

Preparing for a Healthy Postpartum

Heather Eckstein, 2016

Postpartum Adjustment

Pregnancy is a time of rapid physical changes and varied emotional changes and adjustments and the postpartum period is no different. There are a number of changes that occur in the minutes, hours, days, and weeks after birth.

It is important to think ahead and create a plan for the postpartum period. As a new mother, you will have physical, emotional, and spiritual needs to be met. Establishing a plan for postpartum support can help ease the transition into mother hood, whether it is for the first time or for the tenth time.

Our society places unrealistic expectations on new mothers. Asking for help is viewed as weakness and the unspoken expectation is that a new mother should "bounce back" and be completely self-reliant immediately after pushing her baby out. New mothers in our society are often living far from family and may not have the support of a community of friends. The U.S. has pitiful postpartum practices in terms of provider care after birth and maternity/paternity leave.

Adequate, quality postpartum care ensures the physical and emotional wellbeing of the mother. This directly affects the mother's ability to bond with and care for her new baby. Proper postpartum care can have a lasting impact on the mother's parenting and her overall perception of the entire pregnancy, birth, and postpartum experience. Proper postpartum care helps build healthier mothers and healthier babies.



Figure 1 Images from Microsoft Word clip art

Physical Changes

Immediately after birth, the placenta is expelled and the uterus continues to contract to slow down the flow of blood from the site where the placenta was attached. "After pains" is a term used to describe the contractions that occur after birth. After pains may range from very minor to very uncomfortable. These pains are usually a little more painful after each birth as the uterus works to clamp down. Emptying the bladder regularly and keeping the uterus firm can help alleviate some of these after pains. Breastfeeding also causes uterine contractions, which serve a good purpose. Over the next six weeks after birth, the uterus will gradually return to its pre-pregnancy size.



Figure 2 Image from Microsoft Word clip art

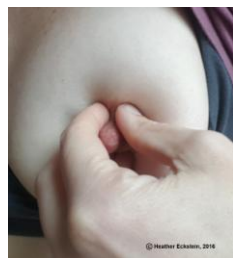
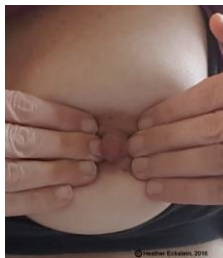
Hormones begin to shift after birth. Estrogen levels plummet, progesterone levels start to drop, and prolactin levels start to rise. Each of these hormones plays an important and unique role and these hormones are responsible for a number of physical and emotional changes.

Lochia is the term used to describe the normal vaginal bleeding that occurs after birth. Lochia slowly decreases over the course of several weeks, changing from heavier red blood flow to lighter brownish pink flow and then to light yellow or white color.

A new mother may experience increased sweating and/or urination during the first postpartum days. Sweating and frequent urination may be more noticeable if the mother had some swelling at the end of pregnancy or received IV fluids during labor. It can be helpful to sleep on a towel or washable bed pad at night to allow for easy changing if it becomes soaked with sweat or other fluids.

Some women experience constipation or a fear of having the first bowel movement after birth, especially if she has stitches or a tear. Use of a peri bottle filled with warm water can help relieve discomfort when using the bathroom. Some women find that it is helpful to spray the warm water as they are starting to urinate, as this can reduce any stinging that might occur with tears. After using the bathroom, rinsing with warm water and blotting with toilet paper (instead of wiping) can minimize discomfort. Maintaining a healthy diet, increasing fiber, and drinking more water can help keep bowel movements regular, soft, and easy to pass. Prunes are another classic remedy for constipation. It is also a good idea to elevate the feet into a squatting position when having a bowel movement.

Some women may experience engorgement when their milk supply comes in, though not all women become engorged. Engorgement can lead to a low fever and painfully swollen breasts. Breastfeeding frequently will help relieve engorgement and it usually only last for a couple of days. Warm compresses before nursing can help milk flow and cool compresses after a feeding can help reduce some of the swelling. If the engorgement makes it difficult for the baby to achieve a deep latch, reverse pressure softening can make it easier. Use your fingers to gently press back on the tissue of the areola, toward the chest. Do this around the nipple to make all of the tissue softer.



Hair loss often increases several months after giving birth. Skin changes that occurred during pregnancy may gradually fade, such as the dark line on the abdomen or the "mask" of pregnancy that causes darker coloration in the face.

If there was a tear that was repaired, the stitches will dissolve on their own. Sitting on firm surfaces instead of soft surfaces can help reduce discomfort. Swelling will subside but sitz baths or herbal baths can provide relief and promote healing.

Emotional Changes

There is a profound hormone shift that naturally occurs immediately after birth and in the following weeks. Changing hormones greatly influence postpartum emotions and the physical changes that occur after birth.

A woman's feelings after giving birth influence her perception of the entire experience. Feelings of disappointment can carry over into the postpartum period. Lack of support during this sensitive time can put the mother at risk of PPD and negatively impact her ability to care for her new baby.

When you are ready, your midwifery team is available to discuss details of your birth and listen to your concerns. If you have questions or just want help processing the experience, we are here for you. Sometimes it can be helpful to discuss your birth with a third party, someone not emotionally involved in the birth. There are counselors that work specifically with women wanting to process their birth, particularly if the birth was traumatic.

It is normal to experience some weepiness, especially in the first few days after birth. This is sometimes referred to as the "baby blues." Weepiness that is accompanied by troubling thoughts, anxiety, extreme sadness, anger, lack of desire to care for yourself/baby, or an inability to perform daily activities is a reason to call your midwife or doctor. These can all be signs of postpartum depression.



Figure 3 Image from Microsoft Word clip art

Spiritual Changes

Birth is a profoundly spiritual event. Giving birth to new life is an experience that evokes many different emotions in the mother. There is a heightened level of emotional awareness and a huge hormonal shift that occurs after birth. The incredible attachment that begins to develop between mother and baby is the beginning of the bonding process. Emotional changes and spiritual changes are interwoven and connected.

It is important to discuss any fears and concerns with someone you trust. You might find it helps to write down concerns or fears in a journal. Powerful spiritual feelings can be overwhelming. Some women benefit from forms of self-expression such as creating art, making music, dancing, etc. as a way to self-reflect and process strong emotional feelings.

If you have a strong connection to your own mother and have a good relationship, it can be beneficial to process your feelings with her. It can also be helpful to connect with other mothers through church or community groups.

Ways to Make Sure Your Needs are Met

It can be very challenging to plan for your postpartum needs and many women are unsure of how to get the help they need. This can be particularly difficult if you don't have family and friends nearby, as is often the case with military families.

Here are some ideas for postpartum support:

- Create and discuss a postpartum support plan with your partner and your midwifery team - establish who will help with household tasks, meals, ensuring the new mother gets time for sleep and basic personal hygiene, etc.
- Establish connections in your community now - try to meet people before baby comes; childbirth classes, LLL meetings, and other community groups are great ways to meet other women who are pregnant or have children of similar ages
- Plan to spend the first few weeks resting or "lying in" - recovery is faster and easier if your body gets rest and good nutrition; a good rule of thumb is to spend the first

couple of days in bed and the first couple of weeks around the bed (resting in your room, resting in the living room, and generally just taking it easy and not walking a lot or leaving the house)

- Set up a meal train - there are websites that allow people to sign up to bring you a meal or you can do it the old-fashioned way and have a sign-up sheet to pass around at playgroup, church, etc.
- Request meals at your baby shower - if you have a shower, you can ask guests to bring a frozen meal for after the birth
- Create a freezer stash - spend a few weekends toward the end of pregnancy preparing easy meals to go into the freezer for after birth
- Postpartum doula - a doula can be a fantastic help when you are recovering from birth but make sure that the doula is not a "baby nurse" and will support your breastfeeding efforts instead of offering to feed the baby a bottle; a doula who is still in training may be a low-cost option; some doulas offer military discounts or volunteer services if your partner is deployed
- Mother's helper - a teenager or college student can make a great mother's helper, giving you a hand around the house while you are resting and feeding your baby; a mother's helper can play with older children or give you a break to shower or eat a hot meal
- Sleep when the baby sleeps - this old saying is true; nap when the baby naps and let non-essential tasks wait; sleep with your baby near you to maximize sleep for both of you



Figure 4 Image from Microsoft Word clip art

- Find ways to fulfill emotional and spiritual needs - this could be in the form of prayer or meditation or even talking to supportive family members and friends
- Assign support persons to "check in" with you - have friends and family check in on a regular basis to see if you need anything and ask how you are feeling; it can be difficult to reach out for help so it might feel easier to have others ask how you're doing instead
- Limit visitors in the early days after birth - if you do allow visitors, make sure they do not expect a clean house or entertainment; visitors should help you with household chores, NOT holding your baby while you do the chores; sometimes the best visitor is the one who silently leaves a hot meal on your doorstep
- Get outside every day - after your initial recovery period, taking a daily walk outside can help you begin to get back to your normal activity level, get some gentle exercise, and sunshine can be a welcome boost to your mood as well
- Get dressed every day - sometimes it feels good to put on clean clothes, even if you aren't going anywhere; a shower is a bonus but don't worry if your hair is a mess because your baby doesn't care
- Don't wait until your 6-week postpartum visit if you have concerns - if you are experiencing signs of postpartum depression or have other concerns, reach out to your midwifery team right away; don't wait to get help

Resources

La Leche League International

Free mother-to-mother breastfeeding support

www.llli.org

1-877-4-LALECHE



Postpartum Support International

Direct peer support to families, info about postpartum mood disorders

<http://www.postpartum.net/>

1-800-944-4773



Sources:

- Davis, E. (2004). *Heart & hands: A midwife's guide to pregnancy and birth (4th ed.)*. Berkeley, CA: Celestial Arts.
- Frye, A. (2013). *Holistic midwifery, volume II: Care during labor and birth*. Portland, OR: Labrys Press.
- Lim, R. (2001). *After the baby's birth: A complete guide for postpartum women*. Berkeley, California: Celestial Arts.
- Varney, H., King, T.L., Brucker, M.C., Kriebs, J.M. Fahey, J.O. & Gegor, C.L. (2013). *Varney's midwifery, (5th ed.)*. Sudbury, MA: Jones & Bartlett Publishers.