

Information post-women's surgery:

Sub-urethral continence tape (TVT™, Monarc™ TOT or TVT-O)

Please check that you have the following information or services before you go home (discharged) and that you understand their purpose. Ask your nurse or doctor if you are unsure or would like more information.

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| <input type="checkbox"/> When outpatient / local GP appointment due | <input type="checkbox"/> Discharge medications |
| <input type="checkbox"/> Private X-rays, personal belongings, medications | <input type="checkbox"/> Copy of Discharge Summary |
| <input type="checkbox"/> Travel bookings and forms (if applicable) | <input type="checkbox"/> Medical certificate |
| <input type="checkbox"/> Outpatient procedures as requested | <input type="checkbox"/> Family notified |
| <input type="checkbox"/> Compliments and Concerns pamphlet | |

Medications

It is normal to have some pain (including cramps) post-surgery. Taking regular analgesia such as paracetamol (Panadol®) every four to six hours will help to keep your pain under control (see manufacturers instructions for recommended dose). A maximum of only eight paracetamol tablets per day is advised. To help with cramps and pain, non-steroidal anti-inflammatory medications such as ibuprofen (Advil®, Nurofen®) may be useful. If you have been prescribed stronger analgesia, remember to take regular laxatives as constipation can cause more pain.

As your body heals, this discomfort should decrease and you can gradually reduce the amount of pain medication you are taking. Remember, some discomfort is normal, but pain is a signal to slow down and rest.

Activity

- Rest is important, take short naps but do not spend all day in bed.
- Continue to wear your compression stockings when resting, also if driving for over an hour or flying in a plane.
- Walking is the best exercise to start once you get home – progress at your own pace by starting with small distances and slowly build up.
- You should be able to resume your regular activities once you feel comfortable.
- Depending on your type of work, you can return to work after about four to six weeks. Check with your doctor if you have any queries.
- Avoid heavy lifting (over ten kilos (20 pounds) of weight) for four to six weeks to minimise stress on your healing wounds, both internal and external. If you cannot easily lift an object with one hand, ask for help.

Avoid driving until full mobility returns and strong analgesia is no longer required (approximately four weeks). The first time you drive you should be accompanied. However, for medico-legal reasons it is important to check with your insurance company prior to recommencing driving.

- Avoid heavy exercise / swimming for four to six weeks after the operation.
- Pushing yourself too fast after surgery will only cause setbacks in your recovery. Discomfort should decrease a little each day. Increases in energy and activity are signs that recovery is going well.

Sexual activity

Penetrative sex (intercourse) is not recommended until bleeding stops and internal healing has happened (approximately four to six weeks). Additionally, you may need to use a water-based lubricant (e.g. KY Jelly® or Sylk®) when recommencing sexual activity.

Vaginal discharge

- You may experience a slight pink or old brown discharge on your sanitary pad or liner for the next five to ten days. Do not use tampons or douche as this may cause infection.
- If you still have periods, expect them as normal.
- If your discharge continues or becomes heavy and/or bright red and/or you develop an offensive discharge, you should seek your local doctor's advice or go to your local or Royal Brisbane and Women's Hospital emergency department.

Diet

Avoid constipation by:

- Drinking extra fluids, especially water. This also helps to prevent urinary infections.
- Adding fibre to your diet, e.g. wholemeal bread, fruit and vegetables.
- Exercising gently and moving around more.
- If wind is a problem you may find trying peppermint or chamomile tea useful, and using laxatives as necessary, e.g. Coloxyl®.

Wound care

- Remove any dressings as soon as they get wet in the shower. They will not need to be reapplied unless the wounds are still oozing. Apply a soft pad or Band-Aid to keep the wound dry and protect your clothing. Once well-healed, you do not need to keep the wound covered.
- If you have had a TVT you will have small incisions in your lower abdomen. If you have had a TVT-O / Monarc TOT you will have small incisions at both sides of your groin area. There will usually be small Steri-strips placed on these incisions. Allow these to remain in place until they peel off. If Steri-strips become heavily soiled or remain in place for longer than 2 weeks, you will need to gently remove them.
- You may shower and wet your wound/s as normal. Clean the wound/s in the shower with warm water (try not to put soap directly on the wound). After showering, dry your wound by patting it dry with a soft clean towel.
- Pain should get better each day. If pain continues or worsens seek medical advice.

When to seek advice

If you experience any of the following symptoms that are not relieved by your usual medications or practices, you should seek your local doctor's advice or go to either your local or the Royal Brisbane and Women's Hospital emergency department as soon as possible.

- Sudden shivers or chills, hot flushes or sweating, fever and feeling generally unwell.
- Unusual shortness of breath or chest pain or pain when breathing.
- Severe abdominal pain or cramping lasting longer than 48 hours, with worsening pain.
- Heavy or prolonged vaginal bleeding, or large clots (especially if bright red).
- Offensive smelling or unusual coloured vaginal discharge.
- Wound becomes painful, swollen and red and/or has discharge.
- Vomiting develops more than 24 hours after the operation.

- Burning, stinging, excessive frequency or difficulty in passing urine.
- Decrease in ability to or unable to pass urine (seek medical advice immediately).
- Tenderness and/or swelling or a hot sore area in the calf muscles.

Follow up appointments

It is important that you have an appointment four to six weeks after your operation with your local doctor to check how you are going and to give you the opportunity to discuss any queries or concerns that you may have. In addition, general reproductive health care may be done if required.

If necessary, your hospital doctor will request and organise a follow-up appointment for you, which will be posted to you four weeks prior to the appointment date, please ensure you phone and confirm this appointment as per instruction in the offer letter.

If you have any concerns, please contact your local doctor to go to either your local or the Royal Brisbane and Women's Hospital emergency department.

If you would like further information, please contact: 13 HEALTH (13 432 584).



Partnering with Consumers National Standard 2.4.1

Consumers and/or carers provided feedback on this publication.

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