incision appears red, hot to touch, leaking fluid/pus or begins to open, you should call your GP or the ward.



Keep Your Bowels Working

Your bowels may take time to return to normal after your surgery. **Getting up and about is very important in getting your bowels back to normal.** Contact the ward if you are not passing any wind. Your motions should be soft and easy to pass. Do not leave longer than 3 days after your surgery without having your bowels opened. Initially you may need to take a laxative to avoid straining and constipation, until your bowel function is back to normal for you. Try to eat extra fruit and fibre to reduce the chances of becoming constipated. Drink 1.5-2 litres / 8-9 glasses of fluid per day. Ask to see leaflet 'High Fibre Diet to Prevent Constipation'.

Vaginal Bleeding

You could experience vaginal bleeding for 1-2 weeks after your operation; this is like a light period and is red or brown in colour. Vaginal surgery will have internal sutures that are dissolvable. Some women have little or no bleeding initially and have a sudden gush of old blood or fluid about 10 days later. This usually stops quickly and is often due to internal sutures dissolving away. You should use sanitary towels rather than tampons, using tampons could increase the risk of infection and other complications.

Tiredness and Feeling Emotional

You may feel much more tired than usual after your surgery as your body is using a lot of energy to heal itself. You may have lost some blood during surgery and this also can cause tiredness and you may need to take a nap for the first few days. Surgery can also be emotionally stressful and many women feel tearful and emotional at first. When you are tired these feeling can seem worse so rest frequently and do not feel tempted to go out or do too much. For many this is often the last system to improve.

A Daily Routine

Establish a daily routine, for example, try to get up at your usual (non-working) time, have a wash and get dressed, move about and so on. Sleeping in and staying in bed too long can make you feel depressed and increase the risk of thrombosis. Try to complete your routine and rest later. Generally, in the first two weeks after surgery try to only look after yourself and then later start to include household jobs. By six weeks you may feel back to normal and and be able to do most activities.

When to seek medical help after your surgery?

You should seek medical advice from your GP, the Hospital, particularly the Gynaecology Ward or NHS Direct if you experience any of the following problems.

Burning and stinging sensation when you pass urine or passing urine frequently: this may be a urine infection, which will need to be treated with antibiotics. You may also need to increase your fluid intake.

Heavy or offensive vaginal bleeding or heavy bleeding which starts again: if you are also feeling unwell and have a temperature (fever), this may be because of an infection or a collection of blood behind your internal or external wound. Treatment is usually with a course of antibiotics. If you have had a hysterectomy the infection or blood collection can be at the top of your vagina, called a vault haematoma. Again treatment is usually with a course of antibiotics. Occasionally you may need to be admitted to hospital to investigate the cause of bleeding and for the antibiotics to be administered intravenously (into a vein). Rarely the haematoma may need to be drained, if so this will be done in theatre.

Red and painful skin around your scar (abdominal surgery): this may be caused by a wound infection this needs assessing by a medical professional. Treatment may be a course of antibiotics.

Increased abdominal swelling: you may also have a temperature (fever), have lost your appetite and are vomiting, this may be because of a problem with your bowel or bladder, in which case you will be assessed and may need to be admitted to hospital. Tell your Doctor if you cannot pass wind or bowel motion.

A painful, red, swollen, hot leg or difficulty bearing weight on your legs: this may be caused by a deep vein thrombosis (DVT) and needs medical assessment straight away. If you have shortness of breath, chest pain or cough up blood, it could be a sign that a blood clot has travelled to the lungs (pulmonary embolus). If you have these symptoms, you should seek medical help immediately (A&E not your GP).

From all the team we wish you a smooth recovery

If you have any comments about this leaflet or the service you have received you can contact :

Gynaecology Nursing Team Ward 1D Calderdale Royal Hospital Telephone No: 01422 224415 / 224416

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"

