



# **Getting ready to go home after delivery**

Reading this book can help you learn how to care for yourself and what to expect when you go home.

During your hospital stay, the health care team will provide additional information, help and support. We welcome your questions at any time!

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# Chapter 1 – Your nursing care

## **In this chapter you will learn about:**

- Your care at the hospital
- Hospital services

## **Your care at the hospital**

### **A team approach**

A team of people will provide your care. We will work together to meet your needs.

The members of your health care team include:

- You, your partner support person and family
- Health care providers such as your doctor or midwife, nurses, nurse practitioners, physician assistants, social workers, dietitians and public health nurses
- Support staff such as business clerks and environmental aides
- Supervised students and health professionals in training

### **Be involved in your care**

We encourage you to be an active member of your health care team.

You can be involved by:

- Sharing information about your health
- Telling us your wishes, such as how you would like family members and support persons to be involved in your care
- Learning about your health and taking care of yourself
- Letting us know what information or help you need

We encourage you to ask questions at any time.

We want you to have pertinent information and support to feel comfortable making health care decisions. If you do not understand part of your care, please ask again.

## Communication

For us to work well as a team, communication is very important. We welcome your comments and questions at any time.

We will protect the privacy of your personal health information. The members of the health care team only share information as needed, to provide the best care for you.

We use Language Line Services to help people who have a limited understanding of English. The patient or family member and health care provider talk to each other over the phone with the help of a professional interpreter.



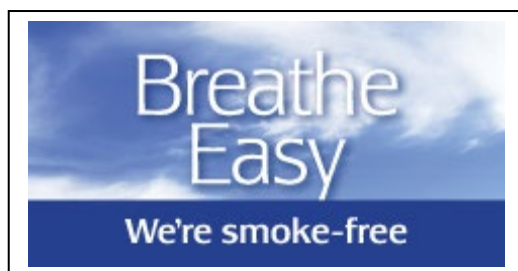
It is also helpful to bring another adult with you who understands English to help with interpretation.

## We are a fragrance restricted hospital

- Many of our staff and patients have asthma and allergies.
- Please do not wear or bring perfume, cologne, aftershave, scented hairspray or other scented products.

## We are a smoke-free hospital

- Smoking is not allowed anywhere on the hospital grounds, including parking lots, garages and vehicles.
- We appreciate your co-operation in providing a safe and healthy environment for everyone.



### If you would like help to quit smoking:

- Talk to your health care provider
- Call Smokers' Helpline at 1-877-513-5333 or visit [www.smokershelpline.ca](http://www.smokershelpline.ca)
- Call the City of Hamilton Tobacco Hotline at 905-540-5566

## Your hospital bill

### If you have a valid Ontario Health Card

Some patient services and equipment are not fully covered by the Ontario Health Insurance Plan (OHIP).

For example, there are extra charges if you:

- arrive by ambulance
- request preferred accommodation (semi-private or private room), as well as our beautiful New Beginnings Room (which is a charge above a private room)

**Please ask ahead of time  
about the costs**

You may have employment benefits or private health insurance that covers some or all of these costs. It is your responsibility to contact your insurance company to confirm your coverage. Be aware that coverage may change year to year.

Please note: You will be billed for any charges not covered by OHIP or your insurance company. See payment options on the next page.

### If you do not have the Ontario Health Insurance Plan (OHIP)

You will be responsible for all costs related to your care, including your accommodation. Please have a credit or debit card available on the day you leave the hospital. You will be expected to pay your hospital bill before you leave (located on the 2<sup>nd</sup> floor). If you are unable to do so, you will receive an invoice in the mail within 5 business days.



## Payment options

<b>Online</b>	<a href="http://www.hamiltonhealthsciences.ca">www.hamiltonhealthsciences.ca</a> Click on Pay-A-Bill
<b>By mail</b>	Hamilton Health Sciences Finance Department - P.O. Box 2000 1200 Main Street West Hamilton Ontario, Canada L8N 3Z5
<b>By credit card</b>	Call Patient Accounts at 905-521-2100, ext. 77000 Patient Accounts is open Monday to Friday from 8am to 4pm
<b>At a financial institution</b>	Pay in person, through a bank teller

## Clean your hands

**Handwashing is the best way to stop the spread of germs that could cause illness or infections.**

Everyone must wash their hands:

- when entering and leaving each unit or ward
- when entering and leaving a patient's room

Wash your hands with soap and water, or use an alcohol-based hand rub (hand sanitizer).

Expect all staff to wash their hands before caring for you. If you do not see them clean their hands, please remind them to do so.



## Wards 4B and 4C

The staff of Wards 4B and 4C provide care to:

- women before delivery who have health risks or develop complications with pregnancy
- women after childbirth and their babies

We will provide your meals. If you would like to prepare something for yourself, use the self-serve kitchen on Ward 4C. There is a microwave oven, refrigerator, hot water dispenser and an ice machine. Please put your name and the date on any food containers you put in the fridge.

## Visiting at the hospital

At the hospital there must be an adult, other than your partner or support person, with the children at all times. The hospital does not provide child care services.

### **Important to remember:**

- We ask that all visitors be in good health. If your visitors are not feeling well, please tell them not to visit. This includes symptoms such as cough, fever, runny nose, sore throat, diarrhea or vomiting.
- Visiting guidelines may change in certain situations. Please talk with your nurses.
- There may be times when no children or only 1 visitor can visit for infection control reasons.

## Hospital services

### Phones and television

There are pay phones at the entrance to Ward 4C and in the family room. You can rent a bedside phone and/or television from Hospitality Network. Information about this service is at your bedside.

### Wireless internet service

Patients and visitors can access wireless high speed internet by connecting to our i-visitor network, powered by Cogeco. Your device will scan and notify you that the HHS i-visitor network is available. Connect to the i-visitor network, log in and choose which plan you wish to purchase.

### Gift Shop

McMaster Give Shop is located on the 2<sup>nd</sup> floor, just inside the main entrance to the hospital. Call ext. 75346.



### Pharmacy

The McMaster Drug Store is located on the 2<sup>nd</sup> floor, beside the main entrance to the hospital. If you have a prescription, you may want to get it filled here before you leave the hospital.

The pharmacy has many items for new mothers, such as:

- sanitary pads
- ladies disposable mesh underwear

## Parking

For current information about parking rates and long term parking options go to [www.hhsc.ca](http://www.hhsc.ca) and click on "Parking & Directions".

You can buy long term parking passes at the Parking Office located in the underground parking garage, red section by the Main Street exit.

Phone: 905-521-2100, ext. 76156  
Email: [parkingoffice@hhsc.ca](mailto:parkingoffice@hhsc.ca)  
Office Hours: Monday to Friday, 8 am to 8 pm  
Call for weekend and holiday hours

## Chapter 2 – Caring for yourself

### **In this chapter you will learn about:**

- Caring for yourself after a vaginal birth
- Caring for yourself after a cesarean birth
- Your moods and feelings
- Resuming your normal activities at home
- Exercises
- Healthy sexuality
- Health concerns

## Your nursing care

### Checking your health

During your stay in the hospital, nurses will check that you are recovering well. The nurses will:

- examine you to see how well you are healing
- help you manage your pain
- ask about your feelings



#### **Safety First**

#### **Prevent falls!**

After delivery you may feel tired, shaky, dizzy, faint or uncomfortable.

**The first time you get up, use your call bell and the nurse will come and help you. Do not get out of bed by yourself, even if you feel well.**

If you are not feeling well, the nurse may ask you to call for help each time you get up, until you are feeling better.

## **Caring for yourself after a vaginal birth**

After a vaginal birth, you can expect to stay in hospital for 1 to 2 days.

### **Your vaginal flow**

You will have some bleeding and discharge from your vagina for up to 6 weeks. This is called lochia. During this time it is best to use sanitary pads, not tampons. Change the pads often.

After the first few days, you should not have any bright red bleeding or clots. It is normal to have more lochia when you are active. Over time, the amount of lochia becomes less and will stop. The lochia will change colour from red to pink to brown.

You may have a period as soon as 2 months after delivery. You can become pregnant before your periods return.

### **Your perineum**

The area between your vagina and rectum is called the perineum. This area may be swollen, bruised and painful after a vaginal birth. You may have stitches in your perineum if you had an episiotomy or a tear. The stitches will dissolve within 1 to 2 weeks.

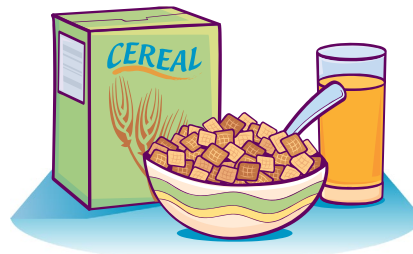
To prevent infection, keep this area clean. Have a bath or shower each day or more often if it makes you feel comfortable. Take your squirt bottle home and continue to use it each time you pass urine or have a bowel movement. Wash your hands before and after touching your perineum.

## Your bowels

Your usual pattern of bowel movements should return in a few days.

Some women may become constipated.  
To keep bowel movements soft and regular:

- Drink 6 to 8 glasses (1.5 to 2 litres) of water or other fluids each day, unless your doctor or midwife has told you to limit fluids.
- Eat foods that are high in fibre such as vegetables, fruits and whole grain products.
- You may need to take a stool softener. This is a medication that softens your bowel movements, making them easier to pass. Your doctor, midwife or nurse can give you more information.



## Passing urine

It is important to get up to the bathroom every few hours to try and pass some urine, even if you do not feel the urge to go. Keeping your bladder empty helps to control your bleeding. Call your nurse the first few times you get up to the bathroom. The nurse needs to measure how much urine you pass.

## Your breasts

Your breasts may become full and feel uncomfortable. For care of your breasts, see page 28

## Your rest and sleep

It is normal to feel tired after delivery. It is hard work. It takes time to adjust to the changes. It may take a few months before you have your full energy level back.

You need to get as much rest and sleep as you can. Rest or nap during the day. If you have visitors, you can ask them to keep their visits short.



## Your comfort

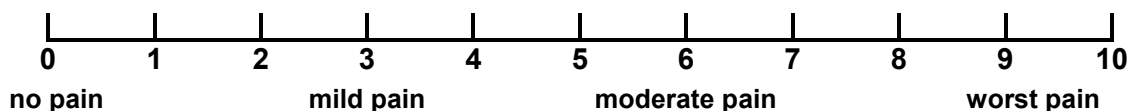
You may feel pain or discomfort from:

- your perineum
- an episiotomy or tear
- a cesarean incision
- hemorrhoids
- full, engorged breasts
- after pains or cramps from contractions of your uterus

Here are some things you can do:

- Take pain medication as directed by your doctor or midwife.
- To reduce pain from your perineum or hemorrhoids, use an ice pack for a few minutes, several times a day. Ask your doctor or midwife about using a medicated cream for hemorrhoids.
- For gas pains - try using a warm blanket, walking or rocking in a rocking chair.

Tell your nurse when you have pain. Do not wait until the pain is very bad. It is helpful to describe your pain on a scale from 0 (no pain) to 10 (worst pain you can imagine).



The nurses will help you find ways to relieve pain and discomfort.

**If you have pain that is severe or is not getting better,  
please tell your nurse, doctor or midwife right away.  
You may also ask to speak with the Clinical Manager.**

## Your medications



### Safety First

**Use only the medication provided by the hospital.  
Do not take your own medications from home.  
Do not give your medications to anyone else.  
Keep all medication away from children.**

## SAM: The Self-Administered Medication Program



You can take the medications provided by the hospital when needed by taking part in “SAM”, the Self-Administered Medication Program.

SAM includes medications to manage pain and to keep your bowels moving regularly.

To take part in SAM, you will need to:

- learn about your medications from a nurse or pharmacist
- follow the directions on the medication containers
- keep your medications safe at your bedside
- record the medications you take

## Caring for yourself after a cesarean birth

Please read this section, even if you are not planning a cesarean birth. It is helpful to know what to expect if the decision to have a cesarean birth is made during your labour.

### Your hospital stay

After a cesarean birth, you will stay in hospital for 2 to 3 days. Your partner or support person can stay overnight with you.

### Managing your pain

If you had a general anesthetic, your throat may feel sore for a few hours. This is due to the tube that was used to help you breathe during surgery.

You will have pain from the incision in your abdomen. You will also feel “after pains” which feel like strong cramps during your period. The amount of pain is different for each person.

The nurses will help you manage your pain. Tell your nurse when you have pain. It is helpful to rate your pain on a scale from 0 (no pain) to 10 (worst pain you can imagine).



The nurses will help you get comfortable and give you medication to relieve pain.

Over the next few days, your incision should become less painful. You will learn to manage your pain with medications and other comfort measures.

**If you have pain that is severe or is not getting better, please tell your nurse, doctor or midwife right away. You may also ask to speak with the Clinical Manager.**

## **The intravenous and catheter**

Your intravenous (IV) will be taken out when you are drinking well and you no longer need IV medications.

Your doctor or midwife will decide when the catheter in your bladder can be removed.

## **Moving and getting out of bed**

Getting up and moving around can help you recover and prevent problems after surgery. Moving keeps your blood flowing, which helps prevent blood clots from forming, especially in your legs.

The nurse will help you get out of bed the first time. It will help if you take your pain medication  $\frac{1}{2}$  hour before getting up. If you feel faint or dizzy, tell the nurse right away to help you get back to bed. When you are in bed, you can move from side to side.

As soon as you are able, go for short walks in your room and in the hallway. Rest after each walk. Each day you should feel a little less pain and be able to walk a little more.

## **Getting your bowels moving**

You may have gas pains in your abdomen. This is normal as your bowels start to work again. To relieve gas pains, try walking around or rock back and forth in the bed or chair. Gas pains usually go away after you have a bowel movement.

Your usual pattern of bowel movements should return in 3 to 5 days. Your doctor or midwife may prescribe a stool softener, a laxative or an enema to help you have a bowel movement.

## Breathing exercises

Deep breathing and coughing exercises keep your throat and lungs clear. This helps prevent pneumonia. The nurse will show you how to do this.

Start these exercises when you are lying in bed. Later on, you can do them sitting up. You will be more comfortable if you cover your incision with your hand or a pillow.

Do these exercises every 1 to 2 hours while you are awake.

## Caring for your incision

Under the dressing or tape, your incision is closed with stitches. The stitches will dissolve and do not need to be taken out.

Keep your incision clean and dry. Your nurse will tell you when you can have a shower or bath. After a shower or bath, gently pat your incision dry.

Check your incision to make sure it is healing well. Look at your incision before you leave the hospital. Then you will be able to see any changes.

## Healthy eating for recovery

Whether they were awake or asleep during the birth, most women can begin eating and drinking after recovery. Some women do not feel like eating right away and may start with drinking fluids.

When you start eating solid foods, eat and drink small amounts and increase your diet as you recover.

Healthy eating can help your body heal and prevent constipation. Choose foods that are good sources of fibre. High fibre foods are fruits, vegetables, and whole grain breads and cereals.



Tell your nurse if you have food allergies or need a special diet (for example, if you have diabetes).

If you have questions about your diet, talk with your nurse, doctor or midwife, or ask to speak with the dietitian.

## Your moods and feelings

Many women have mood changes, such as mood swings, feelings of sadness, and/or feeling anxious.

**Your health care providers will ask about your feelings.**

Mood changes may become Perinatal Mood Disorders (PMD). PMD can be a serious health concern for you or your family. Ask your partner to read this section so that he or she can recognize symptoms and get help, if needed.



### Did you know?

Perinatal mood disorders (PMD) such as depression and anxiety are the #1 complication of childbirth.

Tell your nurse, doctor or midwife if:

- you have any risk factors for PMD (see checklist on the next page)
- you are taking a medication for depression or a mood disorder
- you or your family become concerned about your moods
- your feelings are overwhelming and interfere with your daily life

If you have had depression, a perinatal mood disorder or a mental illness before, be aware that your symptoms can return. Put plans in place so you can get treatment quickly.

- In the Hamilton area, one option for service is the **Women's Health Concerns Clinic** at St. Joseph's Healthcare Hamilton. You can call 905-522-1155, ext. 33979 for an appointment. You do not need a referral from your doctor.
- If you live outside the Hamilton area, call your local Public Health Unit for information about similar services in your community.

### **Are you at risk for Perinatal Mood Disorders?**

Certain conditions make PMD more likely to develop. Tell your nurse, doctor or midwife if you have any of these risk factors for PMD:

- You have had depression, perinatal mood disorder or a mental illness before.
- You have little interest or pleasure in doing things.
- You are feeling down, depressed or hopeless.
- You are having feelings of anxiety or panic for no known reason.
- You are having unrealistic thoughts about yourself, the situation and/or the future.
- You do not have or feel support from family or friends.
- You lack contact with other people and you feel isolated.
- You have had a pregnancy that ended with a miscarriage, abortion or stillborn.
- You have had stressful life events such as a crisis related to your finances, illness, child care, job, marriage or relationship (including physical or emotional abuse by a partner).
- You have a family history of depression, mental illness, alcohol or drug abuse.

### **Perinatal Mood Disorders (PMD)**

Perinatal mood disorders can affect any woman. It is important that you know what symptoms to watch for so you can get help if needed.



## Postpartum depression and anxiety

Postpartum is the time when your body and mind adjust. Postpartum depression or anxiety can occur up to a year.

Symptoms may include some or all of the following:

- feeling overwhelmed and anxious
- loss of interest in activities that you usually enjoy
- loss of or change in appetite
- feeling out of control
- thoughts of hurting yourself (notify your doctor right away)

It is helpful to talk about your feelings with people who are close to you and your health care providers.



**If you have symptoms of postpartum depression or anxiety that last longer than 2 weeks, call your doctor, midwife or public health nurse right away.**

If you live in the Hamilton area, another option for care is the **Women's Health Concerns Clinic** at St. Joseph's Healthcare Hamilton. You can call **905-522-1155, ext. 33979** for an appointment. You do not need a referral from your doctor.

If you live outside the Hamilton area, call your local Public Health Unit for information about similar services in your community.

## Postpartum psychosis

Postpartum psychosis occurs in 1 to 2 out of 1,000 women in the first few weeks after delivery. It is rare, but serious.

Symptoms may include some or all of the following:

- hearing or seeing things that are not there
- believing people or things are going to harm you or
- feeling confused or out of touch with reality
- thinking about harming yourself



**Postpartum psychosis is a medical emergency.  
If you or your family notice any of the symptoms,  
call 911 or go to the nearest hospital emergency  
department.**

### **If you live in Hamilton, please note:**

- The emergency department at McMaster University Medical Centre cares for children and youth ages 17 and under.
- All ages are treated at the other emergency departments in Hamilton – Hamilton General Hospital, Juravinski Hospital and St. Joseph's Healthcare Hamilton (on Charlton Street).

## Treatment and support

It is important to get help for postpartum depression, anxiety and psychosis as early as possible. It may be hard to ask for help, but with the right kind of treatment and support you can get better.

You will get help and treatment from skilled health care providers. The treatment you receive will depend on your needs. There are different types of treatment available such as counselling and taking medication.

## What you can do

### Talk to a health care provider

- Keep all health care appointments.
- Health care professionals care about how you are feeling. They can help you get better.

### Talk about your feelings

- Talk to someone you trust.
- Join a support group.

### Take care of yourself

- Eat a variety of healthy foods.
- Eat small frequent meals if you do not feel hungry.
- Do something you enjoy. Read, take a bath or go for a walk.

### Ask for help

- It is OK to have help.
- Accept help from others.
- Ask someone to call for help if you are not able to do it yourself.
- Family can help with meals.

## What your partner can do

Women who are coping with the feelings and emotions related to childbirth need support. As a partner, here are some ways that you can help:

- Encourage her to talk about her feelings
- Show her that you are trying to understand
- Let family and visitors know if she doesn't feel like company
- Help with the chores and responsibilities at home, or do this yourself
- Accept help from friends and family when it is offered. Go with her to appointments with the doctor or midwife and share your concerns.
- If you feel overwhelmed, talk with family members, a close friend or your health care provider.

## **Perinatal mood disorders (PMD) in fathers**

Perinatal mood disorders affect as many as 1 in 10 men. They are more likely to have depression if their partner has it too.

Fathers may have different symptoms than mothers. Symptoms may include some or all of the following:

- feeling irritable
- feeling angry
- trouble concentrating
- loss of interest in activities you usually enjoy
- starting arguments
- spending less time with friends or family
- easily stressed out
- feeling discouraged
- increased use of alcohol or drugs

### **What you can do:**

- Take time for yourself
- Ask for a leave from work if this is an option for you
- Do things you enjoy
- Talk to friends
- Ask for help from a health care provider if you feel you are not getting better

If you have a history of depression, be aware that your symptoms can return. Put plans in place so you can get treatment quickly.

### Important messages

- ✓ Mood changes are common.
- ✓ Pay attention to your moods. Do not ignore negative feelings thinking they will go away.
- ✓ Talk to your health care providers.
- ✓ There is hope and help for perinatal mood disorders. With treatment and support you can get better.

## Resuming your normal activities at home

**Gradually resume your usual activities  
over the next 6 weeks**

Delivery changes your body. You need time to rest and recover physically and emotionally. Allow family and friends to help with meals, laundry and cleaning. Don't expect to keep your home perfect!

Here are some other changes you may experience as your body starts to recover.

### Your weight and shape

You may lose about 10 lbs. right away and a little more as your body gets rid of extra fluid.

Do not try to lose your pregnancy weight right away. Losing weight gradually over several months is safest.

### Breast and nipple pain

As your body recovers from pregnancy and delivery, you will notice changes to your breasts. As first, your breasts may become full and feel uncomfortable. You may have some leaking of breast milk. These changes will not last long, but you may find them upsetting.

To feel more comfortable:

- Wear a bra that supports your breasts, but is not too tight. Put cotton breast pads inside the cups of your bra in case your milk leaks.
- Drink when you are thirsty. You do not have to drink less fluids. You may have less appetite, but try to continue healthy eating
- Use cold compresses on your breasts or an ice pack on your breasts for a few minutes, several times a day.

- If your breasts are tender or painful, a gentle massage can help. Try massaging and expressing a little breast milk during a warm shower. This will help you feel more comfortable and may prevent a breast infection. This will not cause your breasts to make more milk.
- Take a mild pain medication such as acetaminophen (Tylenol) or ibuprofen (Advil).

## Bladder control

After delivery you may not always have full control of your bladder. Some urine may leak out when you laugh, cough or sneeze. This is called stress incontinence.

You can recover your bladder control by doing Kegel exercises regularly. These exercises strengthen the muscles that support your bladder.

### How to do Kegel exercises

Kegel exercises are for your pelvic muscles. To feel your pelvic muscles, sit down. Try to squeeze the muscles of your rectum, like you are trying not to pass gas.

To do a pelvic muscle exercise:

- Squeeze the pelvic muscles and hold for 3 seconds, count “1 and 2 and 3”.
- Try not to tighten the muscles in your stomach or buttocks.
- Try not to hold your breath.
- Relax for 3 seconds.

10 exercises are called 1 set.

Do 1 set, 5 times a day.

As you get better at doing Kegel exercises, you can count to 5 and relax for 5. You must squeeze and relax your muscles for the same amount of time.

After you get used to doing these exercises, you can do them any time, any place and in any position. No one can see you doing them. Pelvic exercises are healthy to do your whole life.

## Hemorrhoids

These are painful, swollen veins in and around the anus. Many women get them during pregnancy and they often get worse after delivery.

Try these steps to manage your hemorrhoids:

- Use your sitz bath and soak in warm water with Epsom salts.
- Apply a cold compress for 5 to 10 minutes for comfort and to reduce swelling.
- Ask your health care provider which over the counter cream you can use to relieve pain and swelling.
- Eat foods that are high in fiber such as fruits, vegetables and whole grain breads and cereals.
- Drink plenty of water.
- Do not strain when you are having a bowel movement.



## Exercises

**Check with your doctor or midwife about when you can start exercising.**

Exercise gives you more energy, helps you sleep better and may be helpful in preventing postpartum depression.

After a cesarean birth, your incision needs time to heal. Do not do any strenuous activities such as lifting anything heavier.

If an activity makes you feel tired or uncomfortable, stop and rest. Wait a few days before trying that activity again.

### Guidelines for exercise:

- Wear comfortable clothes and shoes that offer good support.
- Begin with light activities such as short walks. Walk a little more each day. Slowly increase the amount of time that you walk. Walking improves blood flow which can help prevent constipation and blood clots.
- Do Kegel exercises to strengthen and tone the muscles around your bladder and pelvis.
- Do gentle stretches to improve your flexibility and movement.
- Do not do sit-ups or other strenuous exercises such as jogging, swimming, jumping and skipping that will strain your abdominal muscles until after you have checked with your doctor or midwife at your 6 week postpartum visit.
- Begin slowly and work up to doing more exercise as you feel stronger.
- Relax before and after each exercise.
- Try not to hold your breath while exercising.
- Rest when you are tired. It is important to get as much sleep as possible to help you recover.
- If you feel pain STOP and rest. Begin again only if the pain is gone.

**Remember!**

**Always go at your own pace while doing exercises that are right for you!**

## Healthy sexuality

### Delivery may change your desire to have sex

Many women feel less interested in sex after delivery. Most women find their usual interest in sex returns gradually over the next year.

You will need time to adjust to the physical and emotional changes after the delivery. You may feel exhausted as all your time. This can affect the sexual relationship with your partner.

Feeling less interested in sex may be caused by many things such as:

- changes in hormones
- discomfort or pain in your perineum, the area around your vagina and rectum
- exhaustion
- feeling less attractive
- fear of pregnancy
- need for birth control
- bladder or bowel problems

Try to plan some time to be alone with your partner. You may enjoy being close or trying sexual activities other than intercourse.

### When to consider birth control

**If you do not wish to become pregnant again, you and your partner should decide on a method of birth control BEFORE you have sexual intercourse.**

You can become pregnant at any time, even if you have not had a period since delivery. Your period may take several months to start again.

Talk with your obstetrician, family doctor or midwife about which methods of birth control are suitable for you at this time.

## **When to have intercourse**

You may have sexual intercourse when your bleeding has stopped, your vaginal area feels comfortable and you feel ready. This is different for each woman. Some women resume sexual intercourse within 7 to 8 weeks of delivery. Other women do not feel ready to have sex for several months to a year after delivery.

When you feel ready will depend on many things such as:

- whether you have discomfort or pain
- how you are feeling
- your relationship with your partner
- medical advice from your doctor or midwife

## **Discomfort or pain during intercourse**

Intercourse should not cause discomfort or pain. If you have either, stop. Talk to your doctor or midwife.

Your estrogen hormone levels will remain low until your periods start up again. This may make your vagina dry. Use a lubricant to provide moisture.

Go slowly at first. Tell your partner what feels good and what doesn't.

Choose positions that allow you to control movement. Stop right away if you feel any discomfort or pain.

## Health concerns

**Call your family doctor, obstetrician or midwife if you have ANY of these problems:**

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<b>Fever</b>	<ul style="list-style-type: none"><li>• Your temperature is 38°C (100°F) or higher.</li></ul>
<b>Perineum</b>	<ul style="list-style-type: none"><li>• You have pain, redness or swelling in the area between your vagina and rectum that is getting worse.</li></ul>
<b>Vaginal flow</b>	<ul style="list-style-type: none"><li>! You have heavy bleeding – soaking a maxi pad in 1 hour, or passing large clots the size of an egg from your vagina.</li><li>• There is a change in the discharge from your vagina. For example, it increases in amount, has a bad smell or that area is very itchy.</li></ul>
<b>Cesarean birth incision</b>	<ul style="list-style-type: none"><li>• Pain in your incision that does not get better with medication.</li><li>• Your incision is bleeding, draining or coming open.</li></ul>
<b>Passing urine</b>	<ul style="list-style-type: none"><li>• You have the urge to pass urine all the time.</li><li>• You have trouble passing urine and it is painful.</li></ul>
<b>Bowel movements</b>	<ul style="list-style-type: none"><li>• Your usual pattern of bowel movements has not returned in 2 to 3 days after a vaginal birth, or 3 to 5 days after a cesarean birth.</li></ul>
<b>Breasts</b>	<ul style="list-style-type: none"><li>• Any red, sore, warm areas, lumps or discoloration on your breasts.</li><li>• Your milk leaks for longer than 2 weeks.</li></ul>
<b>Feelings</b>	<ul style="list-style-type: none"><li>! You are feeling anxious, panicky, hopeless or helpless.</li><li>! You have thoughts of harming yourself.</li></ul>
<b>Other</b>	<ul style="list-style-type: none"><li>• You have one or more of these symptoms: a headache, neck pain, or neck stiffness – and they are severe or do not get better.</li><li>! You are unable to care for yourself.</li><li>! You have pain or tenderness in your leg (calf) with swelling, redness or warmth.</li><li>! You have trouble breathing or chest pain.</li><li>! You feel faint or dizzy often.</li></ul>

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If you are concerned, call your family doctor, obstetrician or midwife right away. **Do not wait for your next appointment.** If you are unable to reach a doctor or midwife, go to the nearest hospital emergency department.



**For these emergencies call 911 or go to the nearest hospital emergency department.**

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**Notes/questions**

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