Discharge advice following laparotomy

This advice is intended as a general guide. Everyone is different. You may also receive additional information to aid your individual recovery. Please ask for any other advice or written information which you may feel will help.

The surgery you have had is a laparotomy and removal of

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Before leaving the ward

Make sure your nurse has given you a date for your follow up appointment and that you have had the opportunity to ask them any questions. You may be asked to sit in the dayroom before going home to allow new admissions for surgery that day to be allocated a bed.

If you are travelling a long distance home take a break in your journey, get out of the car and stretch your legs. It is important to maintain your fluid intake, we suggest that when you stop you have a glass of water or hot drink this will help keep you hydrated.

Rest and exercise

After two weeks you can gradually start to do more and by six weeks most women are back to their normal levels of activity with the exception of heavy or prolonged lifting or strenuous sports. Listen to your own body and use your common sense but do not push yourself too hard.

You should avoid excessive pushing, pulling or stretching. You should avoid heavy housework such as vacuuming, ironing; mopping floors etc, for up to 12 weeks after your operation (do not carry more than a three pint kettle) so accept help from others when it is offered. You can do light household duties such as dusting and making a cup of tea. Allow children to climb onto your lap whilst you are already sitting rather than lifting them up.

You will continue to feel tired so it is important to rest when you can and gradually increase the amount of exercise you do. Some exercise is important because sitting for long periods can cause ankle and foot swelling and can increase your risk of deep vein thrombosis (clots in the veins of the legs).

Get dressed each day and go for a short walk, gradually increasing the length of your walk each day. Continue to do the exercises taught by the physiotherapist.

You may swim after six to eight weeks when your vaginal bleeding has stopped and when your wound has fully healed.
Diet

Try to eat a healthy balanced variety of foods with plenty of fresh fruit and vegetables. Introducing high fibre food including wholemeal bread, branflakes, beans and pulses along with plenty of fluids will help prevent constipation. You should drink at least eight glasses of water (or non sugary drinks) every day. Protein rich foods including fish, eggs, meat, hearty green vegetable and beans and pulses will help with the healing process.

Avoid fatty foods, excessive alcohol, cakes and sweets if you do not want to gain weight. Your operation won’t make you put on weight but you must control your calorie intake whilst you are less active.

Some women have a poor appetite following surgery which can be for many reasons. If this applies to you consult your GP who can refer you to a dietician or prescribe supplements.

Constipation

Painkillers, reduced activity, having an operation and changes in your appetite can all affect your bowel function. If you are constipated following discharge from hospital it is important that you try to address it before it becomes a problem.

Try to increase your fluid intake and eat a well balanced diet with foods rich in fibre for example: wholemeal bread, bran flakes, beans and pulses.

If you have not moved your bowels for three days please contact your GP or district nurse who may give you some medication to help.

Driving

It is acceptable to go anywhere as a passenger in a car but if you are going long distances ensure you stretch your legs regularly.

It is important to consider the safety of yourself and others. From a surgical point of view we recommend you don’t drive for at least six weeks after your operation. You can start driving again after this only when you

- Are able to fully concentrate
- Have stopped medication that may affect your driving ability
- Are comfortable with doing an emergency stop
- When you have checked with your insurance company that you have insurance cover.

Wound care/hygiene

If you have clips/staples in your mid line wound, these will be removed on day seven. You may have small paper strips (Steri-Strips™) which will fall off on their own within seven to ten days. Your ward nurse will refer you to the district nurse only if you need any follow up (eg, wound dressing, to remove remaining clips/staples).
It is important to continue bathing or showering daily to prevent infection. It is safe to get your wound wet unless otherwise advised. Clean your wound with unperfumed soap and water, (there is no evidence to support adding salt to your bath water and this may well just dry your skin). Avoid using antiseptic or bubble bath until your wound has fully healed. After bathing or showering pat dry your wound with a clean dry towel. Do not apply any creams or ointments to the wound site.

Your wound will go through stages of healing. It is normal to feel tingling, itching and/or numbness. It may feel lumpy as new tissue forms and you may experience some pulling as it heals.

If your wound is closed and clean leave it uncovered to aid healing and avoid tight fitting clothing.

**Vaginal Discharge**

Slight vaginal discharge / bleeding can be normal for the first 6 weeks after surgery. The discharge may appear dark red or brown in colour and contain threads from dissolving vaginal stitches. If your discharge becomes offensive go and see your GP as you may have an infection. Do not use tampons as this may cause infection to the vagina and change sanitary towels regularly.

**Smears**

It is unlikely that you will need further smears as your cervix will have been removed. Please check with your consultant to confirm this.

**Feelings**

Your operation has been a stressful event both physically and emotionally. It is normal to feel initially tired which in most instances will gradually get better over the weeks. Most women say they start feeling their "normal" selves after three to six months. During this time you may feel angry and frustrated not being able to do the things you want to do. It is sometimes difficult for family/friends to understand how you are feeling. Your partner may have his own worries about the effect of the operation. It is important for both of you to talk about your feelings concerning this operation and seek help and support from the team at Gateshead if necessary.

**Fatigue**

You may feel like you have no energy and find it difficult to do simple everyday things that we usually take for granted. This is very common following surgical treatment and this may leave you feeling frustrated and overwhelmed. Fatigue following surgery where women feel tired and need to take things easy is usually temporary. Diet, exercise, relaxation, planning and support can all contribute to easing fatigue.

Your sleeping patterns may change due to a change in routine. Sleeping patterns will return to normal and strength and stamina will return.
Sexuality and relationships

Your operation can have an effect on your sexuality and relationships. If your operation has involved having a hysterectomy this means you cannot have any more children which may be very difficult for you to cope with especially if you were planning to have a family in future. You and your partner may want to speak to the team about any emotions which become too much for you to cope with.

Women who are pre menopausal who have had their ovaries removed will go into an early menopause and will experience menopausal symptoms such as hot flushes, night sweats and vaginal dryness. You may notice a quick onset of symptoms compared to the gradual onset that occurs with natural menopause. Discuss HRT (hormone replacement therapy) with your consultant or GP. HRT replaces the body’s natural supply of oestrogen to help restore your body’s normal balance.

We advise you avoid penetrative intercourse for about six weeks. This will allow everything to heal and prevent infection. If you have any concerns, refrain from sex until after your six week post operative check. If you experience any problems once you resume sexual intercourse discuss with your GP or your consultant at your follow up appointment.

If the operation has involved having a hysterectomy your vagina maybe slightly shorter, this doesn’t normally cause a problem. While healing takes place women prefer their partner to be very gentle or not to have penetrative sex. Water based lubricants will help with the discomfort of vaginal dryness.

You will not need to use birth control as you womb has been removed; however it is sensible to consider condoms to prevent sexually transmitted infections.

Medications

Medications including pain medicine, laxatives and anti sickness may be prescribed before you leave the hospital. Use all medication as directed.

If you are taking pain medicine such as morphine or sleeping pills, do not drink any alcohol, drink plenty of fluids to help prevent constipation and do not drive. Contact your GP if you experience any side effects from your medications

Returning to work

You are the best judge of when you feel ready to go back to work as some jobs are more strenuous than others and recovery rates vary from woman to woman. Discuss with your doctor at your six week post operative follow up about returning to work.

When to call your doctor

Seek medical attention if any of the following occur:
- Severe pain not controlled by pain killers
- Fever, shaking or chills or other signs of fever
• Signs of wound infection including increased redness, swelling, tenderness, warmth or drainage from the wound
• Offensive smelling vaginal discharge
• Excess vaginal bleeding
• Persistent vomiting with the inability to tolerate food and fluids
• Constipation for more than three days
• Severe pain in either calf or leg or sudden onset shortness of breath or chest pain

**Follow up**

Before you are discharged from hospital you will be advised when you will be followed up in clinic. Your appointment will be sent out in the post. If you don’t receive an appointment within four weeks of your discharge date please contact the office manager on 0191 445 6148.

**Useful resources**

If you have any concerns or anxieties when you go home, telephone ward 14a on 0191 445 2013 or the nurse specialists Monday – Friday 08.30 – 17.00 on 0191 445 2123 /0191 445 3404

**Data Protection**

Any personal information is kept confidential. There may be occasions where your information needs to be shared with other care professionals to ensure you receive the best care possible.

In order to assist us improve the services available your information may be used for clinical audit, research, teaching and anonymised for National NHS Reviews. Further information is available in the leaflet Disclosure of Confidential Information IL137, via Gateshead Health NHS Foundation Trust website or the PALS Service.

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