

After your sacrocolpopexy or sacrohysteropexy

Patient Information

Obstetrics and
Gynaecology



Post operative advice after sacrocolpopexy (SCP) or sacrohysteropexy (SHP)

Please read this leaflet so you know what to expect after your surgery.

If you have had a vaginal repair at the time of your sacrocolpopexy (SCP) or sacrohysteropexy (SHP) please also read leaflet number 45 "After surgery in the vagina for prolapse". It contains the additional information you will need.

As we are all different, it is not possible to personalise this information, so there may be differences between your individual case and the information given here.

If you have any queries regarding the information please discuss them with the consultant or a member of his/her team (doctors or nursing staff).

When can I start eating and drinking again?

As you have had abdominal surgery, you will be advised by the nursing staff when it is safe for you to restart drinking/eating. You may not feel like drinking /eating anything straight away but **it is important for you to try** and follow the nursing staff instructions as we want to ensure your digestive system is working properly before you go home.

It is important you let staff know if you have been sick or if you have your bowels opened after your surgery. You will be advised to start with light diet before taking a full meal and to gradually increase your food intake until you feel back to normal. This may take up to a week, so it is important to try and keep to a regular eating routine once you are discharged.

How will I manage my pain?

After the operation you will get some pain. You can control the pain using simple painkillers, such as paracetamol, taken regularly until you feel more comfortable. Please ensure that your painkillers do not cause constipation, you may need to take laxatives (medicine to soften the bowel motion) to avoid this.

Will I have any vaginal bleeding or vaginal discharge?

After sacrocolpopexy (SCP) or sacrohysteropexy (SHP) there is often no vaginal bleeding as the surgery has been done through your tummy.

If you have not had a hysterectomy or gone through the menopause your normal monthly period may be delayed by a few weeks, but once it starts you should continue your normal monthly cycle.

How do I take care of my stitches and wounds?

All stitches for a sacrohysteropexy or sacrocolpopexy are dissolvable and do not need removing.

If you had your surgery laparoscopically you will have three to four small wounds, closed with steristrips. Do not remove the steri strips, they will drop away after around a week but if they are still there after two weeks you may gently sponge them with some **cooled** boiled water and remove them if the wound is dry.

If you had an 'open' repair, the scar along your bikini line will be around six to seven inches in length, closed with dissolvable stitches and it may have steri strips applied. Again do not pick the steri strips, they will come away after around seven days.

The wounds may ooze pink / red fluid for a couple of days then there should be no further leakage and the wounds should be dry. After around five days, if you get oozing from the abdominal wounds or the wounds are red or hot to touch, see your GP as you may have a wound infection. The GP will assess the wounds and decide if a swab or antibiotics are needed.

What do I do about bathing?

Please **do not** let your abdominal wounds get wet for two weeks.

After two weeks it would be better for you to shower rather than have a bath. If you don't have a shower and need to use the bath please do not use any perfumed products and avoid soaking in the bath for long periods.

After six weeks, if the wounds are healed you may go back to your normal bathing routine.

It is recommended you do not go swimming for six weeks after your surgery.

Vaginal care

If you were using vaginal oestrogen (as a pessary or as cream) and want to restart this you can restart six weeks after surgery. We would advise you do not use tampons for at least six weeks after your surgery.

What about sex?

You have no cuts in the vagina after sacrohysteropexy or sacrocolpopexy however we would still advise you do not insert any objects into the vagina for six weeks and do not have sexual intercourse for six weeks.

What about physical activity?

After prolapse surgery we advise that you avoid heavy lifting in the long term. Straight after surgery, you need to take things easy but keep moving. You should aim to keep mobile and gradually build up the amount of activity until you are back to your normal levels. During the first six weeks avoid lifting any objects that are heavier than two to three kilograms (about the weight of a half full kettle). Do not do too much and avoid any strenuous exercise. After six weeks you may restart exercise but gradually. If going back to the gym or exercise classes start off gently and build up until you are back to your normal routine.

Strenuous activity such as gardening, lifting furniture, heavy shopping or straining to empty your bowels will greatly increase the risk of the prolapse reoccurring, you should try and avoid these activities wherever possible.

Also we advise you do not smoke as this increases the risk of a long term cough which has a very high risk of making the prolapse reoccur.

When can I start driving again?

You may drive once you can perform an emergency stop without this causing you pain. This is usually around six weeks after your operation. You may want to speak to your insurance company to make sure they are happy for you to drive.

Will I get a change in bladder or bowel function?

Often patients experience constipation after their operation; you need to make sure you do not strain to open your bowels as you may put pressure on your stitches. If constipation is a problem we would advise you to take laxatives (medicine to soften the bowel motion) for at least six weeks after the operation. Take enough laxatives to ensure the bowel motion is soft but formed. If constipation is a long term problem you may need to take laxatives long term. We advise you to try and keep your bowel habit regular. If you need laxatives please see your GP or pharmacist.

Often after prolapse surgery the bladder or bowel function can change. We hope that any change will be an improvement but occasionally things can get worse.

If you do have problems with bladder or bowel function or you get a new symptom of incontinence (leakage) from the bladder or the bowel, you will need to wait three months after your surgery to see if these symptoms settle.

Will I need a follow up appointment?

You will get a follow up appointment about three to four months after your operation.

However, if you have a problem that is not mentioned in this leaflet and you are worried please speak to your GP for further advice, if you're GP is worried they will arrange for you to be seen sooner.

If you have any other issues that are not covered by this leaflet and want further non urgent advice please feel free to contact gynaecology outpatient department at The James Cook University Hospital on the following number and ask to speak to the urogynaecology sister.

Gynaecology outpatients: 01642 854243

Contact number for the urogynaecology secretary at the Friarage hospital: 01609 763075

Contact number for the urogynaecology secretary at the James Cook: 01642 854681

Comments, compliments, concerns or complaints

South Tees Hospitals NHS Foundation Trust is concerned about the quality of care you receive and strives to maintain high standards of health care.

However we do appreciate that there may be an occasion where you, or your family, feel dissatisfied with the standard of service you receive. Please do not hesitate to tell us about your concerns as this helps us to learn from your experience and to improve services for future patients.

Patient Advice and Liaison Service (PALS)

This service aims to advise and support patients, families and carers and help sort out problems quickly on your behalf.

This service is available, and based, at The James Cook University Hospital but also covers the Friarage Hospital in Northallerton, our community hospitals and community health services. Please ask a member of staff for further information.

If you require this information in a different format please contact Freephone 0800 0282451

Author: Urogynaecology team, department of obstetrics and gynaecology

The James Cook University Hospital

Marton Road, Middlesbrough, TS4 3BW. Switchboard: 01642 850850

Version 1, Issue Date: December 2018, Revision Date: December 2020