

**C**ongratulations on your new baby! You are starting an exciting new experience in your life -- raising your baby to be a healthy and happy child. Your baby is unique with his or her own personality from the day he or she is born. Your baby is completely dependent on you for all of his or her needs. The first six weeks after childbirth -- the postpartum period -- is a remarkable time of adjustment for all members of the new family. For the new mother it is a time to learn to love and care for the new baby, and also a time of physical recovery from birth.

## THE POSTPARTUM PERIOD

This period of time begins with the birth of your baby and lasts for 6 to 8 weeks. During this time your reproductive organs will be returning to their pre-pregnancy state. In the first few hours after you give birth many things will be happening. After your baby is born the placenta separates from the uterine wall and your uterus will continue contracting until it is pushed out. The uterus needs to continue to contract firmly to prevent excessive bleeding. The nurse will massage your uterus, check the amount of bleeding, and monitor your temperature, pulse and blood pressure frequently for the first few hours.

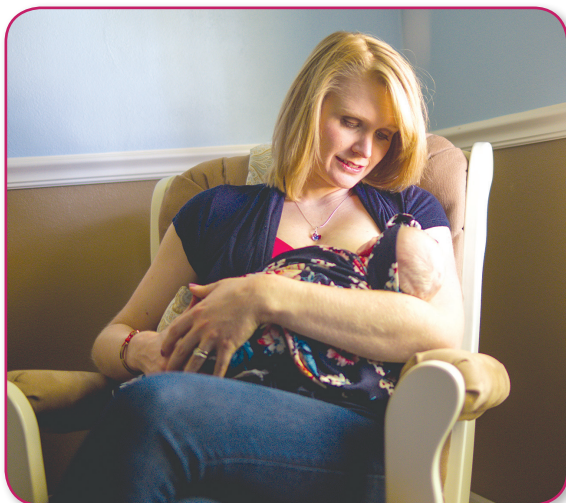
## SKIN-TO-SKIN

Immediately after birth your baby will be placed skin-to-skin on your chest; naked baby on your bare chest. Your chest is the best place for your baby to adjust to life in the outside world. Skin-to-skin will help your baby stay warmer and calmer and will give you the best start for breastfeeding. Skin-to-skin contact will also help you bond with your baby and will help you remain calm following delivery.

## ACTIVITY

Walk as soon as you are able to do so. You will need your nurse to help the first time; then she will let you know if you need to call for help again. Adequate rest is necessary for recovery. Try to rest or sleep whenever the baby sleeps. Even if you feel well rested, you should take a daily nap. Go to bed whenever possible, especially when your baby is waking for night feeding. For the first two weeks after your baby is born:

- Do not lift anything heavier than your baby (in the carseat)
- Avoid heavy pushing (vacuuming)
- Try to stay on one floor as much as possible, avoid climbing stairs frequently.



Return to your daily activities slowly and watch carefully how your body responds. Follow your caregiver's guidelines about activity and exercise. Take advantage of all offers of help, especially with cleaning and cooking. Signs that you are doing too much include increased vaginal flow and fatigue.

## BABY BLUES

Baby blues surprise many new mothers because it is not what they imagined when they dreamed of bringing their new baby home. No one knows for sure what causes baby blues, but it seems to be associated with normal hormone changes that occur after delivery and with not getting enough sleep. Up to 80% of new mothers have some form of baby blues which usually start on the second or third day after birth and can last two weeks or longer. The new mother feels depressed, may have crying spells or mood swings, feelings of loneliness, anxiety, lack of confidence in her mothering ability, and can't understand why, since she was so excited about having her baby. While waiting for the blues to pass, you might feel better if you would take these steps:

- Rest. Don't try to do everything. Get help with chores, shopping and child care for other children. Let some things go for now. Lie down and rest whenever possible. Take small naps during the day while the baby sleeps.
- Take care of yourself. Plan outings with the baby, or ask someone to babysit while you take a walk, or dine out with your husband or friend, etc.
- Eat well. Include plenty of whole grains, milk products, fresh fruits and vegetables, and protein-rich foods in your diet.
- Be realistic. Decide what really needs to be done versus what you would like to get done.
- Seek support. Tell your partner or other trusted person how you feel, and ask for his help and support. Join a new mother's group, come to breastfeeding support group, or get to know other new mothers at your church or workplace.
- Trust yourself. Have confidence in yourself and your ability to care for your baby.

Postpartum depression (PPD) occurs in some women. It usually begins about three to four weeks after birth. It can be serious and it is important you get help. For some women baby blues don't go away; instead the symptoms not only continue, or may get worse. Symptoms can include those of baby blues and physical symptoms such as headaches and hyperventilation. Emotional symptoms include feelings of inadequacy, inability to cope, hopelessness, overconcern or no concern about the baby, suicidal thoughts, panic attacks, frightening thoughts about the baby, dislike or fear of touching the baby and inability to sleep even when the baby sleeps. Postpartum depression is treatable. The sooner a woman seeks help, the sooner she will feel better. If you feel like you may have postpartum depression, GET HELP. Call your doctor. Get help from the professionals who understand Postpartum Depression and can help you feel better. Remember, PPD is an illness. Your feelings don't mean you are "crazy" or that you did something wrong.

### Contact Organizations

- Depression After Delivery, Inc., can provide more information and make mental-health referrals. **Call 1-800-944-4PPD (4773).** Or visit **[www.depressionafterdelivery.com](http://www.depressionafterdelivery.com)**.
- Prevent Child Abuse America provides information on parenting and dealing with stress. **Call 1-312-663-3520.** Or visit **[www.preventchildabuse.org](http://www.preventchildabuse.org)**.

### Talk to your health-care provider

He or she may suggest:

- counseling: to help you explore your feelings.
- medication: ask what is safe to take if you are breastfeeding. With support and care, PPD can be treated.

## CRAMPING

Afterpains or cramping are the uncomfortable contractions of the uterus after birth. They are more noticeable in women having a second or third baby than they are after the first. These contractions are stronger while you are breastfeeding. Afterpains usually disappear after the first week. To reduce the cramping discomfort:

- Mild pain medication ordered by your doctor such as ibuprofen (Motrin, Advil) or acetaminophen (Tylenol) helps
- Keep your bladder empty. A full bladder makes after pains worse
- Try using a heating pad set on low

## LEG PAIN

If you notice an area on your leg after birth that is tender, painful, swollen, hard, warm to touch, or reddened, report this to your doctor right away. These signs could indicate thrombophlebitis, an inflammation of a vein that can result in the formation of a blood clot.

## PERINEAL CARE

In order to prevent infection, relieve pain, and promote healing, special care of the perineum (area between the vagina and rectum) is recommended, especially if you have stitches. Your stitches dissolve and the tissue is usually healed within four weeks.

Perineal Care: Fill the peri-bottle with warm water. After you go to the bathroom, clean yourself by squeezing the warm solution over your perineum from front to back. Continue as long as you are bleeding.

Episiotomy discomfort may be relieved with the following:

- Sitz bath
- Tucks (commercial pads containing witch hazel) can be placed on your sanitary pad, which will hold them against your perineum. Witch hazel relieves soreness.
- Dermoplast spray and pain medication ordered by your doctor will also help with discomfort.

Sitz Bath: A sitz bath can relieve perineal soreness. Continue to use the disposable sitz bath as you did in the hospital or sit on a towel in clear warm water in your bath tub. Take a sitz or warm bath for twenty minutes, 2 - 3 times a day as needed for comfort.

Hemorrhoids: There are several ways to reduce the discomfort of hemorrhoids and to promote healing. Sometimes hemorrhoids develop during pregnancy or from the pressure during the pushing stage of labor.

- Avoid constipation
- Drink 8 - 10 glasses of water each day
- Eat high-fiber foods like bran, fresh fruits and vegetables
- A stool softener may be ordered
- Tucks and sitz baths help ease discomfort
- Try the pelvic floor contractions, or Kegel exercises

## SEXUAL ACTIVITY

Although it is best to follow your physician's instructions, generally it is safe to have sexual intercourse when the vaginal discharge has stopped and your stitches have healed. It takes about one month for the uterus to heal and the cervix to completely close after having a baby. Having sex too early can allow bacteria to enter the uterus and cause an infection. Talk to your doctor about when you can resume sexual activity. Be gentle, you will probably be sore at first. After birth you will have a decrease in vaginal lubrication, especially if you are breastfeeding. Any water soluble lubricant, such as K-Y Jelly or a contraceptive cream, or contraceptive jelly can help.

A condom with spermicidal foam, cream or jelly may be used for birth control prior to your postpartum checkup when you can discuss birth control with your doctor.

Pregnancy can occur as soon as intercourse is resumed, whether you have or have not had a period. If you are not breastfeeding you will probably begin your period 4-8 weeks after your baby's birth. Breastfeeding does not prevent pregnancy. If you are breastfeeding you may not have a period for many months.

## Signs and Symptoms of Infection

Report any of the following symptoms to your doctor.

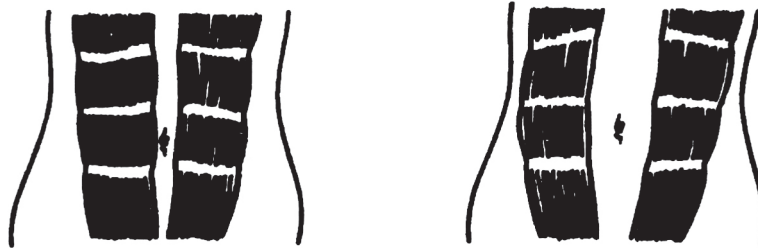
- Increasing swelling
- Increasing pain
- Fever over 100.4 degrees F
- Foul smelling vaginal discharge
- Breasts that develop hot, tender, painful lumps or have reddened areas or red streaks

## Vaginal Discharge

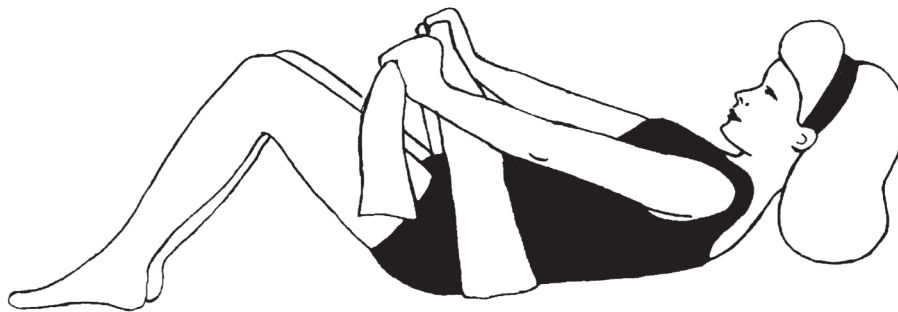
The discharge after childbirth from the vagina is called lochia. It is made up of blood, tissue and mucus from the healing uterus. Use sanitary pads rather than tampons. You should not use tampons or douche for at least six weeks after childbirth. During the first few days after birth, the lochia is red and heavy. It is not uncommon to notice a few clots about the size of a golf ball. Over the next few days the lochia will gradually become pink or brown and then white or yellowish. It may continue for 4 - 6 weeks. If your flow becomes red and heavy again it is probably a sign you have been too active. Lie down and rest. This will usually result in the flow slowing down again. If your flow becomes heavier than a period, has large clots, is soaking a pad in an hour or less, and does not slow down with rest, you should notify your doctor.



Before starting an abdominal exercise program, check for separation of the rectus muscles. These muscles run up and down from your rib cage to your pelvic bone. Due to the stress of pregnancy on these muscles, they sometimes separate. This is painless and it protects the muscles from stretching excessively.



To test for the separation of the rectus muscles, lie on your back with your knees bent. Press the fingertips of one hand into the area just above your navel. (Fingers should be together and horizontal.) Slowly raise your head and shoulders off the floor. The rectus muscles will tense allowing you to feel any gap. A slight gap, (the width of one or two fingers placed side by side) indicates normal muscle weakness after pregnancy. An extreme gap consists of a width of three or four fingers wide and requires special attention before beginning a strenuous abdominal exercise program. To help close the separation, begin with the following exercise.

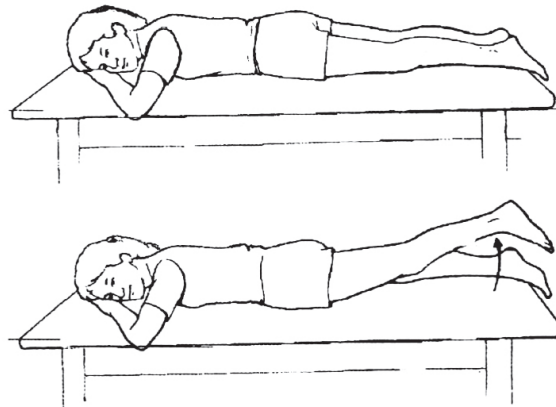


Lie on back with a sheet folded and under back. Cross hands and hold one end of sheet with each hand. Breathe in. As you breathe out, raise your head off the floor. As you raise your head, pull the sheet around abdomen to pull the rectus muscles together. Hold for a slow count of five and slowly lower your head back down. Repeat 5 times in 3 or 4 sessions a day. After the gap has narrowed to 1-2 fingers wide, proceed to more advanced abdominal strengthening.



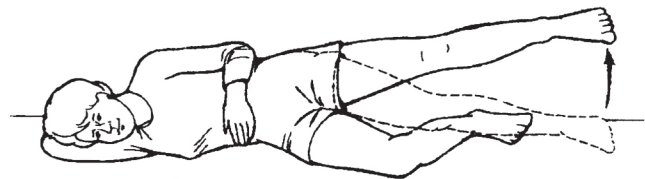
## HIP EXTENSION

Purpose: Strengthen lower back and buttocks. Lie on belly and raise leg off floor. Hold for approximately 5 seconds. Repeat with other leg.



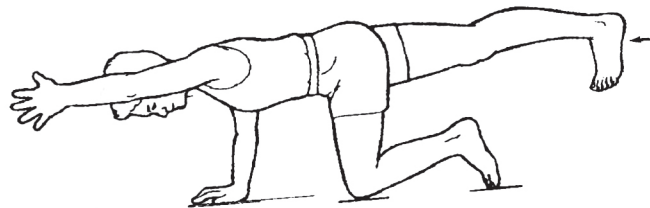
## HIP ABDUCTION

Purpose: Strengthen lower back and outer hip muscles. Lie on side with bottom leg bent and top leg straight. Top leg should be in a straight line with trunk. Do not allow pelvis to go backward or leg to pull forward. Raise leg and hold 5 seconds. Repeat with other leg.



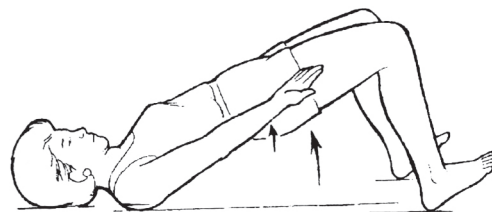
## ARM/LEG DIAGONALS

Purpose: Strengthen and stabilize the back. Begin on hands and knees and hold spine in neutral. Raise the right arm and left leg at the same time without allowing your back to lose the neutral position. Lower arm and leg. Raise left arm and right leg together. Repeat. Do this 10 times, holding each position 5 seconds.



## BRIDGING EXERCISE

Purpose: Strengthen and stabilize low back. Some strengthening of hips. Lie on back with your knees bent and arms at your side, palms up. Keep spine neutral throughout exercise. Pull toes toward the ceiling; push heels into floor; tighten buttocks. Keeping your arms at your side, slowly lift buttocks into the air until hips are even with trunk. Count to five out loud, to avoid holding your breath, and slowly lower buttocks. Do this 10 times.



## PELVIC TILT

The following exercises are a progression of lower abdominal strengthening exercises. Check for separation of the abdominal muscles before beginning this progression. You may progress to the next level once you can perform 30 repetitions of the exercise you are on without losing the pelvic tilt. The tilt is the first exercise shown below. To determine whether or not you are holding the pelvic tilt, place hands under the low part of your back and feel if the back raises off the floor. In maintaining the tilt, your back should stay flat on the floor. As the exercises get harder, you may need to begin with only 3-5 repetitions, increasing as you get stronger and are able to hold the pelvic tilt.

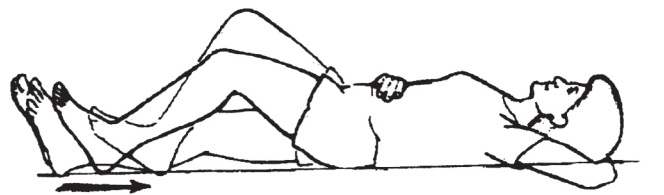
### LEVEL 1: POSTERIOR PELVIC TILT

Lie on back with knees bent. Tighten lower abdominal muscles and flatten back as shown. Begin with 10 repetitions and progress to 30.



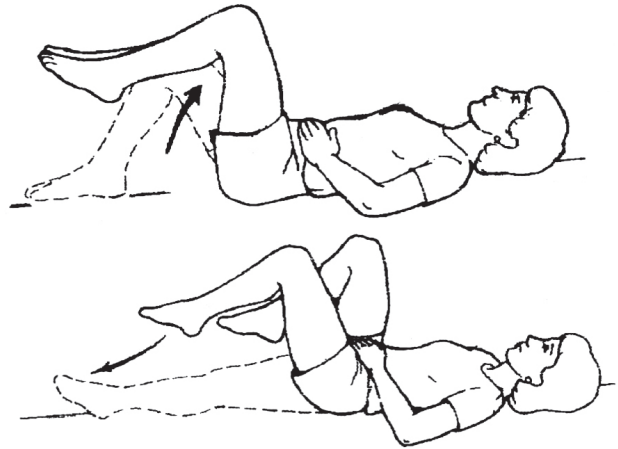
### LEVEL 2:

Same position as level 1. Holding pelvic tilt, slide one leg out straight, then bend again and repeat with other leg, relax. Again, begin with 5 or 10 repetitions, work up to 30.



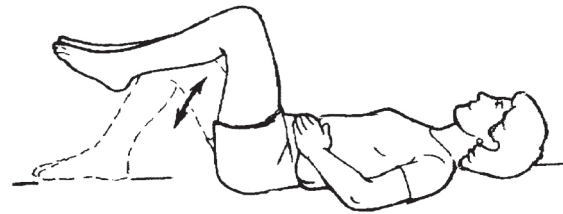
### LEVEL 3:

Same position. Hold pelvic tilt and bring one knee toward your chest, then lower. Bring other knee toward your chest, then lower and relax. Keep tilt while raising each leg up, making sure you don't lose it between each leg lift. Work up to 30 repetitions.



### LEVEL 4:

Hold pelvic tilt throughout exercise. Bring both knees to your chest, then lower and relax. Work up to 30 repetitions.



### LEVEL 5:

Hold pelvic tilt. Straighten both legs and then return them to starting position. Relax. Work up to 30 repetitions. Continue with this exercise 3 times per week to keep abdominals strong.

