



## LOCAL ANTENATAL COURSES FOR LOCAL PEOPLE

### CAESAREAN BIRTH

#### **How will I feel emotionally after the operation?**

Most of us are just glad it's over and grateful we - and the baby - have survived. You may feel elated and delighted - or you may be weepy, and perhaps disappointed that you didn't manage to give birth to your baby vaginally if that is what you were hoping for. If things changed very quickly during your labour, you may still feel traumatised by the shock of what you have been through. It may help your emotional recovery to go over again, and perhaps again and again, the reasons why a [caesarean section](#) became necessary. To do this, you and maybe your partner, need to ask the midwife who was at your baby's birth, (and maybe the obstetrician involved) to talk to you about it.

#### **How will I feel physically?**

Everyone knows a caesarean is major surgery, but you may still be surprised by how much it hurts afterwards. You may feel you can't do anything on your own - to even move up the bed a little you'll probably need something or someone to hold onto. Trapped wind is another problem, especially by about day three - tightening the abdominal muscles on an outward breath helps expel the gas. Peppermint water helps, and will be available in the hospital, and you could also try the homeopathic remedy *Raphanus 30*. It will hurt to cough or laugh, but less if you support your wound (with your hands or by holding a pillow over your stomach) as you do so. Wearing knickers that are a size bigger than you really need (or boxer shorts or special knickers made from stretchy gauze and available from the [NCT](#)) may make the wound feel more comfortable, and you'll need to use sanitary pads because the lochia, or bleeding from the uterus, is the same as after a vaginal birth.

#### **What kind of pain relief will be available?**

If you had an epidural, you'll probably have the catheter left in place for a few hours afterwards so that top-ups of painkiller can be given when you need them. If you had a general anaesthetic, you'll be offered pain-killing injections in the hours and days after the birth. Voltarol suppositories also give good pain relief in the early days after a caesarean. It is vital to have good pain relief, so do talk to your midwife if you feel uncomfortable.

#### **How long before I can get out of bed?**

At first you'll probably feel as though you'll never walk again, but, as soon as six hours

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after the birth your midwife will probably cajole you out of bed. However hard it seems, do try to move - the earlier you can, the better for your circulation and general recovery. Also, you'll have to try it sometime - and once you've got out of bed once, next time will be easier. As well as moving around out of bed, you'll be encouraged to do ankle exercises while you're in bed, to improve circulation to your legs and help prevent clots.

### **Will I be able to breastfeed?**

There's no reason at all why you shouldn't breastfeed after a caesarean. But the pain from your scar may make things a bit more challenging in the early days, so be prepared for this and keep trying [different positions](#) until you are comfortable. Try to have someone else around when you're feeding, so you can get comfortable before you start, and then have the baby handed to you. Lying on your side may be easier than sitting up. If you do sit up to feed him, tuck his legs under one arm and use your other hand to guide his head towards your nipple. But make sure you move the baby to the breast, not your breast to the baby, or you'll end up with back and shoulder ache. Use plenty of pillows to lift the baby up to the right level.

### **What will the scar look like?**

The vast majority of caesareans these days are what's called lower segment caesareans, which means your scar runs horizontally along your bikini line. At first it will look very red and livid, but as the weeks and months go by it will gradually fade to pink. By a year or two after your operation, the scar will probably have faded to a silvery line, and although, depending upon your skin tone, it will always be lighter in colour than your normal skin, it may eventually be almost invisible. Some homeopaths suggest taking Arnica for several days after your delivery, to help the healing process.

### **How will I feel once I'm home?**

You'll probably have to stay in hospital for about three days. In some ways life will be easier once you're home - your bed, for example, will almost certainly be lower than the hospital bed and easier to get in and out of - but you can't expect to be back to normal straight away. It may take your body up to six months to recover after a caesarean and many women say they don't feel completely themselves for up to a year. You'll probably be warned not to drive for five or six weeks, as turning and twisting may cause pain and having to do an emergency stop would be very painful.



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You shouldn't lift anything heavy either - including, unfortunately, a toddler if you have one - so if you have a willing helper, do enlist his or her help. You will be encouraged to start gentle [postnatal exercises](#) the day after your operation. This will help speed your physical recovery. A physiotherapist will come to see you and show you what to do. You should not start a more strenuous exercise programme until six to eight weeks after delivery.

### Will I need a caesarean again next time?

No, not necessarily. In fact around seven out of ten women who have a caesarean go on to have a vaginal birth next time: known as [VBAC \(vaginal birth after caesarean\)](#). If your caesarean was due to an isolated factor in this pregnancy - a [breech](#) baby, for example, or [pre-eclampsia](#) - you have every likelihood of a vaginal birth in another pregnancy, if that's what you would like. Midwives and doctors do tend to be a bit more cautious during a labour if a woman has had a previous caesarean because of a very small risk - usually estimated at less than one in 100 - of the uterine scar tearing during contractions.

## CAESAREAN BIRTH

### PLANNED

- \* Malpresentation (eg breech/transverse)
- \* Cephalo Pelvic Disproportion (shape/size of pelvis)
- \* Maternal medical conditions (eg diabetes/high BP)
- \* Placenta Praevia
- \* Placental abruption

### UNPLANNED/EMERGENCY

- \* Failure to progress
- \* Foetal distress
- \* Cord prolapse
- \* Failed induction
- \* Failed intervention

## EPIDURAL/SPINAL GENERAL ANAESTHETIC

### BIKINI / LSCS

- \* Less post-operative complications
- \* Stronger scar
- \* Heals more quickly

or

### MIDLINE / CLASSICAL

- \* Fibroids, Transverse lie, Placenta Praevia
- \* Weakens abdominals

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- \* Less discomfort
- \* Risk of rupture is less likely
- \* Invisible !
- \* 98%

- \* Greater discomfort

- \* **Baby delivered in 5 – 10 minutes**
- \* **Repair 40 – 45 minutes**
- \* **Stitch(es) usually removed on day 5**

### **PRE-OP**

- \* Consent form
- \* Shaved
- \* Catheter
- \* IV drip for fluids
- \* Antacid
- \* Remove jewellery
- \* BP monitor
- \* Heart monitor
- \* Oxygen monitor
- \* Sterile drapes
- \* Moon boots
- \* Gowns for dad
- \* Anaesthetic administered

### **POST-OP**

- \* Temperature and BP taken frequently
- \* Wound checked daily
- \* Pain relief
- \* Mobility (up and about asap)
- \* Circulation
- \* Going to the toilet
- \* Wind (avoid fizzy drinks)
- \* Coughing, sneezing, laughing
- \* Drip removed after 12 – 24 hours
- \* Sleeping
- \* Breastfeeding
- \* Driving (check with