

THE WOMEN'S OB-GYN GROUP
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 POSTPARTUM 

Congratulations to you and your family on the arrival of your new baby! We also wish to express our thanks for allowing us to help you during your pregnancy and to share these experiences with you. The following instructions are guidelines which, combined with your own common sense, may help to insure a rapid recovery.

After you are home, please call the office and make an appointment to see us in six weeks for your postpartum checkup. This will include a physical examination and discussion of birth control. You may wish to give this some thought until then. Patients who have had a caesarean delivery are requested to make an additional appointment at two weeks for a brief incision check.

GENERAL ACTIVITIES: Routine activities, such as walking, are permitted and encouraged. If possible, try to lift nothing heavier than forty pounds for the next three or four weeks. Try to get as much rest as you can, including at least one nap in the daytime. Exhaustion and sleep deprivation may lead to depression. Abdominal exercises (such as sit-ups) should probably be delayed for four weeks. Patients delivered by Caesarean section should delay these exercises until after the postpartum checkup unless specifically counseled to start earlier.

For the next several days, limit climbing flights of stairs excessively. If you find that this or any other form of moderate exercise exhausts you, then slow down. If increasing the amount of exercising does not tire you, then you may continue to gradually increase your range of activities. Riding in a car and traveling is okay, but you should probably refrain from driving for approximately four to five days. Caesarean section patients should wait about two weeks. We recommend that you refrain from tampon use, douching or sexual intercourse for at least 6 weeks.

DIET: You are encouraged to eat a balanced nutritious diet which is high in protein. Refrain from any weight reducing diets until at least 6 weeks post partum so that your body may fully heal and recover from the stress of pregnancy and delivery. Breast feeding imposes additional nutritional requirements and is a further reason to be especially nutrition conscious. You should also continue to take your prenatal vitamins or multivitamin supplement daily for at least 6 weeks and longer if breast feeding.

BATHING: Showers are permitted without restriction. However, we encourage you to wait until bright red bleeding has stopped before taking a tub bath. Please continue the sitz baths, Tucks and perineal spray until your stitches have healed.

BLEEDING: Most women will stop having bright red bleeding by two weeks after delivery, but some will continue to spot or have light bleeding for as long as 6 weeks. If the bleeding seems to get heavy, stay off your feet until it lessens again, and decrease your activity.



If bleeding stays heavy despite rest, please contact us for an appointment. If you soak more than one pad in an hour, call us immediately. If you are not breast feeding, your first period will probably start in four to eight weeks after delivery, and will be unusually heavy. If you are breast feeding, your first period may not start until after you wean the baby.

DEPRESSION: Post partum blues, including sad feelings and easy crying are very common, and are exacerbated by sleep deprivation. Make sure you get enough rest and that you set aside enough time for yourself. Sometimes, however, women experience more than the blues. Call us immediately if you have the feeling that life is not worth living, or you have excessive anxiety and fears of harming the baby. These may be signs of post-partum depression or post-partum psychosis. These types of problems are more common in breast feeding mothers, so they may be also related to sleep deprivation or hormonal changes. You may need medication or referral to a psychiatrist for these problems.

BREAST CARE: If you are bottle feeding, try to avoid any breast stimulation. Wear a well-fitting bra at all times. If your breasts become engorged (full, tender and very firm), use ice packs. Engorgement usually resolves in 24-48 hours. We try to avoid prescribing medication to inhibit breast milk production, because it is associated with rare, but serious, side-effects. On a case-by-case basis, however, this medication may be appropriate.

If you are breast feeding, you should also wear a well-fitting bra at all times. If your nipples become sore, try to achieve let-down before you have the baby latch on (you can do this by rolling your nipple between your thumb and finger for approximately one minute). Also

vary the positions of the baby from one feeding to the next. If your nipples become cracked or begin to bleed, you may need to use a breast pump until they heal. If you have continued problems with breast feeding, or if the baby is not gaining enough weight, you may want to seek the aid of a Lactation Consultant (see the Yellow Pages, or call La Leche League). If you develop sore spots on your breasts that are red or have red streaks, along with a fever and general sense of feeling ill, you probably have mastitis. Mastitis is an infection of the breasts that usually resolves with oral antibiotics. If you suspect that you have mastitis, do not stop breast feeding: Please call us for an antibiotic prescription.

Remember that when you are breast-feeding, whatever foods and medicines you take may pass through the breast milk. If you are unsure whether or not you can take a certain medication while breast feeding, please ask us or your pediatrician.

Again, congratulations! Now begins the hardest part: raising the baby.