

Physiotherapy Department Recovery advice and exercise following major gynaecological surgery



Patient Information

Introduction

The James Paget University Hospitals NHS Foundation Trust has developed an enhanced recovery programme for patients undergoing a major gynaecological operation. The aim is to get you up and about quickly after your operation. Research has shown us that it is much better for you to be out of hospital as quickly as possible; you are much less likely to develop an infection in your own home, as well as getting improved rest and sleep and being surrounded by your own comforts.

There will be a team of individuals looking after you whilst you are in hospital, all working to make sure you get the best from your operation. However, the most important person in that team is YOU. In order for you to get the maximum benefit from your operation, there are some things you must do to help yourself.

This booklet will cover how to:

- Move easily and rest comfortably after your operation
- Exercise to prevent breathing and circulation problems
- Exercise the pelvic floor muscles and abdominal muscles
- Safely return to normal activities

Please have this booklet with you when you attend the Physiotherapy class and when you come into hospital for your operation.

This booklet will be applicable if you are undergoing any of the following operations:

Abdominal Hysterectomy
Vaginal Hysterectomy
Laparoscopic Assisted Vaginal Hysterectomy
Total Laparoscopic Hysterectomy
Laparotomy
Vaginal Repair for Prolapse (Anterior and/or Posterior)

Your personal checklist

At the back of this booklet you will find a checklist for you to follow each day to monitor how well you are doing in your recovery. If you answer "no" to anything on the checklist then you must alert a member of the medical team. Please work through your checklist each day, making sure that you are comfortable by ensuring that your pain is well controlled, you are eating and drinking, and that you are getting up and about.

What will happen prior to my surgery?

Attend pre-operative physiotherapy class: this will be booked after you have been placed on the waiting list for your operation. Please contact the Gynaecology department if this has not been arranged. Please make every effort to attend the class; however this may not be possible if you have been booked for an urgent operation.

Attend pre-operative assessment: This will be arranged with the medical team and you will be contacted in due course. Please speak with your consultant for further information about this.

Start planning your post-operative recovery:

Talk with your family and / or friends about what help you will need after your surgery. If you live alone you will need to have someone to support you on discharge.

Prepare, batch cook and freeze meals.

Do all of the shopping, cleaning and washing that you want done as you will be restricted for six weeks.

Stock up cupboards.

Arrange common items at waist height so you do not need to stretch and bend for them.

Ensure there is clear access through your home: remove trip hazards.

If you are a main carer for someone else ensure arrangements are in place to help

If you have concerns about how you will cope after your surgery talk to your GP or health professional. It is also advisable that you inform us if you have mobility problems or disabilities that might affect your recovery. Please see the section "what can I do and when after my surgery?" to help you plan ahead.

How long will I be in hospital?

The length of time that you are in hospital will depend upon the type of operation you have, yourself, and your doctor. It is usually between one to three nights stay. Once at home, you will need time to rest and recover. It is important to consider that although your scar may have healed on the outside, it still needs time to heal on the inside. The type of sutures (stitches) used vary from surgeon to surgeon, so a member of the gynaecology team will provide instructions about wound care when you are ready to be discharged.

- Pack some lose fitting clothes and sensible non-slip footwear
- Please bring your own toiletries including toothbrush, toothpaste, soap, deodorant, etc. Towels are not needed
- Bring your medication with you
- Bring any books or magazines or Ipads you would like. Mobile phones can be used but please bring your own charger
- Please bring only a small bag due to minimal space

Recovery advice and exercises after my surgery

Pain relief – it is important that you ask for some pain relief if you are feeling uncomfortable. Exercise and walking about may cause discomfort, so it is a good idea to help to prevent this by taking regular pain relief medication in the first 48 hours, even if you are feeling comfortable.

The day of your operation

Circulation exercises: Until you are mobile, undertake the following two exercises every hour.

1. Sitting upright, take five deep breaths, feeling the lower ribs move out. Deep breathing can help you to relax and relieve any nausea you may be experiencing.



2. Move your feet and ankles up and down for 30 seconds.

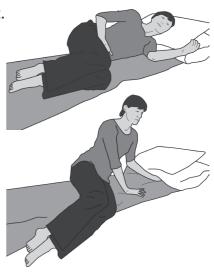
What can I do to help clear my chest if I am struggling to cough? After doing your 5 deep breaths, make a short sharp huffing sound with a wide open mouth, as though you were misting a mirror.

When you feel ready to cough try placing a pillow or rolled up towel across your tummy for support.



How to get out of bed

- Bend your knees and roll onto your side
- Lower your feet over the side of the bed
- Push up with your elbow and hands
- Repeat in reverse to get back into bed



Sitting out of bed – try to spend one to two hours at a time sitting out in the chair each day after your surgery. This will help to make you feel better and help with your recovery.

Wearing your own clothes – this will make you feel better and help motivate you with your recovery.

Walk a short distance – this will help to keep your circulation moving, and encourage your bowels to start working after your operation. It will allow you to start moving to and from the bathroom with confidence.

Washing

It is ok to bath or shower after your operation. It is better to pat any wound dry or allow it to air dry. Wounds heal better if they are clean and dry. It is preferable not to have long soaks in the bath until after the wounds are healed.

Going to the toilet after your operation

- You will have a catheter in your bladder after your operation

 this is usually removed the next day. The nursing staff will
 need to measure how much urine you are passing after it is
 removed.
- Sit on the toilet properly when you first try and empty your bladder do not hover, as this may not allow your bladder to empty properly. Try to relax and take your time.
- You should pass urine every two to four hours.
- If you experience any difficulty going to pass urine, or an altered sensation when you need to go, it is important you speak to your nurse or doctor immediately.
- It is important to drink plenty of fluid, 1.5 2 litres each day.
 Water is best.
- Try to avoid going to the toilet "just in case".
- IT IS IMPORTANT NOT TO STRAIN TO EMPTY YOUR BOWEL

- If you find it difficult to open your bowels after your surgery, please speak with your doctor or nurse about medications which may help.
- Follow the instructions below and use the position in the diagram to help you to empty your bowels more easily.
- Sit comfortably on the toilet and relax.
- Keep your knees apart and higher than your hips (either use your tip toes or a footstool if needed)
- Lean forwards and rest your forearms on your thighs whilst keeping your back straight.
- Let your tummy relax, widen your waist and allow your abdominal muscles to bulge outwards.
- If you have had a vaginal operation, you may want to support your stitches by placing a clean pad against your perineum.
- Keep your mouth slightly open and your jaw relaxed. Breathe out. This allows your pelvic floor to remain relaxed.
- Pull up your anal muscles as you finish emptying. This will improve the closing reflex.

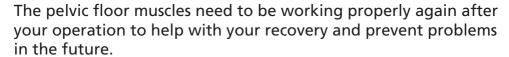


Pelvic Floor Muscles

These are a group of muscles that span the outlet of your pelvis. They attach from the pubic bone at the front to the coccyx bone at the back, forming the floor of your pelvis.

The main functions of the pelvic floor are:

- Helps you control your bladder and your bowels
- Support your bladder, womb and bowel
- Improves sensation during sex.



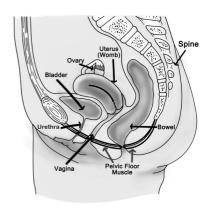
Start the exercises gently once your catheter has been removed and you have been able to pass urine on your own. If you have stitches underneath it is perfectly safe for you to do your pelvic floor exercises.

They need to be practised lifelong. Make your pelvic floor exercises part of your daily routine, just like brushing your teeth.

How do I do my pelvic floor exercises?

Imagine that you are trying to stop yourself passing wind and urine at the same time. You can also think of squeezing tight in the vagina. You should feel your pelvic floor muscles 'squeeze and lift'; try not to squeeze your buttocks and legs.

- They can be performed in any position. Straight after your operation you may find it easier to do them in lying or sitting.
- As your muscles improve aim to do some of your exercises standing up.
- Do not hold your breath whilst doing your pelvic floor exercises. This is difficult at first but keep trying. Sometimes it helps to count out loud.



• Do not practice stopping the flow of urine mid-stream as this could affect your bladder function in the longer term.

You should try to aim for the following routine:

- Short squeezes 10 times
- 10 second squeeze 10 times
- Repeat this three to five times a day.

The Knack

When we lift, bend, strain, cough or sneeze, pressure increases in your abdomen. This is called intra-abdominal pressure. The pelvic floor and tummy muscles should naturally brace to ensure your pelvic organs are not pushed down. Many of us need to re-train our muscles to brace, particularly if our pelvic floor muscle is weak or too slow to work. This is called 'the knack'. You should try to tighten your pelvic floor muscles before you do anything that may put them under pressure. This will help support your pelvic region after your surgery, and is a useful technique to use lifelong.

Abdominal Exercises

It is important to exercise your abdominal muscles after any gynaecological operation. These muscles work to support your back and help with your posture. Using your abdominal muscles when performing activities such as lifting or bending will make you feel more comfortable after having abdominal surgery.

For all the following exercises, lie down on your back (preferably on your bed if you cannot get down on to the floor comfortably), with your knees bent.

Stage 1 exercises: Can start the day after your surgery.

1. The deep tummy exercise

 Take a deep breath in, as you breathe out gently draw in the lower part of your stomach, as if you are trying to zip up a tight pair of trousers

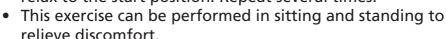


- Try to hold this position whilst breathing normally for a few seconds.
- As the muscles strengthen you can build up to a ten second hold, repeated ten times, several times each day.
- As you become confident performing this in lying, start to do it during everyday activities as part of 'the knack', to support the abdominal muscles.

2. Pelvic tilting

- Draw in your tummy (as in exercise one), then gently press the small of your back down, tilting your pelvis.
- Hold this position for a few seconds then gently

relax to the start position. Repeat several times.





Stage 2 exercises: Able to start once stage one exercises are comfortable

3. Leg slide

- Draw in your tummy muscles (as in exercise one) to keep your back steady.
- Whilst holding this position, slowly slide one leg until it is straight and resting on the bed.
- Return to the starting position by slowly bending your leg, then let your tummy relax. Repeat several times with each leg.

4. Knee rolling

- Draw in your tummy muscles (as in exercise one), then slowly roll your knees gently to the right.
- Return to the middle and repeat to the left. Return to the middle and let your tummy relax. Repeat several times.

5. Single bent knee fall out

- Draw your tummy muscles in (as in exercise one).
- Allow one knee to roll out to the side, slowly and with control. You are aiming to keep your surface beneath you.
- pelvis and back still on the





Slowly bring the leg back in. Repeat on the other side.

What can I do and when after my surgery?

Recovery from an operation is a personal experience, and a gradual return to your normal levels of activity is best. The following section provides a guide as to when you may be able to start certain activities. This can vary from person to person issues such as previous surgery and underlying health issues can affect how quickly we heal and recover.

One to two weeks

Look after yourself and make sure you have enough rest

Do the pelvic floor and abdominal exercises daily

Go for a short walk each day: five to ten mins

Do not stay in bed

Do not do any heavy lifting or prolonged standing – listen to your body.

Two to three weeks

Start to gently increase your walking time

Help with light household tasks e.g. wiping-up, dusting, making light meals

Keep doing your pelvic floor and abdominal exercises daily.

When possible sit rather than stand

Do not do too much too soon

Four to six weeks

Gradually build up to do more household jobs e.g. cooking and ironing

Increase your walking as comfortable

Avoid heavy lifting (bag of groceries, hoover, full kettle) and

prolonged standing (more than 30 minutes)

Remember, your initial wound healing takes up to six weeks – it may look fully healed on the outside quickly, but inside is still recovering.

Six to twelve weeks

Begin doing more strenuous tasks e.g. vacuuming.

Start low impact exercise such as Pilates, swimming or cycling. Wait until any vaginal bleeding or discharge has stopped before you start.

If you are exercising with a personal trainer or gym instructor, make sure that you tell them that you have had recent gynaecological surgery.

Still listen to your body – if something is uncomfortable, stop You should still be doing your pelvic floor and abdominal exercises daily at this stage.

Over twelve weeks

Aim: By week 12 to be back to your normal level of activity Leave heavy lifting until at least 12 weeks

You will need to wait at least three months before you start high impact activities and exercise, or any competitive sports.

Some exercises that involve 'heavy straining' may need to be avoided for life – speak to a member of the Women and Men's Health Physiotherapy Team for specific advice.

Continue your pelvic floor exercises life long

Remember – for any lifting activities, use the knack (return to page nine for further information)

Returning to work

This will vary depending upon you, your operation, the type of work you do and the number of hours you work.

- Four to six weeks for less strenuous jobs e.g. office work
- 12 weeks for strenuous jobs involving lifting or standing for long periods
- Speak to your occupational health department if you have one for guidance on return to work
- Consider a phased return to work if necessary
- If you have concerns or need specific advice on returning to work then ask your doctor or Women and Men's Health Physiotherapist.

Driving

- Wait at least three weeks
- Check with your insurance company before you drive

You should be able to:

- Comfortably look over your shoulder and turn the steering wheel without pain.
- Perform an emergency stop. Practise this before you start the engine when you go out for the first time.
- Fully concentrate on your driving and the road around you.

Sexual activity

You should be guided by how ready you are and how comfortable you feel before you re-start sexual activity and this will vary from person to person.

You should wait at least four to six weeks before having intercourse, making sure that any bleeding has stopped and that your scar is well healed. If this is too soon for you then wait until you are ready.

Your personal checklist

On the next few pages are your day-by-day checklists. This will help you to ensure you are doing everything you can to help with your recovery following your surgery. If you answer "no" to any of the questions, particularly the one about pain relief, please speak to you nurse or doctor immediately.

Patient Checklist

Day 0 (day of your operation, when you return to the ward after your operation)

Activity	Yes	No	Comments	
My pain has been controlled today				
I have done some deep breathing and circulation exercises today				
I have been sitting out of bed for at least two hours				
I have had something to eat and drink				
Please use this space to note any questions or concerns you have about today.				

Day one (first day after your operation)

Activity	Yes	No	Comments
My pain has been controlled today			
I have done some deep breathing and circulation exercises today			
I have practised my deep tummy activation and stage one exercise			
I have dressed in my own clothes today			
I have been sitting in the chair today			
I have walked a short distance on the ward today			
I have been eating and drinking well today			

I know when I am going home - today / tomorrow / next day (please circle)

I have arranged transport to go home YES / NO

Please use this space to note any concerns you have about today or for any questions you may have.

Day two (second day after your operation)

Activity	Yes	No	Comments	
My pain has been controlled today				
I have done some deep breathing and circulation exercises today				
I have practised my deep tummy activation and stage one exercise				
I have practised my stage two exercises				
I have been sitting in the chair today				
I have walked a short distance on the ward/home today				
I have been eating and drinking well today				
I know when I am going home – already home / today / tomorrow / next day (please circle)				
I have arranged transport to go home YES / NO				
Please use this space to note any concerns you have about today or for any questions you may have.				

Day three (third day after your operation)

Activity	Yes	No	Comments	
My pain has been controlled today				
I have done some deep breathing and circulation exercises today				
I have practised my deep tummy activation and stage one exercise				
I have practised my stage two exercises				
I have been sitting in the chair today				
I have walked a short distance on the ward/home today				
I have been eating and drinking well today				
I know when I am going home – already home / today / tomorrow / next day (please circle)				
I have arranged transport to go home YES / NO				
Please use this space to note any concerns you have about today or for any questions you may have.				

If you have any queries or concerns with any information in this booklet please speak to your consultant or contact the appropriate team on:

Physiotherapy	01493 452378
Gynaecology Clinic	01493 452361
Pre – Operative Assessment Clinic (via admissions department)	01493 453289
Ward 9	01493 452009

Feedback

We want your visit to be as comfortable as possible. Please talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve your concern, please ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care. Before you leave the hospital you will be asked to complete a Friends and Family Test feedback card. Providing your feedback is vital in helping to transform NHS services and to support patient choice.



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

For a large print version of this leaflet, contact PALS 01493 453240

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