



Helpful Postpartum Tips

Congratulations on your new bundle of joy!! Now that you are home all the fun begins. Here are some tips and reminders of what to expect.

Labor and delivery is hard work. Expect some fatigue and mood swings due to the large shift in hormones and body fluids.

Episiotomy Care

You will have some soreness and discomfort at the episiotomy site. A warm sitz bath followed by using a hair dryer on a low setting will help to keep this area clean and provides some relief from the discomfort.

Do not use tampons or a douche. Change your maxi-pads frequently and avoid any tight clothing. You should use a mirror to examine your stitches and if you notice any pain, a foul smelling discharge or see any redness or separation of the stitches you need to call our office. Occasionally the stitches will dissolve faster than the tissue heals and you may notice some stitches when you wipe. As long as there is no increased pain, discharge, or temperature greater than 100.5, there is no reason for concern.

An episiotomy is when a small cut is made to widen the opening of your vagina when you're giving birth. The physicians at Women's Health Specialists DO NOT cut episiotomies on every woman. It is a decision that is made at the time that the baby's head is crowning. It is done to assist delivery of the baby or to avoid tearing. The area is repaired with dissolvable stitches and to help ease the pain and to heal quicker you can:

- Apply cold packs or chilled witch-hazel pads to the area
- Do Kegel Exercises a day after birth
- Use a numbing spray or cream
- Use a pillow to sit on
- Do sitz baths (sit in a bathtub or warm water just deep enough to cover buttocks and hips)

Hemorrhoids

Most women who have had a baby will experience hemorrhoids. Try to keep your bowels soft by using Colace, increasing the fiber intake and using bulking agents like Metamucil. Tucks pads and Preparation H pads with each bowel movement will help treat discomfort. Occasionally, a hemorrhoid will have a clot that doesn't dissolve and will be very uncomfortable. If you have tried all the above measures without relief then you need to call the office.

Breast Care

Your milk will still come in after 48-72 hours after delivery even if you choose to bottle-feed. Minimizing the amount of stimulation to your nipples will decrease the amount of milk production. Wear a well fitting bra, a sports bra works well for this, and avoid changing the bra for 2-3 days. Use a wide (6 or 8 inch) ace wrap and bind your breast to decrease any stimulation. Ice packs will also decrease the amount of engorgement when your milk comes in. Once your body senses that milk production is not necessary, your milk will dry up. If you have leakage that persists, just repeat the above steps.

If you have a temperature that is greater than 100.5 or your breasts become tender and red, you need to call our office.

Sore Nipples

The baby must have all of the nipple and most of the areola in their mouth when they latch on. Change the position of the baby to allow the baby to latch on differently with each feeding. Allow your nipples to air-dry a few minutes after each feeding. Keep your pads dry and try to use cloth when possible. Paper disposable pads are sometimes irritating. Occasionally, a milk duct will become clogged. There is usually some discomfort, but no fever or flu-like symptoms. Try warm compresses and massaging the breast.

Mastitis

If you are breast-feeding and feel like you have the flu, you may have mastitis. You may have a fever (> 100.5) and breast tenderness as well. You will need antibiotics to clear up mastitis. Call immediately if you have any of the above symptoms.

Postpartum Blues/ Depression

Feeling “blue” after delivery is very common however if the feelings of sadness persist for more than 2 weeks after delivery you may be experiencing postpartum depression. Postpartum depression can affect 5% to 25% of women. Symptoms include sadness, fatigue, changes in sleeping and eating patterns, reduced libido, crying episodes, anxiety, and irritability. If you are experiencing any of these symptoms please contact our office.

Lochia

The discharge after a delivery is called lochia. Initially it will be as heavy as a period, but should become lighter over a week to ten days. You may notice an increase in the discharge after nursing or an increased activity level. If the discharge increases or becomes bright red, decrease your activity level. If this does not help to reduce the flow, call the office.

Birth Control

There is no magic time to resume intercourse. You should wait until your lochia has stopped and any soreness from delivery has resolved. We recommend that you NOT resume intercourse until after your six week postpartum visit. If you are breastfeeding you may notice vaginal dryness and may need extra lubrication. You must use birth control as you are still able to get pregnant during this time. You will ovulate prior to your next period. Breastfeeding will delay ovulation but doesn't guarantee you won't get pregnant. Some birth control options include depo-provera injections, birth control pills, IUD's or a diaphragm. Condoms are also a good choice, especially when used with a spermicide.

Office Follow-up

You will need to schedule a six week postpartum exam. At this visit we will review contraceptive options.

Pain Medicine

Tylenol or Motrin may be used during the postpartum period. If you need a refill on your pain medicine, please call the office during regular hours.