

King's

مستشفى كينجز كوليدج لندن
King's College Hospital London

—
Parent Information Leaflet

NOW
YOU'RE GOING HOME

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CONGRATULATIONS ON YOUR BIRTH

Having a baby and becoming a parent is a major event in the lives of women and their families. Becoming a parent is usually accompanied by changes to your home life, social life and relationships.

We hope that the following information will help you in adjusting to your new life together and if you have any worries about yourself or your baby please contact your named Consultant Obstetrician.

IN A REAL EMERGENCY
you should Call **999** and ask for an ambulance.



POSTNATAL CARE FOR MUM

TIREDNESS

Many women report being excessively tired after the baby's birth as a result of the demands of a new baby. It is important not to fight the feeling; follow your instincts and let your body be your guide. Do not overexert yourself and take short periods of rest throughout the day. Do not be afraid to ask for help in your household chores if it is available. Just concentrate on resting and eating a healthy diet. In this way you will ease smoothly into your role of happy new mum!

BREAST CHANGES

When the milk comes in, usually around three to four days, you may find that your breasts become hard, swollen and uncomfortable. You may also feel weepy and feverish. Be reassured that these changes are only temporary and will pass quickly. If you are breastfeeding, feeding your baby may ease the discomfort. Some women find it helps to take mild painkillers such as paracetamol and/or ibuprofen. Putting a warm flannel on the breasts for several minutes, may be helpful. It is also important to wear a good supportive bra, which has been fitted properly. If bottle feeding, it may take a couple of days for the breasts to soften.



BLEEDING

After your baby is born you will have some vaginal bleeding, called lochia. To start with, the bleeding may be slightly heavier than the first day of a period. It may also be heavier when you breastfeed your baby as breastfeeding causes the womb to contract and empty its contents. You must only use sanitary towels to catch the flow as tampons can introduce infection.

Over the next few days, the bleeding will gradually reduce in volume, becoming more like the end of a period in colour as the days pass – changing from bright red to pink or brown and then a clear discharge. This takes anything from two to six weeks after the delivery and it is normal. You should change sanitary pads at least every four hours.

If your lochia becomes heavier, you start passing clots or your loss becomes foul smelling, you should contact your Consultant Obstetrician and seek medical advice.

BOWEL CARE

You may worry about your stitches when you have your bowels open for the first time after birth. You can safely open your bowels without any damage. Normally, your bowels would be opened within three days of birth.

Try to avoid getting constipated as it causes strain on the pelvic floor muscles and stitches.

A healthy diet, including plenty of fruit, vegetables, brown bread, cereals and plenty of fluids will help you to return to a regular bowel habit.

AFTER PAINS

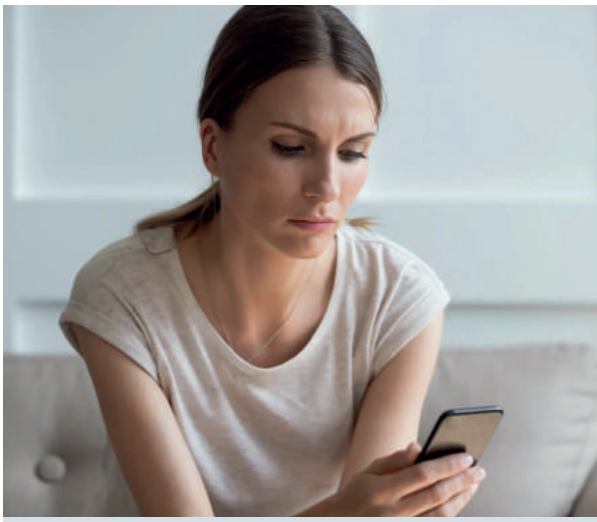
After the birth of your baby your womb will continue to contract back to its normal size. As a result, you may feel pain or cramps in your lower abdomen. These can be particularly troublesome after a second or subsequent childbirth.

A mild painkiller like paracetamol or ibuprofen may help. These are safe to take even if you are breastfeeding.

HAEMORRHOIDS (PILES)

Haemorrhoids are swollen veins around the rectum, which may itch, feel sore or bleed. If this is the case your Obstetrician / Family Medicine Doctor will recommend some creams and ointments.

This is due to hormonal changes in your body. It is very important to avoid being constipated as haemorrhoids are aggravated by constipation.



YOUR HEALTH

A small number of women may develop serious health conditions.

You should be encouraged to seek medical help from Kings Hospital or call for emergency help if you have any of the symptoms below:

1. ABNORMAL VAGINAL BLEEDING

Varying amounts of blood loss during and after the delivery affect women in different ways. If, during or following a heavy blood loss, you begin to develop symptoms including:

- Palpitations
- Dizziness
- Rapid Pulse
- Weakness
- Sweating
- Restlessness

2. INFECTION

Signs of infection to look out for following childbirth are:

- Fever and chills
- Lower abdominal pain and tenderness
- Offensive, foul-smelling vaginal discharge; and a tender uterus (womb).

3. HEADACHE WITH NECK STIFFNESS, FEVER AND VISUAL DISTURBANCES

Many women may suffer from tension headaches and/or migraines after the birth. These usually resolve with mild pain relief such as paracetamol and rest.

Relaxation exercises may also help to get rid of tension.

If, however, you have a sudden onset severe headache with neck stiffness and a high temperature you should contact your Family Medicine Doctor or Kings College Labour and Delivery Triage.

If the severe headache occurs within 3 days of the birth and is accompanied with heartburn-type pain, blurred vision and 'flashing lights', nausea or vomiting, you should also contact your carers as this may indicate a sudden rise in blood pressure, which may require treatment.

If you had an epidural and then develop a headache which worsens when you are upright and is relieved when you lie down, accompanied by nausea and vomiting and ringing in the ears, this could be symptomatic of epidural complications and should be reported to your Obstetrician or Family Medicine Doctor.

4. RED, PAINFUL AREA ON THE BREAST

This is most common in women who are breastfeeding and falls into two categories – infective and non-infective mastitis.

Symptoms are similar for both – a high temperature and flu-like symptoms. Non-infective mastitis is usually caused by blocked milk ducts and is managed by wearing a well-fitting bra and ensuring your baby is correctly positioned at the breast.

Infective mastitis is a bacterial infection, usually caused by a cracked nipple, and will require review by Family Medicine Doctor as treatment is often with antibiotics.

Neither is a reason to give up breastfeeding and your midwife will show you how to ease the symptoms by massaging the breast, taking paracetamol, increasing fluids and resting.

5. BREATHLESSNESS, FAINTNESS, DIZZINESS, TINGLING FINGERS AND TOES

These are all symptoms of anaemia, which is caused by too little haemoglobin (Hb) in the red blood cells.

Diagnosis is by a simple blood test and can be treated with iron supplements and dietary advice.

A further feature of anaemia is fatigue, over and above that which would be expected following childbirth.

If you are concerned, discuss this with your carers.

6. THE TRANSITION TO PARENTHOOD, MOOD CHANGES, POSTNATAL DEPRESSION

Childbirth can be one of the most challenging and rewarding experiences in any woman's life.

The creation of a new life is a very personal experience which brings enormous pride, pleasure and responsibility.

While it is a very exciting time, new mums can and do feel tired, stressed and sometime overwhelmed by their new circumstances; these feels are natural and a period of adjustment is to be expected.



POST- NATAL DEPRESSION

Affects about 10 per cent of women who have just had a baby. It is a reaction to a life event which can be split up into three categories. Baby blues a few days after delivery, postnatal depression which can continue for months, and postnatal psychosis.

BABY BLUES

Around the third or fourth day after giving birth, %80-50 of women go through what is known as the 'baby blues. It is not known why it happens but it is quite normal and very common and may last up to a week. You may be feeling:

- Upset and cry for no reason
- Tired and weary
- Feeling useless
- Anxious (stressed out)
- Unable to sleep
- Cross and cranky
- Not eating properly

Postnatal depression is treatable and is treated in much the same way as ordinary depression.

Talking about the problem with somebody, such as a Family Medicine Doctor or Obstetrician is very important and you should not delay in seeking professional help.



GET FIT FOR MOTHERHOOD

This section offers guidance on safe and effective exercise for the pelvic floor and abdominal muscles.

Try to fit in a few exercises each day to help you get back into shape. The exercises should be easy to do, need little effort but remember it takes several weeks to begin to see results.

If you've had a caesarean section, these exercises are still ideal. Just remember to start gently and progress slowly.

DO I NEED TO MAKE TIME TO EXERCISE?

After you have given birth, you will understandably want to give your baby lots of attention.

Even so, it is important to make a little time for yourself. By regaining your fitness you'll feel good, have more energy and you could well avoid health problems in the future.

DO I NEED TO EXERCISE MY PELVIC FLOOR MUSCLES?

In these early days, gentle exercises for the pelvic floor muscles help to reduce the pain and swelling in the tissues after a vaginal birth. In the long term, keeping these muscles strong will improve bladder and bowel control, safeguard against prolapse and contribute to a healthy sex life. Good reason for all new mothers to exercise a little every day, now and for life!

WHERE ARE THE PELVIC FLOOR MUSCLES?

The pelvic floor muscles form a broad muscular sling across the base of the pelvis. These muscles support the position of the pelvic organs and help the closure and control mechanisms of the bladder and bowel.

HOW DO I EXERCISE MY PELVIC FLOOR MUSCLES?

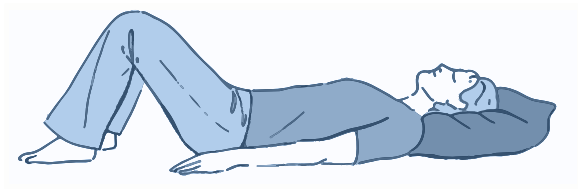
Start in any comfortable position: sitting or lying is easier than standing.

Try to tighten the muscles around the back passage and work this feeling forwards into the vagina. You could try to imagine you are stopping yourself from passing wind or try to imagine you are 'tucking in your tail bone'.

The feeling of 'squeezing and lifting' internally is the basic pelvic floor contraction. Start gently and always work with easy effort. Try not to tighten your buttocks, clench your jaw or hold your breath as you work these muscles.

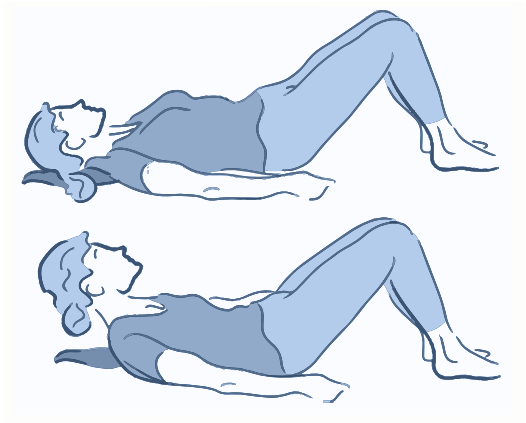
Work towards tightening the muscles and holding for a few seconds. Don't worry if it is difficult to feel these muscles in the early days after the birth.

The exercises will become easier as you practise and as your body recovers.



THE 'PELVIC TILT' EXERCISE

- Lie with your knees bent up. Gently draw in your lower abdomen, squeeze your pelvic floor muscles and gently tilt your pelvis. You should feel your back flattening into the bed
- Hold this for a few seconds before releasing gently
- Rest for a few seconds before repeating this exercise



ADVANCED POSTNATAL EXERCISES (6-4 WEEKS), THE 'HEAD LIFT' EXERCISE.

- Draw in your lower abdomen and pelvic floor
- muscles tilt your pelvis as before, and tuck your chin to your chest
- Lift your head a little way, hold for a few seconds and lower gently
- Rest before repeating this exercise
- Progress to lifting your head and shoulders, but only when you can keep your stomach braced and flat.

WHEN CAN I INCREASE MY GENERAL EXERCISE?

Exercise should always be undertaken gradually after childbirth.

It is important to regain fitness levels and it certainly helps to strengthen both the abdominal muscles and pelvic floor muscles before returning to fitness activities. However, never be tempted to do 'double leg raises' or 'sit ups' with straight legs as part of a workout.

Many women choose to go back to the gym or resume a sport three months after childbirth, but everyone is different. Remember, progress at a pace that suits you.



YOUR BABY'S HEALTH

Most babies are born healthy and stay healthy in the postnatal period. A small number of babies have problems with their health. Babies who develop jaundice (a condition that causes yellowish colouring of the eyes and skin) in the first 24 hours should be checked straight away. Babies who haven't passed the thick greenish brown meconium (the first stool of newborn babies) in the first 24 hours should also be checked straight away.

This information should help you to identify if your baby is unwell. If you are worried about your baby's health or have any questions you should be encouraged to talk to your Paediatrician or ring the advice line number above.

COLOUR

Your baby's lips should be pink and his/her skin warm; the baby's hands and feet might feel cooler and slightly pale but this will improve within 24 hours. There may be some bruising on the baby's head. If the baby appears slightly yellow (jaundiced) within the first 24 hours you should seek advice from Paediatrician.

UMBILICAL CORD

Your baby's umbilical cord will be securely clamped. The cord should be kept clean and dry, and outside the nappy area. There is no need to use wipes or put powder on it. The cord stump will

dry and fall off between five and twelve days. As part of normal skin care we recommend that you clean around the stump with tap water only and dry the cord. Powders or other lotions are not recommended.

NAPPIES

For the first 24 hours after birth, your baby's stool will look dark and sticky. This is normal, and it is called 'meconium'. Babies also pass very little urine in the first 24 hours. The baby's skin is very sensitive and delicate, and we would recommend using cotton wool and water to clean the nappy area. Small amounts of orange/ red discolouration are common in the urine and may appear in the nappy in the first 24 hours.

RASHES

It is common for new-born babies to have various spots and rashes after birth:

Milia

also known as milk spots, are small cream spots, usually on their nose. These are normal and need no treatment.

Erythema Toxicum

is a blotchy red rash with pinhead solid bumps (papules), particularly on your baby's trunk and limbs. It often appears within the first week after birth and disappears within a day or two. No treatment is needed.

Heat rash

shows as reddened areas which usually disappear quickly when your baby cools down.

Nappy rash

is where skin on your baby's buttocks is reddened, occasionally raw, moist and shiny. It can happen when their skin is in contact with a nappy soaked in urine or poo (faeces) for a long time. It can be very uncomfortable for them. You can avoid it by changing their nappy often and cleaning their skin between changes. To treat nappy rash, put on nappy cream between changes, or leave their skin open to the air in a warm room.

CRYING

All babies cry and some babies cry a lot. Sometimes you will know the reason; perhaps your baby needs a nappy change, a feed or a

cuddle, or is not feeling well. However, sometimes parents can try everything to stop their baby crying and nothing seems to work.

This can be very distressing for parents. There are many things you can do to comfort a crying baby: skin-to-skin, letting your baby suckle at your breast, holding the baby close to you, rocking, swaying, singing and stroking them. Rocking your baby to and fro in the pram or taking your baby for a drive in the car may be of help. Massaging your baby or giving him/her a warm bath may also be of benefit.

CONTACT A PAEDIATRICIAN IF:

- Your baby is jaundiced and is sleepy, not feeding or the yellow colour is getting worse.
- Your baby is sleepy and feeding less than six times in 24 hours.
- Your baby's stool has turned from yellow to green.
- Your baby's cord looks red and inflamed.
- Your baby is disinterested in feeding and seems lethargic.

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