

Your important take home information

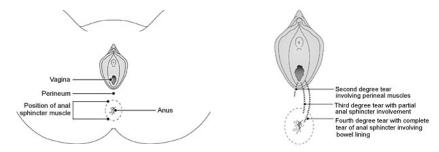
Physiotherapy after vaginal delivery

What is the perineum and pelvic floor?

The pelvic floor is a sling of muscles that help to support your pelvic organs and assist with bladder and bowel control. The perineum is the area of skin between the vagina and anus (see diagram below).

Tears related to vaginal deliveries

A first degree tear involves the skin of the perineum and/or vagina. A second degree tear and an episiotomy involve the skin of the perineum and/or vagina and the pelvic floor muscles. Swelling is common after such vaginal deliveries. Weak pelvic floor muscles can lead to difficulty with the control of wind, urinary and/or faecal incontinence.



Source RWH website

What you can do to assist your recovery

1. Reduce pain, swelling and inflammation by:

- **Rest**: Lie down on your back, side or stomach for two hours during the day for the first two weeks and one hour during the day from two to eight weeks.
- **Ice**: apply an ice pack, wrapped in gauze or face towel, to the perineum for 20 minutes every two to four hours for the first 72 hours after birth. Continue if swelling persists. Do not put ice directly against skin.
- Compression: wear firm supportive underwear or compression tights for the first 6 weeks
- Take **pain relief** medication regularly as prescribed by your doctor.

2. Commence your pelvic floor exercise program

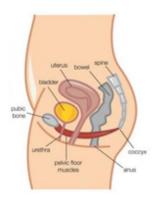
- Start pelvic floor muscle exercises 48 hours after birth in a comfortable horizontal position.
- Squeeze and tighten around your back passage and vagina, lifting and drawing forwards and upwards. Keep breathing normally and ensure your legs and buttocks are relaxed.
- Try to hold for three seconds, rest for 6 seconds and repeat three times.
- This is one set. Repeat this set four times a day.



Progress these exercises by increasing the length of the hold and the number of repetitions as you are able. You should have a distinct feeling of 'letting go' of the muscle before you progress.

3. Avoid constipation and straining

- **Drink** at least two litres of fluid daily (water, juice, milk). Minimise caffeine intake to one to two caffeinated drinks per day.
- Eat a **high fibre diet** (fruit, vegetables, wholemeal grains and cereals). Try to include fibre with each meal.
- Avoid straining during your bowel motion. Adopt a good position on the toilet (see diagram)
 - Lean forward with a straight back
 - Rest your arms on your thighs
 - You can use a footstool so that your knees are higher than your hips.
 - To empty, relax your abdominals and bulge your tummy out. It can help to support your perineum with your hand.





4. Avoid straining with heavy lifting

 Try to minimise lifting anything that requires strain for the first 6 weeks after delivery. Heavy lifting can place further pressure on your perineum and pelvic floor whilst it is recovering.

Sometimes women need Physiotherapy care for ongoing problems after delivery.

Contact the Physiotherapy Department within the first three months after delivery if you experience:

- Bladder or bowel problems
 - Passing urine frequently or urgently
 - Incontinence (leaking) of urine
 - Urgency to empty bowel
 - o Incontinence of wind or bowel motion
- Vaginal "heaviness" or prolapse
- Pain during sexual intercourse

Further information

If you have any questions regarding this information, please contact:

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