



## Saint Mary's Managed Clinical Service Division of Gynaecology

#### PATIENT INFORMATION LEAFLET

# YOUR RECOVERY AFTER SURGERY

This leaflet aims to provide you with a guide of what to expect after having gynaecology surgery. You may have had open (laparotomy) surgery; keyhole (laparoscopic) surgery or vaginal surgery. By understanding what is normal after surgery, we hope to relieve any concerns you may have. The following advice is generic and individual recovery may be shorter or longer depending on personal circumstances. If you have any concerns regarding your recovery within 4 weeks of discharge, please contact Ward 62 for advice in the first instance, who will then signpost you to the most appropriate service. You can find the contact details at the end of this leaflet.

#### **WEEK 1-2 POST DISCHARGE**

It is normal to have some abdominal pain for the first week or so after surgery. This should continue to reduce in intensity, and you should be able to move around more comfortably. We advise you to ensure you are taking regular pain medication such as Paracetamol, Co-Codamol or Ibuprofen. You may tire easily but you should find your energy levels slowly returning to normal as the days pass by.

Vaginal bleeding is also to be expected and can last between 2-4 weeks. This bleeding can change in colour and consistency over the next week or two. We advise you use sanitary pads, not tampons, to monitor your bleeding, and avoid inserting anything in the vagina to avoid the risk of infection. If you are bleeding heavily, where you change one sanitary pad in an hour or less, please contact our Emergency Gynaecology Unit (based at Wythenshawe Hospital) on 0161 291 2561 or attend your local A&E department.

If you have had keyhole surgery, you may not have stayed in hospital very long. It is important to note that after keyhole surgery you should be feeling better each day, and if you are starting to feel worse, or are not making progress, you need to be reviewed by a doctor.

You may have a wound down your abdomen (midline); across your lower abdomen (transverse) or keyhole sites. Ensure you clean your wounds daily, avoid applying soaps/creams and washing directly over the wound site. Avoid baths or swimming. Wounds should be pat dried with a clean towel. If you have staples these will be removed by a district nurse between 7-10 days. If you have had keyhole surgery, the sites will be closed by stitches or glue, which will dissolve by themselves.

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If you had vaginal surgery, you will not have any visible wounds as these will be internal (inside). You may notice part of a stitch, which may be blue in colour, coming away after a few days/weeks as these dissolve, and this is nothing to worry about.

You must not drive until you can wear a seatbelt and perform an emergency stop. We advise you contact your insurance company regarding driving following surgery, to ensure you are fully insured.

We encourage you to walk daily, avoid doing heavy lifting, swimming, or strenuous exercise at this point.

You will be able to perform light housework duties, avoiding anything heavy such as vacuuming.

You will be expected to wear your anti-embolism stockings for the same duration you are on your blood thinning injections. This may be 7 days to 28 days. You can remove these for washing purposes, but they must be worn at all other times including overnight.

#### **WEEK 3-4 POST DISCHARGE**

If you have had keyhole (laparoscopic) or vaginal surgery, you will possibly feel ready to return to work. You may wish to discuss reduced hours/lighter duties with your employer. However, if you have had open surgery (laparotomy) or your job involves heavy lifting/heavy work, you are advised to wait until 6 weeks post-surgery.

Your pain should be less now as you continue to move around more. Continue to take simple pain relief such as Paracetamol if required.

Your vaginal bleeding may have changed in colour and consistency or may have stopped completely. If you are still bleeding, continue to use sanitary pads.

If you have dissolvable stitches in your wound, these will begin to dissolve. Continue to keep your wound/s clean and dry.

Dependent on the surgery you had, you can increase your level of exercise to include low impact activities such as brisk walking; cycling; gardening.

### **WEEK 5-6 POST DISCHARGE**

Pain should now be settled or very minimal and you should require pain medication infrequently or not at all.

Your bleeding should have stopped.

Your wound should be healed.

You can resume your normal level of exercise. However, if this causes any pain, please stop this level of exercise, and return to a gentler form of exercise that does not cause you pain.

#### **AFTER WEEK 6**

You can restart driving if you can comfortably wear a seatbelt and do an emergency stop.

You can return to penetrative sexual intercourse if you feel comfortable.

You can have a bath or go back to swimming if your wound is fully healed.

You can return to all daily activities including heavy lifting. However, if you have had a prolapse repair, we recommend avoiding heavy lifting as much as possible as long-term lifestyle change, to reduce the risk of recurrence.

Depending on the surgery you have had, and if you have not already, you can return to work. Your doctor will let you know if you need longer than this period. If you do not feel ready to go back to work at this point, please discuss this with your GP.

If you require any further information or clarification, including clarification of terminology, please do not hesitate to talk to one of the doctors or nurses, who will be happy to discuss your concerns with you.

#### REFERENCES

Information in this leaflet has been taken and adapted from Royal College of Obstetrics and Gynaecologists (RCOG) guidelines for recovering well from gynaecological procedures.

https://www.rcog.org.uk/for-the-public/browse-our-patient-information/recovering-well-from-gynaecological-procedures/ June 2024.

#### **CONTACT DETAILS**



Ward 62

0161 701 3325



**Emergency Gynaecology Unit (EGU)** 

0161 291 2561 (24 hours)

Located at Wythenshawe Hospital, enter via entrance 15.

The department operates a telephone triage system, you must call and speak to a specialist nurse before attending.

There is no emergency gynaecology service at Saint Mary's Hospital, Oxford Road Campus.

In case of an emergency please go to your nearest A&E