

What can I expect during my recovery from:

Vaginal Repair Surgery Vaginal Hysterectomy

- Immediately after surgery you will have a tube draining urine from the bladder and a packing gauze in the vagina to prevent bleeding. This will be in place for 24 to 48 hours.
- Some pain and discomfort in the groin, vagina and lower abdomen is common. Sometimes you can experience a sharp or aching pain deep in your buttock(s). Most pain or discomfort settles within two weeks but 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. You may wish to wear the stockings at home for another few weeks until you are fully mobile to prevent clots.
- After a repair you may notice that your urine flow is slowed 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).
- Vaginal bleeding and discharge can occur up to 6 weeks as the stitches in the vagina dissolve. This is normal. At first the blood will be bright red then become darker red to brown. 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.
- For 12 weeks after the operation you may feel more tired than usual and you may need to rest.
- You should avoid situations where excessive pressure is placed on the repair – for example, heavy lifting, straining, coughing and constipation. Please avoid lifting over 5kg for the first 6 weeks.
- 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

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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 ½ to 1 sachet daily to avoid loose bowel motions.

- You will have a follow-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 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.
- Please contact the hospital or Dr Young if you experience excessive vaginal bleeding, unusual pain or persistent fever.