

# The Fourth Trimester: Postpartum Care

## Normal Changes

It takes several months to return to your normal pre-pregnancy state. After delivery, the first six weeks are considered the postpartum period. The uterus will shrink to the level of the umbilicus during the first day postpartum. After that it will continue to involute (shrink) for the next six weeks. Bleeding will also continue intermittently during the first six weeks. You may bleed like a regular menstrual cycle, then stop, then start again or you may spot daily for six weeks. Drainage after delivery is called lochia. The discharge may be watery and pale or change to a thicker yellow or fleshy color. It often smells “earthy”. Cramping and passing an occasional clot is also normal.

## Menstrual Cycle

The first period is usually delayed following delivery. Some women may not have a cycle until they finish nursing. Other women may ovulate soon after delivery. You may be able to get pregnant before your periods return, even when you’re breastfeeding. Birth control is important from the very beginning so speak with your doctor about your options regarding birth control. Options for birth control are listed at [http://www.lowmg.com/info/medinfo/ob/ob\\_book/contraceptive\\_options.pdf](http://www.lowmg.com/info/medinfo/ob/ob_book/contraceptive_options.pdf)

## Birth Canal and Perineum

The vagina stretches to allow delivery and then must shrink back to normal size after delivery. The muscles and support may not return to normal for six to seven weeks. Stitches from vaginal tears or an episiotomy take six weeks to dissolve. Swelling and edema from the delivery may take one to two weeks to resolve. If the vagina was swollen at delivery and stitches were needed, the stitches may appear looser as the vagina heals. Do not be concerned, as this is normal. Lactation causes vaginal dryness. This is caused by diminished estrogen production due to breastfeeding. Lubrication or prescription vaginal estrogen may help with discomfort.

## Bladder Control

Sometimes the nerves to the bladder are stretched during delivery causing urinary retention which requires a bladder catheter for a short period of time. Muscular and ligament support to the bladder may also change with delivery. If stress incontinence is a problem, Kegel exercises may help restore the bladder function. Vaginal estrogen may also help with incontinence if nursing causes a low estrogen state in the vagina. It is normal to urinate more frequently after delivery due to third trimester water retention and swelling.

## Bowel Function

Constipation is common after delivery due to dehydration, medication and decreased activity. The first bowel movement usually occurs two to three days after delivery. Hemorrhoids are common with delivery and may never resolve completely. If hemorrhoids are painful, use cold compresses, TUCKS, and hydrocortisone cream. Both constipation and hemorrhoids are improved by using a stool softeners such as Benefiber.

## Skin Changes

The mask of pregnancy (facial) and the linea nigra (black line on the abdomen) will usually resolve within six months. Stretch marks gradually fade to silvery lines but do not completely disappear. Skin tags, rashes from pregnancy and the small red blood vessel spots on the skin disappear within a few weeks.

## Hair Loss

It is normal for hair to fall out after delivery and while breastfeeding. It may take several months after finishing nursing for a return to a normal hair growth cycle.

## Weight Loss

Returning to pre-pregnancy weight is a common goal. Combining a healthy diet with exercise will help you lose weight safely after delivery. Because dieting after pregnancy can decrease bone mineral density, it’s important to get enough calcium and do weight bearing activities. Lose weight gradually. Remember, it took nine months to gain the weight. It takes nine months to get back to normal. Consume at least 1,800 calories per day (an additional 500 calories per day is recommended if you’re breastfeeding). Drink plenty of fluids.

## **Postpartum Depression**

Many women have emotional changes after delivery. Let your physician know if you've been feeling overwhelmed, anxious, sad, isolated, nervous, obsessive, incompetent, exhausted, or you can't sleep. Your doctor can help you get the help you may need. Take time for yourself. Get enough rest. Call on family and friends for help. Delay going back to work as long as possible. A comprehensive reading list is located at the back of this book. Call your doctor if you think that you are depressed.

## **Bathing**

Showers and baths are safe after delivery. The perineum should be rinsed with lukewarm water two to three times daily the first few days after delivery. A squeeze bottle or sitz bath can help with this. Washing or wiping should occur from front to back. Stitches may take six weeks to dissolve.

## **Exercise**

Get up and move. Go outside and walk. Regular physical activity after delivery should be a part of every new mother's daily life. A gradual return to exercise is recommended. Some women may be able to start exercising within days of delivery; others may need to wait four to six weeks. Do Kegel exercises to strengthen the pelvic floor and abdominal muscles. This reduces the risk of urinary stress incontinence. Do weight-bearing exercises to tone and shape your body and keep your bones strong. If you had a cesarean section, your doctor may advise you to wait six weeks prior to resuming exercise.

## **Nutrition**

A well-balanced diet is essential for women before, during, and after pregnancy. Most multivitamins and prenatal vitamins don't supply enough calcium. Also, breastfeeding mothers transfer 250-350 mg of calcium to their baby through breast milk when they're nursing. Vitamin and mineral supplements can help ensure that you get the nutrients you need. Make sure you consume at least 1,000 mg of calcium daily, 1000 Units of Vitamin D and 15 mg of iron daily. For calcium, eat foods such as low-fat and fat-free dairy products and leafy vegetables (e.g., broccoli, kale, and collards). For iron, eat foods such as fortified cereals, lean beef, dried fruits, tofu, oysters, and spinach.

## **Sexuality**

Lack of interest in sex is common after childbirth and for the first couple of months following delivery. This is due to exhaustion and may be due to hormonal changes. Most women experience a gradual return to pre-pregnancy levels of sexual desire, enjoyment, and frequency within a year of giving birth, but every woman has her own timetable. Keep an open dialogue with your partner about your readiness to make love. Make time for cuddling and kissing to re-establish physical closeness.