

Recovery from sphincter injury after childbirth

This guide is for patients who have had a sphincter injury after childbirth and for their partners. Guide provides general information about sphincter injury, recovery, rehabilitation, and self-care. It also includes information about sexuality and advice on seeking further treatment if necessary.

What does sphincter injury mean?

An anal sphincter injury is a tear of the anal sphincter that occurs during vaginal delivery. Ruptures are rare and these occur in about 1% of women who have a vaginal delivery each year. No single cause is known for rupture and the cause of rupture is often multifactorial. Careful diagnosis, surgery and active rehabilitation are important for the prognosis of the injury. Surgery outcomes are often good, and patients recover without symptoms, but some patients may experience fecal and/or urinary incontinence, air retention and pain. Symptoms vary individually and can last from weeks to several months. It is important to start active rehabilitation within 24 hours of the surgery.

The anal sphincter includes external and inner sphincter muscles. The external sphincter function is both voluntary and involuntary. This means that the function of the external sphincter can be controlled voluntarily. The inner sphincter function is non-voluntary.

Perineal injuries are classified in four level depending on how severe the tear is. Third and fourth level tears are tears of the external sphincter of the anus. The table on the next page shows full classification of tears.

1st degree tear	Damage to the vaginal mucosa/perineal skin
2 nd degree tear	Vaginal mucosa and perineal muscles damaged, anal sphincter muscles intact
3 rd degree tear	Damaged perineum and partially damaged external anal sphincter
4 th degree tear	Damage to the external and internal sphincter and damage to the rectal mucosa/rectum

How to treat and rehabilitate?

Rehabilitation and recovery from sphincter injury takes time on an individual basis. Mostly patients recover well. Sphincter tears are repaired with stitches, after which healing begins. Rehabilitation and self-care are an important part of recovery.

Pain management

After childbirth, pain is treated with medication, which is prescribed by the maternity ward. In addition, local cold therapy can be used to alleviate swelling and pain. Also, scar area can be sprayed with cool water. Exercise at a steady pace throughout the day will usually ease the pain and improve blood circulation. Avoid prolonged sitting for the first few weeks. Pressure at the scar area can be eased by sitting on a towel or pillow rolled into a U shape.

Bowel function

After reconstructive surgery, it is important to have regular bowel movement and prevent constipation. Soft stool makes defecating easier and do not put pressure and stretch on the scar.

To avoid constipation, it is important to ensure adequate fibre intake, hydration, and exercise. If needed, use medication that increases stool fluid content or bowel content.

Defecation can be made easier by correct position. Use a small stand under the legs, which raises the knees above the hips when sitting on the toilet seat. This position corrects the position of the rectum and allows the stool to pass more easily.



Treatment of scars

Perineum surgery and various degrees of tears cause scar tissue during wound healing process. Once the superficial sutures have melted after 2-3 weeks, you can start to soften the scar with an oil suitable for intimate area treatment. Rub oil gently into the scar with a circular motion.

Physiotherapy and rehabilitation

Physiotherapy and selfcare pelvic floor rehabilitation are the primary treatments for rehabilitation from a tear and prevention of fecal incontinency.

Training starts the day after delivery with recognizing exercises for the pelvic floor muscles:

Recognition exercises

- Get into a good resting position, e.g. lying on your back or side.
- Gently squeeze the anus, vagina, and urethra inwards and upwards, as if you were holding stool or urine.
- Hold the light contraction for about 2 seconds and then relax the pelvic floor muscles.
- Repeat the contraction 5 times and do 1-3 sets at a time. Exercise several times a day.
- Focus on recognizing the difference between contraction and relaxation. You can get feedback on the contraction by feeling the vulva area with your fingers or by using the mirror.
- Do the recognition exercises for 2-3 weeks.

After 2-3 weeks, you can start the strengthening exercises for the pelvic floor muscles. Exercises are instructed during physiotherapist's visit in the maternity ward.

Sports / physical activity

Regular exercise should be started by increasing gradually the load and listening to your body's sensations. Light exercise supports recovery from childbirth. In the beginning, for example, walking and bodyweight exercises are good forms of exercise. After hospital discharge, you can do light housework and baby care as usual. However, it is best to avoid strenuous physical stress for 4-6 weeks after the birth. It is also a recommend taking a break from running and jumping for 3 months after giving birth.

What's next

In 3 months after discharge, you will be seen by a specialist doctor to assess your current symptoms, skin condition and recovery of pelvic floor muscle strength, among other things. During the appointment, the need for sexual health clinic services will also be assessed. In addition, a normal postnatal check-up will be carried out at the clinic 8-12 weeks after the birth.

If you face any challenges during recovery process, you should raise these issues at your postnatal appointments. If necessary, you may be referred for pelvic floor physiotherapy at the hospital. Routine follow-up to pelvic floor physiotherapy will not be booked. If your symptoms are mild or you feel that you need further support in rehabilitation, you can contact your primary health centre for pelvic floor physiotherapy or contact private physiotherapy providers. You can find private pelvic floor physiotherapists listed by region on Pelvicus.fi -> Find a physiotherapist.

Sexuality

Sexuality is part of every person and its meaning for everyone is unique and it changes throughout life. Pregnancy and childbirth are big changes for pregnant women, those giving birth and for their partners. There are many ways to express your sexuality and it is worth discussing this openly with your partner(s). If you need professional help to support this discussion look for specific contact details at the end of the guide.

However, it is advisable to abstain from penetrative sex after childbirth for the postpartum period, i.e. for about 2-6 weeks. This involves a risk of infection, which should be avoided. Tears may be tender or prevent e.g. penetrative sex, which is why the use of lubricant during sex is important in addition to treating the scar area. There are different types of lubricants, and which can be bought from pharmacies or sexual health shops, for example.

It is important to take care of the mucous membranes after childbirth, as breastfeeding and contraceptive pills can thin and dry the mucous membranes due to hormonal changes. Dry mucous membranes can cause soreness, stinging and pain. Good intimate hygiene, moisturizing base creams for the vulva and vaginal topicals are important for mucous membrane management. These products are available from pharmacies. If you use pads or panty shields, it is important to make sure that you change them frequently and try to wear them occasionally.

Material / contact information (in finnish)

Terveyskylä: Pelvic floor muscle training guide,

www.terveyskyla.fi/kuntoutumistalo/kuntoutujalle/lantionpohjan-ongelmat/lantionpohjan-lihasten-harjoitteluopas

Recovering from childbirth,

www.terveyskyla.fi/naistalo/synnytyksen-jälkeen/synnytyksestä-toipuminen

Pre-natal services also include support for the well-being of the parent(s). You can raise issues about your relationship at a counselling visit. OmaKS Seksuaalineuvonta.

Free low-threshold service. Chat and remote reception.

<https://omaks.fi/palvelumme/seksuaalineuvonta>.

Väestöliitto offers parents advice and information on parenting, child-rearing and sexuality (free of charge). <https://www.vaestoliitto.fi/vanhemmat/>.

On the Mielenterveystalo.fi website, you can make self-management programmes independently. There are self-care programmes for pregnancy and baby wellbeing and relationship self-care.

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