



The National Maternity Hospital  
Vita Gloriosa Vita ~ Life Glorious Life

## INFORMATION LEAFLET

# PERINEAL TEARS

**Name:** \_\_\_\_\_

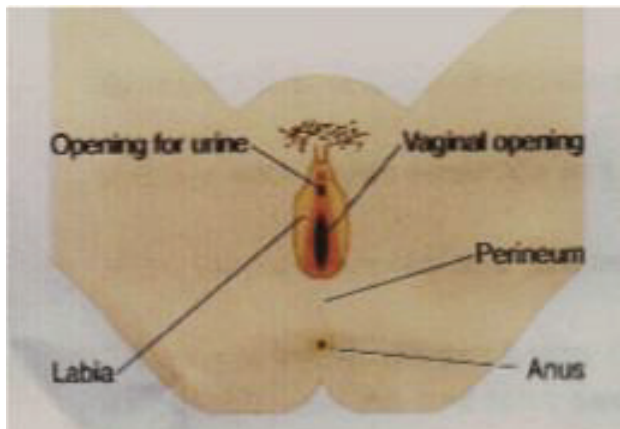
**Hospital Number:** \_\_\_\_\_

The purpose of this leaflet is to provide general information about your perineal tear. It is not intended to replace the discussion between you and your midwife or doctor, but may act as a starting point for discussion. If after reading it you have any concerns or require further explanation, please discuss this with a member of the healthcare team caring for you.

## What is a perineal tear?

As your baby is being delivered the skin and muscle on the inside and outside of the vagina expand and stretch. As a result up to 85% of women experience a perineal tear to some extent during childbirth. A tear involves the skin and muscle of the perineum, which is the area between your vagina and anus (back passage) Fig 1. A tear can also occur inside your vagina and in the labia (lips of the vagina).

An episiotomy is a surgical cut, performed by a midwife or doctor through the vaginal wall and perineum to make more space to deliver your baby.



..... Fig 1

After the birth of your baby, the midwife or doctor will examine your perineum to assess if you had a tear. They will inform you of what type of tear it is (Fig 2) and if you need stitching. Stitches will prevent bleeding and help the tear to heal properly.

## Types of perineal tears:

- **First degree tear:** Where only the skin is torn. This usually heals naturally and does not require stitches.
- **Second degree tear:** This is a deeper tear where the skin and muscle are torn. Second degree tears usually require stitches under local anaesthetic.
- **Third degree tear:** A tear in the vaginal tissue, perineal skin, and perineal muscles that extends into the anal sphincter (the muscle that surrounds the anus).
- **Fourth-degree tear:** Tear extends through the anal sphincter and the tissue beneath.

**Third and fourth degree tears** are less likely to occur than first and second degree tears. They are repaired in theatre under spinal or general anaesthetic.

- **Labial Tears:** Tear in the lips of the vagina may or may not require stitches under local anaesthetic.
- **Episiotomy** will require stitches under local anaesthetic.

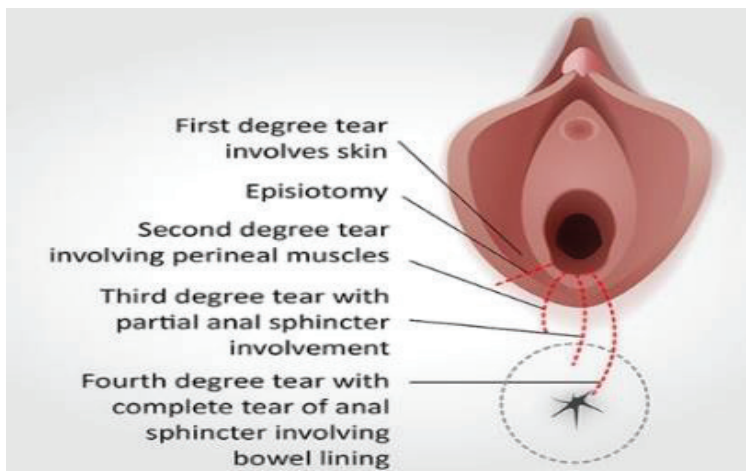


Fig 2: Types of Perineal Tears

Most tears are repaired with dissolvable stitches, which do not need to be removed. On day 4-5, the stitches tighten as they heal; this may cause increased pain. Most sutures start to dissolve within 10 -14 days. Some sutures can take up to 6 -12 weeks to completely dissolve. It is not unusual to see small pieces of threadlike material on your underwear when the stitches are dissolving.

**It can take up to 6 weeks for the wound to heal.**

### **General advice on caring for your perineum after delivery:**

The clinician will ask to look at your tear episiotomy on the ward, and/or when you return home to look for signs of healing and infection.

### **Some important points to remember**

#### **To help with discomfort:**

Your perineum is typically painful for the first 7-10 days but usually improves after this.

- ✓ Take pain medication for the first two to three days if required and when you go home. Paracetamol will help, together with an anti-inflammatory drug such as Ibuprofen. Follow the directions on the packet – DO NOT exceed the stated dose.
- ✓ Passing urine can also cause stinging. It is important to drink plenty of water to dilute the urine so it won't sting as much and pass urine ever 3-4 hours. You may find it helpful to pour body temperature water over your perineum during and after passing urine, to help reduce the stinging, using a shower head or bidet. Some women find it helpful to lean forward when passing urine to reduce stinging.
- ✓ Avoid standing or sitting for long periods. Ensure you are comfortable when sitting. You may find it more comfortable to lie on your side for periods.

### Keeping the area clean:

- ✓ Wash your hands both before and after going to the toilet and after changing your pads.
- ✓ Use plain warm water to clean this area.
- ✓ Shower twice a day. Do not add any products to the water while you recover. Avoid using any perfumed or coloured products on the area, warm water is enough.
- ✓ Short, shallow warm baths are optional, if preferred.
- ✓ Pat or gently wipe the area dry with toilet paper or your own towel (change towel daily). Always wipe, front to back to avoid contamination from your anus. Do not use a hair dryer to dry this area.
- ✓ Change your sanitary pad regularly, at least every two to four hours. This will reduce the risk of infection. Ensure the pad is secured in place so it does not move around and cause further irritation. Use maternity sanitary pads where possible, especially for the first few days. Avoid using plastic backed or perfumed pads as they can make the area sweat, causing irritation.
- ✓ Wear loose cotton clothes and cotton underwear, to avoid friction.



### Having your bowels open:

- ✓ It's natural to be scared about splitting your stitches during your first bowel movement following delivery.
- ✓ Do not delay the urge to open your bowels as this could lead to constipation. Take your time and relax on the toilet.
- ✓ If you wish, you can hold a clean sanitary towel against your perineum/stitches to protect them and to stop you feeling that your stitches will split.

- ✓ To avoid constipation, eat a high fibre diet (fruit, vegetables and whole-meal bread) and remember to drink plenty of water (1.5 to 2 litres per day). Eating a varied diet helps prevent constipation and ensures you get the nutrients you need to help with healing.
- ✓ If you are unable to open your bowels, ask a member of your healthcare team or pharmacist for some medicine to soften your stools.



### Pelvic floor muscle exercises:

Strengthening the muscles around the vagina and anus by doing pelvic floor exercises can help blood flow to the area and can help healing and strengthen your pelvic floor.

- ✓ Commence 2 to 3 days following delivery or when comfortable
- ✓ You should be offered physiotherapy advice about pelvic floor exercises to do after birth, please visit [www.nmh.ie](http://www.nmh.ie) for further information.
- ✓ If you smoke, stopping smoking will promote healing.



### When can I have sex?

In the weeks after having a vaginal birth, many women feel sore, whether they've had a tear or not.

It is best to resume sex after your stitches have healed and your bleeding has stopped but there is no right or wrong time. For some people it is within a few weeks but for others it can be when they feel emotionally ready – there is no 'normal' time.

- Do not forget you can become pregnant the first time you have sex after the birth of your baby, it is advised that you use contraception.
- Make sure you talk to your partner about resuming sex and when you start, start gently.
- You may find it helpful to use a lubricating jelly. You may feel some discomfort for the first few times whether you had stitches or not.
- It will feel different following the birth of a baby.
- Different positions may make it more comfortable.
- If the pain continues, discuss this with your doctor.

## When should I seek medical advice after I go home?

### Signs & symptoms of infection:

- If you start to feel unwell or have a temperature.
- Your stitches may start to throb or pain increases.
- You have a 'smelly' odour or discharge.
- Your stitches are coming apart or the tear is not healing.
- Increased vaginal bleeding or passing clots.

### Non infection concerns:

Problems controlling your urine or you cannot control your bowel function.

You should contact your General Practitioner, Public Health Nurse or contact the hospital **Emergency Room on 01 6373176** if you have concerns/questions. You may be referred back to the hospital for review if necessary.



**The Poppy Clinic**

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**Thank you to all who contributed to the development of this leaflet.**



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# HEALTHY BODIES AFTER BIRTH CLASS

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PHYSIOTHERAPY  
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