MATERNAL-FETAL MEDICINE POSTPARTUM CARE

VAGINAL BLEEDING

Vaginal bleeding usually continues for 3-4 weeks after delivery, although it is not uncommon that the duration may be longer. The amount of bleeding varies, but during the the first two weeks, the amount is similar to an average menstrual period. Increased activity may be associated with increased amounts of bleeding. Increasing bleeding, foul-smelling vaginal discharge, fever (greater than 100 degrees) or chills, or increasing uterine tenderness may suggest infection and should be evaluated. If these signs or symptoms occur, you should give us a call.

EPISIOTOMY AND HEMORRHOIDS

Sitz baths (sitting in 5-6 inches of warm water in a tub for 15-10 minutes) 3-4 times per day may reduce the discomfort associated with either episiotomy or hemorrhoids. You do not need to scrub this area, but rather gently pat dry after sitz bath or shower. You may use mild soap once a day. Loose cotton underwear will probably feel most comfortable. Nothing should enter the vagina for at least three weeks or until the bleeding stops. You should not douche or have intercourse during this period and pads should be used, rather than tampons. If you have increasing discomfort from your stitches after the first 4-5 days, or still have bright red bleeding (rather than a small amount of spotting) after 3-4 weeks, you should give us a call.

ACTIVITY AND EXERCISE

You should limit your activity for the next weeks and avoid any heavy lifting or strenuous activity. Allow yourself time to rest. It is most helpful to have another person home with you during your first several days, if possible. Normal activity should be resumed gradually. It is fine to drive a car or climb stairs, but initially try to minimize these and other similar activities. If you had a cesarean section, you should avoid driving for the first two weeks after delivery.

You may begin doing your Kegel exercises right after delivery. You can gradually begin doing strenuous exercises, such as swimming, jogging, tennis, dance, etc., at three weeks after a vaginal delivery or after your first postpartum visit following a cesarean section.

SEXUAL ACTIVITY

You may resume sexual intercourse as early as three weeks after vaginal delivery, as long as the bleeding has stopped, although many couples may prefer to wait until after the first postpartum visit. If you had a cesarean section, you should wait until after your postpartum visit. The initial attempts at intercourse may feel awkward. The man often worries that he will hurt his partner, and the woman worries that her stitches will tear. Use of a lubricant (water-soluble, like K-Y Jelly) will ease penetration and make intercourse less uncomfortable initially. Proceed slowly and gently. Since you can become pregnant after delivery (even with a history of infertility), contraceptive methods,

such as condoms or contraceptive foam, should be used if you have intercourse before your first postpartum visit. Alternative methods of birth control will be discussed at your 4-6 week postpartum visit.

BREAST CARE

Breast feeding allows a mother to continue to provide nutrition for her baby, as she has done for many months. Many women enjoy breast feeding; however, formula is also able to provide for the newborn's nutritional needs. Whether or not to breast feed your infant should be an individual decision.

Your breast may become engorged with milk 3-7 days after delivery. Breast feeding will improve the engorgement, but the discomfort may continue for several days. To relieve mild discomfort, you may apply warm moist compresses to the breast. If there is persistent pain or redness in your breast, or if you have a temperature greater than 100, you should give us a call. These signs may suggest a breast infection. Your nipples are usually sore for the first week of breast feeding. When breast feeding, use no soap on your nipples. After breast feeding, rub the remaining milk on the nipple and let it air dry to prevent the nipples from becoming dry and cracked. Lanolin or Masse cream may also be applied after the nipples have dried to prevent cracking. Excess cream should be wiped from the nipple prior to the next feeding, but it is not necessary to wash the nipple before feedings.

If you are bottle feeding, be sure to use a well-fitting, supportive bra. Use of ice packs may decrease additional discomfort and milk production. The soreness and engorgement should go away in several days.

DIET

Continue to eat a well-balanced diet as you did during pregnancy, and continue your prenatal vitamins for at least the next month. Take in plenty of fluids and, in general, use common sense.

POSTPARTUM "BLUES"

Most women will have some postpartum "blues," which may include: feeling helpless, inadequate or lonely, unprovoked crying, or being depressed without apparent reason. Episodes are usually brief, lasting several days to several weeks. However, if these episodes persist for more than several weeks, or become overwhelming, please contact us.

It is hoped that you have an uneventful postpartum recovery. If you have any questions or are unsure if you should be concerned about the course of your recovery, please do not hesitate to call us. We usually like to see patients 4-6 weeks after delivery. Please call the office several weeks prior to your planned visit to schedule an appointment.