

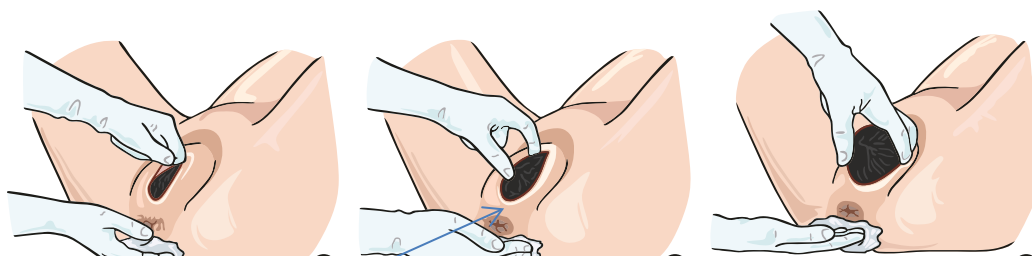


## Your important health information

# Understanding perineal tears and episiotomy during a vaginal birth

The perineum is the skin and muscles between your vaginal opening and the anus.

Towards the end of your labour, the perineum will thin and stretch to allow your baby to be born (as shown below).



Stretching perineum

It is quite common for women to have some form of perineal or vaginal tearing at this time, particularly if you are having your first baby.

## Types of tears

A **perineal tear** affects the skin and muscles of the perineum. Tears can also occur inside the vagina.

Midwives and doctors use a grading system to describe the types of tears according to the size of the tear and type of tissue involved.

**First and second degree** tears are tears which involve the perineal skin and perineal muscle. They will usually require stitches.

**Third and fourth degree tears** are not very common. Approximately 4 out of every 100 women, having a vaginal birth, experience a third or fourth degree tear. Both involve some tearing of the anal area.

Third and fourth degree tears require stitches and this is done in an operating theatre by an experienced doctor. You will see a doctor and a physiotherapist before you go home to discuss the healing process and what follow up you may require.

## Could I be at risk of a third or fourth degree tear?

Some factors contribute to perineal tears in birth. Such as:

- instrumental births
- a previous third or fourth degree tear
- babies weighing over 4 kilograms

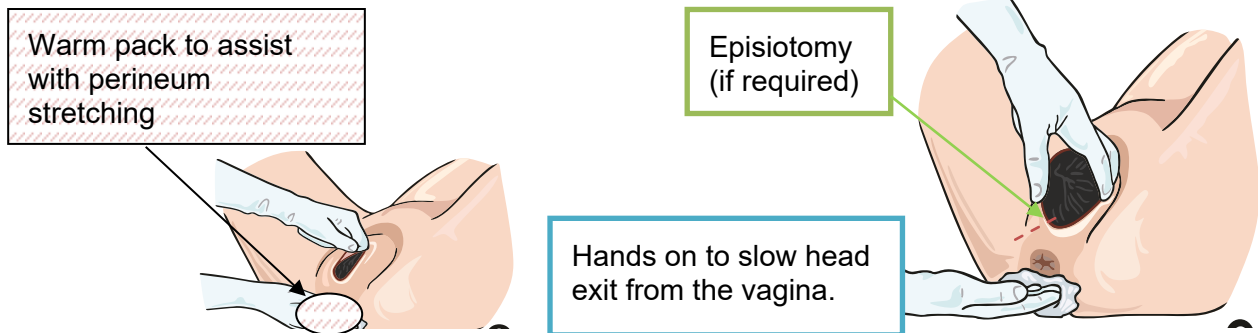
## What does this information mean for me?

There are ways to reduce the risk of a third or fourth degree tear during your pregnancy. These include:

- perineal self-massage (or with the help of your partner) after 34 weeks of pregnancy
- pelvic floor muscle exercises

To reduce your risk of having a third or fourth degree tear during a vaginal birth, you may be offered the following:

- A warm compress applied to your perineum when you start pushing and the baby's head starts to show.
- Guidance with breathing techniques to have a slow, controlled birth.
- The midwife or doctor will gently support your perineum with their hands during the birth of your baby's head.



Some women may require an episiotomy. An episiotomy is a cut made to enlarge your vaginal opening to help your baby to be born.

It is done when your perineum is very thin and you may need an injection of a local anaesthetic.

An episiotomy involves the same muscle and tissue as a second degree tear and always needs to be stitched. We will talk to you and gain your consent if an episiotomy is recommended.

### **What if I require an assisted vaginal birth?**

An assisted vaginal birth means that a doctor uses specially designed instruments, such as a vacuum (Ventouse) or forceps to help your baby to be born.

If this is your first vaginal birth and you are having an assisted birth, we will discuss and recommend an episiotomy with you.

### **How will I know if I have a tear?**

After your baby is born, a doctor or a midwife will examine you to check for any tears. This includes an examination of your anal area. If we find a tear, we will discuss if there is a need for stitches and what follow up care you may require.

### **Recovery from your tear or episiotomy**

Healing time varies but usually the pain and swelling settles within a few days to a week. You will be given ice packs and medicine to reduce swelling and any pain for a few days. Your stitches do not need to be removed as they dissolve over time.

#### **Further Information**

If you have any questions, at any time, please speak to your midwife or doctor.

#### **Acknowledgements**

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