

My Caesarean Delivery Journey: the enhanced recovery approach

EROSS; Enhanced Recovery for Obstetric Surgery in Scotland



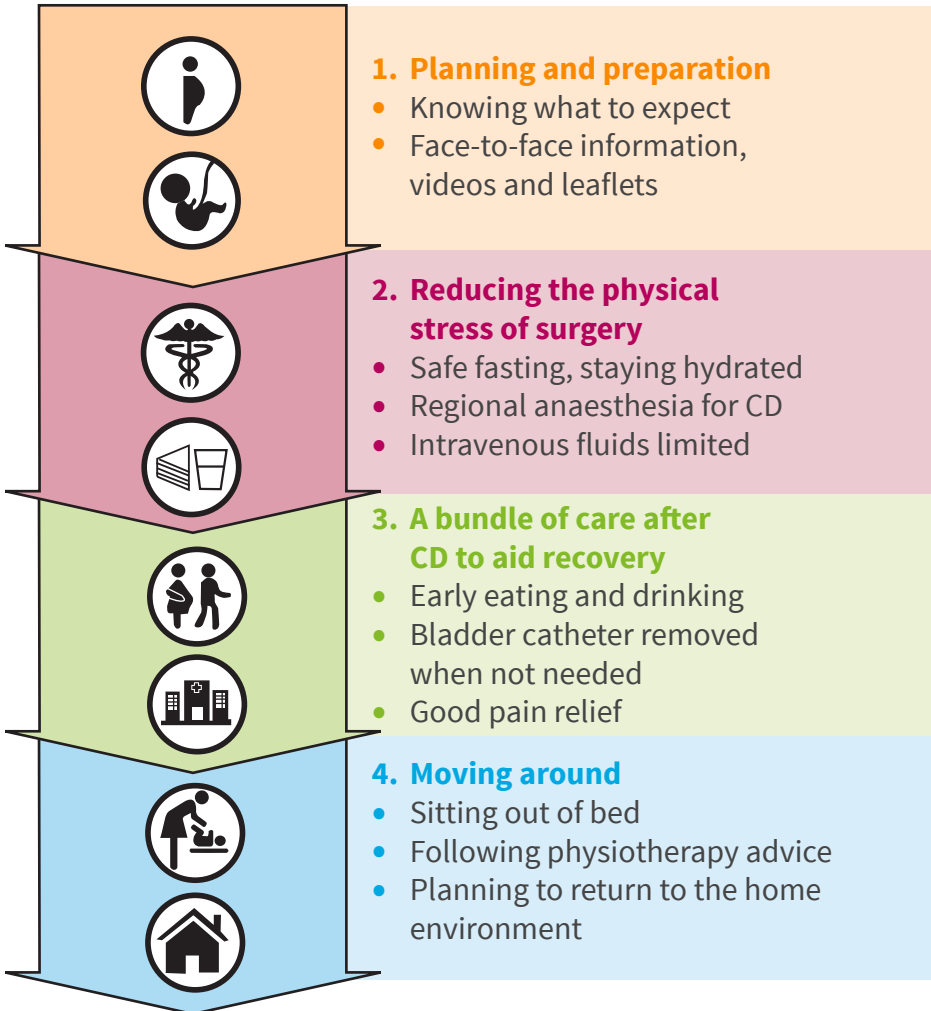
This booklet is for mothers and families who have chosen a planned caesarean delivery (CD). The information is equally useful if you have less time to plan and have an urgent or emergency CD. This booklet will give you information about what to expect when having a CD: before, during, and afterwards, as part of the Enhanced Recovery for Obstetric Surgery in Scotland (EROSS) programme.

The aim of the EROSS Programme is to get you back to 'you' as quickly as possible after your CD, and we encourage you to play an active part. Research has shown that knowing what to expect improves recovery and your overall experience. Research has also shown that after surgery, the sooner you move about and the earlier you are eating and drinking, the speedier your recovery will be. You are also less likely to develop complications.

There are four elements to the Enhanced Recovery approach:

- 1. Planning and preparation before coming to hospital**
- 2. Reducing the physical stress of the operation**
- 3. A standardised bundle of care after CD**
- 4. Moving about as soon as possible**

The caesarean delivery journey; EROSS principles help promote recovery and improve overall experience with your caesarean delivery (CD). These principles are outlined below;



1. Planning and preparation before coming to hospital



Research has shown that the better prepared you are in advance of surgery, the better you will recover from surgery. By reading information booklets, watching videos* or attending preparation classes you will know what to expect and that will help us to help you and your family around the time of your CD. Information on enhanced recovery CD sessions and pre-admission appointments will be available from your local maternity team. Please attend these sessions if you can and bring your birthing partner too.

To access EROSS preparation videos, click this link;

*<http://bit.ly/EROSScot>

2. Reducing the physical stress of the operation



Eating and drinking before your CD

You will be given specific fasting instructions with exact times to follow by your local maternity team. These will depend on what time of day you come to hospital and when you have your operation. It is important to have an empty stomach before a general or spinal anaesthetic. This lowers the chance of you vomiting. It is equally important not to go without fluids for too long as dehydration increases thirst, headaches and nausea.

You can drink water, diluting juice, fruit tea and black tea or coffee (no milk) until the morning of your surgery. DO NOT DRINK fizzy juice, fresh fruit juice or milk. You will be given two antacid tablets to reduce acid in your stomach. Take one the evening before your surgery and one on the morning of your caesarean delivery.

Coming into hospital

You and your birthing partner will be welcomed to the ward area where the midwife may perform some blood tests.

- It is important to have a shower or a bath on the morning of your CD. Please DO NOT shave or wax your tummy or pubic areas in the 2-3 weeks before your surgery. This will help to reduce the risk of infection near your wound.
- The obstetric and anaesthetic doctors will come and meet you and if you haven't done so, will ask you to sign a consent form.
- Please remember to ask if you can have a drink while you wait to come to theatre; staying hydrated helps you feel better and recover faster.

Coming to theatre

Anaesthesia

- Most mothers will have a spinal anaesthetic. This is a mixture of local anaesthetic and a strong pain killer injected into your lower back which numbs you from the chest down. This is often the safest option, and provides you with the best pain relief and allows you to be awake and comfortable for your baby's birth. It will take around 30 mins for your spinal to be performed and for your anaesthetist to check it is working correctly.
- General anaesthesia (going to sleep) is an alternative and in certain circumstances may be the safest option.
- Your anaesthetist will discuss the options of anaesthetic with you on the morning of your CD, and you will have the chance to ask questions.
- Your anaesthetist will stay beside you throughout the operation.
- If you feel sick or faint during the operation tell your anaesthetist and they will give you medicine through your drip to make you feel better.
- https://www.labourpains.com/FAQ_CSection for more detailed information.

During your Caesarean Delivery

- Doctors, midwives, theatre nurses and sometimes neonatal staff are all present in theatre during your CD, so theatre can be busy.
- Your birthing partner will be with you too.
- You will have a drip put into your hand. Fluids and medicines will go through the drip and into your body.
- Your blood pressure, pulse and oxygen levels are monitored.
- Once your spinal anaesthetic is working, a screen will be placed in front of you which can be lowered when your baby is born.
- A urinary catheter will be inserted, as while the spinal anaesthetic is working you will not feel when you need to empty your bladder. This catheter will remain in place for as short a time as possible, but usually 6-12 hours following CD.
- Your Obstetrician will make a cut across your abdomen just above your bikini line.
- Delivering your baby takes 5-10 minutes, although this may take longer if you have had a CD or other abdominal surgery before.
- You may feel some pushing and pulling sensations during the procedure.
- After your baby is born you can see him or her straight away. All being well, your baby will stay with you in the theatre.
- You or your birthing partner can cuddle them and start skin-to-skin contact as soon as possible. Early skin-to-skin helps settle babies, keeps them warm and helps with feeding.
- All babies will have a knitted hat put on to keep them warm.
- As soon as your baby is born you will get an injection to help your womb contract and lessen bleeding. This may be into your drip or your arm and may make you feel sick.

- Closing your wound takes a bit longer, usually about 30-45 minutes although again this may take longer if you have had a previous operation. You will have internal stitches which will dissolve and do not need to be removed.
- Some types of skin stitches will need to be removed, your midwife will discuss if and when this will happen.
- You will have a dressing on your wound for several days.

3. A standardised bundle of care after CD

- When your operation is finished you will be transferred to a recovery area.
- The staff in recovery will keep a close eye on you and your baby there before we transfer you to the ward.
- In most cases, your 'drip' will be disconnected so you can use your hands more freely.
- You can have a drink and eat a light snack, such as a cereal bar, banana, a sandwich or toast when your recovery is straight forward.
- Eating or drinking within the first hour of your recovery can be helpful to encourage your stomach function to return to normal.
- The maternity staff looking after you will help you with skin-to-skin contact and feeding your baby.
- A midwife call (buzzer) system in the ward lets you call for assistance when you require it.
- If all is well your catheter can be removed around 6-12 hours after your operation.
- All mothers having a CD will be given a daily injection of blood thinning medicine to lower the risk of blood clots in their legs and lungs. Your midwife will show you how to do this injection, as you will need to continue this for around seven days at home.

Pain Relief

- Following your CD it is important that you are comfortable enough to care for yourself and your baby.
- It is normal to experience some discomfort over your wound and tummy area.
- Everyone feels pain differently and will need different amounts of pain relief.
- The most commonly used pain relief tablets after a CD are paracetamol and anti-inflammatory type medication.
- Morphine or ‘morphine-based’ painkillers are also available to help keep you comfortable.
- Most of these tablets work better when taken regularly.
- All of these medications taken in the correct way, are not harmful to your baby while breast feeding.
- Please don’t let pain interfere with your recovery and caring for your baby; remember to ask your midwife for these medicines.

4. Moving about as soon as possible



- As soon as the feeling begins to return in your legs, move your feet and ankles regularly as this helps your circulation.
- Please ask for assistance the first time you get out of bed, so that a staff member can check your legs have fully recovered after your anaesthetic.
- We expect that you will be able to get up and move about approximately 6-8 hours after your CD.
- The physiotherapist or midwife will encourage you to sit in your chair instead of the bed, to allow you to move more easily and care for your baby.

- A physiotherapist may be on the ward to show you exercises to support your recovery. If not, check out this physiotherapy video for more information*
- If you need to cough, place both hands over your wound and apply slight pressure to help ease discomfort.
- You will be advised to shower, not bathe on the first day after your CD. Keeping the area around your wound clean and dry helps prevent infections.

For EROSS physiotherapy video, please click here;

*<http://bit.ly/EROSScot>

Planning for going home

Following the EROSS programme has many benefits and will help you feel better, return to health and reduce the risk of complications; as well as preparing you and your family for leaving hospital when you are ready.

When you and your baby are both well, you may wish to go home the day after your CD. Your recovery will continue when you get home and your community midwife will be there to support you.



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