

## Vaginal Hysterectomy and Vaginal Repair Surgery Discharge Advice.

Immediately after surgery, for approximately 24-48 hours, you will have a catheter draining urine from the bladder and packing gauze in the vagina to prevent bleeding.

It is common to experience some pain/discomfort in the groin, vagina and lower abdomen. Sometimes you can experience a sharp or aching pain deep in the buttock area. Most pain or discomfort settles within two weeks; however, it can be present for several weeks.

You will need to take pain-killers to control the pain and is best taken at regular intervals in the first week.

You will need to wear TED stockings and may receive injections to reduce the risk of a blood clot in the leg. Whilst you are in bed or resting try to do simple exercises such as moving your ankles in a circular motion a few times each hour.

After a repair you may notice that your urine flow is slower and it takes longer to empty your bladder. About 10% of women will have difficulty emptying their bladder fully after surgery; a catheter may be needed until swelling settles and the bladder returns to normal function (usually after 1-2 weeks).

It is normal to have vaginal bleeding/discharge for up to 6 weeks as the stitches dissolve in the vagina. This is normal. At first the blood will be bright red then become darker. You may then notice an increase in discharge that may be yellow or brown for a further 2-4 weeks. If you experience heavy bleeding with fresh red bleeding or clots requiring frequent pad changes, please contact Dr Young's rooms during office hours or attend your nearest emergency department after hours.

You may feel more tired than usual and you may need to rest more as your body heals. You should avoid heavy lifting, straining, coughing and constipation. Please avoid lifting over 5kg for the first 6 weeks.

Postoperatively if you feel up to walking, start by walking around the house and as you feel ready, increase your activity to include short daily walks. Walking is a good form of activity and does not put strain on your repair. If you feel pain or discomfort stop and take a rest.

Do not jog, power walk or do aerobics classes, weights or gym for at least 6 weeks. To avoid straining with bowel movements you should eat a high fibre diet and take Movicol for 2 weeks to avoid constipation. Movicol may need to be individually adjusted from one sachet twice a day to 1 sachet daily to avoid loose bowel motions.

You will have a post-up appointment six weeks after the surgery. After this check-up you may resume sexual activity.

You can perform pelvic floor muscle exercises when you feel ready usually 1-2 weeks after surgery.

You should not drive a car until you have stopped using any of your pain medication and feel comfortable about paying attention to the road. Do a dry run first: sit in the car and slam the foot on the brake. If this is pain free and you can get in and out of the car comfortably you are safe to drive.

You can return to work around four to six weeks after surgery, depending on your field of work and on how you feel. It may be advisable to try and organise a shortened working week or light duties when you first return to work, especially if your job involves standing or heavy lifting.

*If you feel as though your symptoms are an emergency and you are unable to contact your GP or APFI, present to your closest emergency department at your local hospital.*

If you have any questions or concerns, please do not hesitate to contact our rooms on 1300 273 400 Monday to Friday 9:00am – 4pm. You can also contact us via our email – [enquiries@apfinstitute.com](mailto:enquiries@apfinstitute.com) / [nurse@apfinstitute.com](mailto:nurse@apfinstitute.com)