

# Postpartum Complications to be Aware of

Taking care of your health is just as important post-delivery as during the prenatal period. Here are some postpartum health complications to look out for, as well as advice for managing them if they do occur.

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**W**hilst most mums strive to take great care of their health and be extra vigilant before giving birth, not all recognise the importance of self-care in the postnatal period. It's easy to understand why – after all, your newborn's health and welfare often takes top priority. But neglecting your own pain and discomfort can result in an exacerbation of health problems down the line. Find out some of the more common postpartum complications women may face, and what to do if you experience them.

## Postpartum Haemorrhage (PPH)

"Postpartum haemorrhage (PPH) is generally defined as the loss of 500ml or more of blood from the genital tract," says Dr Kelly Loi, obstetrician and gynaecologist at Health & Fertility

Centre for Women. The condition has numerous potential causes, including a retained placenta where tissue retained in the body from the placenta or foetus leads to bleeding. Retained placental tissue may also contribute to uterine atony (i.e. the inability of the uterus to contract), resulting in continuous bleeding, Dr Loi explains. PPH may also surface due to delivery trauma which causes tissues and vessels to tear, or coagulopathy which happens when blood fails to clot.

If you experience abnormal amounts of bleeding, see a doctor as soon as possible. "Effective treatment requires early recognition, diagnosis, and prompt fluid resuscitation to minimise potentially serious outcomes," Dr Loi advises. "As for treatment, various medicines are available to induce uterine contractions, and any retained placental tissue should be removed, or genital tract trauma repaired to address the cause of bleeding." For more severe



cases, surgical intervention may be required.

### Uterine Infection

Also referred to as endometritis, a uterine infection is one of the most common postpartum infections of the female genital tract. Mums who have had a caesarean birth, a long labour, frequent vaginal exams, or other medical conditions such as diabetes or anaemia have a higher likelihood of contracting this infection, observe Cindy L. Farley and Janet Engstrom in *Prenatal and Postnatal Care*. Signs include an elevated temperature, abdominal pain with uterine tenderness, a general feeling of malaise, and foul smelling lochia (vaginal discharge after giving birth).

If these symptoms occur, schedule an appointment with your doctor as soon as you can. As for diagnosis, a physical exam, complete blood count, urinalysis, and possibly a chest x-ray may be required, note Farley and Engstrom. If the infection is mild, oral antibiotics are usually prescribed. Moderate to severe cases, however, may require hospitalisation and intravenous fluids.

### Constipation

It's relatively normal to experience infrequent bowel movements for a few days after having your baby, so don't fret if this happens. In fact, at least 20 per cent of mums experience some degree of constipation after giving birth, especially if you have consumed labour pain relief drugs such as pethidine or codeine, notes Dr Loi. Damage to the anal sphincter or pelvic

floor muscles due to a difficult delivery may be another contributing factor, as well as the fact that your digestive system slows down dramatically during labour. The reason could even be psychological – stitches and bruising can cause mums to feel apprehensive about going to the loo, observes Dr Loi.

**To alleviate constipation, be sure to start eating and drinking lots of fluids regularly as soon as you've given birth.**

"Sitting or lying down for long periods increases the likelihood of constipation, so get out of bed and take short walks around the ward or around your home," says Dr Loi. "Also, try to eat high-fibre foods such as wholegrain rice, figs and prunes." If symptoms persist, get a doctor's prescription for laxatives to stimulate your gut's natural rhythm, but do note potential side effects such as mild stomach cramps.

### Perineal Pain

Like constipation, this is another common postpartum complication that shouldn't incite too much anxiety. The perineum is the region between the vagina and rectum incurring the most bruising and stretching during delivery, so it's perfectly natural for this area to hurt post pregnancy. Perineal pain may surface as a result of vaginal tears or an episiotomy, with post-episiotomy pain affecting up to

97 per cent of women on the first day, and 71 per cent of women seven to 10 days postpartum, notes Stergios K Doumouchtsis in *Childbirth Trauma*. Discomfort may be reduced through several means, including prescription medicine, squirting warm water over the area when using the bathroom to soothe the burning sensation post-urination, or applying ice packs or cold gel. Do also use a soft pillow when sitting down, and avoid sitting for long periods of time. Loose clothing should be worn as well to prevent fabric from irritating the area.

### Mastitis or Breast Abscess

Characterised as a localised, painful inflammation of the breast, mastitis usually manifests in the first six weeks postpartum, with symptoms like fever, redness around the breast area, and malaise. It's also known to affect around two to 10 per cent of women who breastfeed, note Antonio Malvasi, Andrea Tinelli and Gian Carlo Di Renzo in *Management and Therapy of Late Pregnancy Complications*. Milk oversupply, infrequent breastfeeding, poor drainage due to blocked milk ducts, prolonged engorgement and excessive pressure on the breast are all possible reasons for this.

**To reduce the likelihood of mastitis developing, frequent breastfeeding and pumping are recommended to empty the breast completely.**



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If left untreated, mastitis may eventually turn into a breast infection or abscess, also known as localisation of pus into the breast tissue, warn Malvasi, Tinelli and Di Renzo. Therefore, it's best advised to seek treatment as soon as possible, usually in the form of antibiotics. To relieve symptoms, try placing ice packs or cold compresses on your breast. Nonsteroidal anti-inflammatory drugs may help relieve pain too, but do check with your doctor on the best course of medication.

### Postnatal Baby Blues

"Many women may feel a bit tearful or anxious in the first week after giving birth, and this is dubbed "baby blues";" says Dr Loi. "It's considered normal and usually doesn't last for more than two weeks after giving birth." On the other hand, postnatal depression may start later and last longer. This may spiral into a serious condition as symptoms could worsen and

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significantly affect a mum, her care of the baby and the family, she warns. Women more at risk of developing post-natal depression include those with a history of anxiety or mood disorders, poor family support, stressful circumstances like financial issues, or those with a baby facing health issues.

Whilst understandably a tough condition to handle, mums should always remember that

the key is not to battle it alone. Consider getting help from a support network or asking your doctor for a psychiatric referral, encourages Dr Loi. Let family and friends know what you're going through, and make it a point to eat healthy, exercise and get sufficient rest. [m](#)

