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## Care of the Perineum after the Birth of your Baby

### Women's Health

## References

National Institute for Health and Clinical Excellence (NICE) 2006 *Routine postnatal care of women and their babies*- Clinical Guideline 37 Available at: [www.nice.org.uk](http://www.nice.org.uk)

NMC Nursing Midwifery Council 2008 *The Code: Standards of conduct, performance and ethics for nurses and midwives* NMC, London

Steen M 2002 A randomised controlled trial to evaluate the effectiveness of localised cooling treatments in alleviating perineal trauma. *MIDIRS Midwifery Digest*12: 373-376

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### Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email [asp-tr.patient.advice@nhs.net](mailto:asp-tr.patient.advice@nhs.net). If you remain concerned, the team can also advise upon how to make a formal complaint.

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## Having your bowels open

- When you first have your bowels open after the birth you may worry about your stitches, you can safely open your bowels without damaging them. To help discomfort hold a clean pad against your perineum when you open your bowels, this will stop you feeling as if your stitches will split – they won't.
- Avoid constipation by drinking plenty of fluids and eating a healthy high fibre diet.
- If you feel you are unable to have your bowels open your midwife or your GP will be able to give you some medicine to help soften your stools and make it easier for you.

## What about sex?

There is no right time to resume having sex, for some it is 2 weeks and for others 6 – 12 months. Take things slowly and be prepared for it to feel different. It is quite safe to have sex when you are ready but don't forget to use contraception and if you need to, use a lubricating jelly for the first few times. If intercourse is painful ask your midwife or GP for advice.

## Care of the Perineum after the Birth of your Baby

This leaflet is intended to give you additional information to that received from a healthcare professional.

The area of skin and muscle (the perineum) between the vagina and back passage often gets torn during childbirth and occasionally tears occur in the labia (lips of the vagina) and inside the vagina. Some women may require an episiotomy (a cut on the perineum).

## How is the tear or cut repaired?

It is repaired with dissolvable stitches which start to dissolve within 10-14 days, when the perineum should be healed, but take 6 weeks to completely dissolve.

## Looking after your stitches

It is very common for the perineum to feel very sore following childbirth even if stitches are not necessary. All women are different, some find their stitches painful and others experience much less pain. This may last days or sometimes weeks. The following advice can aid healing, reduce discomfort and the risk of infection.

## Keep your perineum clean

- Use plain warm water to clean, (if soap is used, non perfumed is advised). Using bath additives (such as salt, antiseptics or witch hazel) have not been shown to improve healing when compared to plain water but can have a soothing effect.
- Pour warm water over the perineum during or after going to the toilet to prevent stinging and to keep it clean (a clean jug or disposable squirty bottle works well).
- Pat the area dry gently with toilet paper from front to back to prevent infection
- Using a hairdryer is not recommended as this can damage the tissue and delay healing.
- Change your pads frequently, at least every 4 hours. However it may be beneficial and of comfort to expose your perineum to the air once in the privacy of your own home.

## Pelvic floor exercises

Begin doing pelvic floor exercises as soon as you feel able. This will increase blood flow to the area, to improve healing and help regain tone and control of the pelvic floor.

The pelvic floor muscles are important to prevent leakage of urine, 'wind' and stools.

During pregnancy and birth these muscles can become stretched and may be damaged. Pelvic floor exercises recover the strength in these muscles to prevent problems in later life. They are very important not only for now but the rest of your life!

If you need help with pelvic floor exercises ask your midwife or the women's health physiotherapist when you are in hospital, or see leaflet for more details.

## To ease discomfort:

- Take regular pain relief such as Paracetamol or Ibuprofen, both are safe for breastfeeding; ensure you read the label clearly.
- 'Cold therapy' such as ice or cool packs (feme pads) can help reduce the swelling and discomfort in the first 2-3 days. Apply for up to 1/2 hour at a time and have a break in between. Wrap ice in a clean flannel or napkin.
- Valley cushions or rubber rings can be used to relieve pressure when sitting but should only be used for short term relief as the circulation can be restricted.
- Taking a warm bath can be soothing. Adding aromatherapy oils such as Lavender or Chamomile may help as they have antiseptic and soothing properties, however evidence is limited as to the benefits of using them as bath additives.
- Creams or sprays containing local anaesthetic should not be used as there is no evidence to suggest that are effective.
- Arnica is a popular herbal remedy; however, there is no conclusive evidence that it is effective, so we are unable to recommend its use.