



KK Women's and
Children's Hospital
SingHealth

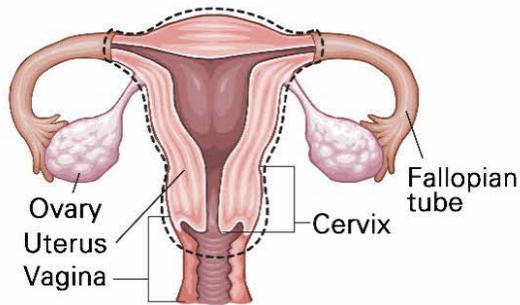
Recovering well after a Hysterectomy



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What is a Hysterectomy?

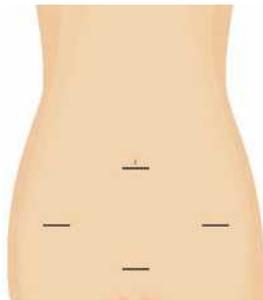
Hysterectomy is a surgery to remove the womb (uterus). During the surgery, one or both ovaries and fallopian tubes may also be removed.



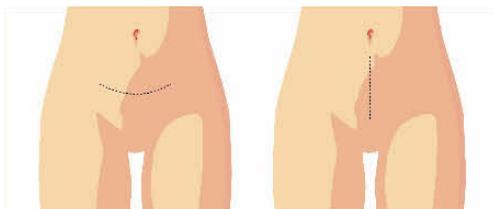
Hysterectomy can be performed via

- Open abdominal incision,
- Laparoscopic (key hole) incision, or
- Vaginal surgery

The type of hysterectomy performed depends on your personal circumstances. Your gynaecologist will discuss this with you in detail before your operation.



Key hole incision



Low transverse incision

Vertical incision

Post-operative care

Every woman recovers differently. Your recovery journey will depend on:

- How fit and well you are before your operation
- The reason for your hysterectomy
- The type of hysterectomy that you have
- How smoothly the operation goes and whether there are any complications

Usual length of stay in hospital

- Most women are admitted either the day before or on the day of your operation and majority will go home by the third day after their operation. For key hole surgery you may be discharged earlier if you are well.

What will I experience after a hysterectomy?

- **After-effects of general anaesthesia**
 - ❖ You may feel nauseated or sleepy after the surgery. However, these effects should not last for more than a day.
- **Pain and discomfort**
 - ❖ You can expect pain and discomfort in your lower abdomen for at least a few days after your operation. Taking oral painkillers as prescribed can help you to get out of bed sooner and move around.
 - ❖ After the surgery, the scar area may feel numb or sensitive to touch for a few weeks.
- **Vaginal bleeding**
 - ❖ You can expect to have some vaginal bleeding for 1 to 2 weeks after your operation. This is like a light period and is red or brown in colour.
 - ❖ Any stitches in your vagina will not need to be removed as they are dissolvable. You may notice a stitch coming away after a few days or maybe after a few weeks. This is normal and nothing to worry about.
- **Starting to eat and drink**
 - ❖ After the operation, you may have a drip in your arm to provide you with fluids. When you are able to drink again, the drip will be removed.
 - ❖ Your doctor will slowly escalate your diet after the operation, starting with a drink of water and something light to eat.

- **Trapped wind**

- ❖ After your operation, your bowel may temporarily slow down, causing gas or 'wind' to be trapped. Getting out of bed and walking around can help your bowels start to move, easing the discomfort of trapped wind.

- **Constipation**

- ❖ Avoid constipation after surgery by having plenty of fruits, vegetables and water as tolerated. If needed, laxatives can also be prescribed.

- **Tiredness and feeling emotional**

- ❖ You may feel more tired than usual as your body is using a lot of energy to recover. A hysterectomy can also be emotionally stressful and many women may feel tearful and emotional.

- **Washing and showering**

- ❖ You may shower daily after the surgery. Do not worry about getting your scars wet – just ensure that you dab them dry. Keeping your scars clean and dry helps healing.
- ❖ Do not soak in a bathtub or swimming pool until the wounds (both abdominal and vaginal closure wound) are well-healed which usually takes 2 weeks.

- **Activity**

- ❖ Avoid strenuous exercise, heavy lifting, excessive coughing and overly stretching your body for 4 to 6 weeks to prevent wound break down but do continue to stay active – walk around at least several times a day.

- **Can I have sex? Can I use tampons?**

- ❖ You should refrain from having sex/inserting anything in the vagina until the tissues have healed completely – usually 4 to 6 weeks

■ **What can I expect after a hysterectomy?**

- **Intravenous drip**

- ❖ An intravenous plug will be inserted on your arm to deliver fluids and medication to your body.

- **Pain killers**

- ❖ Patient controlled analgesia (PCA) pump is frequently used for patients who have undergone a major abdominal surgery. When you press a button on the handset, a small amount of painkiller will be injected into your bloodstream to relieve pain. You are unlikely to overdose yourself as the PCA pump is preset to deliver only a safe amount of painkiller within a time limit. When you have adjusted to regular eating and drinking, the PCA pump will be discontinued and oral painkillers will be given.



PCA Pump

- **Catheter**

- ❖ You may have a catheter (tube) in your bladder to allow drainage of urine.
- ❖ The catheter will be removed when you are able to walk to the toilet to pass urine.

- **Drain**

- ❖ Occasionally, a drain (small tube) is inserted through your abdominal wall to remove any blood/fluid that may accumulate immediately after your operation. The drain will be removed before discharge from the hospital.

- **Pack**

- ❖ If you had a vaginal hysterectomy, you may have a pack (a length of gauze like a large tampon) in your vagina to prevent bleeds. The vaginal pack will be removed before discharge from the hospital.

- **Stitches and dressing**

- ❖ Stitches are commonly used for closing of the surgical incision. Most stitches are under the skin and will dissolve in three to four weeks after surgery.

Some stitches are not dissolvable and will need to be removed 7-14 days after your operation.

- ❖ Our doctor and nurses will check your wound regularly. Your dressing should be kept clean and dry. Please inform the nurses if your dressing is wet. Dressing will be removed between five to seven days after your operation.
- ❖ If you had an open abdominal incision, you will be encouraged to use a binder to support the abdominal wound.
- **Physiotherapy**
 - ❖ You will be given advice about exercises to help you recover and ways to move easily and rest comfortably. Deep breathing exercises helps to prevent lung congestion while leg exercises improves blood circulation while you are less active.

- **Formation of blood clots – how to reduce the risk**

- ❖ There is a small risk of blood clots forming in the veins in your legs and pelvis (deep vein thrombosis) after any operation. These clots can break off and travel to the lungs (pulmonary embolism), which could be serious. Reduce the risk by ambulating early after your surgery. Other measures that may also be taken to reduce this risk include:
 - ◆ Graduated compression stockings
 - ◆ Calf compressors – will be put on your legs after operation to help blood movement in your legs. It is usually removed when you start your exercise.
 - ◆ Blood thinning medications



Calf Compressor

- **What can help me recover?**

- Establish a daily routine and keep it up. For example, try to get up at your usual time, have a wash and get dressed, move about, and do light activities around the house.
- A balanced diet with an emphasis on high protein food helps to ensure that your body has all the nutrients it needs to recover.
- Perform pelvic floor muscle exercises to keep your pelvic organs in the correct position (prevent prolapse), tightly close your bladder and bowel (stop urinary or anal incontinence) and improve sexual satisfaction.
- Get support from your family and friends and have a positive attitude towards how you are recovering. Give yourself some time to adjust.

- **When should I seek medical advice after a hysterectomy?**

- Abdominal pain/distension, especially if it is associated with fever or vomiting may be due to injury to your bowel or bladder.
- Vaginal bleeding that becomes heavy or smelly may indicate an infection or a small collection of blood at the top of your vagina (vault haematoma).
- Red and painful skin around your scar may indicate a wound infection
- Burning sensation when you pass urine or frequent urination may indicate a urine infection.
- A painful, red, swollen leg may indicate a deep vein thrombosis (DVT).

You should go to the KK Urgent O&G Centre for further assessment if you have any of the above symptoms.

RecoveryTracker

1 - 4 days	<p>You may:</p> <ul style="list-style-type: none"> • Still be in the hospital. • Feel some pain and discomfort in the abdomen. • Feel soreness when moving in and out of bed. • Have some bleeding, like a light period. • Be fatigued and have urges to sleep during the day. 	<p>Fit to work?</p> <p>⊗</p> <p>No</p>
	<p>It is safe to:</p> <ul style="list-style-type: none"> • Get up and move about. • Go to the toilet. • Get dressed yourself. • Start eating and drinking per normal. 	
5 - 7 days	<p>You may:</p> <ul style="list-style-type: none"> • Have been discharged from the hospital. • Feel pain, but of less intensity. • Have the ability to move about more comfortably. • Still feel tired and have urges to nap during the day. 	<p>Fit to work?</p> <p>⊗</p> <p>No</p>
	<p>It is safe to:</p> <ul style="list-style-type: none"> • Carry out activities as per Day 1-4. • Go for short walks. • Carry out exercises recommended to you. • Wash up and shower as per normal. • Have a rest or sleep in the day if necessary. 	
1 - 2 weeks	<p>You may:</p> <ul style="list-style-type: none"> • Feel even less pain as you move about. • Possess increasing levels of energy. • Experience minimal or no bleeding. 	<p>Fit to work?</p> <p>⊗</p> <p>No</p>
	<p>It is safe to:</p> <ul style="list-style-type: none"> • Build up activity slowly and steadily. • Lift light loads. 	

2 - 4 weeks	<p>You may:</p> <ul style="list-style-type: none"> • Feel minimal pain as you move about more. • Observe your energy levels returning to normal. • Become stronger by the day. 	<p>Fit to work?</p> <p>☑</p> <p>Yes, but on reduced hours or lighter duties</p>
	<p>It is safe to:</p> <ul style="list-style-type: none"> • Continue building up the amount of activity to normal levels. • Play low-impact sport. • Make plans to resume work. 	
4 - 6 weeks	<p>You may:</p> <ul style="list-style-type: none"> • Almost be back to normal. • Still have feelings of tiredness. 	<p>Fit to work?</p> <p>☑</p> <p>Yes, but no heavy work</p>
	<p>It is safe to:</p> <ul style="list-style-type: none"> • Conduct all daily activities, including lifting. • Do your usual exercise. • Drive. • Have sex, if you feel ready. 	

Royal College of Obstetricians and Gynaecologists, 2015

■ **Surgical menopause (for those who have both ovaries removed during the operation)**

- Surgical menopause is the removal of both ovaries before a woman has undergone natural menopause.
- Surgical menopause causes a sudden drop in ovarian hormones and may cause menopausal symptoms, such as hot flushes, night sweats, fatigue, joint ache, vaginal dryness, reduced sexual drive, mood changes (depression) or impaired cognition (thinking). Lifestyle interventions, hormone replacement therapy or non-hormonal treatments are options to manage menopausal symptoms.
- Women who have undergone surgical menopause before the age of 45 years are at risk of long-term health problems. They may be advised by their doctors to start on hormone replacement therapy until the age of 50 years old to protect their heart and bone health.
- Speak to your gynaecologist or get an appointment to see a specialist doctor at KK Menopause Centre if you would like to discuss these options.



■ **Follow-up appointment**

You will be given an appointment to see your doctor a few weeks after your operation. Your doctor will assess your condition and ensure that you are recovering well from the surgery.

■ **Key contacts**

- **KKH Urgent O&G Centre (UOGC)**
Operating hours: 24-hour walk-in clinic
Location: Women's Tower, Basement 1
- **Central Appointments**
6294-4050
- **KKH Menopause Centre**
Operating hours: 8.30am to 5.30pm
Location: Wellness Centre, Clinic B,
Women's Tower, Level 1
Contact number: 6225-5554
- **For emotional support**
Medical Social Worker 6394-1028

Resources

Feltmate, C., Falcone, T., & Chakrabarti, A. (n.d.). Care after Gynaecological Surgery. UpToDate.

Royal College of Obstetricians & Gynaecologists. (2015). *Information for you after an Abdominal Hysterectomy*.

Useful telephone number

Central Appointments

6294-4050



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