



Your important health information

Physiotherapy following vaginal and abdominal surgery

After your operation

The most effective way to prevent complications and help your recovery is to get moving as soon as possible.

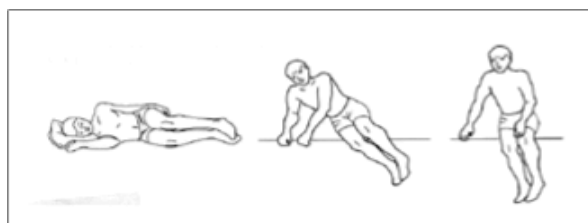
On the day after your surgery, you should aim to sit out of bed a couple of times and walk a short distance. Each day you should aim to walk further and sit out of bed for a longer period.

Wound pain can make it hard to move, so make sure you ask your nurse how your pain can be best managed to allow you to get moving. When coughing, support your wound (vaginal or abdominal) with your hand to reduce discomfort.

Getting in and out of bed

- Roll onto your side
- Move your legs off the edge of the bed
- Push your body up with your hands

Repeat the process in reverse to lie down.



Your bladder and bowel

Following surgery you may have difficulty passing urine, or experience constipation. The following strategies may help to improve your symptoms:

- **Adopt good bladder and bowel habits and avoid constipation**

- Drink 6 to 8 glasses of fluid (water is best) throughout the day.
- Ensure you go to the toilet at least every three hours.
- Eat a high fibre diet (Fruit, vegetables, wholegrains and cereals).

- **Adopt a good position on the toilet (see picture)**

- Lean forward with a flat back.
- Rest your arms on your thighs.
- Place a footstool under your feet so that your knees are higher than your hips.
- To empty, relax your stomach muscles (abdominals) and bulge your tummy out.
- Don't hold your breath or strain, or hover on the toilet.



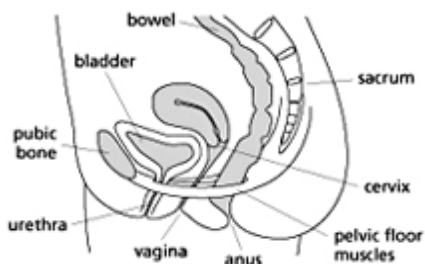
- **Ensure that you empty your bladder fully**

- Take your time to empty your bladder – ensure that you do not rush.
- If you feel that your bladder is not emptied properly, try rocking your pelvis back and forth on the toilet, or stand up and sit back down, then try again.
- If you are unable to empty your bladder properly please make sure you inform your nurse.

General advice – at home

- No heavy lifting for 6 weeks after your operation. This includes shopping, vacuuming, sweeping, scrubbing floors, lifting children and gym exercises.
- Always lift correctly. Bend your knees and keep your back straight. Keep loads close to you.
- Rest (lying down) for a least one hour a day for at least four to six weeks. This reduces the strain through the pelvic floor and operation site.
- Walk each day. Start with an easy five-minute walk and build up to a brisk 30-minute walk by four to six weeks.
- Check with your doctor regarding return to driving and sexual intercourse.

The pelvic floor muscles



The pelvic floor muscles form a sling between the pubic bone and the tail bone. These muscles help to support the pelvic organs and assist with bladder and bowel control.

If you have a hysterectomy or vaginal repair surgery you are at risk of developing prolapse when the pelvic floor muscles are weak.

Pelvic floor muscle exercises

- **Before surgery:** We recommend commencing these exercises before surgery. This will help with your recovery and prevent issues in the future.
- **After surgery:** Please check with your medical team when you can commence these exercises.
- **Always remember to squeeze, lift and hold your pelvic floor muscles before coughing, sneezing or lifting to provide support and prevent leakage of urine.**

Position: Lying or sitting.

To contract: Tighten (squeeze) the muscles around the anus, vagina and urethra, and lift forwards and upwards (as if trying to stop passing wind and urine).

- Squeeze and lift with your best effort and as strong as you can.
- You may feel your lower tummy gently tighten and draw in.
- Keep breathing normally.
- Ensure the upper abdominals, buttocks and leg muscles remain relaxed.
- Hold for three to five seconds.
- Relax and feel a distinctive “letting go”.
- Repeat 10 times in a row, and do these three times a day.

Discuss progression of these exercises with your physiotherapist.

Follow up physiotherapy

If you experience any ongoing bladder, bowel or prolapse symptoms after your surgery, your doctor may refer you to see a physiotherapist at this hospital or in the community.

Further Information

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

Physiotherapy Department

Mercy Hospital for Women

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Acknowledgements

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