

Physiotherapy after a Caesarean Section

Chest Care

Chest problems may occur following abdominal surgery even if you have no chest problems normally and are not a smoker. The reasons for this are as follows:

Pain

If your pain is not well controlled you may be reluctant to take deep breaths and avoid coughing. If you feel that pain is impairing your ability to keep your chest clear, please tell somebody so that your pain control may be reviewed. It is important to take painkillers regularly to allow pain free movement which aids recovery.

Position

If you are lying flat or slumped in your bed or chair, you will find it difficult to take a deep breath. It is easier to take deep breaths in an upright position. Use pillows to make you comfortable.

Smoking

If you are a smoker, you may have an increased amount of phlegm after your operation. Stopping smoking before your operation will decrease the risk of chest problems now or in the future. It may be useful to use this time in hospital as an opportunity to give up.

Anaesthetic gases (if a general anaesthetic was necessary)

- Increase the amount of phlegm produced.
- Make phlegm sticky and difficult to clear.
- Make you drowsy after your operation and as a result you may take smaller breaths and not expand your lungs in the usual way.
- Make you cough less effectively.

To prevent chest problems, it is important to practice breathing exercises.

1. Breathing Exercises

- Sit upright.
- Practice normal relaxed breathing. Place your hand on your tummy and you should feel your hand gently rising and falling as you breathe in and out.
- Now take a **deep** breath in and hold for a count of 3 then breathe out gently. Repeat 4 times then return to normal breathing.

The deep breathing will help move any phlegm on your chest and get air to the bottom of your lungs. It is then important to be able to clear the phlegm. Stretching the lungs after pregnancy with deep breaths helps them return to normal.

2. Coughing

- Sit upright.
- Bend your knees up to take the strain off your operation site.
- Support your wound with your hands or hug a pillow if it is more comfortable (do the same for sneezing and laughing).
- Try a few huffs (the same as if you were to steam up your glasses) to try and get the phlegm moving.
- When the phlegm feels just at the back of your throat try a strong cough and, if able, spit it out.
- Go back to relaxed breathing and continue the process until your chest feels clear.



You should aim to do breathing exercises hourly until you are more mobile.

3. Circulation

Whilst you are in bed it is important to pump your feet up and down at the ankle vigorously every hour. This will help maintain the circulation in your legs and reduce the risk of blood clots. Avoid crossing your legs as this may also impair your circulation.

4. Positioning

It is important to be able to relax after your operation, tense muscles will always feel more painful.

Don't be afraid to lie in any position, including on your tummy, as long as you are comfortable. Pillows may assist in supporting you and preventing any strain on your operation site.

Rehabilitation

1. Mobility

- It is usual for the nursing staff to assist you into your chair the first day after your operation.
- To get out of bed, bend your knees up, roll onto your side and push up with your hands. Reverse this to get back into bed.
- The next day you will begin to start walking short distances and then continue to progress daily.



It is important to become active as soon as possible. Walking is an excellent way to get your lungs expanding and to help regain your strength after the operation. Try and walk as upright as possible - a little stretch on the wound is not harmful.

Exercises

The following exercises are designed to increase the support and control of your pelvic region including your tummy and lower back. The following exercises can be done from the first

day after your operation. If any of the exercises are causing you pain stop doing them and ask the physiotherapist to check that you are doing them correctly.

The following exercises can be started as soon as you feel comfortable after your operation.

2. Pelvic floor exercises

These are the muscles which support your abdominal contents and control your front and back passages and stop you from leaking urine.

First relax your buttocks, tummy and legs, then imagine that you are trying to stop your urine flow mid-stream and at the same time trying to stop yourself passing wind. Close and draw up the front and back passages - 'squeeze and lift'.

When performing pelvic floor exercises:

- DO NOT:**
- ✗ hold your breath,
 - ✗ squeeze your legs together,
 - ✗ tighten your buttocks,
 - ✗ pull your tummy in.
- DO:**
- ✓ hold and lift as long as you can, up to 10 seconds,
 - ✓ then release,
 - ✓ rest (for about 4 seconds),
 - ✓ repeat as many times as you can, up to 10 repetitions,
 - ✓ now do up to 10 short, sharp, contractions.

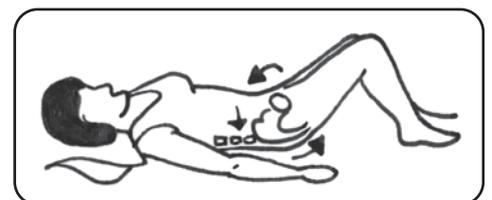
Perform this section as often as you can, at least morning and evening. It takes about 3 months to get the muscles strong.

DO THEM FOREVER!

3. Post natal exercises

Abdominal muscles exercises

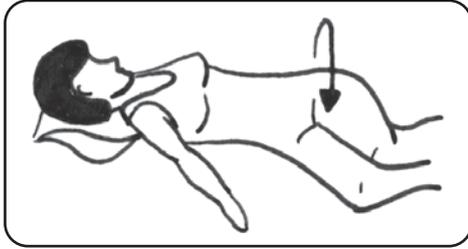
Lie on the bed with your knees bent. Tighten your tummy



muscles and flatten the small of your back against the bed. Count to 3 then let go. Repeat 5 times, twice a day.

Knee rolling

Lie with both knees bent and feet together with your arms out to the side



and your shoulders flat on the bed. Tighten your tummy muscles then roll your buttocks and knees towards one side of the bed as far as comfort allows. Bring your knees back to the middle then repeat towards the left.

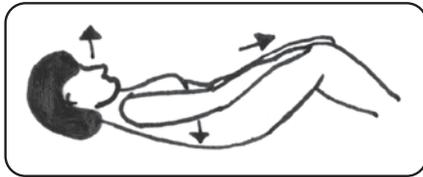
Hip hitching

Lie on your back with your legs straight. Hitch one hip up at the waist to make your leg seem shorter. Relax. Repeat on the other side.

The following are stronger exercises and should only be started at around 6 weeks after your Caesarean.

Head raising

- Flatten your tummy and back, place your hands half way up your thighs. Lift your head and shoulders up slightly and, whilst looking up at the ceiling, slide your hands towards your knees. Return slowly to your starting position.



- You may vary this exercise by lifting your head and right shoulder and reaching across to your left thigh then repeating the exercise towards the opposite side.
- Follow the head raising exercise but keep your arms straight by your sides throughout the exercise. Keep your tummy flat and curl up slowly.
- To work the muscles even harder, keep your arms crossed over your chest as you curl up.



Rules of exercise

- Stop if it hurts.
- Stop if you are tired.
- Don't do them if you feel unwell.

General Advice

It is important to get the right balance between rest and exercise. You will feel tired to begin with but you still need to be gradually increasing your activity.

Rest

This is so important, to make up for lost sleep and help your body return to normal.

Walking

You should aim to go for short walks daily and gradually increase the time you are walking. Using the stairs should be no problem after your operation. However, if you have had pelvic girdle problems in pregnancy, recovery will be slower and less walking initially is sensible.

Housework

Begin with the light duties: for example, make a cup of tea, dust, do the washing up. You should aim to increase your activity so that by 6 weeks you are back to doing your normal housework. It is safe to lift a kettle but be sensible and only fill it with the water you need.

Driving

You should not drive for 4 weeks after major surgery. Many insurances do not cover you for 4-6 weeks following surgery so you must check with your individual policy. Physically you need to be able to respond to any situation comfortably and effectively: for example, being able to do an emergency stop, turning and looking over your shoulder or using the hand brake.

Going home

When you are being driven home, it may be more comfortable to place a pillow between you and your seatbelt.

Sport

You can start moderate exercise as soon as you feel comfortable and fit enough. Start gently and gradually increase your activity. Swimming is a good general exercise and can be started as soon as your scar is healed and there is no discharge.

Avoid strenuous or high impact exercise for at least 3 months as your pelvic ligaments remain relaxed.

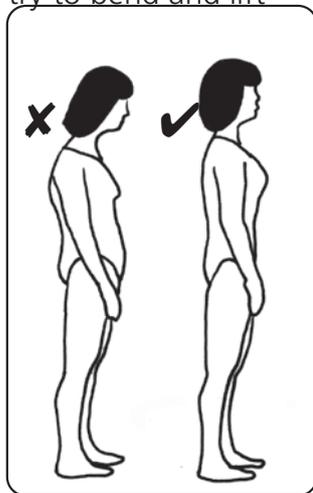
Sexual activity

This should be when you feel ready. There is no set time limit.

Back care

After your Caesarean your back is particularly vulnerable and you should try to bend and lift correctly to avoid strain. Try to avoid heavy lifting for 6 weeks and remember good posture in all activities.

- Remember to stand tall, pull in your tummy and tuck your bottom in.
- When sitting, sit well back in a chair and support your back with a cushion or a roll. Keep your feet supported on the floor or a low stool.



- Lift correctly. Bend your knees, pull in your tummy muscles and tighten your pelvic floor before you lift.

Constipation

Do not allow yourself to become constipated. Aim to drink 2 litres of water daily and ensure a balanced diet to keep your bladder and bowel working well. Avoid straining.

Moving, bending, stretching, following our exercise program and gentle walking is all good for you. Build up your activity levels as comfort allows.

*If you have any concerns regarding **your operation** (eg. pain, bleeding, discharge, etc.), please contact your **community midwife or the Maternity Unit.***

*If you have any concerns or queries regarding **physiotherapy**, please contact us on **01392 406507.***

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by RD&E staff undertaking procedures at the RD&E hospitals.

© Royal Devon and Exeter NHS Foundation Trust

Designed by Graphics (Print & Design), RD&E