



Information about Planned Caesarean Section

Date for Caesarean section:

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A Caesarean section increases the risks for blood clots in your legs. It is therefore important that you mobilise. In some cases it might be necessary to administrate a blood thinning medication. Damage on your colon or your urinary tract can occur during the operation. This happens 1-5 times for every 1000 operation. The damage might mean that you will have to have another operation to fix the problem. You should not experience any nuisance from this afterwards the corrective surgery.

Influence on Future Pregnancies and Labour

Even though you have had a Caesarean section this time, it does not mean that you will have to have a Caesarean section another time or that you are incapable of giving birth naturally.

If your situation is the same in your next pregnancy we would recommend another Caesarean section but otherwise a vaginal childbirth will be planned.

During your next delivery we recommend that you should be admitted to a labour ward with special care. In rare cases the scar in the uterus might burst during labour and therefore we would keep a close eye on you and your baby.

Some women experience that their placenta at the following pregnancy lies at the exit of the uterus, which then causes complications. This would mean that your next childbirth would also be with the help of a Caesarean section.

*The Staff of the
Maternity Ward at Regionshospitalet Herning and Holstebro*

A Planned Caesarean section

In this pamphlet you will find information and guidance about the process in relation to a planned Caesarean section. You will find information about the preparation before the Caesarean section, the process during the Caesarean section and the period after the Caesarean section.

If Labour Starts

If you have contractions or the amniotic fluid breaks before the planned Caesarean section, then you must contact the Maternity Ward on (0045) 78 43 47 62.

When you arrive to the Maternity Ward, the midwife will then examine you and estimate how far advanced you are in the labour process. The Caesarean section will then be carried out as soon as possible, if necessary.

Preparation for a Caesarean section

About 2 weeks before the Caesarean section you must visit the Daily Surgery Ward (Dagkirurgisk afsnit – DKA) at the Regional hospital in Herning. Here you will have an interview with an anaesthesiologist or an anaesthetic nurse. The interview and assessment will determine which kind of anaesthesia will be used.

Usually a Caesarean section is performed with a spinal anaesthetic unless there are particular reasons to have a general anaesthetic.

**The opening hours at the DKA are:
Monday, Tuesday and Thursday 07.45-14.45
Wednesday 08.30-14.45**

After you have visited the anaesthesiologist you must visit the inter-professional training unit at the Antenatal and Maternity Ward (Studieafsnittet, Svangre-barselsafsnittet). Here you will be given two Zantac tablets, of which you take one the night before and again the following morning before the Caesarean section. The Zantac tablets will be described later on in this pamphlet.

Normally a blood sample is not taken before a Caesarean section. However if a blood sample is needed then the physician will inform you about this.

You have the opportunity to have one caregiver with you during the Caesarean section.

The Caesarean section

- The day before the Caesarean section we would like you to call the Antenatal and Maternity Ward after 16.00 on (0045) 78 43 48 60 to receive the exact information about the time of attendance.
- The supplied Zantac tablets will reduce the production of stomach acid and must be taken the night before the operation and again at least 2 hours before you arrive at the inter-professional training unit.
- We expect that you have taken a shower before admission, specially cleaning the belly button. Please do not apply body lotion on your abdomen, as the surgical spirit that is used to disinfect your skin will not work.
- Pubic hair needs to be removed with a trimmer. Please do not remove the hair with a razor as small cuts can occur where bacteria can enter. On admission, the staff can help you with hair removal if you have not had a chance to do so beforehand.
- Please do not wear fake nails, nail polish, jewellery, belly button piercing or make-up in connection to the anaesthetic as we must be able to observe your blood circulation on your skin and nails.
- You can eat up until 6 hours and drink fluids up until 2 hours before the operation. The fluids may contain sugar as that can help reduce nausea after the Caesarean section.

Remember:

- It is important that you take your medication so that you can move around
- It takes 30-45 minutes for the medication to work
- No side effects occur for your baby through your milk, when taking the correct dosage and amount of medicine.

Good to know

You can read much more about the maternity period in the Danish pamphlet "Good to know – when becoming parents" (Værd at vide – når I bliver forældre) or you can find the information on the Ward's website.

Complications

Mostly women do not experience any complications when they have had a Caesarean section.

One percentage of women experience a headache from the spinal anaesthesia. The headache occurs when you are standing in an upward position but tends to disappear when lying down. The headache is not dangerous but can require treatment.

Some experience difficulties with emptying the bladder when a general anaesthetic has been administered. If this occurs it might be necessary to empty your bladder with the help from a catheter until your bladder works properly again. For most women, this only takes a couple of days before the bladder returns to normal.

Cystitis and infections occur more often after a Caesarean section than at a normal childbirth. This is treated with antibiotics.

Few women experience an infection of the Caesarean section wound and this requires extra treatment.

At Home

About 8 days after the operation the staples, which are keeping your wound closed, must be removed. This can be done by your own GP (General Physician). It is your own responsibility to schedule an appointment with your own GP. You will receive a pair of tongs, which you must bring to your GP. If the wound has been sown with thread then usually it is a type of thread that dissolves.

Nuisance from scarring

It is completely normal to be slightly swollen above the scar during the first couple of weeks. Some experience bruising around the scar, and they are sore, but this also will disappear in time. It is also completely normal that the scar will be numb because the nerve endings have been cut. The feeling will return after a couple of weeks or months. It is important that you daily shower the scar area and keeps the scar dry to protect infection. Do you have a skin fold you can use gauze to absorb the moisture. After you have gotten rid of staples and scabs are gone you can smoothen the scar and reduce numbness by massage with soap and oil.

Nuisance when urinating

You can experience pain when emptying your bladder, especially at the very end of urination. This happens because the bladder has been moved about during surgery. This is common and not dangerous at all and it disappears after a couple of weeks. If you have a suspicion about cystitis then please contact your own GP.

Pain-relieving Treatment After Discharge

For the first four days you will receive Tablet Pinex Retard and Tablet Carbonyl, which is both long-acting painkillers. The first few days we supplement with Tablet Morphine.

Then, you take the Tablet Pinex and Tablet Ipren.

We recommend that you gradually reduce your pain-relieving Treatment

By first stopping the Tablet Ipren and afterwards the Pinex.

You will receive instructions when you are being discharged.

- Drinking juice or milk-products later than 6 hours before the operation is not advisable. This also accounts for the milk in your coffee
- If you are a smoker, you can smoke up until 2 hours before the operation.

On the day of the operation you will arrive at the inter-professional training unit. Here you will be assisted to become ready for the planned Caesarean section.

You and your partner must change clothes, you will receive a bracelet with your name and CPR number, pain relieving medicine and if necessary help with removal of pubic hair. Feel free to ask any questions you might have.

At the time of the operation the hospital porter will arrive and take you to the OR (operation room).

Please bear in mind that there might be some waiting time because of acute situations.

The Inter-professional Training Unit

The inter-professional training unit is where the nurse-, midwifery- and medical students work. They work together in a cross-curricular team and work closely with the trained nurses, midwives and doctors. Professional quality and education is important at the inter-professional training unit. The purpose of the inter-professional training unit is to make sure that the students collaborate and handle the assignments, which involve taking care of you during the admission. The students work closely with you in regards to the observation, guidance and care after the Caesarean section and also in regards to the care and observation of the baby.

Maternity doctors will carry out the Caesarean section.

Two maternity doctors will carry out the operation. You will meet with one of the doctors just before the operation.

In the OR (operation room) there will be:

- An anaesthesiologist, who will administrate the anaesthesia.

- An anaesthetic nurse, who will observe you during surgery.
- The maternity doctors, who will carry out the Caesarean section.
- Two OR nurses.
- A midwife, who will take care of the baby.
- Possibly some students.



An anaesthesiologist administrating a spinal anaesthesia

The Anaesthesia

A spinal anaesthetic will be administrated unless there are particular reasons to choose a general anaesthetic. It is the anaesthesiologist, who administrates the anaesthetic. Few experience pain during the administration.

Before the anaesthesia is administrated, a drip will be applied and we will monitor your blood pressure and your pulse. You will also receive oxygen through a nasal catheter. The spinal anaesthetic will make you pain free and you will be awake when the baby is born. You will be able to feel that you are being touched, even though you are anaesthetised, but it is not painful. You might experience nausea and uneasiness after the anaesthesia has been administrated. If this happens, we will give you

Guidance and information about rehabilitation

Postnatal exercise is as important after a Caesarean section as after a normal childbirth. The pelvic floor's muscles have to be rehabilitated and re-trained as it has been affected by the pregnancy. The whole body has to be changed back to normal after the pregnancy.

We recommend that you only lift small things so that it does not hurt in your wound up until 6 weeks after the surgery.

Breast-feeding guidance and information

You will be advised to contact the staff when you breast-feed for the first time in preparation for the correct suckling-technique, breast-feeding positions etc.

We will advice you according to the information on breastfeeding that you had at the antenatal class or the experience you have from previous births.

Our advised is based upon the Danish pamphlets "Breast-feeding, Early Contact" (Amning -tidlig kontakt) and "Good-to-Know When You Have Become Parents" (Værd at vide – når I er blevet forældre). These are pamphlets that you have received during your pregnancy and are also available in the ward.

Doctor's examination

You don't normally need an examination after a Caesarean section but it is possible to contact a doctor if needed. If you are admitted to the The Interprofessional Training Unit, you will be offered a "run-through" of the operation from a medical student.

Treatment of pain

After the Caesarean section you can experience pain in the wound and contractions in your uterus. You will receive pain-relieving pills regularly two times in 24 hours. You will always have some pain-relieving medicine in your system when you take it routinely. This will make sure that you will not experience sudden pain when the pills stop working.

The treatment consists of 4 pills of Pinex Retard (2 gram) and 1 pill Bonyl (0,5 gram) two times in 24 hours. You may also receive morphine medicine if needed.

Urination after spinal anaesthesia

It is important that you experience normal urination 3 hours after the catheter has been removed from your bladder. You might not experience the need to urinate after the first couple of days after the spinal anaesthesia, and therefore you must urinate regularly, e.g. every 3rd hour.

Please contact the staff if you do not urinate regularly. If the bladder becomes too large and distended, the uterus might have trouble contracting properly and thereby increasing the risks of increased bleeding and a distended bladder.

Colon-function must start again

It is important to get your stomach started again. A help towards this is mobilising. Drink plenty of water and eat lots of fibres and vegetables. You will receive Magnesia (a mild laxative which will be mixed with cordial) the first couple of days after the Caesarean section. If you have had trouble with constipation during your pregnancy then it might be a good idea to take a mild laxative (Magnesia pills) a couple of days before the Caesarean section. The medicine can be bought at the pharmacist.

some medicine to counteract the symptoms and the uneasiness will disappear within a few minutes.

The Operation

A catheter will be placed in your bladder and your abdomen will be disinfected with surgical spirit before the Caesarean section. You will be covered with an operation-cover. The operation-cover will also make a section between your head and the rest of your body so that you and your companion are not able to see the operation.

The maternity doctor will make an incision right above where the pubic hair starts. It only takes a few minutes from when the operation starts until the baby is born. When the baby is being born you will be able to feel pressure on your abdomen.

Skin Against Skin Caesarean Section

Provided that everything goes as planned, you will be offered a Caesarean section method which is called "Skin Against Skin Caesarean section". This means that you will be able to witness the baby being born and the baby will be placed on your chest – skin against skin. Early contact between parent and baby can have an influence on breast-feeding and also to the bonding between parent and child. You will be able to talk to the staff about this before the Caesarean section.

The baby will be placed on your chest as soon as possible if the baby needs to be checked.

You may take pictures of/at the operation as long as it is okay with the staff. Video is not permitted.

The First Hours After the Operation

When everything has gone as planned you will be transferred back to the inter-professional training unit/Antenatal and Maternity Ward. You will be under close observation during the next 1½ - 2 hours until you can move your legs and until your blood pressure is stabile.

You will receive pain-relieving medicine. This can be administrated through a vein or as a pill. We will be observing how much bleeding there will be from your vagina and if there is bleeding from the incision wound.

If you have been under a general anaesthetic or complications arise during the operation you will be transferred to the Recovery Ward on the Intensive Care Ward and be observed there for a couple of hours after the Caesarean section. When stabile, you will then be transferred to the inter-professional training unit/Antenatal and Maternity Ward.

Nausea

During the hours after the Caesarean section, you might experience nausea. Drinking fluids, which contend sugar up until 2 hours before the Caesarean section, can prevent this. If needed, counteractive medicine can be given.

Itchiness after spinal anaesthesia

Some women experience itchy skin after a spinal anaesthetic. This usually disappears after a couple of hours. In some cases medicine can be given to reduce the itchiness.

Baby at the breast

The staff will guide you on how to put your baby at the breast, if you wish to breast-feed. The suckling-needs of babies can vary. Some babies might feel nauseated by the amniotic fluid and therefore do not feel like suckling to begin with. We know that skin-to-skin contact is important the first couple of hours after the Caesarean section and reinforces breast-feeding and the bonding between baby and parent. The midwifery-students and the midwife will weigh and measure your baby.

We recommend that your baby is given vitamin K.

The first couple of hours, your baby and you will need rest and it is recommended that someone else than yourself, e.g. the baby's father, is present with you and your baby.

Admission after the caesarean section

You will have a family room where the staff will be available in order to guide and help you and your baby. We recommend that you have a family member or a companion to stay with you during the operation and the first 24 hours in order to receive the support and help you need. The expected admission time for multipara is one night and for primipara, two nights. It is also possible to be discharged in the very same day.

Get walking as quickly as possible

6 hours after the Caesarean section, at the latest, you must get out of bed to restart your body after the operation. You must take a walk throughout the ward as quickly as possible.

The catheter in your bladder will be removed 6 hours after the Caesarean section.

The days following the Caesarean section, it is important that you mobilise and rest alternately. It is advisable that you get out of bed a couple of hours in the morning, the afternoon and the evening.

The bandage will be removed after 24 hours of the Caesarean section. You can take a shower when you want to. It is important that the wound is rinsed every day the first couple of days after the Caesarean section.

You would normally be able to take care of your baby yourself.

Food and drinks

You can drink and eat whatever you like.