What can I expect following a vaginal repair or vaginal hysterectomy?

Immediately after your surgery, you may have a catheter (a tube) that drains urine from the bladder into a bag, and a pack in the vagina to prevent bleeding. Your doctor will specify how long these will need to stay in place, usually between 8–24 hours.

Pain/discomfort following surgery

You may experience some pain or discomfort in the groin, vagina, and lower abdomen after surgery. If you have had a sacrospinous (vaginal vault or uterine) suspension you may also experience a sharp or aching pain deep in your buttock(s). Most pain or discomfort settles within a week or two but it can sometimes be present for several weeks.

While in hospital you will be prescribed regular pain relief to keep you comfortable. On discharge from hospital, painkillers will be prescribed though often “over the counter painkillers” should be sufficient.

Pain relief in the early post-operative period is best taken at regular intervals; don’t wait for pain to become severe before taking medication. Staying on top of any pain will help to keep you mobile and to recover more quickly. If you are experiencing severe pain that doesn’t settle after pain killers contact your doctor.

Prevention of deep vein thrombosis

Following surgery the risk of developing a deep vein thrombosis (clots in the veins in the legs) is increased. To minimize this risk your doctor may prescribe compression stockings and a daily blood thinning injection.

While you are in bed try to do simple exercises such as moving your ankles briskly in a circular motion, bend and straighten your legs a few times each hour. Avoid crossing your legs. You are advised to become active (under supervision) as soon as possible after surgery. Sometimes extra preventive measures may be advised, especially when your health status increases the risk of blood clot development. Your doctor will discuss this with you if necessary.

Bladder and bowel function after surgery

After a vaginal repair you may notice that at first your urine flow is slowed and it takes longer than normal to empty your bladder. About 5 to 10% of women have difficulty emptying their bladder fully after surgery; a catheter may then be needed until swelling settles and the bladder returns to its normal function (usually after 1–2 weeks).

Constipation is a common problem following surgery. Before and after your surgical procedure eat plenty of fruit and fiber and drink plenty of fluid to keep your bowel movements soft. Following surgery stool-softeners (laxatives) are often prescribed to help prevent constipation. Take these on a regular basis when you first go home. It is important to avoid excessive straining to pass a bowel motion as this can put pressure onto the stitches in the vagina. Some women experience burning or shooting pains in the rectum after surgery. This usually settles within a few days after surgery.

Can I expect any vaginal discharge following surgery?

It is normal to have some bleeding followed by a creamy white discharge that may last for up to 6 weeks as stitches in the vagina dissolve. At first the blood loss may be bright red; later this usually changes to a darker reddish brown. The amount of bleeding can vary from day to day. If you experience heavy fresh red bleeding or clots requiring frequent pad changes; contact your doctor. Use pads, not tampons, for the first 6 weeks after surgery.

Resuming activity after surgery

Following surgery you will feel more tired than usual, therefore make sure you get plenty of rest and listen to your body.

Start by walking around the house and as you feel ready increase your activity to include short daily walks. Walking is a good form of activity as it puts little strain on your surgical repair.
Do not try to exercise rigorously for at least 6 weeks following surgery. It is safe to restart pelvic floor exercises when you feel ready, usually 1–2 weeks after surgery.

What should I avoid in the 6 weeks following surgery?

- Heavy lifting and strenuous activities (including carrying small children): you should not be carrying anything more than 10 pounds. Heavy lifting puts pressure on the surgical repair and this can increase the risk of having a recurrence of the prolapse.
- Heavy shopping, gardening, and housework such as vacuuming, lifting, moving furniture, etc.  
- Exercises with high impact such as aerobics, running, horse riding, and weight training—these all put heavy forces on the pelvic floor.
- Smoking. It may delay wound healing and increases the risk of wound infection.

What can I eat following a vaginal repair or vaginal hysterectomy?

You can eat and drink as usual as soon as your appetite returns after surgery. Aim for a balanced diet to receive all the nutrients your body needs. It will be helpful to include foods with plenty of fiber such as muesli, prunes, and kiwi fruit and up to 2–2.5 liters of fluid intake a day to keep your bowels regular.

Bathing and showering

You will usually feel well enough for this the day after surgery. Showering is preferable to bathing in the first 6 weeks after surgery when vaginal stitches are still present.

When should I ask for medical advice?

If you develop heavy or smelly vaginal discharge or bleeding, burning or stinging on passing urine, increasing abdominal pains, vomiting, fever, painful swollen leg(s), shortness of breath or chest pain, seek medical advice.

When will I feel back to normal after my surgery?

Everyone recovers at a different rate and this depends on several factors:

- Your health and fitness state before surgery
- Whether complications occurred
- The type of repair performed

It is important to listen to your body, take time to rest. Don’t push yourself too hard! Over the course of 4–6 weeks your body will gradually heal and your energy level will slowly rise to a normal level.

When can I drive following a vaginal repair or vaginal hysterectomy?

You should not drive if you are taking sedative painkillers or are not confident that you could perform an emergency stop if needed.

As a general guide avoid driving for 1 to 2 weeks. If unsure check with your doctor. Some insurance companies place restrictions on driving after surgery, so check your policy details.

When can I start having sexual intercourse?

It is advisable to refrain from sexual intercourse for 6 weeks after you have been discharged from hospital. Intercourse may be a little uncomfortable to begin with so take things slowly and gently. Using a vaginal lubricant may be helpful if you feel dry. If intercourse remains uncomfortable after 3 or 4 months, speak to your doctor.

Three Convenient Locations

**Erlanger Medical Mall**  
423-778-5910  
979 East 3rd Street, Suite C-925  
Chattanooga, TN 37403  
Fax: 423-778-5915

**Erlanger East Hospital**  
423-778-8478  
1755 Gunbarrel Road, Suite 209  
Chattanooga, TN 37421  
Fax: 423-778-8479  
After hours walk-in clinic every Monday, 5–8 PM.

**Two Northgate Park**  
423-778-6941  
2158 Northgate Park Building 2, Suite 104  
Chattanooga, TN 37415  
Fax: 423-778-6936