



Patient & Family Guide  
2018

# Hysterectomy

Aussi disponible en français :  
*Hystérectomie* (FF85-1921)



[www.nshealth.ca](http://www.nshealth.ca)

# Hysterectomy

A hysterectomy is an operation to remove your uterus (womb) and cervix (opening to the womb). Other tissue, such as the ovaries, fallopian tubes, lymph nodes and parts of the vagina, may also be removed at the same time.

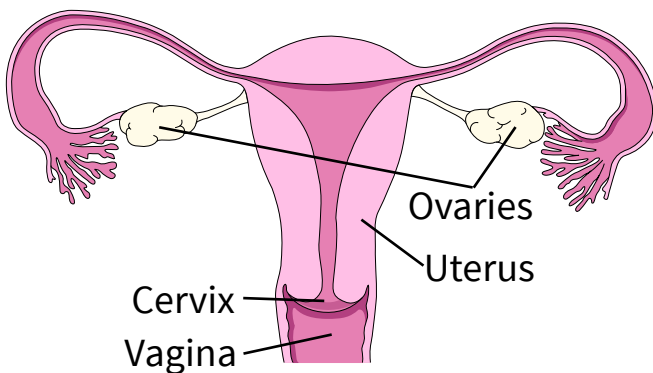
**There are different types of hysterectomies:**

## Hysterectomy

The uterus and cervix are removed through an incision (cut) in your abdomen (stomach area).

## Radical Hysterectomy

The uterus, tissues that support the uterus on the sides, cervix, and top part of the vagina are removed.



## **A hysterectomy can be done by:**

**Laparoscopy** – The surgery is done using a laparoscope through small incisions in the abdomen. Ask for our patient pamphlet called *Laparoscopic Hysterectomy* for more information.

**Laparotomy** – The surgery is done through an incision in the lower abdomen.

## **Before surgery**

- Blood tests will be done.
- Do not eat or drink after midnight the night before your surgery.

## **After surgery**

After surgery you will have:

- An incision in your abdomen.
- An intravenous (IV) to give you fluids. The IV will be taken out when you are able to drink.
- A catheter (tube) in your bladder to drain urine, if needed.

You may also have packing (absorbent material) to absorb blood and fluid in your vagina.

## **Breathing**

You will be asked to take deep breaths and cough every 1-2 hours. You will be given an Incentive Spirometer (device that helps you take slow deep breaths) to help you with this. This helps to prevent lung problems such as pneumonia.

## **Pain**

You may have some pain around your incisions the first few days after surgery. You will be given medication to help with the pain. Please tell your nurse when you are starting to feel sore rather than waiting until it becomes severe. Pain medication can be given every 3-4 hours as needed. This pain will get better every day.

## **Activity**

The morning after surgery, your nurse will help you get out of bed and sit in a chair. You can help your recovery by starting to walk as soon as possible.

## **Food**

You will be able to have clear fluids after surgery, gradually moving up to solid food. When you are drinking well, the IV will be taken out.

## **Bowel activity**

Your bowel activity will be slow at first. You may feel bloated and have gas pains. Walking will help get the gas moving and ease the discomfort. Chewing gum may also help.

## **Vaginal bleeding**

Light vaginal bleeding is normal. This may be reddish to brownish discharge. When you are in hospital, your nurse will be checking with you to see how much discharge you are having. Continue to wear pads when you are at home, if needed.

## **Incision care**

There will be a dressing on your abdomen, which will be removed 1-2 days after surgery. The incision will likely be closed with staples and will be cleaned by your nurse as needed. The staples will be removed 7-10 days after surgery by your family doctor.

## **Blood clots**

In the hospital you will be given an injection of a blood-thinning medication called Fragmin®. This injection, plus moving your feet and legs every hour, will help to prevent blood clots from forming. You may need to keep taking the blood-thinning medication at home.

## **Leg swelling**

If lymph nodes were removed during surgery, your legs may swell. Lymph nodes control how fluid moves in your body. To decrease swelling, raise your legs up for several hours each day. You can do this by putting them on 2 pillows when you are sitting. You may also need to wear special support stockings. You may be asked to wear these stockings for a few months after your surgery.

## At home

Please read the pamphlet, *At Home After Gynecological Surgery*.

- Keep your incisions clean and dry.
- You will tire easily. Gradually go back to your normal activities.
- Do not lift anything heavier than 15 pounds for 6 weeks.
- You may have reddish to brownish discharge from your vagina for 1-2 weeks. Contact your doctor if the discharge becomes heavier than a normal period, has a foul odour (bad smell), or if there is heavy bleeding.
- **Do not put anything in your vagina during the first 6 weeks.** That includes douching and using tampons or menstrual cups.

## Sex

Do not have sexual intercourse (sex) for about 6 weeks after surgery. You can engage in other sexual activities, such as cuddling, caressing and embracing, if you wish.

You and your partner should start slowly and gently. Your abdomen may feel tender. It may take several months before you feel completely comfortable.

You may want to try intercourse positions that take pressure off your abdomen, such as side-lying or being on top.

Each woman reacts in a different way to this surgery. You may feel worried about its effects on you and your partner. This is normal. Give yourself time to adjust physically and emotionally. Most women get back to their normal routines and activities within a few months after surgery.

**Call your doctor or go to the nearest Emergency Department if you have:**

- › fever (temperature of 38.5 ° C or 101.3 ° F or higher)
- › more redness, swelling or warmth around your incision
- › more pain or tenderness around your incision, or in your abdomen and pelvis
- › separation of the edges of the incision
- › drainage from your incision
- › vaginal discharge or bleeding that is heavier than a normal period or has a bad smell
- › chest pain, shortness of breath, or pain, redness and swelling of one leg, as these can be signs of a blood clot

## Resources

Canadian Cancer Society

1-888-939-3333

[www.cancer.ca](http://www.cancer.ca)

Call or visit the website for information on  
sexuality and cancer.

The Society of Gynecologic Oncology of Canada

1-800-561-2416 ext. 250

<https://g-o-c.org/resources/patients>

### Looking for more health information?

Find this pamphlet and all our patient resources here: <http://library.nshealth.ca/PatientGuides>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

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*Please do not use perfumed products. Thank you!*

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The information in this pamphlet is to be updated every 3 years or as needed.