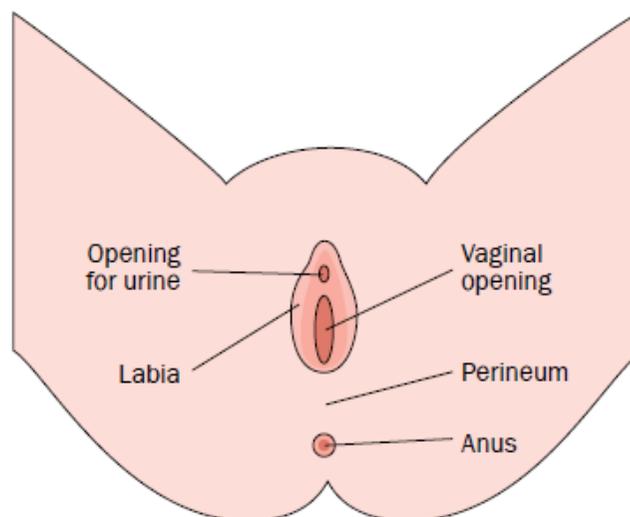


This leaflet should help you understand the extent of the tear, how to manage the pain and discomfort and how to care for your bladder and bowels.

Here is a picture helping you to understand where your tear is:



For any further information please contact :

The Maternity Unit at St. Bernard's Hospital on:  
+350 20072266 ext: 2125

## Care of your perineum after delivery

### General Hygiene

The most important aspect of caring for perineum is general hygiene. You must remember to:

- keep the area clean and dry, using odourless soap
- use cotton maternity pads and replace regularly

### Managing Your Pain

It is important to keep on top of your pain relief if in pain. Let your midwife know if you feel uncomfortable.

To help ease discomfort when sitting, place towels or pillows under each thigh. This will help take the pressure off. We DO NOT recommend using a rubber ring.

Here are a couple of natural ways to help aid healing:

1. Freeze some maternity pads, once frozen cover and place over perineum for 5-10 min)
2. Use of aromatherapy oils such as, Lavender and Tea Tree Oil can also aid in the healing. Either used in a bath or by placing a few drops on the maternity pad.

## Caring For Your Bladder

After delivery some women with perineal trauma can find passing urine an unpleasant thing.

If you are finding it painful to pass urine here are a few tips:

- Try pouring some warm water over your perineum as you pass urine
- Drink plenty of water throughout to day to help dilute your urine. If you are not well hydrated your urine will be more concentrated and will sting when you pass urine.

## Managing Your Bowels

After delivery, it's a normal feeling to be anxious about opening your bowels. The best thing to do is try and not hold it off for too long as this will only risk causing constipation and make it worse for you.

Depending on the type of tear you have had, the doctor may have prescribed Lactulose. This is to help soften your stools making it easier to open your bowels.

Ensure you are in a good position on the toilet – Ideal position is having your knees higher than your hips, leaning forward with your elbows on your knees. Relax your abdomen and straighten your spine.

## Types Of Perineal Trauma

### 1<sup>st</sup> Degree Tear

This type of tear only affects the skin layer, is very superficial and generally doesn't need suturing.

### 2<sup>nd</sup> Degree Tear

This type of tear goes a little deeper and affects both the skin and muscle layer. This will usually have required some suturing following your delivery.

### Episiotomy

This is when the midwife/Doctor needs to make a small cut in order to aid the delivery, eg. as baby may have been distressed or you had an instrumental delivery. This is usually a 2<sup>nd</sup> degree tear.

### 3<sup>rd</sup> and 4<sup>th</sup> Degree Tears

A 3<sup>rd</sup> degree tear extends even deeper into the muscle layer and can damage your sphincter. A 4<sup>th</sup> degree tear goes completely through your sphincter and into your back passage. Both these types of tears will have been sutured by a doctor and will have been performed in theatre under a spinal anesthetic. You will also have been commenced on lactulose (a liquid stool softener, making open your bowels easier) and oral antibiotics to prevent any infection. At discharge you will also be given a follow up appointment with the doctor in 6 weeks time.

