

Pelvic floor advice following a perineal tear

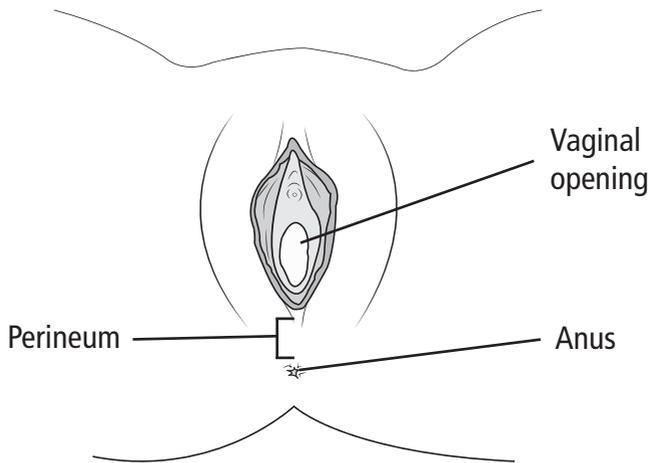


Who is this leaflet for?

This leaflet is for women who have suffered a 3rd or 4th degree perineal tear following vaginal childbirth. It explains how pelvic floor exercises can help, and aims to answer common questions you may have.

What is a perineal tear?

The perineum is the area of skin and muscle between your vaginal opening and your anus.



The extent of the tear decides its grading:

- **1st and 2nd degree tears** generally heal without intervention.
- **3rd degree tears** are tears to the skin and muscle of the perineum, and some of the muscle around the anus.
- **4th degree tears** are tears to the skin and muscle of the perineum, the muscle around the anus and the skin lining the anal canal.

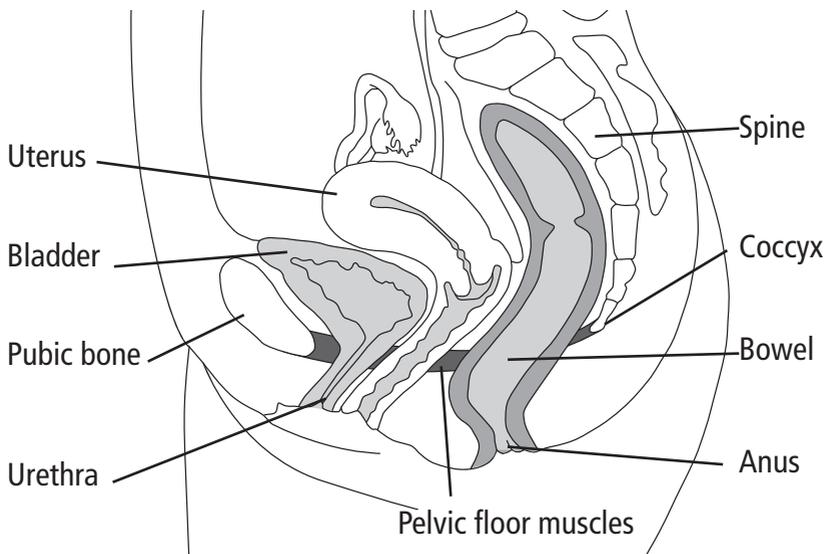
This can result in:

- difficulty holding on when you feel the need to empty your bladder or bowel
- leakage from the bladder or bowel
- difficulty controlling wind.

To restore control it is important you strengthen your pelvic floor muscles by doing your pelvic floor exercises.

What are pelvic floor muscles?

These are layers of muscle that act like a hammock to support your womb, bladder and bowel, stretching from the pubic bone at the front of your body to the bottom of your back bone. They help to prevent urine leaking from your bladder or faeces leaking from your bowel.



How do they work?

When you pass urine or empty your bowel, the pelvic floor muscles relax. Afterwards they tighten again to restore control. Following childbirth these muscles may be weak, so it is important to start your pelvic floor exercises to regain and maintain strength.

How do you exercise them?

Imagine you are trying to stop your flow of urine midstream, at the same time as trying to stop yourself passing wind. The sensation is one of squeeze and lift. It is important not to tighten your buttocks or leg muscles and you must not hold your breath. Only the pelvic floor and deep stomach muscles should be working.

- 1 Tighten and relax your pelvic floor quickly, up to a maximum of 10. It is important that the muscle can react quickly when you cough or sneeze.
- 2 Tighten the pelvic floor and hold for as many seconds as you can, up to the count of 10. Release the contraction and relax for 4 seconds. Repeat the exercise up to a maximum of 10 times. This exercise increases the stamina of your muscle. Gradually you will be able to hold the contraction for longer, and do more repetitions.

How often should I do the exercises?

Nobody can tell you are doing pelvic floor exercises so you can do them at any time. So, do them as many times as possible at least 3 times a day.

Tighten your pelvic floor muscles before coughing, sneezing and lifting. This will improve your control and reduce leakage of urine.

Try doing pelvic floor exercises:

- while feeding your baby
- while expressing
- after using the toilet or washing your hands
- whilst watching TV.

How long will it take for the exercises to work?

It may take 6 months to achieve a good result, so persevere. When your pelvic muscles are strong, exercise twice a day for the rest of your life to maintain their strength.

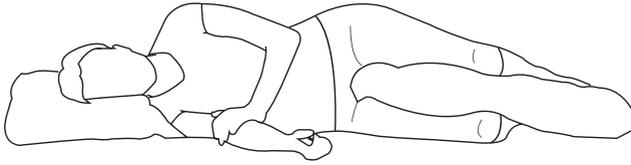
Positioning for ease

Sitting

- Try not to sit directly on the wound for long periods as this will restrict blood flow to the area. Change position regularly.
- When you are sitting, do your pelvic floor exercises to encourage blood flow to the area.
- To reduce the pain and pressure to the area, you can sit on two cushions – one either side of your buttocks, so your wound sits in between the cushions.

Lying

- You can lie on your side with a pillow between your knees, propping your baby up on pillows for feeding.



How can I help myself?

Toileting/nutrition

- Good fluid intake will dilute your urine and reduce stinging (minimum of 2 litres daily).
- To reduce stinging when passing urine, pour water from a cup or a jug over the area as you pass urine.
- To avoid constipation, eat lots of fruit and vegetables.
- Never strain on the toilet, take your time.
- You can use a maternity pad to support your perineal wound when on the toilet.
- When sitting on the toilet, keep your knees higher than your hips by placing your feet onto a stool or raising onto your toes, then lean forward so your elbows rest on your knees like below:



Hygiene

- Keep the wound as clean as possible by showering regularly and pat dry.
- Do not use any soap or products on the area.
- You can have a bath but do not stay in the bath for longer than 10 minutes as the edges of the wound may soften.
- Use a cup or jug of water to wash the perineal area after using the toilet.
- Change your maternity pad every 2 hours, even if you feel it doesn't need replacing.
- If you are able to do so, regular periods resting without your pad or underwear on will allow air to the wound to help it stay dry.

Medication (only for 3rd and 4th degree tears)

- **Antibiotics** – you will be given antibiotics to minimize the risk of infection.
- **Analgesia** – this will be prescribed to relieve local pain, which will lessen quickly but may persist for some weeks after.
- **Laxatives** – you will be given a stool softener for 14 days to help to keep your bowel movements regular and soft as it is important to avoid constipation.

Sexual relations

- Only when you feel ready.
- You may feel a temporary lack of interest, but this is normal.
- Remember to use contraception.
- Consider using lubricant to make intercourse more comfortable.
- Some positions may be more comfortable than others.

What happens next? (only for 3rd and 4th degree tears)

- You will be reviewed at 6-10 weeks by your consultant.
- You will be seen by an outpatient Women's Health Physiotherapist after 6 weeks to check your pelvic floor strength and to discuss any ongoing problems.

- Please contact the Physiotherapy Department or Consultant's secretary if you have not received your appointment.

Contact us

If you have other questions about any of this information, please contact your GP, midwife, health visitor or obstetric physiotherapist.

Women's Health Physiotherapist: 01872 252601 or 01872 252885

Urogynaecology Nurse Specialist: 01872 252299

Email: rch-tr.urogynaenurse@nhs.net

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

