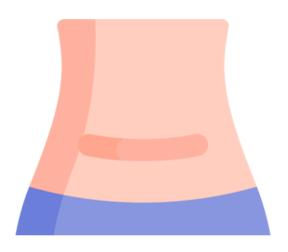


تجمع الرياض الصحي الثاني Riyadh Second Health Cluster شركة الصحة القابضة



Caesarean Birth

Patient Information

What is cesarean birth?

It is a procedure to deliver the baby through an abdominal incision. The incision will be made in the lower abdomen, approximately 13 cm in length. The surgery will take about 1 to 2 hours, followed by an additional hour in the recovery room. The procedure is typically performed around 38 to 39 weeks of pregnancy.

Type on anesthesia

There are two types of anesthesia, you can be either:

Awake with a regional anesthesia

Asleep with a general anesthesia

The majority of women having a planned caesarean birth will have a regional anesthesia (a spinal anesthesia or an epidural, or a combination of the two). You will not feel pain although you may feel nausea, experience vomiting, and have a pulling sensation or pressure in your lower body. There are medicines that your anesthetist can give you to help with discomfort or nausea during the procedure.

A regional anesthesia is usually safer for you and your baby than a general anesthesia.

What should you do BEFORE the OR?

- You will be admitted on the night of the operation
- Labs work will be done
- You should take a shower with an antimicrobial soap
- You can have a light meal at 2 PM, after that, you may drink water or tea (without milk) until 4 PM.
- Certain medications will be given to you before the surgery to prevent nausea and vomiting.

AFTER the OR

You will stay in the recovery room for one hour. During this time, you will be offered a drink of water or a cup of tea, along with something light to eat. Eating soon after surgery is safe. If you have an IV in your arm, it will be removed once you are able to eat and drink. Afterward, you will be transferred to the ward.

At the ward

after delivery. You can eat immediately, starting with drinks and a soft diet, and then we will progress to a regular diet while avoiding certain dietary products to reduce abdominal distention.

It is expected that you will stay 2-3 days

It is recommended to start breastfeeding as soon as possible. A breastfeeding educator will be available to assist you throughout the process.

It is also beneficial to begin walking as soon as possible, as this will help reduce the risk of thrombosis and improve bowel function. As you are at a higher risk of developing DVT. To reduce this risk, you will be given an antithrombotic injection. It is also advisable to move as soon as possible.

You will receive analgesia for pain relief, as well as antiemetics to prevent nausea and vomiting.

Your wound will be covered, and the dressing will be removed on the first day after the operation.

You should be able to shower or bathe the day after your operation. Don't worry about getting your scars wet—just make sure to gently pat them dry with clean disposable tissues or allow them to air dry. Keeping the scars clean and dry promotes healing

At discharge

- You will receive a call on Day 1 and Day 7 after your discharge to check on your recovery.
- You will have a follow-up visit at the outpatient department (OPD) after 6 weeks to assess the wound and discuss contraception options.
- We will provide you with painkillers, enoxaparin, and other necessary medications.
- Keep the wound dry and clean. There is no need to apply any ointments or herbal medications to the wound.
- You may initially need to take laxatives to prevent straining and constipation. You may find it more comfortable to support your abdomen the first one or two times your bowels move. It may also help to place a small footstool under your feet while sitting on the toilet, so your knees are higher than your hips.

Important notes During recovery

Your uterus will get smaller

- As your uterus is getting smaller you may have pains that feel like contractions. These are called after pains.
- They may be stronger when you are breastfeeding. These contractions help your uterus get back to its usual size.

You may feel warmer than usual

- This is normal when your body is making breast milk. If you are worried, take your temperature.
- If your temperature is higher than 38° Celsius you have a fever. Come to the ER.

Your uterus will bleed

- bleeding from your vagina for 2 to 6 weeks
- first few days this flow will be dark. It will have blood clots and will not smell bad. After 2 to 3 days you should bleed less. The flow will look more brown. It will be like the flow in the last days of your menstrual periods.
- If you soak through more than one pad in an hour, or if the clots are large, if You notice a strong smell come to the ER.

You may have hemorrhoids

- Many people get hemorrhoids when they are pregnant.
- Some treatments help relieve symptoms right away. For example, your doctor may prescribe anti-inflammatory medicine.
- Other treatments are long-term. Changing your diet and exercising more can help ease constipation and can keep symptoms from coming back. Keep using the medication you received in the hospital.

Here is what you can do to relieve the pain and swelling:

Take sitz baths twice a day. This means sitting in a few inches of warm bath water. Soak for 15 to 20 minutes two times a day. A sitz bath can relieve the pain of hemorrhoids. It can also help keep the area clean.

- Put an ice pack on the hemorrhoid. Placing an ice pack wrapped in a cloth or towel on an external hemorrhoid can help relieve pain right away. It will also help reduce the blood clot. Use the ice for 15 to 20 minutes at a time. Keep the cloth between the ice and your skin to prevent skin damage.
- Use over-the-counter treatments. Try using cotton pads soaked in witch hazel (Tucks® pads). You can get them at most drugstores. You could also
- User hemorrhoid ointments and petroleum jelly.
- Avoid constipation



You may have constipation

- To decrease constipation, Develop good bowel movement habits. This means:
 - Use the bathroom when you need to.
 - Don't ignore the urge to go. This can make you constipated, turn your stools hard, and can make you strain to go.
 - Do not read while on the toilet. Sit only as long as you need to.
 - Add fiber to your diet. This can help relieve constipation. For example, eat more wholegrain breads, fresh fruits, and vegetables.
 - Drink more water. Drinking more water can also help ease constipation. Water helps make stools soft and bulky. Be sure to drink plenty of water throughout the day. Drinking fruit juices, such as prune juice or apple juice, can also help prevent Constipation



If you are getting constipated:

- Do not strain to have a bowel movement.
- Ask your healthcare provider about using a stool softener. If you are breastfeeding, always ask before you take any medicine.

You may have trouble urinating (peeing)

- Some people have trouble peeing after giving birth.
- After the first 2 days, you may notice that you are urinating (peeing) more than usual. This happens because your body is getting rid of the extra fluid that you retained when you were pregnant.

What to do if you are having trouble peeing?

- Pour warm water over your perineum as you sit on the toilet. This will reduce stinging.
- Drink lots of liquids. This will help prevent bladder infections. Try to drink at least eight glasses of liquid every day.

Call your doctor or nurse if:

- The trouble you have peeing does not get better
- The stinging when you pee does not get better

Your breasts will swell with milk.

- They are likely to feel tender and heavy. This is normal.
- To help prevent breast soreness and control irritation, take care of your swollen breasts and your nipples and wear a good bra.

If you are **not** breastfeeding, your breasts could still get very sore. Here is what you can do

- Try not to stimulate your nipples
- Wear a bra that is tight
- When your breasts are uncomfortable, apply ice packs

What to do about swelling (engorgement)?

- Take mild pain relief medicine such as acetaminophen (Panadol)
- Use moist heat to help reduce the ache.

- Put cold packs or cold cabbage leaves on your breasts after breastfeeding. These can give you some relief.
- Breastfeed more often. This will keep milk from clogging your breast ducts.
- If your breasts are so full that your nipples are flat,
 squeeze out a few drops of milk. This will make sure
 that baby can get a good latch.

If your breasts stay swollen you could get an infection, called mastitis. People mostly get mastitis when milk collects in the breast and the fatty tissue becomes inflamed. The best way to prevent mastitis is to keep your milk flowing. Breastfeeding often will help to keep your milk flowing.

Even if you do get an infection, your milk should still be fine for baby.

How to prevent sore nipples?

- Make sure baby latches on to your breast correctly.
 Your nipple should be between the baby's tongue and the top of the baby's mouth.
- Do not clean your breasts using alcohol, soap, or scented cleansers. These can dry and crack your nipples.
- Do not wear nursing pads that are lined with plastic.
 They hold in moisture. This will make your nipples chapped.
- If your nipples do get dry and cracked, use pure lanolin lotion or cream, will soothe your chapped nipples.

How to choose a good bra?

- Wearing a bra that is the right size is very important. A
 bra that is too tight could cause one of your ducts to
 clog and become irritated.
- Look for a bra that is 100% cotton and has no underwire

- choose a bra with wide straps that won't dig into your back and shoulders.
- If you are breastfeeding, find a nursing bra that lets you to uncover one breast at a time.



Come to ER if

- Blood clots the size of a quarter, or bigger, come out of your vagina
- · Your bleeding soaks a pad every hour
- Blood is gushing from your vagina
- Your discharge has a strong smell
- You have severe pain in your belly NOT relived by pain medication
- The pain near your stitches is getting worse
- You have a fever or chills is 38° Celsius or higher
- You have not had a bowel movement within 1 week after giving birth
- Feeling like you have to pee even though nothing comes out

- Burning or pain when you pee
- Not being able to pee
- Discharge is coming out of the surgery scar
- Leg pain and swelling.

لأن الوعي وقاية

إدارة التثقيف الصحى

Gynecology & Obstetrics Department



