

## **ABDOMINAL / VAGINAL HYSTERECTOMY**

### **PATIENT DISCHARGE INFORMATION**

#### **ABOUT THE PROCEDURE:**

- A hysterectomy is the surgical removal of the womb (uterus), with or without the removal of the ovaries. This procedure is used to treat a variety of conditions, including heavy or painful periods, fibroids and endometriosis.
- For an abdominal hysterectomy, the surgeon usually makes a horizontal cut along your pubic hairline (your pubic hair will have been shaved around the incision). Some women may need a vertical midline incision in the lower abdomen, especially if the hysterectomy is for a large uterine fibroid.
- A vaginal hysterectomy is performed through an incision at the top of the vagina. Women with a vaginal hysterectomy generally spend less time in hospital and have less discomfort while recovering. However, an abdominal hysterectomy is generally recommended when a woman has large fibroids or cancer.

#### **FOLLOWING THIS PROCEDURE:**

It is Normal to Expect:

- To stay in hospital for between 2 and 6 days.
- To be sore for several weeks after your surgery.
- Some vaginal discharge for 2-6 weeks after surgery.
- To be able to return to non-physical employment at six weeks post surgery (after review with your specialist).

#### **MANAGING PAIN POST OPERATIVELY:**

- It is recommended that you use Panadol/ Panadeine and/or Ibuprofen as prescribed or directed.
- In addition to the above medications, you will be discharged home from hospital with stronger pain relief. Please take as directed by your specialist or the hospital staff.

#### **HYGIENE AND WOUND CARE:**

##### **Abdominal Hysterectomy:**

- Shower as normal. Gently dry your abdominal wound. Do not swim in pools, use baths or spas until you have been reviewed by your specialist post-operatively.
- Any adhesive strips (steri-strips) on your wound will fall off in 7-10 days. Any other dressings should be removed prior to your discharge from hospital.
- Sanitary pads/liners should be used and changed regularly. Do not use tampons.
- Abstain from sexual intercourse and do not insert anything in the vagina until your review appointment with your specialist.

### Vaginal Hysterectomy:

- Shower as normal. Do not swim in pools, use baths or spas until you have been reviewed by your specialist post-operatively.
- There may be stitches in your vagina that will take 4-7 weeks to dissolve.
- Sanitary pads/liners should be used and changed regularly. Do not use tampons.
- Abstain from sexual intercourse and do not insert anything in the vagina until your review appointment with your specialist.

### **PHYSICAL ACTIVITY:**

- You must rest and allow healing after surgery.
- You will be seen by a physiotherapist during your hospital stay to revise your post-operative activity.
- Do not drive until six weeks post surgery, unless you are advised otherwise.
- Do not lift anything heavy for six weeks. This includes shopping bags, washing baskets, children and anything more than 2kgs.
- Do not play sport, exercise or do heavy housework for six weeks.
- Do walk regularly. Start gently and gradually increase your speed and distance.

### **BLADDER AND BOWEL FUNCTION:**

- Drink 6-8 glasses of fluid each day.
- Eat a high fibre diet that includes fruit and vegetables.
- Ensure your bowels are regular. Please avoid constipation. If you are taking pain relievers that contain narcotic (eg. Panadeine or Endone) you may become constipated. You can take bowel medications such as Movicol or Lactulose if needed. You can buy these from the chemist without a prescription.

### **PHYSIOTHERAPY:**

- Continue to wear your white compression (anti-embolism) stockings until you are fully active.
- Reintroduce your pelvic floor exercises from day two post surgery as comfortable.

### **IF YOU HAVE ANY OF THE FOLLOWING PROBLEMS:**

- Increasing abdominal or pelvic pain that is not eased by mild pain relief medication.
- Your wound discharge is bright blood or contains clots.
- Your wound is red and swollen or your wound discharge is offensive.
- Your vaginal discharge is offensive.
- You have problems voiding, eg. Pain or burning on passing urine, the need to pass it frequently, or increasing difficulty emptying the bladder.
- Nausea/vomiting that does not settle.
- You have a fever or chills.
- You have calf pain, tenderness or swelling; any shortness of breath or chest pain.

**Please seek immediate help as follows:**

1. During office hours of 9am to 5pm Monday to Thursday and 9am to 4pm Fridays, contact Care Gynaecology: Phone (02) 6058 6188 and dial 2 to speak to the Practice Nurse.
2. Contact the hospital you attended for your surgery:  
Albury Wodonga Private Hospital: Phone (02) 6041 1411
3. Contact your normal GP or
4. If you have further concerns, present to the Albury Wodonga Health (Wodonga Hospital) Accident and Emergency Department.

Note: Albury Wodonga Health (Albury Hospital) Accident and Emergency Department does not have gynaecology services.

**POST OPERATIVE FOLLOW UP:**

- You will receive a follow up phone call from our Practice Nurse approximately seven days following your procedure to check on your progress and discuss your pathology results (if applicable).
- You will have a post-operative appointment with your specialist to check on your recovery (usually at six weeks post surgery).