

# Caring for Your Surgical Wound after Caesarean Section

## Families Division Patient Information Leaflet



### Options available

If you'd like a large print, audio, Braille or a translated version of this leaflet then please call:

**01253 955588**

Our Four Values:

People Centred

Positive

Compassion

Excellence

## **Caring for your surgical wound**

This leaflet provides some information and advice about caring for your surgical wound at home.

A surgical wound is the cut made in the skin by the doctor during your caesarean section. At the end of the operation, your wound will be closed using stitches to allow the skin edges to come together and heal.

The skin edges usually form a seal within a day or two of the operation, but the time varies from one person to another.

### **Stitches**

The medical term for stitches is "sutures". Some stitches are dissolvable and don't need to be removed. Other types of stitches have to be removed by the midwife and arrangements for this will be discussed with you.

### **Dressings**

The purpose of a dressing is to:

- Absorb any leak from the wound
- Provide optimum conditions for healing
- Protect the area until the primary healing has begun
- Prevent stitches catching on clothes

### **Caring for your wound**

The original dressing is usually removed after 24 hours and the midwife will check your wound and re-dress it.

You may be told to remove the dressing yourself but before you do, you must wash your hands with soap and water and then carefully take the dressing off. Try not to touch the healing wound with your fingers.

After 48 hours the wound can usually be left without a dressing, however, some people prefer to wear a dressing to protect the wound, especially if clothing is going to rub against it.

Do not apply antiseptic cream or any other product to the wound unless advised by your midwife or doctor.

Dissolvable stitches will usually disappear on their own in 7-10 days. Non dissolvable stitches may be removed at 5-7 days after being assessed by the midwife that they are ready to come out.

During this time you may see small pieces of stitch material poking out of the healing scar - do not be tempted to pull these. If there are loose ends which are catching on clothing, seek the advice of your midwife or wait until they are removed or fall out on their own.

If they cause you pain or discomfort, please contact the midwife or the hospital for advice.

### **Bathing and showering**

It is possible for you to have a bath or shower about 24 hours after your surgery. The midwife will assess you to make sure it is safe for you to get up and go to the bathroom.

Some general points of advice are:

- Always wash your hands with soap and water prior to removing the wound dressing.
- Remove any dressing before having a bath or shower unless you are given other specific advice.
- Showering is preferable to bathing.
- Don't use soap, shower gel, lotions or talcum powder directly over the wound.
- It's ok to allow the shower water to gently splash over the wound, however, don't spray directly or rub the area as it will cause pain and may delay the healing process.
- Dry the area by gently patting with a separate clean towel.

### **Problems with wound healing**

Most wounds heal without causing any problems. Some redness and swelling after surgery is to be expected, however, sometimes a wound infection can be a complication after surgery. This means that germs have started to grow in the wound and can delay normal healing. These wound infections are usually treated with a course of antibiotics. Occasionally, hospital admission may be needed and possibly further surgery.

Certain people are more likely to develop wound infections than others and your midwife/doctor will discuss this with you.

Those at higher risk include people who:

- Smoke
- Have diabetes
- Have a condition or treatment that affects their immune system
- Obesity is strongly associated with the development of a surgical site infection.

The higher your BMI (Body Mass Index) the greater the risk.

- BMI 25-30 are 1.6 times more likely to develop an infection
- BMI 30-35 are 2.4 times more likely
- BMI over 35 are 3.7 more likely (HPA 2012)

The hospital staff will do everything they can to prevent your wound from becoming infected whilst you are in hospital and it is important you know how to tell if you are developing an infection after you go home.

If a wound becomes infected, it may:

- Become more painful
- Look red, or more inflamed or swollen
- Leak or weep liquid, pus or blood
- Smell unpleasant

If you are concerned about your wound or you develop a high temperature, or notice any of the signs listed above, you should contact your midwife or GP who will be able to advise you.

They may examine your wound and if they suspect you have a wound infection they may swab it and send the sample to the hospital laboratory.

We will usually wait for the swab result to confirm if antibiotics are necessary, however, on occasions the midwife or doctor may arrange a course of antibiotics straight away, if necessary.

On most occasions the majority of patients are treated without being admitted to hospital.

## Useful contact details

Hospital Switchboard: **01253 300000**

### **Patient Relations Department**

The Patient Relations Department offer impartial advice and deal with any concerns or complaints the Trust receives. You can contact them via:

Tel: **01253 955589**

email: **patient.relations@bfwh.nhs.uk**

You can also write to us at:

**Patient Relations Department, Blackpool Victoria Hospital, Whinney Heys Road, Blackpool FY3 8NR**

Further information is available on our website:

**www.bfwh.nhs.uk**

### **References**

This leaflet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this leaflet are available on request from:

**Policy Co-ordinator/Archivist 01253 953397**

**Approved by:** Clinical Improvement Committee  
**Date of Publication:** 07/04/2014  
**Reference No:** Ic00010186 - PL/842 v1  
**Author:** Angela Fletcher  
**Review Date:** 01/10/14

