

### **Why have I been given this leaflet?**

You have just had an Emergency Caesarean Section – it was not planned so you had no chance to prepare for it. This leaflet will explain what to expect over the next few days and when you go home to try and make your recovery as quick, safe and comfortable as possible.

### **What will happen after the caesarean?**

- You will have come out of theatre with a “drip” (intravenous line) which will be discontinued within the first day when you are drinking enough unless there is any particular need to give you fluids or antibiotics.
- You will have a catheter draining urine from your bladder. This will usually be removed within 12-24 hours.
- You will be offered oral and injectable pain relief regularly by the midwives. If you require additional pain relief please ask a member of the staff.
- To begin with you will struggle to move easily so will be given assistance with your hygiene needs and be assisted up to the toilet and shower.
- Usually after 24 hours you are able to move around fairly comfortably.
- Most women stay between 24 - 48hrs, but this can be longer - depending upon your personal needs or if your baby still needs care.
- It is important that you have good support when you go home so that you don't overdo it.

### **How do I care for my caesarean wound?**

- The stitches we use are usually with dissolvable but occasionally they will need to be removed on the 5th day post caesarean by your midwife.
- The dressing will be removed after 48hours and will not be replaced.
- It is then good practice to keep the wound clean and dry – as you would with any other cut on your skin.
- Clean the wound once or twice a day by wiping it gently but firmly using clean water and a soft unscented wipe/swab. Always wash your hands first.
- It is good for the wound to get some air, as this helps to prevent infection and aids healing. It may be necessary to lie down and lift up your tummy from time to time.

### **Why am I wearing stockings and being given injections?**

- After surgery you are at risk of developing a **DVT (Deep vein thrombosis)** which is a blood clot in one of your legs.
- These can be serious especially if they move to your lungs (**pulmonary embolus**).
- To reduce the risk of these we:
  - Fit you with some stockings to be worn for the first 10 days or longer if you are not mobile. They should be reapplied after a shower or bath.
  - Give you an injection of heparin to further reduce your risk of developing a DVT. These are injected into your tummy for 10 days. You will be shown how to do this before you go home.
  - Encourage you to mobilise as quickly as possible

### **How do I help myself to move better?**

- You will be given advice following your operation on deep breathing exercises, the importance of maintaining a good posture and pelvic floor exercises.
- Should you need to cough or sneeze, support your tummy firmly with one arm across your abdomen.
- For the first two weeks – **DONT OVER DO IT!**
  - You have had major surgery - be kind to yourself.
  - Avoid lifting heavy things or heavy housework for the first few weeks.
  - The baby or a small shopping bag is okay;
  - The baby strapped into a car seat or 4 bags of shopping is too much!
- You cannot drive for at least 4 weeks until you can safely perform an emergency stop without it hurting
- It is advisable to wait for at least 4 weeks before resuming sexual intercourse, to enable the wound chance to heal and for you to feel more comfortable.

### **Breastfeeding your baby**

We encourage you to breast feed your baby but some of the natural processes may not occur if you have a caesarean section. To help this:

- Please ask a member of staff to support you with feeding and assisting you with getting the baby out of the cot.
- Have your baby skin to skin and keeping your baby close. This will increase the hormones that assist with producing your breastmilk and help you pick up on the baby's early feeding cues as the more your baby feeds the more it will stimulate your milk production.
- There may be occasions when your baby is

reluctant to feed and it is therefore important to hand express. Ask a member of staff to show you this skill as it will help with your milk production if you have not already learnt it.

### What must I look out for once I am home

- It is important to monitor your wound closely. If you are unable to see the wound, have a loved one check it alternate days for signs of any infection.
- In addition to wound infections you are at an increased risk of other post-operative complications such as blood clots.
- Do not ignore any signs of illness.
  - Severe abdominal pain, redness, or swelling around the wound site.
  - Pain that is not improving or gets worse
  - Pus and discharge from the wound
  - Temperature or feeling hot and cold and generally unwell
  - Pain on passing urine or smelly vaginal discharge
  - Bleeding that soaks a sanitary pad within an hour or that contains large clots
  - Leg pain or swelling or sudden breathlessness

Call your doctor or ring Maternity triage **07990986517** if you have any of these symptoms once home

### Do I need any different things bought in?

- Large comfortable pants that will not rub on the caesarean wound.
- **Buy some pain relief** ready for use at home as this is not offered routinely on discharge. Paracetamol and ibuprofen can be used. Codeine products are not recommended if you are breast-feeding.

### Visiting:

Partners and **your own** children are welcome between 9am -9pm. For other visitors please ask or refer to the hospital web-site.

### What will happen in a future pregnancy?

A doctor or a midwife will come and talk to you about what happened this time and what may happen in a future pregnancy. You will be given a leaflet 'Birth Choices after a Previous Caesarean Section' for you to read. Many ladies go on to have a normal vaginal delivery

### Feedback regarding your stay

We will ask you if you would be willing to provide feedback regarding your stay via the Friends & family questionnaire on the TV (staff will direct you) so that we can make improvements to the service we provide. If you have any queries or concerns regarding the care you have received please ask to speak to the Maternity Ward Manager, Senior Midwife or Matron before you go home.

### Telephone numbers:

Maternity Triage	07990986517
Maternity ward	01432 372994

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## Emergency Caesarean Section

### Information Leaflet



Maternity Department