

Taking Care of Yourself at Home

Self-care and follow-up

Your body goes through many changes in the first weeks after giving birth. Be sure to take care of yourself and follow your provider's guidelines.

Follow-up

After you get home, you may receive a call from one of our nurses. We will ask how you and your baby are doing and answer any questions you have.

If you are not home when we call, we will leave a message. Please call us back! We want to follow up with you and to answer your questions. We also want to know if there are any ways you feel we can improve the care we provide.

Your Follow-up Visit

You will need to see your healthcare provider for a follow-up visit about 6 weeks after giving birth. Your provider may ask you to come in sooner. We can help you set up this visit if you are seeing a UW Medicine provider.

Do not miss this important visit! We want to make sure you have fully recovered from pregnancy and birth. If you had any problems such as hypertension, pre-eclampsia, or gestational diabetes, ask your provider how to reduce your risk of these problems in the future.

Physical Changes

Uterine Cramps

You may have abdominal (uterine) cramps in the days after your baby's birth. These "after pains" are caused by your uterus shrinking



After you give birth, remember to take good care of yourself! This includes continuing to eat a good variety of wholesome foods.

back to the size it was before pregnancy. They are strongest for the first 2 or 3 days and then become less uncomfortable. Please read the chapter “After Your Vaginal Birth” in this workbook for more information.

Breast Swelling and Leaking

- Right after birth, your breasts make a special milk called *colostrum*. Milk volume usually grows within 2 to 4 days and then changes to mature milk.

- You may have breast swelling and tenderness when your milk “comes in” (fills your breasts). This is called *engorgement*.

If your breasts continue to be painful, swollen, or hard, or if you have other concerns about breastfeeding, call your healthcare provider or Lactation Services (see the “Helpful Phone Numbers” chapter in this workbook).

- Your breasts may leak milk. Put a soft handkerchief or a nursing pad inside your bra. This will help soak up the milk and keep it from leaking onto your clothes. Do **not** use a nursing pad with plastic lining.

Vaginal Bleeding and Your Period

After childbirth, you will have some bleeding from your vagina. This blood is from the lining of your uterus where the placenta was attached.

The flow is usually heavy and bright red for the first few days. Then it changes to a pinkish color, then to brown. **If the flow ever has a bad smell, call your healthcare provider right away.**

The amount of bleeding decreases as the days and weeks pass. If you have an increase in the amount of blood or it is red again, you need to rest more. The flow of blood from your vagina may continue as long as 6 weeks after your baby’s birth. Panty liners and pads are best to use. Do not use tampons, feminine sprays, or douches.

If you are breastfeeding your baby and **not** giving any bottles, your period (menstruation) may not begin again for several months. If you are bottle feeding, your period could begin in 6 to 8 weeks.

Risk of Getting Pregnant

We strongly advise that you use birth control after your baby is born. Read the chapter “Planning Your Family” in this workbook.

If you have no bleeding after the first 8 weeks, **and** you are **only** breastfeeding (not giving formula) for the first 6 months, your risk of getting pregnant is less than 2% (fewer than 2 out of 100 women get pregnant under these conditions).

Leg Swelling

Swelling in your legs is common after giving birth. It should go away in 7 to 10 days. To help with swelling:

- Sit with your legs propped up to help the swelling go down.
- Do not wear tight-fitting shoes or clothing. Support stockings are OK to wear.

Call your healthcare provider if your leg swelling gets worse, or if you have leg pain or redness in the lower part of your leg.

Vaginal Tears or Episiotomy

You may have stitches from a vaginal tear or an *episiotomy* (a cut your care provider made at the opening of your vagina just before the birth). Your stitches will dissolve in a couple of weeks.

Be sure to keep the area clean. Rinse well with warm water each time you go to the bathroom. Use the squirt bottle you received in the hospital until you do not have any vaginal bleeding or discharge.

If needed, read about managing pain in the chapter “After Your Vaginal Birth” of this workbook.

After Cesarean Section

These symptoms often last for **1 to 2 weeks** after your surgery:

- Soreness and discomfort at the incision
- A tugging and pulling feeling when you move
- A burning feeling at your incision
- Numbness above your incision – it can take up to 1 year for feeling to fully return to this area

If needed, read about managing pain in the chapter “After Your Cesarean Birth” in this workbook.

Hemorrhoids

You may develop *hemorrhoids* (inflamed veins in your rectum) late in pregnancy. They may get irritated during delivery.

If you have hemorrhoids, tell your doctor or nurse. There are medicines and treatments that can help.

Most hemorrhoids that form in pregnancy go away after the birth. See the chapter “After Your Vaginal Birth” in this workbook.

Feeling Tired

Most mothers feel tired in the days after giving birth. The birth itself is hard work and uses a lot of your energy. Plus, your baby will feed every few hours in the first days and weeks at home.

Try to get as much rest as you can. Take naps. Try to sleep when your baby is sleeping.

Urine and Bowel Control

After pregnancy and giving birth, the muscles that support your bladder, vagina, and rectum can be weak. You might have urine leaks when you cough or sneeze. Here are some things you can do to help:

- **Kegel exercises** help heal and strengthen pelvic floor muscles. Learn to do these when you are urinating. Begin to pass your urine, then stop the flow by tightening your muscles. Hold as long as you can, up to 30 seconds. Then let go and finish urinating.

Once you know how to do these exercises, do them several times a day when you are **not** urinating. Tighten the muscles, hold for 10 seconds, relax for 10 seconds, then repeat 10 times. Do this at least 3 times a day.
- **Yoga, Pilates, and other exercises** that strengthen your core abdominal and pelvic muscles can help you regain urine and bowel control.

If you try these forms of exercise and still have trouble controlling urine or bowel movements, or if you don't feel like you can empty your bladder all the way, talk with your doctor. Getting help early can keep muscles from getting even weaker.

Emotional Changes

The “baby blues” are emotional changes you may have after your baby's birth. Please read the chapter “Baby Blues and More” in this workbook.



Wait until you have had your 6-week checkup to go jogging, do aerobics, or do any other very active exercise.

Activity and Exercise

For the next few weeks, you will need to take extra care of yourself as well as care for your baby. Ask for help when you need it, and be sure to accept help when it is offered!

Wait until your 6-week checkup before you begin or go back to jogging, aerobics, or other active exercise. A slow return to your activities will help you recover and keep you from getting too tired.

Here are some activity guidelines to follow:

For 6 to 8 Weeks After Giving Birth

- **Walk.** Start with short walks at a slow pace. Try starting with 5-minute walks around the house. As you begin to heal, slowly increase the amount of time you spend walking. Let your body be your guide and stop or slow down if you have pain, bleeding, soreness, or very low energy.
- **Breathe.** Practice breathing using your abdominal muscles. When you are resting, try taking 10 slow breaths. Expand your belly as you inhale, and gently pull in your belly as you exhale. This kind of breathing will help reduce stress and help your abdominal muscles get stronger.
- **Protect your abdominal muscles.**
 - Log-roll in and out of bed, especially if you had a Cesarean.
 - Sit up straight. Try not to slouch when seated, even if you are tired. Use a support for your lower back and your shoulders while you are feeding or rocking your baby.
 - Breathe out when you have to do something that takes effort or causes pain. This will gently activate your core muscles and protect your back.
 - Avoid lifting anything that weighs more than 10 pounds (a gallon of milk weighs almost 9 pounds). This means you will need help carrying your car seat or a toddler.

After 8 Weeks

Many women need help to get their bodies back to normal after being pregnant. Talk with your doctor about physical therapy if you have these symptoms 8 weeks after giving birth:

- Pain
- *Incontinence* (cannot control when you pee)

- A scar that feels “stuck”
- The feeling that your abdominal muscles have forgotten how to work

To learn more about physical therapy to help strengthen your pelvic floor muscles, visit:

- www.womenshealthpta.org/pt-locator
- <https://hermanwallace.com/practitioner-directory>

Also talk with your physical therapist about massaging your Cesarean scar after it is healed. It takes about 6 weeks for the scar to heal.

Returning to Exercise or Sports

Before you return to more vigorous activity:

- See a physical therapist. Find out if your core and pelvic floor muscles are strong enough to keep you free of injury.
- Start with strengthening and core stability work before returning to high-impact activity. Pay attention to your body every step of the way. Remember that postpartum recovery can take a year or more, especially if you are breastfeeding.
- Avoid doing sit-ups, double leg lifts, and heavy weight-lifting until you are sure you are fully healed. Most women have some *abdominal separation* (diastasis recti) during pregnancy. This is when your belly sticks out because the space between your left and right belly muscles has widened. Doing these exercises too soon can make this problem worse.
- For more personal guidance, work with a personal trainer who has certification in postpartum exercise. For trainers in the Seattle area, visit www.bodiesforbirth.com.

Nutrition

A well-balanced, healthy diet will help you heal and build and maintain a good milk supply. It can be hard to juggle preparing regular meals and taking care of a newborn. It can help to have a supply of healthy snacks on hand.

Do **not** try to diet to lose weight for the first 6 weeks after you give birth. Talk with your provider about your nutritional needs.

Iron Supplements

Some women may need to take iron supplements if they have anemia or a low blood count. Your healthcare provider may prescribe them for you along with ascorbic acid (vitamin C). Vitamin C helps your body absorb the iron.

Immunizations After Pregnancy

After giving birth, it is safe for you to receive vaccines, even if you are breastfeeding. Several vaccines can help protect your new baby from getting whooping cough and other serious illnesses. Your healthcare providers will talk with you and answer your questions about any vaccines that you can receive at the hospital.

Resuming Sexual Activity

People differ in when they are ready to resume intercourse after having a baby. Some are ready as soon as possible after the birth, and others prefer to wait. They may even feel afraid.

A couple's ability to relax and enjoy sex can be affected by:

- Being very tired
- The demands of parenting
- Being in pain
- Other issues

Talk with your partner about your concerns and desires, and whether you feel ready to have sex. Ask your healthcare provider any questions you may have.

Wait at least 4 to 6 weeks after giving birth to have intercourse. After that, it should be safe to have intercourse when:

- Your stitches are healed
- Your vaginal discharge stops
- Your birth control plan is in place
- You feel ready

You may feel sore at first. You may also have vaginal dryness caused by hormone changes. A water-soluble lubricant can help.

Be sure to use birth control when you have intercourse, since you could get pregnant. See the chapter “Planning Your Family” in this workbook.



Talk with your partner about planning your family before you resume sexual activity.

Family Planning

To help make your best decision about planning your family, read the chapter “Planning Your Family” in this workbook. Check with your health insurance provider about your family planning coverage.

Now, please go back to the Table of Contents of this workbook and check the box so your nurses will know you have read this chapter.

Questions?

Your questions are important. If you have questions about taking care of yourself, call your healthcare provider during office hours.

If you have an urgent concern, call your Labor & Delivery unit.

If you have a medical emergency call 911.