

about your health after birth



**Having a baby** is always a 'journey into the unknown'. This is just as true when it's your second or a subsequent baby as when it's your first. You don't know what the birth will be like, how well you will feel afterwards, how long it will take you to recover, whether the baby will feed well and settle easily or be very unsettled and difficult to feed.

Once the baby is born, everyone's attention tends to be very focused on the baby. It's easy to forget the physical demands of pregnancy, labour and giving birth. A long labour, difficult forceps delivery or caesarean section can make it even more difficult to recover your health. And it goes without saying that life with a new baby leaves most women with little time for rest and recovery.

Physical health problems are, in fact, extremely common in the first year after childbirth. Most women feel exhausted and drained in the first few weeks, and many go on feeling this way or become even more tired as the year progresses. Other common problems include: back pain, soreness where you had an episiotomy or tear, haemorrhoids, incontinence, bowel problems, pain following a caesarean section, mastitis and other problems associated with breastfeeding, relationship difficulties and sexual problems.

This pamphlet includes information about some of the health issues which affect women after having a baby. It is based on research conducted by the Centre for the Study of Mothers' and Children's Health, and researchers in the United Kingdom. The pamphlet includes some suggestions about ways of dealing with physical health problems, and things you might like to try. Your maternal and child health nurse or GP may be able to suggest other options.

about your health *after birth*

# “I didn’t know it was possible to feel that tired”

## Some other things to try:

- ▲ see if someone could look after your baby for even an hour or two, while you have a rest or take a relaxing bath;
- ▲ share some of the night time work - even one night of uninterrupted sleep for you on the weekend might make a big difference;
- ▲ if you need to be the one who gets up overnight, see if your partner can be the one to look after your baby first thing in the morning while you catch an extra hour’s sleep.

Chronic exhaustion and tiredness affect almost three quarters of women in the first year after having a baby. Although, most women expect to be tired in the first few weeks, almost all women with young children say that they didn’t expect to feel *so tired, for so long*.

The demands of caring for a new baby, and being on call 24 hours a day are more than sufficient reasons for women with young children to feel tired a lot of the time. On top of this, many women have to cope with added stresses: a baby who cries a lot, or who wakes frequently during the night or sleeps for only very brief periods during the day. A bout of flu that affects the whole family, and other family members needing support can be overwhelming when coupled with a new baby.

As a result, women often get little or no time for themselves. It’s not surprising that many women feel chronically exhausted for a long time after they have a baby.

You may feel, as many other women do, that it is impossible to do anything about how tired you feel. Taking a nap when your baby does may help. But being told to do this by someone else may be very unhelpful, especially if the time your baby sleeps is the only time that you get to yourself, or if your baby is one who only catnaps for twenty minutes at a time.

Mothers often find that other people have very little understanding of the demands of their job. Whereas other people working long hours get to

put their feet up at the end of the day, mothers usually don’t. On the other hand, small amounts of support - a sleep-in once a week, an hour or two of time to yourself - can make a real difference.

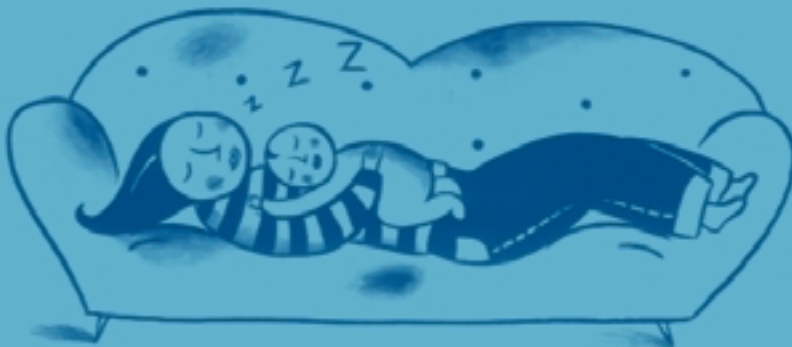


# Health problems in the year after birth

We asked over a thousand women who had recently had a baby what kinds of health issues had been a problem for them in the first six months. The list below shows just how common it is for women to experience health problems after having a baby.

- 69% **tiredness**
- 44% **back pain**
- 26% **difficulties with sex**
- 21% **soreness from an episiotomy or tear**
- 18% **relationship problems**
- 17% **depression**
- 17% **mastitis**
- 13% **bowel problems**
- 11% **urinary incontinence**  
(leakage of urine, e.g. when you cough or laugh)
- 11% **more coughs and colds than usual**
- 8% **difficulties with contraception**
- 6% **constantly reliving the baby's birth**

Almost all women (94%) had experienced one or more of these problems.





## Back pain

44% of women complained about back pain in the first six months. Whether or not it's a new problem, coping with back pain given all the lifting, carrying and other hard physical work that goes with having a growing baby isn't easy. Nor is it likely to go away very readily. The proportion of women affected by back pain remains fairly constant throughout the first year after birth.

Commonly when we talked to women about their health, they didn't mention back pain unless we specifically asked about it. Very often women saw back problems as just something they had to put up with, just another aspect of being a mother. They didn't mention it, because they didn't think anyone would be interested.

If you are experiencing back pain, it may help to talk to your GP or maternal and child health nurse about it. They may be able to offer suggestions about:

- ▲ simple stretching exercises to try
- ▲ ways to reduce the impact of all the lifting, carrying and bending you have to do with a new baby.

## Perineal pain

Healing of the perineum after childbirth can take a long time, particularly after a first birth, or if you have had a tear or an episiotomy. Around 20% of women experience soreness (or a particularly sore spot) in the first six months. Just over one in ten women are still experiencing pain at 7-9 months after the birth. It is likely that in most cases, this pain will go away with a little

more time. If the pain is worrying you, or doesn't seem to be improving, it may be helpful to talk to your doctor or maternal and child health nurse about it.

*"I found it difficult to rest during the first few months. My husband works long hours and I had many minor problems after the birth - milk fever, sore episiotomy, severe haemorrhoids, gastro. It would have been helpful if I had had some child care for the older children (3 and 4 years) here and there."*



## Haemorrhoids

It is easy to assume you are the only one having to cope with haemorrhoids (swollen and painful veins in the anal area, that are sometimes called piles). It may seem very awkward or embarrassing to talk about, but many women experience haemorrhoids after having a baby (as many as one in five). There are some simple things which may help, such as avoiding pain killers containing codeine, and making some changes to your diet.

## Bowel problems

Constipation can be particularly painful and difficult to deal with just after the birth. A small number of women have problems with leakage or incontinence from the bowel. In our study, 5% of women reported having this kind of problem. All of these women talked about how difficult it was for them to discuss this, and none had talked to their doctor about it. You may find it easier to talk to a woman doctor about things to try which might make a difference. If you have problems with constipation, avoiding painkillers containing codeine is important. Some of the things that seem to help with urinary incontinence, may also help with incontinence from the bowel.



## Incontinence

Up to a third of women who have recently had a baby experience urinary incontinence. Some women experience leakage when they cough, laugh or sneeze. Other women find they need to go to the toilet more often, or that they need to get there more quickly than before.

In our study involving over 1000 Victorian women, 11% said that incontinence was a problem for them in the first six months after having a baby. When we asked a small group of the same women about this problem at 7-9 months, almost a quarter said they were sometimes incontinent. The fact that fewer women reported having problems with incontinence in the first study reflects the reluctance of women to complain. It can seem a very embarrassing thing to talk about, especially if you mistakenly think you are the only one experiencing problems or that little can be done about it anyway. There are some things that may help - your doctor or maternal and child health nurse will be able to offer advice and suggestions.

## Sexual problems

It is very common for women who have just had a baby to have mixed feelings about sex. Often women say they are just too tired, or too busy to even think about it.

Around a quarter of women have problems in their sexual relationship in the first six months after having a baby. Sometimes problems are related to the events that happened at the time of the birth. Women who had a forceps delivery or had an episiotomy or tear requiring stitches are more likely to experience pain with intercourse than women who had a vaginal birth and no stitches.

Some babies are more demanding and difficult to care for than others. Having a baby who doesn't sleep well, cries a lot or has problems feeding can also have a big impact on parents' sexual relationships.

Although it is commonly said that everything ought to be 'back to normal' by the time of the six week check-up, many women find that their sexual relationships are affected for at least the first year after the birth, and sometimes longer.

If you are having problems, giving each other lots of hugs and staying physically close in other ways can be reassuring for both of you.

Talking about what's happening - the changes in your lives, letting your partner know if you are still experiencing pain - may help, even if sex isn't on for some time. If talking to your partner is difficult, and something to do with sex is worrying you, you may find it helpful to talk to your GP or maternal and child health nurse about it.

## Relationships

It is easy to feel very alone in coping with relationship difficulties. Around one in five women told us about difficulties they were having in their relationship with their partner. It hardly seems surprising given all the demands that babies place on their parents! Chronic exhaustion from interrupted sleep, never or rarely sitting down for a meal together, coping with sick children or a baby who cries a lot, and perhaps not feeling well yourself can make it difficult or impossible to find time for each other!

## Reliving the birth

Giving birth is such a powerful experience, it is not surprising that women often recall it with a mixture of emotions. Talking about it afterwards, and going over what happened can be an important part of piecing the experience together.

A small number of women go on reliving the birth over and over again. Sometimes the reason for this is a particularly difficult or long labour, especially if women have had to cope with long periods of feeling anxious about their baby's safety. For other women it is the sense that their views weren't taken into account, that they weren't given an active say in making decisions about their care. It is also possible for the experience of giving birth to trigger memories of childhood sexual abuse, or of other forms of emotional or physical abuse. When this happens it can be very distressing. It may help to talk to your maternal and child health nurse, your doctor, a friend or your partner.

## Crying, feeding, sleeping ...

Some babies cry more than others. A lot of babies take a long time to develop sleeping patterns which allow their parents to sleep at night. Some take a long time getting to sleep. Others wake frequently during the night. Feeding problems are also common during the first few months.

- ▲ 60% of babies have difficult sleeping patterns in the first 6 months
- ▲ 38% of babies have feeding problems
- ▲ 30% of babies cry a lot in the first 3 months, 8% still cry a lot at 6 months.



Your health is important too!

As mothers, we often worry about our children's health and well-being. We ask lots of questions about how to care for the baby, when to introduce solids, when to go to the doctor or visit the health centre. We stay home for the day because the baby isn't settled, or has a cold.

In contrast, we often seem to put our own health and recovery on hold. We tend just to accept and put up with physical health problems as part of the experience of being a mother.

Your health is important, just as important as your baby's. Here are some suggestions from other mothers about things that helped them regain their health and well-being in the year after giving birth:

- ▲ talk about how you're feeling to a friend or relative who you think will be supportive; just talking about what it's like to be a new mother and the impact it has on your health can make a big difference
- ▲ see if you can organise some time for yourself each week to do something you enjoy - arrange to meet a friend to go for a walk or have a cup of coffee
- ▲ do a swap with another mother so that you each get a couple of hours every other week to go to the hairdresser, have a swim or just spend some time at home alone
- ▲ if your baby is too small to leave, try having a relaxing bath or reading a book while grandparents or your partner play with the baby for an hour or two
- ▲ talk about your health to your GP or maternal and child health nurse - they are there for you, as well as your baby.

# What is PRISM and how might it help?

PRISM stands for Program of Resources, Information and Support for Mothers. It is a community project being conducted in your local area.

As part of PRISM, your local maternal and child health nurse and some of your area's GPs will have recently participated in a **special training program to update them on common physical health problems experienced by women after the birth of a baby.**

Some health problems go away within a short period of the birth, but others persist and may get worse if nothing is done about them. It used to be thought that most women would be 'back to normal' by the time of the six week postnatal check-up. We now know this isn't the case. The training program for maternal and child health nurses and GPs in your area has provided an opportunity for them to look at the most recent evidence about what strategies might be helpful when problems do continue beyond the first few weeks after the birth.

All mothers giving birth in your municipality will be receiving a copy of the **PRISM Information Kit**, including a guide to your local community and a book of vouchers for local services.

We hope the guide and the vouchers encourage you to explore some mother friendly services in your local area. Getting out and about in your own community, finding things you enjoy doing by yourself, or with your baby, can really help in this demanding period of your life.

Finally, look out for some **local opportunities for meeting people, especially other mothers.**

Being at home with young children can be very isolating. PRISM is promoting a range of local opportunities for meeting other mothers in your locality to help break down the isolation that many women experience when they have a young baby. Ask your maternal and child health nurse about ways to meet other mothers living in your area next time you visit.

