



**University Hospitals  
Bristol and Weston**  
NHS Foundation Trust

Patient information service  
**St Michael's Hospital**  
**Weston General Hospital**

# Physiotherapy advice and exercises after gynaecological surgery



**After your operation you will be encouraged to get out of bed and start moving around.**

## **Top tips to help you recover faster**

1. If you have been told that you need to stay in bed, do some regular deep breathing and ankle exercises. Try not to cross your legs.
2. At all times, make sure you are comfortable by having good pain relief.
3. Support your wound when moving or coughing.
4. Bend your knees before coughing and removing phlegm.
5. Sit upright when in your bed or in your chair.
6. Place a small pillow in the small of your back to help prevent backache.
7. Trapped wind? Try lying with your knees bent up and, keeping your knees together, rock them gently side to side. Or, get up and gently walk around.
8. When walking around, stand and walk tall to help reduce pressure on your wound and back.
9. Wear your day clothes rather than your night clothes when you are up and about.
10. Go to the dining room for meals rather than having them by your bed.

# Breathing and leg exercises

Good blood circulation is very important for healing. While in bed you will naturally be moving less than usual and taking shallower breaths, and this means that your circulation is slower. **When you are up and walking around the ward, you will not need to continue these exercises:**

- when awake, take a few deep breaths and briskly move your feet up and down for about 30 seconds every hour
- if you sit out, but are not ready to walk around, you could try standing up and walking on the spot for a short while.

# Coughing

If you have phlegm, it is very important to cough it up and out so that it does not cause an infection in your lungs:

- sit forward with your knees bent
- support your wound with your hands or a pillow (or, if you have had a vaginal operation, you could firmly hold your sanitary towel)
- now take some deep breaths: in through your nose, out through your mouth
- holding your towel or pillow firmly, take a deep breath and cough. Try to remove any phlegm/sputum rather than swallow it.

If you find it difficult to cough effectively, try **huffing**. After doing some gentle deep breathing, take in a medium-sized breath and then breathe out fast (huff) through your open mouth as if steaming up a mirror.

This will squeeze sputum up along the airways to a point where you can easily cough it up.

# Rolling over in bed

Bend your knees up one at a time.

Keeping your knees together, roll onto your side. Do not twist your body.

## To get out of bed:

- push up into a sitting position using your arms and at the same time swing your legs over the side of the bed
- stand up slowly.

When you need to get back into bed, sit close to your bed's back rest and reverse the above method.



# General advice and guidelines after major surgery

Some operations take longer to recover from than others.

Remember that everyone is different and will recover at different rates, so do not compare yourself to others.

Learn to listen to **your** body.

It is quite safe to use the stairs from the day you go home from hospital, but we suggest that you avoid going up and down too frequently in the first few weeks.

You should only do light housework for the first few weeks and avoid anything that involves prolonged standing – for example, you could sit down to prepare meals or do the ironing.

After three to six weeks, gradually return to general activities. You can return to driving at around four to six weeks, if you feel you can fully concentrate. Make sure you are comfortable turning around to look over your shoulder and are able to do an emergency stop. Check with your insurance company that you are covered.

## Lifting

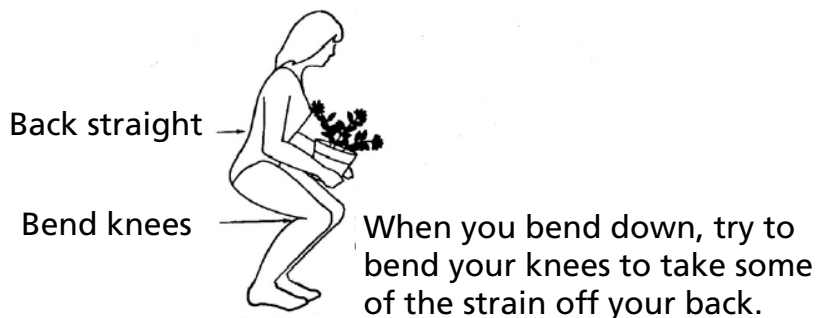
Immediately after surgery, avoid lifting anything heavier than 2.5kg (approximately 5lbs).

When you do lift, remember to do it correctly. Gently pull in your stomach muscles, tighten your pelvic floor muscles and breathe out as you lift.

Try to avoid lifting heavy objects, for example a vacuum cleaner or full washing basket, for at least six to eight weeks. However, if

you have had a prolapse repair or have very weak pelvic floor muscles, it may be sensible to always try to avoid very heavy lifting.

If your work involves heavy lifting you may need to have longer off work than others who have a seated occupation.



## Bladder and bowel advice (going to the toilet)

Always sit down on a toilet. Don't hover, as your bladder may not empty properly.

When you are moving your bowels (having a poo) it may help to support your wound. If you have had abdominal surgery, then try supporting your abdomen with your hands or a towel.

If you have had vaginal surgery then you could try holding a sanitary towel against your vagina for support.

Do not strain to move your bowels. Try using a step stool to raise your knees higher than your hips, and lean forwards with a straight back.



# Exercise

Walking is an ideal exercise. When you feel ready you could aim for a daily walk of ten minutes which can be increased gradually.

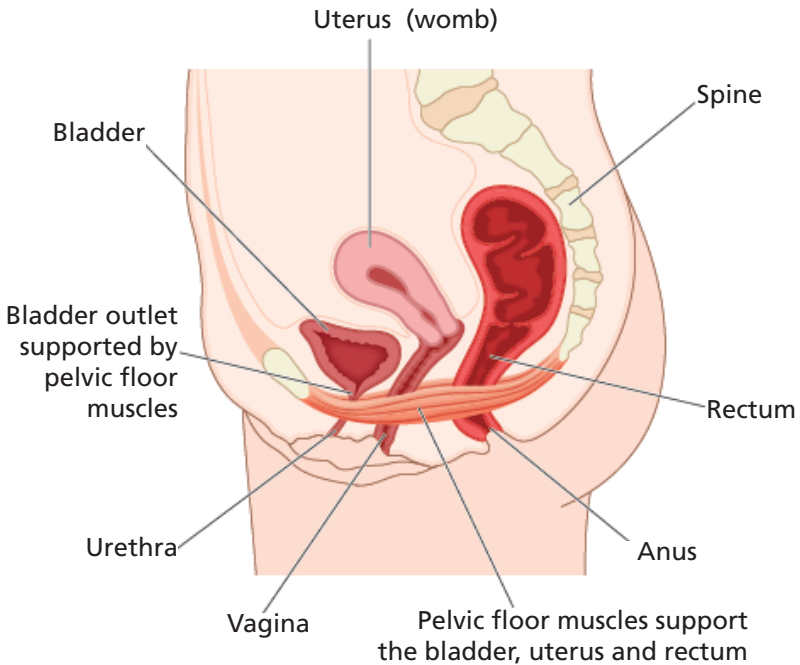
## Pelvic floor muscle exercises

These are important exercises that every woman should do every day to help with bladder and bowel control. These muscles also help to support your pelvic organs.

The exercises can be done anytime and anywhere. They can be done while sitting, standing or lying down.

If you have had a catheter, you should wait until it is removed and you are passing urine normally before you start these exercises.

We recommend that you wait for about one week before starting these exercises if you have had a vaginal repair.





# How to do a pelvic floor exercise

A pelvic floor exercise means you need to

- tighten your pelvic floor muscles around your back passage, as if you are trying to hold a fart
- feel this tightening continue forwards and upwards as if you are trying to stop the flow of urine
- hold these muscles lifted up for a few seconds (do not hold your breath) then relax these muscles completely for four seconds
- your aim is to be able to hold them for 10 seconds and repeat ten times
- now try to do ten quick pull-ups, again relaxing between each squeeze.
- aim to build up to 10 second holds, x 10 repetitions, x 10 quick squeezes

Try to find time to do these exercises a few times each day indefinitely.

Remembering to do them can be a problem. It can help if you link them to something that you do on a regular basis, for example cleaning your teeth, making a cup of tea or standing in a queue.

You can now get pelvic floor apps for your phone to help you remember to do your exercises eg The Squeezy App.

# Abdominal exercises

Your abdominal muscles act as a corset to help support your back and internal organs.

You can start these exercises as soon as you feel comfortable.

As with all exercises, start slowly, gradually increase what you can do and do not continue if you feel pain or are very tired.

## Deep stomach exercise

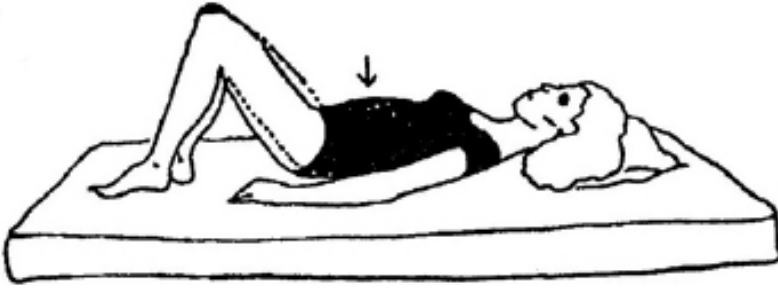
This exercise can be done while sitting, standing or lying on your side:

- let your tummy muscles relax
- breathe in gently
- as you breathe out, gently pull in the lower part of your tummy
- do not let your back move
- hold for a few seconds (do not hold your breath) then relax.

Practise until you can hold for 10 seconds and repeat 10 times while breathing normally.

Try to do this exercise three to four times a day.

## Pelvic tilting



Lie on your back with your knees bent.

Pull in your tummy and flatten your back onto the bed by tilting your pelvis.

Hold your tummy muscles tight then relax.

Do not hold your breath.

Practise until you can hold your muscles tight for five seconds and repeat five times.

Try to do this exercise three to four times a day.

## Return to fitness

We advise a gentle return to sporting activities.

Wait three to six weeks to allow for healing before progressing to low impact exercise, such as cycling, pilates, yoga, swimming.

However, if you have had a vaginal operation, you will need to wait until any discharge has ceased before going back to swimming (approximately six weeks).

Avoid high impact activities – for example running, tennis, high impact aerobic activities and competitive sport – for at least three months.

If you have any questions, do not hesitate to ask to speak to the ward physiotherapist for further advice.

Remember to keep on doing your pelvic floor exercises once or twice a day for the rest of your life. If you stop, then your muscles may weaken, and any symptoms you have with continence or prolapse may return

## Further advice

### University Hospitals Bristol and Weston

To download the following leaflets please click on the link or scan the QR code

- Tips for your bowel problems  
<http://foi.avon.nhs.uk/download.aspx?did=6329>



### Pelvic Obstetric and Gynaecological Physiotherapy

The Pelvic Obstetric and Gynaecological Physiotherapy is a UK based professional network affiliated to the Chartered Society of Physiotherapy.

Their website hold a host of further information booklets. All can be downloaded from:

<https://thepogp.co.uk/resources/booklets/>



We recommend looking at:

- Fit following surgery
- Improving your bowel function

**If you have problems with your bladder or pelvic floor you can now self-refer to the physiotherapy outpatient service.** Ask the ward physiotherapist or your nurse in charge for a copy of the self-referral leaflet.

These can also be obtained from your GP surgery or, if you prefer, you can leave a message with your contact details on **0117 342 7768** and a copy will be sent to you in the post.

# Notes



As well as providing clinical care, our Trust has an important role in research. This allows us to discover new and improved ways of treating patients.

While under our care, you may be invited to take part in research. To find out more please visit: [www.uhbw.nhs.uk](http://www.uhbw.nhs.uk)

Help us prevent the spread of infection in hospital. Please make sure your hands are clean. Wash and dry them thoroughly/use the gel provided. If you have been unwell in the last 48 hours please consider whether your visit is essential.

Smoking is the primary cause of preventable illness and premature death. For support in stopping smoking contact **NHS Smokefree on 0300 123 1044.**

Drinkline is the national alcohol helpline. If you're worried about your own or someone else's drinking, you can call this free helpline in complete confidence. **Drinkline on 0300 123 1110.**

For access all patient leaflets and information please go to the following address:  
<http://foi.avon.nhs.uk/>

**Bristol switchboard: 0117 923 0000**

**Weston switchboard: 01934 636 363**

**[www.uhbw.nhs.uk](http://www.uhbw.nhs.uk)**



For an interpreter or signer please contact the telephone number on your appointment letter.



For this leaflet in large print or PDF format, please email [patientleaflets@uhbw.nhs.uk](mailto:patientleaflets@uhbw.nhs.uk).

