

Physical Recovery after Pregnancy Loss

The following information is intended to be general guidelines on caring for yourself after you are discharged home. Any information you receive from your healthcare provider will be more specific to your situation and you should follow it in place of these general guidelines.

Following your loss, some physical changes to your body may occur that could potentially be painful reminders that you do not have a new baby physically with you. Your breast milk may come in and you may also experience light cramping and bleeding for several weeks after the loss. For information on lactation after loss, please refer to the “Lactation after Loss: Guide for Grieving Mothers” information on page 6.

When can I restart normal activities?

After a vaginal birth

You may resume normal activities as soon as you feel up to it, which can typically be expected within 1 to 2 weeks after delivery. It is important to immediately resume good self-care:

- Shower daily.
- Dress for the day rather than staying in pajamas.
- Eat nutritious meals three times each day even if you do not feel the desire to eat.
- Gently increase your activities, daily walking or light exercise can be great for general health and emotional well-being.
- Drive a car only after you have completely stopped taking narcotics (opioids).
- Begin Kegel exercises to help strengthen pelvic floor muscles which support the uterus, bladder, small intestine and rectum.

To get started doing Kegel exercises, you must begin by identifying your pelvic floor muscles:

1. Try to stop urinating midstream. If you succeed, you have identified the right muscles.
2. Tighten your pelvic floor muscles for 5 seconds, then relax for 5 seconds.
3. Do this 4-5 times in a row 3 times a day. Eventually, you may be able to hold the muscles for up to 10 seconds at a time.
4. Remember to breathe while you are doing these exercises.

After a cesarean birth

- Avoid driving for at least 2 to 3 weeks. You may resume driving when you are no longer fatigued, can tolerate a seatbelt on the incision site, your pain is significantly reduced, and you are **no longer taking narcotics (opioids)**.
- You may walk up and down stairs, but refrain from lifting anything heavier than a gallon of milk for at least a month.
- After 2 to 3 weeks, begin resuming light physical activity.

What should my diet be like?

Continue taking your prenatal vitamins for the first couple of weeks after delivery as your body may be low on iron and other nutrients. At any point, if you are trying to get pregnant again or are having unprotected sex, keep taking the prenatal vitamins and folic acid as they can help prevent some birth defects. Your health care provider can prescribe more prenatal vitamins if you are low or run out.

Continue to eat foods from the four food groups - especially those with iron (meat, beans, green leafy vegetables, dried fruit, enriched bread), calcium (milk, yogurt, cheese) and protein. Drink enough fluids to satisfy your thirst. Do not diet to lose weight during this postpartum period. Discuss weight management with your health care provider at your follow up visit.

How do I take care of my uterus?

- Massaging the uterus helps to return it to its pre-pregnancy state. To massage your uterus:
 1. Lie on your back after urinating.
 2. Use the flat of your hand and fingers to gently press downward at your navel.
 3. While pressing downward, rub gently in a circular motion. This massage causes the uterus to get smaller and feel firm.

Massaging your uterus may cause increased vaginal bleeding for a few minutes, and may increase cramping briefly.

- You may experience vaginal bleeding for 2 to 6 weeks. The color will change from a bright red to a dark red to a watery red-pink. Within 2 weeks, the vaginal flow will change to a yellow/white/clear discharge.
- Rest your pelvic area completely for 6 weeks. For example, do not use tampons or douches, and avoid sexual intercourse or anything in the vagina until you talk with your healthcare provider at your 6-week check-up appointment.

Menstrual periods

It is common to have “**lochia**” which is menstrual bleeding after delivery. Usually this is like a period at first but gradually slows down until you may just have spotting. Typically, this will last 2-3 weeks. Most women will begin their period again at 4 to 8 weeks, sometimes up to 12 weeks after pregnancy. Please contact your healthcare provider with any questions or concerns.

How can I manage my pain?

Perineal pain (space between the anus and vagina)

- Be sure to alternate sitting positions.
- Tighten your butt muscles before sitting down.
- Sit on a soft surface.
- Use a sitz bath every day.

- Witch hazel pads/wipes may also be used to help soothe the perineal area. Change these pads whenever you change your maxi pad.
- You may take pain medication as needed and as discussed with your health care provider.

Afterbirth contractions

These contractions signal that your body is returning the stretched uterus to its pre-pregnancy size and muscle tone. They may be stronger after each succeeding pregnancy and when your bladder is full. More bleeding may occur with these cramps. Using a heating pad or hot water bottle can help, or lying on your abdomen (belly) may help provide relief from cramping. Medications such as Motrin (ibuprofen) can be helpful.

Incision pain:

Changing positions and walking are effective in relieving incision pain.

- Support your incision with a pillow or folded blanket when changing positions, walking, coughing or deep breathing.
- When getting out of bed, roll on your side and use your arm muscles for assistance.
- Try to keep your torso straight like a board when transferring to different positions, and avoid twisting movements.
- Use pain medications as ordered by your healthcare provider.

How do I care for my perineum and abdominal incision?

Caring for your perineum (space between the anus and vagina)

- Use the squirt bottle (peribottle) with warm water to cleanse your stitches whenever you urinate or have a bowel movement.
- When wiping, gently pat the area cleaning from front to back.
- After 24 hours, you may start using a sitz bath twice a day for 1 to 2 weeks or until you no longer feel discomfort from your stitches.
- Wear cotton underwear and loose fitting clothing only.

Caring for your abdominal incision (from a cesarean section or tubal ligation)

- Keep the incision clean and dry.
- You may shower and wash the incision with soap and water, but do not scrub the incision. Allow soapy water to run over the incision and then rinse with regular water.
- After showering, air dry your incision area for 15 minutes. This is especially important if the incision is in a fold of skin.
- Wear cotton underwear and loose fitting clothing. The skin from the incision will heal in several days, but it takes 6 to 8 weeks for the complete healing of all the layers of the abdomen and uterus.
- A care provider will remove staples by day 4 or 5 following delivery and apply steri strips. These strips will fall off within 7 to 10 days. If they do not fall off within that time, gently remove them when you shower.

What can I do if I am swollen or retaining fluid?

It is normal to see an increase in swelling in your hands, legs and feet during the first week or longer after delivery. The body cannot remove the extra fluid volume from pregnancy quickly so it is temporarily stored in the tissues. As your body works to eliminate the extra fluids of pregnancy, you may notice an increase in perspiration and urination and ultimately a decrease in swelling. To address these symptoms, elevate your legs and try not to eat salty foods.

How can I care for my bladder and bowel function?

Bladder function:

It is important to urinate every 2 hours even if you do not feel your bladder is full. You may not feel the urge or sensation to urinate immediately. The urge will return in a few days as the bladder muscle is exercised and regains tone.

Bowel function:

Most women will have their first bowel movement 3 to 4 days (or sooner) after a vaginal delivery. Depending on when you were able to start eating following a cesarean section, it may be a little longer. To help return to regular bowel

habits, eat foods high in fiber (whole grains, fruits, vegetables), and drink plenty of fluids. Taking a stool softener such as Colace, as well as an over the counter laxative, such as Miralax or Milk of Magnesium, may also be helpful.

Lactation after loss

One of the most challenging times for many grieving mothers is when their milk comes in. Many feel unprepared to cope during this physically and emotionally difficult time. Please refer to the Lactation After Loss Handout for more information.

<http://www.med.umich.edu/1libr/gyn/lactation/LactationAfterLoss.pdf>

Why should I consider birth control?

Consider birth control until you are physically and emotionally ready for another pregnancy. Talk to your healthcare provider about birth control options. When you are interested in conceiving again, please openly discuss this with your provider to address the best and safest time to try for a pregnancy. Even though you may long for another pregnancy immediately, it is important to allow your body to heal and for your iron levels and other vitamins and minerals to get back to normal values to be able to support another pregnancy.

- You may resume sexual activity after discussing with your health care provider. You should allow time for your perineum, vagina, or abdominal incision to heal.
- A water-soluble lubricating jelly may be used if vaginal dryness is experienced.

When should I call my healthcare provider?

Report the following as soon as possible to your health care provider or Von Voigtlander Women's Hospital at (734) 764-8134:

- Fever over 100.4F (38.0C) with or without chills
- Racing heartbeat
- Red, hot, swollen breasts with localized pain and fever or flu-like symptoms
- Vaginal discharge with a foul odor

- Bleeding or any drainage from episiotomy, stitches, or abdominal incision
- Warmth, redness, separation, or foul odor at incision site
- Vaginal bleeding that soaks a maxi pad within an hour
- Soft uterus that does not firm up with massage; accompanied by heavy vaginal bleeding.
- Difficulty urinating or burning with urination
- Severe pain in your abdomen (belly), chest, back, or leg
- Dizziness, lightheadedness, or fainting
- If at any point you feel like harming yourself or others contact your provider.
- If at any time you feel your symptoms are life-threatening please call 911

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