

Women and Children's Directorate
Physiotherapy Department



Patient Information

Advice and Exercise Following Major Gynaecological Surgery



Your surgery may have been performed through your abdomen (tummy) or vagina (birth canal). This leaflet is a general guide and should be helpful for whatever surgery you have had.

Rates of recovery will vary. The time it takes you to recover depends on the exact type and extent of surgery, your general health, your age, your lifestyle and your state of mind.

The information in this leaflet will advise you on how;

- To get comfortable after your surgery.
- To move about more easily to help to prevent chest and circulatory problems.
- To exercise the abdominal and pelvic floor muscles.
- To regain your previous level of fitness following surgery.

The first days after your surgery

Patients with Chronic Obstructive Pulmonary Disease

If you have chronic obstructive pulmonary disease (COPD) you may benefit from using pursed-lips breathing, particularly if you feel short of breath. Breathe in through your nose for about 2 seconds. Breathe out slowly through pursed lips as though you were blowing out a candle, without forcing the air out. Breathe out for 2 or 3 times longer than you breathe in. Repeat 3 times. Try to keep your shoulders down and relax as you practise. This is the correct technique for patients with COPD - COPD patients should **not** practise the breathing exercises described below.

Breathing exercises

You may find it helpful to practise deep breathing exercises after surgery if you have mucus to clear from your chest. It may also help you relax, relieve nausea and move any trapped wind.

Practise the breathing exercises in sitting or lying. Take a deep breath in through your nose, hold for 2 seconds and then slowly sigh the air out through your mouth. As you breathe in relax

around your abdomen and feel your waist expand. Try this 2-3 times and then rest. Repeat this every hour.



Huffing

This breathing technique will also help to clear any mucus. Support your wound with your hands or a rolled up towel, take a normal breath in, and then breathe out through your mouth, making a huffing sound as if you were going to steam up a mirror. Repeat whenever you feel necessary.

Coughing

You will not harm your stitches or scar when you cough. You will feel much more comfortable and able to cough if you support your stitches with your hands, a folded up towel or a pillow. If your surgery is through the vagina place your hand firmly over your sanitary pad.



Feet exercises

When in hospital, we will probably ask you to wear TED stockings (special support stockings to reduce the risk of blood clots). However, you should also do the following exercises to help maintain blood flow in your veins and help to prevent blood clots developing. When you are resting in bed or sitting in a chair bend your feet and ankles up and down briskly for 30 seconds every hour to help your circulation.

Getting moving

To turn in bed from lying on your back

- Bend both knees up keeping your feet on the bed.
- Support your abdomen with your forearm.
- Taking care to move your shoulders and knees at the same time, roll onto your side.

Placing a pillow under your lower abdomen and between your knees can help you rest more comfortably especially if you have backache or wind pain.

To get out of bed

- Roll onto your side as described above.
- Push your body up by pushing down onto the mattress with your upper hand allowing your feet to go down to the floor.
- Sit on the side of the bed for a minute.
- Stand by pushing up with your hands and legs. Stand tall and support your wound if it helps you to feel more comfortable.



To get into bed

Stand with the back of the knees against the bed

- Support your abdomen with one hand and put the other on the bed behind you.
- Bend forward as you sit.
- Lower your head and shoulders sideways on to the pillow while lifting your legs onto the bed.
- Keeping your knees bent, roll onto your back.

Sitting

- When sitting in bed or in an armchair, sit well back.
- Placing a small pillow or a rolled up towel behind the lower back and waist will give support and help relieve backache.
- Your feet should be flat on the floor.

Standing

Good posture will help to prevent backache. You will look and feel better if you stand tall.

Going to the toilet

- When sitting on the toilet make sure your feet are on the floor. Relax and give yourself plenty of time.
- When moving your bowels you may find that some extra support will make you more comfortable. Try holding a sanitary towel firmly in front of your back passage keeping even pressure. Supporting your wound with a folded towel can also help. It may help you to move your bowels more easily if you sit with your feet raised on a small foot stool as shown in the picture below.
- Do not strain. Breathing out as you move your bowels or pass urine may help.

The ideal position for emptying your bowels is shown in the diagram.



Early exercise

It is important to exercise your abdominal muscles following your surgery. They form a natural corset and help to support your back and internal organs. The following exercise can also help to relieve wind and backache both of which are often felt after abdominal surgery.

It is believed that the abdominal support muscles work at the same time as the pelvic floor muscles (see page 8). You may start these exercises as soon as you feel able.

Deep abdominal exercise

These exercises can be practised lying on your back with your knees bent or lying on your side with your knees bent.

- Place your hand on your lower abdomen between your tummy button and your pubic bone, breathe normally and let your tummy sag.

- Breathe in gently to prepare. As you breathe out draw in the lower part of your tummy towards your back, then relax.
- Repeat but keep your muscles in while you breathe. Aim to hold for a count of 6 seconds. Feel your lower tummy pulling away from your hand. Your back should not move at any time during this exercise.

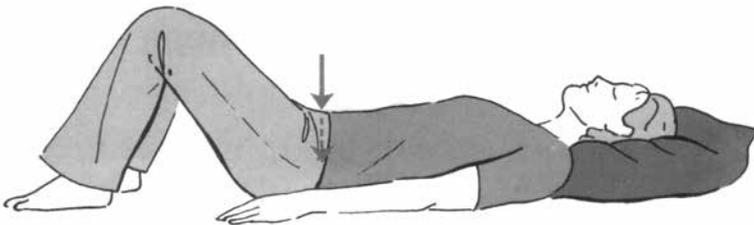
Progression

Try this exercise when sitting or standing. Gradually increase the time holding in and the number of repetitions (10 seconds, 10 times). Hold your tummy in when walking, standing or lifting.

Pelvic tilting

Once you can manage the deep abdominal exercise you can move on to this exercise.

- Lie on your back with your knees bent, place your hand on your lower abdomen.
- Tighten deep muscles as in previous exercise.
- Keep pulling in your deep abdominal muscles, tilting your pubic bone towards your chest and flattening the small of your back into the bed. Hold for 6 seconds then slowly release.



Progression

Gradually increase the repetitions (10 times)

Keep breathing slowly throughout

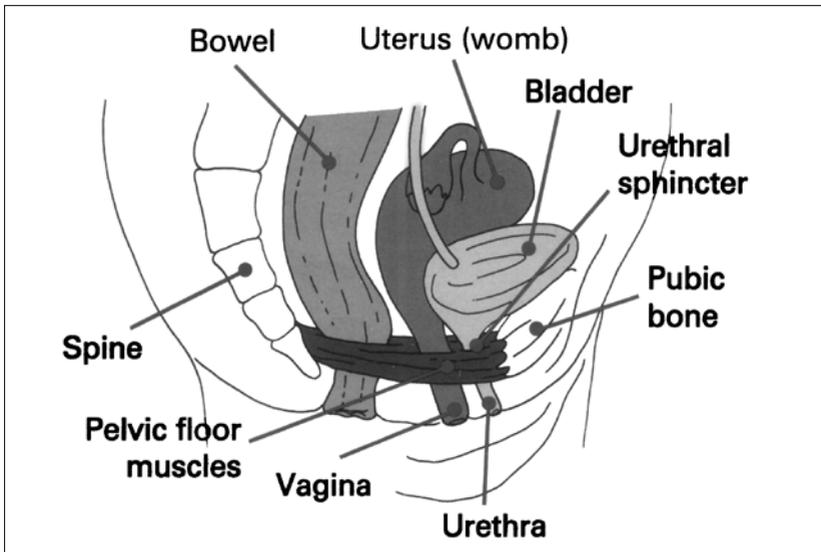
Pelvic floor exercise

These muscles are located underneath your bladder, bowel and womb. They are attached like a hammock between the pelvic bones.

Strong healthy pelvic floor muscles can help:

- Prevent leakage from your bladder and bowel.
- Safeguard against prolapse.

If after surgery, you have a catheter, it may be more comfortable if you wait until you are passing urine normally before starting these exercises.



To exercise these muscles

- Lie, sit or stand with your knees slightly apart.
- Imagine that you are trying to stop yourself from passing wind and at the same time trying to stop your flow of urine.
- The feeling is of squeeze and lift, closing and drawing up at the back and front passages. This is called a pelvic floor contraction.

Do not

- Hold your breath.
- Squeeze your legs together.
- Tighten buttock muscles.

For comfort tighten your pelvic floor muscles when coughing, sneezing or moving.

Progression

Progress this exercise by holding the squeeze and lift for up to 10 seconds and repeating up to 10 times. This will help to build up the endurance of your pelvic floor muscles. Practise these exercises 3-4 times per day.

It is also important that your pelvic floor muscles react quickly to stop you leaking when you cough or sneeze. Tighten them as quickly and strongly as you can and do this rapidly several times (working up to 10). Practise this 3-4 times per day.

You may feel a tightening in your deep abdominal muscles when you do your pelvic floor exercise, this is normal.

Making progress (up to 6 weeks)

As you feel more comfortable increase the amount of walking you do about the ward and take the opportunity to get as much rest as you can. Remember recovery from surgery varies with every individual. Listen to your body.

Going home

Your stay in hospital will vary depending on the type of surgery you have had. Even when your wound heals, healing continues in the deeper tissues. Take advantage of any help offered.

Travelling

You may be more comfortable if a towel, folded into a pad, is placed across your abdomen.

When getting into the car

- Lower yourself backwards into the seat by bending your knees, holding on to the frame of the door for support.
- Move yourself back into the seat.
- As you turn to face forwards lift one leg at a time into the car.
- To get out of the car reverse this procedure.

Returning to driving will depend on the type of surgery you have had, advice from your surgeon, your recovery and your comfort.

It can take as long as 6 weeks following major abdominal surgery before you feel able to drive.

Make sure that you:

- Check your insurance cover.
- Can wear a seatbelt comfortably.
- Are able to concentrate as normal.
- Are able to make an emergency stop.
- Can look over your shoulder to manoeuvre.

Exercise

Continue the abdominal exercises and pelvic floor exercises you were practising in hospital and try to progress as described.

Gradually increase the time you walk every day over the first 6 weeks. Aim to gently increase the pace and distance as you get stronger, without becoming overtired or increasing your discomfort or pain. Try to take 1 or 2 short walks during the day, aiming to gradually return to your previous mobility level as you feel able.

Everyday Activities

For the first 6 weeks after major abdominal surgery you should only lift light loads such as 1 litre bottle of water (1.1kg). You can gradually increase this to 3 litres by 12 weeks after your surgery. Always remember to bend your knees, pull in your tummy muscles and draw in your pelvic floor muscles as you lift, this will help your recovery. Many every day chores can be done while sitting, for example ironing or preparing vegetables.

Rest

For the first 6 weeks try to take a rest every afternoon lying on your bed for at least one hour. It is common to feel emotional in the early days but if you are tired these feelings can seem worse.

6 weeks onwards

You may have had a postoperative check and feel able to gradually return to previous activities. We advise you to check with your surgeon if you are unsure.

Returning to work

You may feel ready to return if your job is not physically demanding or is part time. If your job involves heavy lifting, returning to work will take longer, 10-12 weeks depending on how physically demanding it is. Your employer may offer you a phased return to work.

Whatever your workplace, good posture is important at all times and correct lifting habits must be remembered for life in order to protect your back and pelvic floor.

Sexual activity

The time when you resume sexual activity will depend upon the type and extent of your surgery and how you feel but it is usually around 6 weeks or as advised by your surgeon.

Swimming

You may be able to start swimming after your 6 week postoperative check as long as your scar has healed and any vaginal bleeding or discharge has stopped.

Exercise

You may be able to start low impact exercise and controlled stretches after your postoperative check as long as your scar has healed. You should gradually resume your preferred exercise. However, you should avoid competitive sports and high impact aerobics for 3-6 months. Please ask your physiotherapist for individual advice.

If you wish any further advice please contact the Physiotherapy Department:

- **Glasgow Royal Infirmary: 0141 211 5232**
- **Queen Elizabeth University Hospital: 0141 201 2324**
- **Royal Alexandra Hospital: 0141 314 6765**

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