

# Following surgery to treat endometriosis

Cornwall Endometriosis Centre



One + all | we care

## **Who is this leaflet for?**

This leaflet is for patients who have had surgery to treat endometriosis. It provides guidance and advice on what to expect during and after your stay in hospital. It also aims to answer any common questions you may have, to give you as much information as possible to support your recovery.

## **What is endometriosis?**

Endometriosis is a condition where tissue similar to the inner lining of the womb (endometrium) is found elsewhere – usually in the pelvis. It is a very common condition, affecting around 1 in 10 women. You are more likely to develop endometriosis if your mother or sister has had it.

Endometriosis usually affects women during their reproductive years. It can be a long-term condition that can have a significant impact on your general physical health, emotional wellbeing and daily routine.

## **Who are the team involved with my care?**

Consultants: Mr Byrne  
Mr Smith-Walker  
Mr Keedwell

Clinical Nurse Specialist: Gilly Macdonald

## **What can I expect after my operation?**

You will usually have a urinary catheter to keep your bladder empty over the first night following your surgery. This is usually removed early the next morning. A scan of your bladder is performed later in the day to check it is emptying properly.

A blood test will be carried out on the first day following surgery and the results checked before you leave the hospital. You will usually go home on the day of your surgery. However, if you have had bowel surgery you will usually stay for 3 – 5 days in hospital.

## **Will I have any pain or discomfort?**

Pain relief is very important and works best when it is given continuously. Please take the prescribed pain killers even if you feel you are not in pain, as this is the best way to keep you pain free. It takes a great deal more medication to suppress pain when it is allowed to build up.

You may receive pain killers as oral tablets, liquids or by suppository (medicine placed in your back passage). The pain relief suppositories have a longer lasting effect, which is very helpful.

## **When can I mobilise?**

The sooner you start to move around, the better. To reduce the chance of developing a blood clot in your leg veins, carry out exercises to contract your calf muscles as soon as possible. These may be as simple as flexing your knees or ankles and rotating your feet.

You may be given special support stockings to wear after surgery to help your blood circulation. Your nurse or doctor will explain how you should use these.

To help reduce the risk of clots, you will usually be given an injection to thin your blood slightly. Research shows the earlier you get out of bed and start walking, eating and drinking after your operation, the better.

## **What happens before I go home?**

Following your operation, the endometriosis surgeons and specialist nurse team will see you to explain the procedure and answer any questions you may have. If you are worried about anything relating to your operation please be sure to speak to a member of staff before you leave.

If you need a follow-up appointment, staff will make sure this is organised for you – this is usually three months after surgery.

## **What can I expect when I go home?**

When you get home, don't be surprised if you feel tired at times – this will improve with time as you recover.

You may also find that at times you get emotional or weepy. This will also improve as you recover from your surgery.

If you are worried about any of your symptoms when you are at home please see your GP.

## **Will I have any pain?**

Pain levels vary from person to person. It is advisable to take regular simple analgesia such as paracetamol and/or ibuprofen as per manufacturers' instruction for the first few days. Ideally avoid codeine or opiates as they can cause constipation.

## **What can I do to help my recovery?**

- Get plenty of rest.
- Go for short walks, to improve stamina and lessen the chance of complications like leg vein clots (thrombosis) and muscle weakness.
- The risk of developing blood clots in your legs or lungs can continue for up to several weeks after you have returned home, so keep active and walk around as much as you are able.
- Eat a well-balanced diet.
- Drink plenty of water (at least 2 litres a day).
- Continue to wear the support stockings at home for at least 6 weeks.

## **How will my wound(s) heal?**

All wounds go through several stages of healing. It is common to feel:

- an unusual stretching feeling, like tingling, numbness or itching
- a slight hard lumpy feeling as the skin heals
- a slight pulling around the stitches as the wound(s) heal.

## **Can I do anything to help my wound(s) to heal?**

You can look after your wound by:

- having a bath or shower each day – avoid using detergents or perfumes on the wounds
- drying your wound(s) carefully after washing (do not use talcum powder or creams).

## **When can I start having sex again?**

You can have sex when you feel comfortable. For most women this is about 4 – 8 weeks after your operation.

If you have had a hysterectomy as part of your operation you should not have sex until at least 8 weeks afterwards.

## **When can I go back to work?**

This will depend on the level of surgery you have had. Following a diagnostic laparoscopy, you should be able to return to a light job after two weeks. More significant surgery may require a longer period of time of 4 – 8 weeks. A sickness certificate can be provided on discharge from hospital, if requested.

## **When can I resume driving?**

This will depend on the level of surgery you have had, but you should not start driving again for at least 4 weeks after major surgery. Before you do start driving, test to see that you are comfortable doing an emergency stop (no pain felt when you stamp your foot hard on the floor). Please check that your insurance covers you to drive after this type of surgery. You may wish to contact your insurance company before you start driving again.

## **What should I should look out for?**

Contact your GP or emergency services if you have any of the following symptoms:

- inability to pass urine
- severe vaginal bleeding
- abdominal distension or pain

- foul smelling discharge (vaginal or from a wound)
- high fever / rigors (shivers)
- pain on passing urine or blood in your urine
- difficulty opening your bowels
- pain or swelling of your legs.

If in doubt please ring the Gynaecology ward. You may be told to contact the ward direct and not your GP. This will be explained before you go home.

### **Any questions?**

If you have any worries or concerns following your operation, please contact the Endometriosis CNS:

Tel: 07775 018100

Email: [rch-tr.endonurse@nhs.net](mailto:rch-tr.endonurse@nhs.net)

Eden ward (Gynaecology ward): 01872 252090

If you would like this leaflet in large print, braille, audio version  
or in another language, please contact the General Office on  
01872 252690

