



# Birth Recovery

## **A GUIDE**

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# What to Expect in the Moments After Birth

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You have been waiting for this moment for months, perhaps years. You have endured 10 months of pregnancy with countless sleepless nights. You have dreamed of this moment.

Your baby has arrived.

Many women are surprised by the events that unfold in the moments and days after birth. You will not be one of them.

I am here to tell you the truth about what comes after birth. As an ObGyn I have walked with hundreds of women across the threshold from pregnancy to motherhood. I have walked over the threshold myself. On the other side of the door is a challenging, overwhelming and delirious time punctuated with profoundly beautiful moments. It does not wait for you to catch your breath or rest. The 4th trimester arrives full-force at moment one.

Let's make sure you are ready!

## **Baby Is Out Now What?**

Birth is an overwhelming physical and emotional experience. Afterwards, the work is not over. In fact, it is just beginning...

## **Deliver Placenta**

The placenta is the organ that allows you to nourish your baby in pregnancy. After baby delivers the placenta must follow. This usually occurs within 30 minutes. It is smaller than baby but still may require some effort on your part to deliver. Some women require extra assistance from their provider if they do not deliver their placenta within 30 minutes.

Before you deliver over half a liter of blood is going to your uterus every minute. After delivery that blood flow needs to decrease drastically. To help decrease bleeding, your doctor or midwife will massage the top of your uterus over your belly. Calling it a massage is somewhat misleading. You may not notice much if you have an epidural, but if you don't it can be pretty uncomfortable.

## **Repair Lacerations**

This is the part of delivering a baby most of us dread. The truth is that most of us will have some tearing, especially with your first baby. It is also true that most of the tearing will be minor, heal well, and cause no long-term problems.

But first you have to get through the repair (or stitching together) of any lacerations.

During the repair your provider will ask you stay still and keep your legs open. This is so we can properly visualize what we are doing. This is easier said than done. If you are unmedicated you will likely need some numbing injections. If you have an epidural hopefully this experience will be painless for you. But as not every epidural is created equal, this can be a challenging experience even if you have one.

As someone who had an unmedicated birth and repaired hundreds of lacerations myself, my personal and professional advice is— do not fight the experience. Take a deep breath, relax your body and surrender. It will be over so much faster if you do.

I recommend asking your doctor for details about your laceration. We are often so distracted by our new baby and the overwhelming experience of birth that we don't even know where we have stitches. If your provider doesn't explain- ask!

### **A Word About Debriefing**

Birth can be an overwhelming and sometimes traumatizing experience. If you need clarity on anything that happened during your labor or delivery do not be shy about asking your nurse, doctor or midwife for a debriefing. This debriefing can help you process the experience and come to terms with your birth story.

### **The Golden Hour**

The first hour after birth is a sacred and important time for the new family. During this time, if both are stable, baby will be placed on your bare chest. This practice is called skin-to-skin and is beneficial for both baby and mom. The full assessment of your newborn, including weighing, takes place after this first hour.

### **What Happens After a Cesarean?**

Once your surgery is complete you and your baby will be taken to a recovery room. Sometimes baby leaves the Operating Room a few minutes ahead of you, sometimes at the same time. You will be in the recovery room for several hours. During this time, if both you and baby are stable, you and baby will be skin-to-skin.

Your nurse will perform frequent checks of your uterus and “massage” your uterus to help prevent bleeding. Your nurse will also be checking your vital signs and making sure you are stable to go to your postpartum room.

Expect your movement to be very limited in the first few weeks. You don’t realize how often you use your abdominal muscles until you have an abdominal surgery. I’ve been there. It’s not easy but it will get better. Be patient with yourself and your recovery. You are going to need a lot of help.

### **The Breastfeeding Journey Begins**

Your breastfeeding journey will begin within the first few hours of birth. Not all babies latch right away so try not to stress. Breastfeeding is a skill and it takes time to learn. You also have to teach this skill to a brand-new human with zero life experience. If it has been awhile since you’ve been a newbie at something, this can be frustrating. Your nurse (and often a lactation consultant) will be available to teach you and baby the ropes.

### **What Does It Feel like After Baby Is Out?**

In a word— strange. Bump is still there, baby is gone. For the first few days you will experience afterpains which are strong uterine cramps that feel eerily similar to labor contractions. Breastfeeding often causes these cramps to increase.

You will also bleed for approximately 6 weeks after birth. The bleeding is typically heavier than a period for the first 1-2 days and then decreases gradually thereafter. Your nurse and doctor will evaluate your bleeding while you are in the hospital to ensure it isn’t too heavy.

If you've had a vaginal delivery expect sitting and walking to be uncomfortable for the first week or so. I highly recommend a donut pillow for anyone who has had tearing in childbirth.

Many women experience discomfort with urination after birth and some have issues controlling their bladder. As if that wasn't enough, the first bowel movement, whether you've had a vaginal delivery or a cesarean, can be an *experience*. At most hospitals, after birth medications to help prevent constipation are standard.

All of these symptoms should steadily improve. If you are unsure if what you are experiencing is normal do not be shy about asking your doctor.

### **How Long Do I Stay in the Hospital?**

Most women spend the first 2 days after birth in the hospital and longer if they've had a cesarean. Unfortunately, the hospital is not always the most restful place. Between your nurse, food services, housekeeping, baby's pediatrician, your doctor, the lactation consultant, the birth certificate people, and your visitors, it can feel like a revolving door, leaving you little time to rest.

So why stay 2 days? Baby will typically cluster feed, feeding on-and-off for hours on end, in the first 48 hrs. This can be a physically and emotionally overwhelming experience, especially if you are a first-time mom.

As an ObGyn I had planned to leave as soon as I crossed the 24 hour mark. I thought— "I've got this. I know what I'm doing" Ha! How wrong I was. I stayed the 2nd night at the behest of my midwife and I am so glad I did. My daughter cluster fed on the second night and I was bawling my eyes out.

I couldn't get a latch that wasn't excruciatingly painful. Then my angel nurse whipped out a nipple shield and it all got better. In addition to the breastfeeding help, it can be reassuring to have your meals, medications and everything brought to you all the while having someone, mainly your nurse, on the look-out for any complications.

### **You Deserve the Best**

I hope this helps you feel more prepared for all that comes after birth. What follows certainly isn't easy. There will be difficult days and even more difficult nights. But I will promise you this— it gets easier. You don't bounce back but you do grow forward into a new normal.

# Care Instructions

The instructions are for general education purposes only. If any of these instructions contradict those given to you by your OB provider, always follow **your** providers instructions.

# Vaginal Lacerations

- Keep all external lacerations (those of the perineum and vulva) clean and dry.
  - This can be done in between bathing with a squirt bottle filled with water (can be warm or cold depending on your preference).
  - In the first few weeks, the vulva and perineum should be cleaned with water and patted dry with a towel after urinating or having a bowel movement.
- Change pad every 2-4 hrs
- Place nothing inside the vagina unless instructed to do so by your Ob provider.
- Do not attempt to clean inside of the vagina. Absolutely no douching.
- A small amount of mild, fragrance-free soap can be used on your vulva and perineum after several days.
- Cold, in the form of ice packs or frozen pads, can help reduce swelling and pain. Cold is best used in the first few days after delivery.
  - Cold packs and witch hazel pads, as well as numbing and cooling sprays, are provided by most hospitals.

- Warmth can promote healing and muscle relaxation. Warmth can be applied via Sitz baths (instructions on page 17), heat packs, warm compresses, or infant diapers/pads with warm water.
- Avoid constipation with a combination of dietary fiber, fiber supplements, lots of hydration, and over-the-counter stool softeners. Limiting opiate pain medications to only what is necessary is important for avoiding constipation.
  - Be aware that the first bowel movement after a vaginal delivery can be an intense experience.
- Itching around a healing laceration is common as it heals. This itching is expected to be mild.
  - Increasing irritation and itching could also be attributed to a yeast infection, and thus warrants a phone call to your providers office. Do not use over-the-counter yeast treatments unless instructed to do so by your OB provider.
- Lacerations and episiotomies heal best when there is minimal tension on the healing tissue. To the best of your ability keep your legs close together, especially for the first 2 weeks.
- A donut-pillow is an excellent way to minimize pain when sitting.

# Cesarean Incisions

- An occlusive dressing, meaning an air and water tight dressing, is typically applied for 24 hrs after cesarean.
  - After 24 hrs, in general, there is no need to prevent air or water from touching your incision.
- After the first 24 hrs, a dressing is applied to cesarean incision for 2 purposes: 1) to prevent any blood or discharge from getting on clothing, and 2) to protect incision from irritation by clothing.
  - One of the best dressings for a cesarean is a pad. The sticky portion of the pad can be attached to your underwear. Underwear and other items of clothing should go above the incision to avoid irritating it.
- Incision should be kept clean and dry.
- Small amounts of bloody discharge from incision is normal for the first few days.
- Unless you are told otherwise by your provider, your incision can get wet after 24 hrs.
- If you have steri-strips applied to your incision (see belly birth recovery lesson if you are unfamiliar with this term) they can be removed approx 7 days after your cesarean, unless you are instructed otherwise by your provider.

- Incision can be cleaned with water and mild soap. Do not scrub area.
- An abdominal binder, provided by most hospitals, can be helpful at lending support, especially when moving around.
- No lifting >10 lbs (if your baby is >10 lbs you can lift baby) for 4-6 weeks
- No driving while on narcotics.
- No driving x 2 weeks.



# The Red Flags of Postpartum Recovery

## **Heavy bleeding**

Before leaving hospital ask how much bleeding is too much. While it is common to have a slight increase in bleeding with activity, the increase should be slight. We often say to return to the hospital if you are bleeding enough to saturate 2 pads in an hour. Make sure you find out from your doctor how much bleeding is too much. Depending on your unique characteristics, your doctor may want you to be more cautious.

## **Shortness of breath**

In pregnancy mild shortness of breath with activity and in certain positions is common. After delivery this should resolve. Shortness of breath is not a normal symptom in the postpartum period and could signal a blood clot in your lungs or a problem with your heart. Even more concerning is shortness of breath that gets worse when you lie down or is accompanied by chest pain, palpitations, or a cough. These symptoms warrant immediate medical evaluation.

## **Fever (T >100.4 F or 38 C)**

There are numerous reasons you may have a fever in the postpartum period, some of them are no big deal and others are very serious. It is not up to you to determine the seriousness of your fever— that is the job of a trained medical professional. All fevers in the postpartum period warrant a phone call to your provider or a trip to the hospital.

## **Headache not relieved by over-the-counter medications such as Tylenol or Motrin**

This could be the sign of some seriously high blood pressures and warrants medical evaluation. Preeclampsia is pregnancy related condition that can progress quickly and can be life-threatening. The good news is that under appropriate medical care we can drastically reduce complications and risks from this condition.

## **Change in vision, seeing stars or spots**

Another potential symptom of preeclampsia or elevated blood pressure. These symptoms are not normal or expected, needs immediate medical evaluation.

## **New pain in the upper portion of your abdomen**

This is yet another possible sign of a blood pressure issue or preeclampsia and warrants immediate medical evaluation.

## **Pain and swelling in your leg**

This could be a sign of a blood clot. These frequently occur in just one leg making one leg more painful and larger than the other. Blood clots can be life-threatening, particularly if they travel to your lungs. You may have heard that Serena Williams suffered this complication, called a pulmonary embolism, postpartum. These symptoms warrant immediate medical evaluation.

## **Increased pain, swelling, redness, drainage or warmth of vaginal lacerations or cesarean incision**

These could signs that your laceration or incision is infected and warrants a medical evaluation.

# Combating Constipation

There are several factors that contribute to constipation:

- Motility of your intestines (how much they move)
  - opiate pain medications slow down intestines
  - caffeine and pro-motility agents, like senna, speed it up
- Amount of fiber in your diet
  - pulls water into colon and makes poop softer and easier to pass
- How hydrated you are
  - if dehydrated the balance of fiber to water will be off and you will have hard, difficult to pass poops

# Bye-Bye Constipation Formula

**HYDRATION**

+

**FIBER**



**2 tsp Acacia fiber in glass of room temperature water 1-2x/daily**

**IF NOT ENOUGH...**

+

**PRO-MOTILITY FOODS**

**Aloe vera juice, prune juice,  
magnesium citrate etc**

# Bye-Bye Constipation Formula

**IF STILL NOT ENOUGH...**



**MEDICATIONS TO INCREASE WATER IN STOOLS**



**Docosate Sodium (aka Colace)**

**IF STILL NOT ENOUGH...**

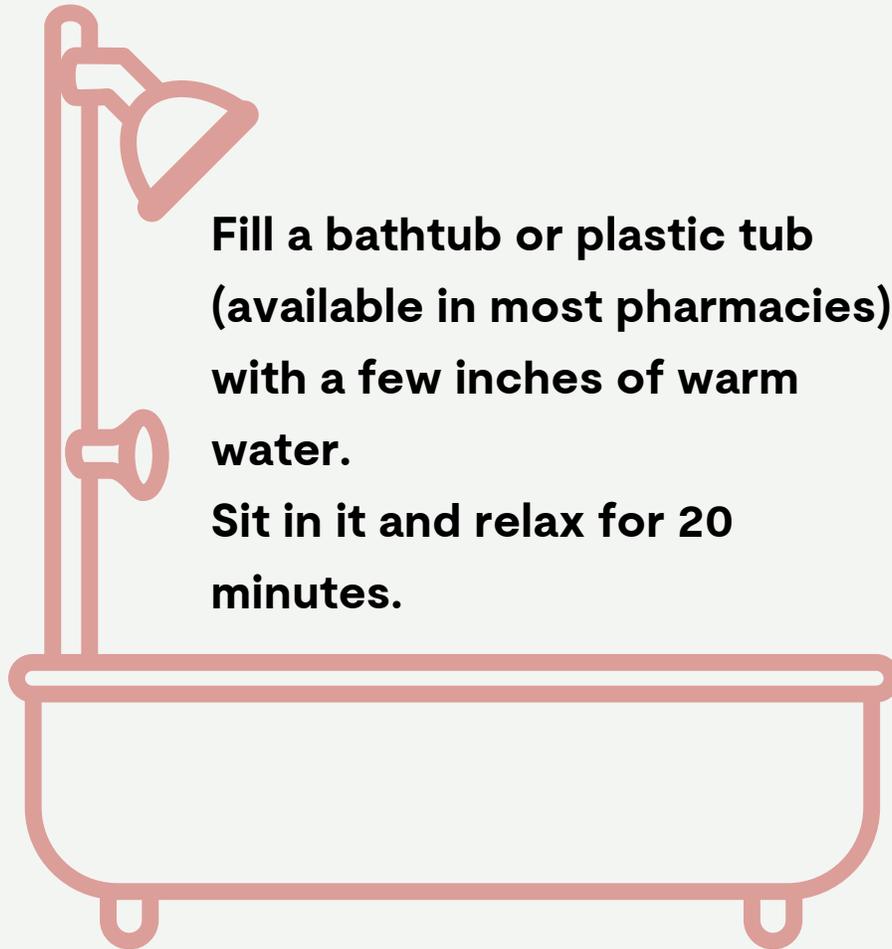


**MEDICATIONS TO INCREASE MOTILITY**



**Senna Tablets**

# Sitz Bath Instructions



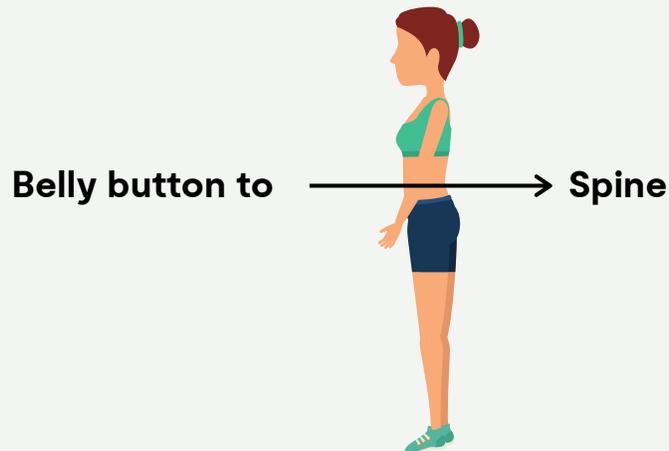
**Fill a bathtub or plastic tub  
(available in most pharmacies)  
with a few inches of warm  
water.**

**Sit in it and relax for 20  
minutes.**

**\*Some people like to add an herbal mixture to  
the warm water. Make sure to check with your  
Ob provider before doing so!**

# Rectus Diastasis Exercise Instructions

Exercises only to be done after clearance by your Ob provider to avoid exacerbating certain issues.



Take a deep breath while pulling your belly button towards your spine. Let out your breath in 5-10 short bursts, pulling your belly button further in with each burst. Do 3 repetitions of this exercise at least 3 times per day once cleared by your OB provider.

# Kegel Exercise Instructions

Exercises only to be done after clearance by your Ob provider to avoid exacerbating certain issues.



Imagine your pelvic floor in two different sections: the back of the pelvic floor and the front of the pelvic floor.

First engage the back of the pelvic floor as if you are stopping gas. Then lift. Then relax.

Now engage the front of your pelvic floor as if you are stopping the flow of urine. Then lift.

Then relax.

Then combine the two together engaging and lifting from back to front.

Always ensure you fully relax your pelvic floor after a Kegel.

Start slow: Now that you are aware of these muscles, it's time to practice. Start off by contracting for a few seconds and relaxing. Tighten for only 5 seconds at a time until you feel more comfortable and the exercise becomes easier.

Aim for practicing three times a day for a few minutes at a time and remember that quality is more important than quantity!

Routine: Aim to slowly work up to 10 repetitions, three times a day of alternating between contracting and relaxing for 10 seconds each.

# Must Discuss List for Your Postpartum Appointment

Birth control. If breastfeeding, we typically recommend a progesterone-only or non-hormonal method. I recommend doing your own research before your appointment. My favorite resource for birth control information is [Bedsider.org](https://www.bedsider.org)

Rectus diastasis. This is a separation of the rectus abdominal muscles that often occurs in pregnancy. Exercises and physical therapy can help repair this separation. If nothing is done, it can weaken your core and lead to back pain in the future.

Sex. While initially some vaginal pain with intercourse is common, this pain should resolve entirely after several weeks. Ask your doctor what the next step will be if you have pain that does not resolve. Pelvic physical therapy can treat some causes of painful intercourse.

Bladder control and prolapse symptoms. For the first few weeks after having a baby some women experience incontinence or a ball in vagina sensation. This should resolve entirely within the first 1-2 months. If not, ask your provider about a pelvic physical therapy referral.

Mental health. If you think you may be experiencing postpartum depression, anxiety, or any other mental illness call your provider right away. All women should be screened for postpartum depression and anxiety in the weeks and months following birth.

Back or pelvic pain. You can expect some mild back or pelvic pain initially after birth. This should resolve over the first few weeks. If it doesn't get better it should be evaluated further.

# The Body Love Meditation

**Sit comfortably and close your eyes. Starting at your head, go through all your parts: eyes, ears, nose, hands, legs, etc. As you go part by part, do the following:**

**1. Express your gratitude for what that body part does for you. For your eyes you may say “Thank you, eyes, for allowing me to see my beautiful son.”**

**2. Tell that part of your body that you love it. “Thank you, eyes, for allowing me to see my beautiful son. I love you.”**

**When you get through all your body parts, you will see that if you can love all the parts of your body, then you can love your whole self and your whole body.**