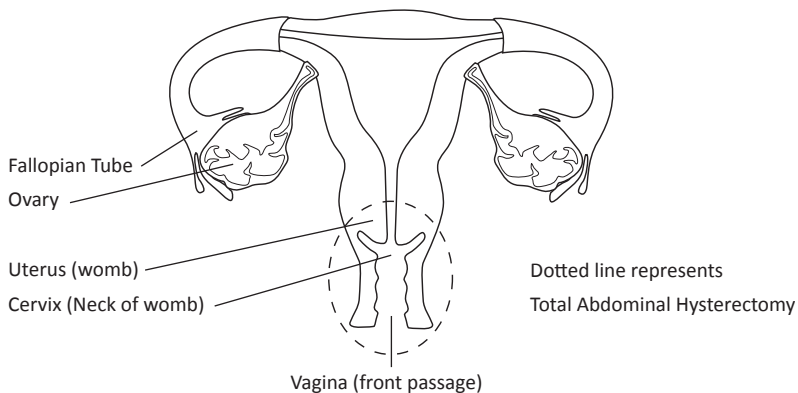


MAJOR GYNAECOLOGICAL SURGERY

*Exercises and advice for a speedy recovery.
Please bring this leaflet into hospital with you.*

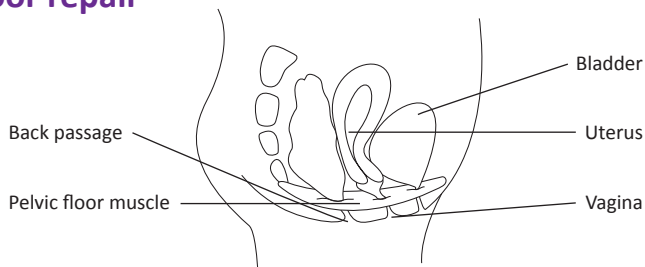
Hysterectomy

Hysterectomy means having the uterus/womb removed. Occasionally the fallopian tubes and/or the ovaries are removed too. It is usually done through an abdominal incision and you will have a bikini line scar. Sometimes it is done through the vagina, possibly at the same time as a “repair” and there will be no visible scar.



Removal of an ovarian cyst will also be performed through a bikini incision.

Pelvic floor repair



BEFORE YOUR OPERATION

Please take time to read through this leaflet. If you have any difficulties you can ask the physiotherapist when she sees you after your operation. It is a good idea to practise these exercises before you come into hospital.

EXERCISE 1 - Deep breathing

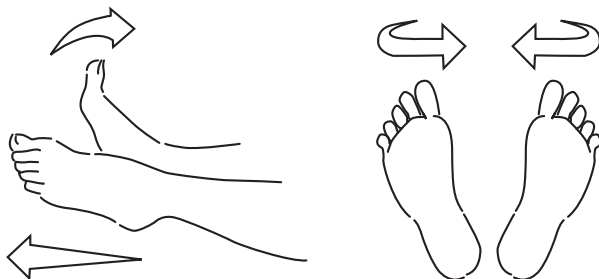
After an anaesthetic and in the early stages after an operation it is important to expand your lungs well.

1. With your hands on your lower ribs, take a deep breath in, feeling your lower ribs expand under your hands, then breathe out slowly. Repeat this 3 times every hour, for 2 weeks after your operation.
2. If you need to cough, do not be afraid to do so, and spit out any phlegm. If you smoke, try to stop before your operation as this will lessen the possibility of a chest infection afterwards.
3. If you have stitches in your tummy, bending both knees, holding the stitches and tucking your chin on your chest, will make coughing more comfortable.

EXERCISE 2 - Circulation

Do these exercises every hour to prevent the circulation from becoming too slow and sluggish. This helps to prevent blood clots forming.

- i) bend your feet down at the ankle and then back up again, 6 times.
- ii) circle your feet round in both directions, 6 times.
- iii) do these every hour, for 2 weeks after your operation.



You will be asked to wear elasticated stockings and have some 'boots' on when you return from theatre. Try not to sit or lie with your legs crossed as this puts pressure on blood vessels and impedes the circulation. As soon as you are awake and aware after your operation you should start your breathing and circulatory exercises.

EXERCISE 3 - Pelvic Floor exercises

If you have a catheter draining urine after the operation and/or a vaginal pack, do not start pelvic floor exercises until these have been removed. If you do not have either of these, it is quite safe to get these muscles working as soon as you are comfortable after the operation (preferably within 48 hours).

Do these up to 6 times every day for at least 6 weeks, and then once a day for life. The Pelvic Floor muscle is like a sling that supports the bladder, womb and back passage. If strong it helps to control the bladder, bowel and prevents prolapse from occurring. It is important for all women to exercise this muscle regularly, particularly after an operation.

Keeping the rest of your body as relaxed as possible, imagine you are trying to stop yourself from passing wind from the back passage and at the same time trying to stop your flow of urine. The feeling is one of “squeeze and lift”, closing and drawing up the back and front passages. This is a pelvic floor contraction.

- i) “Squeeze and lift” these muscles and hold for as long as you can up to 10 seconds. Repeat as many times as you can, up to 10 times. Over time, the number of seconds for which you can hold the contraction will increase as will the number of “holds” you can do.
- ii) Repeat this up to 10 times. Aim to do this exercise at regular intervals during the day. Pelvic Floor exercises should become a daily, lifetime habit! You can do them in various positions - lying, sitting, standing or walking. The quality is important. Fewer good exercises will be more beneficial than many half-hearted ones.

EXERCISE 4 - Deep tummy muscles

The deep abdominal muscle works with other muscle groups (the pelvic floor and deep back muscles) to support the lower back and pelvic girdle. To begin strengthening this deep muscle, lie on your back or side:

- i) Let your tummy sag
- ii) Breathe out, and as you do, gently draw in your lower abdomen as though trying to pull your tummy button towards your backbone
- iii) Hold for a short while take a few breaths in and out, and then let go
- iii) Repeat 4 times
- iv) Try and build up the length of the hold to a slow count of 10.
- v) do 6 of these, 4 times a day.

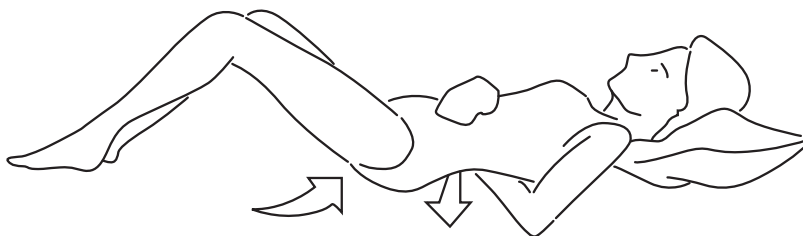


Progress to do these exercises in a sitting and in a standing position. It is a good idea to incorporate this exercise into everyday activities.

EXERCISE 5 - Pelvic tilting

This eases backache and reduces pain due to “wind”:

- i) Lying with both knees bent up and your back as flat as you can comfortably get it, put one hand under the small of your back
- ii) Gently pull in your tummy muscles as described in the exercise above
- iii) Tilt your pelvic backwards, flattening your back down onto your hand. Hold for a few seconds, then relax.
- iv) Do 6 of these, 4 times a day.

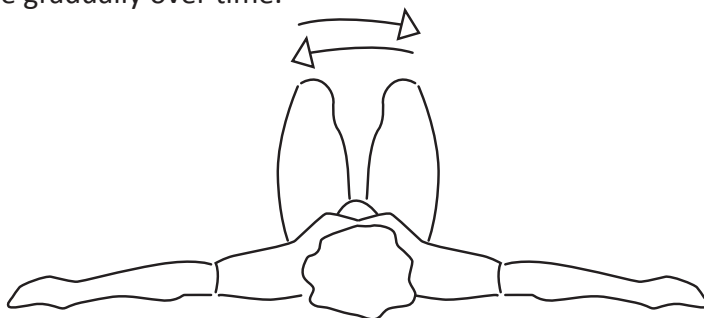


EXERCISE 6 - Knee rolling

Feet and knees together, pull tummy in and take knees slowly to one side, back to the middle then slowly to the other side and back to the middle.

Don't twist very far to begin with.

- i) Lie with both knees bent up and your back as flat as you can comfortably get it,
- ii) Gently pull in your tummy muscles as described in the exercise above
- iii) Slowly take both knees to one side, back to the middle and then to the other side
- iv) Just move as far your knees as you feel comfortable, increasing the distance gradually over time.



COMFORT IN BED

Do not be afraid to move!

To lie on your side

Step 1 - Bend your knees up.

Step 2 - Roll onto your side keeping your knees together.

Getting out of bed

Step 3 - Follow steps 1 and 2 as above, push yourself up into a sitting position with your hands, then swing your legs down to the floor one at a time.

To get back into bed

Reverse the process.

POSTURE

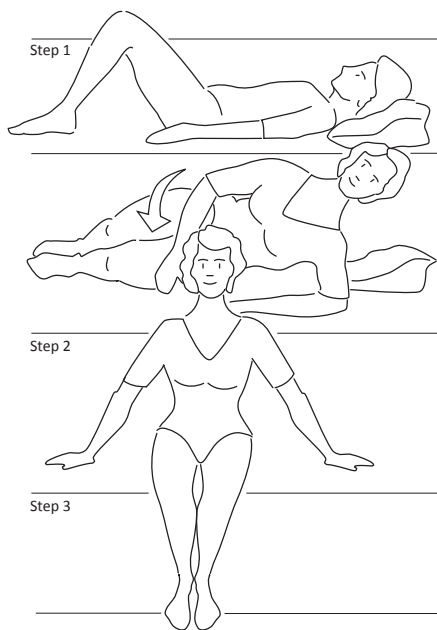
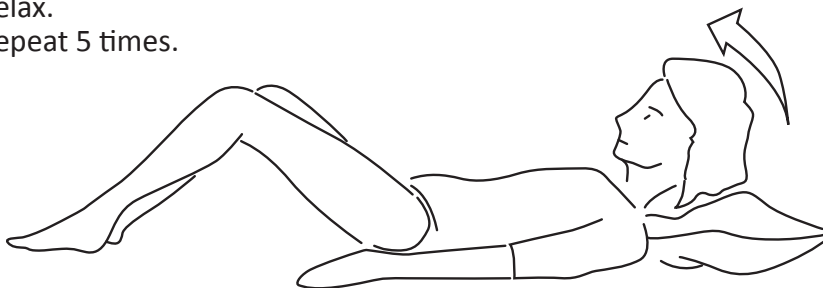
Try to stand and walk tall as soon as possible after your operation. The temptation to bend forwards will aggravate any backache and cause your abdominal contents to press more heavily on your wound.

LATER EXERCISES - to be started one week from your operation keep them up for 6 weeks.

EXERCISE 7 - head lift

Lying on your back, with your knees bent up.

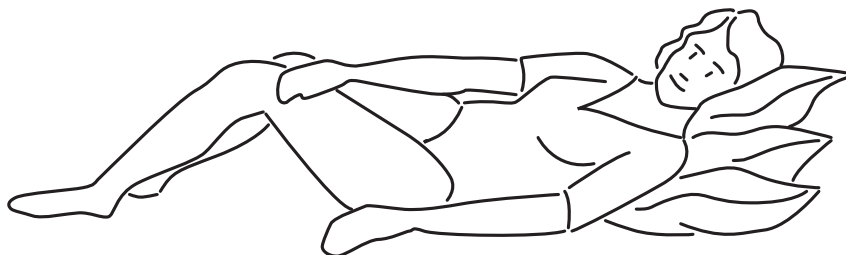
- i) Pull in your tummy muscles.
- ii) Pull up your pelvic floor.
- iii) Lift your head only, to look at your knees. This is not a "sit-up"; your shoulders should not lift up.
- iv) Relax.
- v) Repeat 5 times.



EXERCISE 8 - Head lift with a twist

Use 3 pillows for this exercise.

- i) Lying on your back, with your knees bent up and 2-3 pillows under your head.
- ii) Gently pull in your tummy and pelvic floor muscles.
- iii) Lift your head off the pillows, and reach your left hand across to your right knee.
- iv) Relax, and then repeat with your right hand to your left knee.
- v) Repeat 5 times to each side.



CAUTION

Never do a sit-up with your legs straight or a double-leg lift from lying. These are dangerous and can damage your spine, abdominal muscles and pelvic floor. They are unnecessary.

BLADDER AND BOWEL ACTIVITY

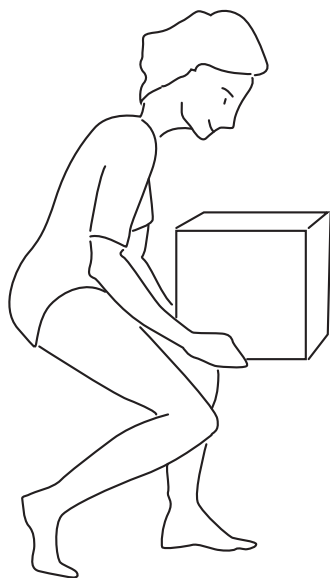
After surgery, it may take a few days for your bladder and bowels to work normally again. It may feel different to begin with when you empty your bladder and open your bowels. It is important to try to drink a normal amount after the operation and to eat a well balanced diet including fruit and vegetables.

Getting up and walking about also helps with these bodily functions. When trying to open your bowels, getting your knees higher than your hips will help the back passage to open more easily. Putting your feet on a small block (2 thick books or a 2-pack of toilet paper) and raising your heels will help you achieve this position.

REST AND EXERCISE

For the first two weeks after leaving hospital take it very steadily. During this time you really need extended "hospital" care. Rest as much possible -base yourself around your bedroom and the settee, not the kitchen!





Go for a short walk each day.

Continue with Exercises 4-8 until six weeks after your operation. Exercise 3, the pelvic floor exercise should be continued for the rest of your life! (seriously).

WORKING, LIFTING AND DRIVING

Gradually increase the amount of household jobs you do until by about six weeks you are back to normal, except for heavy lifting, which should not be attempted for three months. Reduce standing whenever possible.

Example: four weeks after your operation you may vacuum but you must not carry it upstairs or move heavy furniture. When it is safe to drive depends on you and your concentration. About 4-6 weeks after your operation is probably a safe guide. Check what your

insurance company says, as some do not cover for 6 weeks after major surgery.

If you are not sure about any exercise, ask the Physiotherapist for advice. She can be contacted at Doncaster Royal Infirmary, telephone: 01302 366666 bleep No. 1365 or Bassetlaw District General Hospital, telephone: 01909 500990 and ask for the Women's Health Physiotherapist.

SPORT

Everyone is different and some will be fitter than others before surgery, the same is true afterwards. Build up your fitness levels by doing the abdominal (tummy) exercises over the weeks after the operation and build up the number of repetitions of each exercise. Increase the distance and speed of your daily walk. If you enjoy swimming, start swimming after your 6 week check.

Do not do competitive sport or activity e.g. squash, badminton, running, cycling etc. until after 12 weeks. Gentle warm - up work or beginners keep-fit classes - stopping when you feel tired - are good. Increase your fitness gradually and gently. It is not advisable to do high-impact sporting activities if you have had surgery for incontinence or to repair a prolapse. Inappropriate exercise can damage your pelvic floor.



Patient Advice & Liaison Service (PALS)

PALS staff are available to offer advice or information on healthcare matters. The office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email. PALS staff can also visit inpatients on all Trust sites.

The contact details are:

Telephone: 01302 553140 or 0800 028 8059

Minicom (Text talk): 01302 553140

Email: pals.dbh@dbh.nhs.uk

