



Managing Pain After Delivery

Pain after delivery is very common. Pain can interfere with your ability to care for yourself and your baby. It's important to manage your pain.

Whether your baby's birth was vaginal or cesarean (C-section), pains after delivery are common.

Depending on the pain you're experiencing, there are non-medication and medication options to provide relief.



In order to best manage your pain, while minimizing the risks of using stronger medications, your doctor will introduce pain-reducing medications in steps:

Step 1: Non-opioid pain reducing medications (examples: acetaminophen, ibuprofen)

Step 2: Add mild opioids (examples: codeine, hydrocodone, oxycodone, tramadol)

Step 3: Add stronger opioids (examples: morphine, hydromorphone, fentanyl)

*** It is safe to continue breastfeeding while taking these medications**

**Before taking any medication,
talk with your doctor.**

If you struggle with opioid use disorder...



MINIMIZE

use of opioids for pain management

MAXIMIZE

use of non-opioids (acetaminophen, ibuprofen) and non-medication pain therapies, including exercise and physical therapy



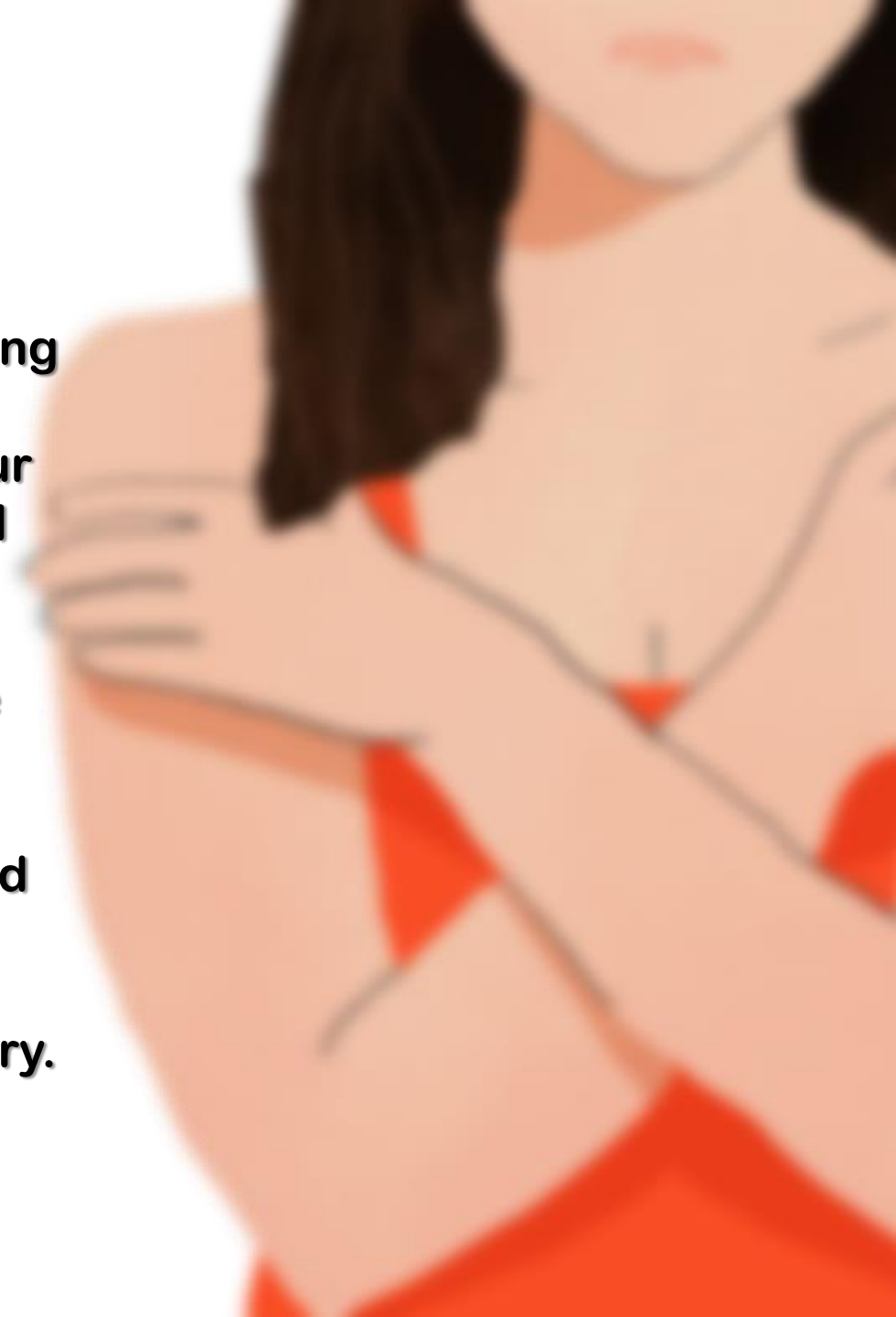
Common Pains with Vaginal Births

- **Breast engorgement**
- **Nipple pain**
- **Uterine cramps**
- **Perineal pain**
- **Hemorrhoids**



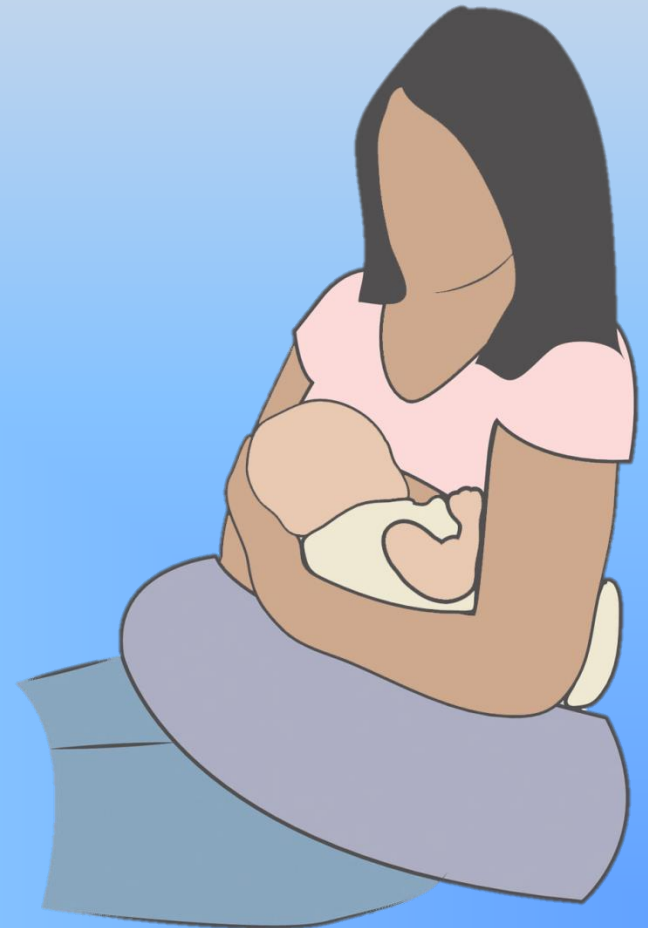
What is Breast Engorgement?

- When your breasts start producing milk and your milk “comes in” (usually 1-4 days after birth), your breasts increase in size, and feel heavier and warmer.
- Breast engorgement is when the breast tissue overfills with milk, blood, and other fluids, causing your breasts to feel full, tight, and painful.
- Engorgement is usually temporary.



How to Manage Breast Engorgement

- Increase frequency of breastfeeding
- Massage breast in a downward motion while breastfeeding
- Hand-express milk, before, after, or instead of breastfeeding
- Warm compresses to enhance milk flow
- Cold packs between feedings
- Acetaminophen or ibuprofen



What Causes Nipple Pain?

- Nipple pain is one of the most common complaints by mothers.
- Pain is often caused by nipple sensitivity or nipple injury.
- Nipple sensitivity is experienced at the beginning of each feed and usually subsides 30 seconds to 1 minutes after suckling begins. This discomfort often improves in the first weeks of breastfeeding.
- Nipple injury causes pain throughout the entire feed. Injury is usually due to poor breastfeeding position or latch-on, causing nipple bruising, cracking, and/or blistering.



How to Manage Nipple Pain

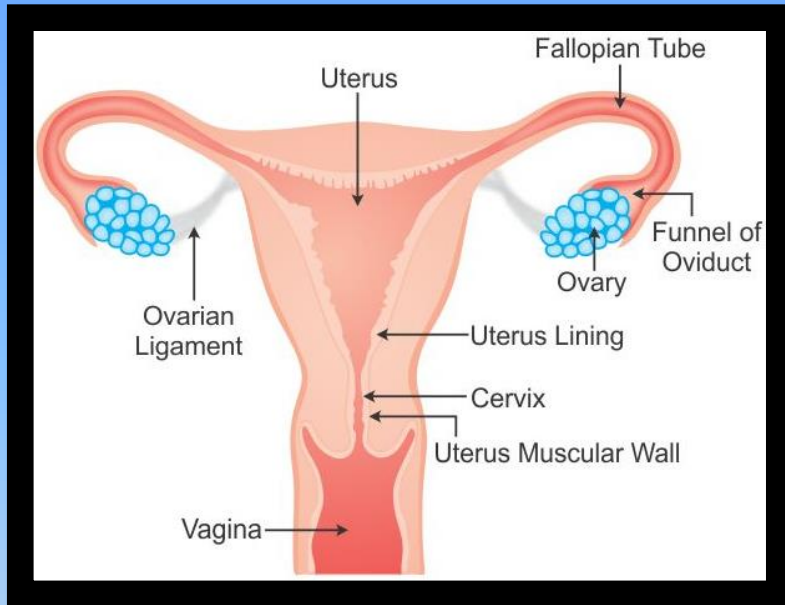
For severe nipple sensitivity, you can use acetaminophen before feeding. But this should improve in the first weeks of feeding.

For nipple injury:

- Breastfeeding is challenging! Proper positioning and latch of your baby will help prevent nipple injury. A lactation specialist can provide more help.
- Cool or warm compresses
- Acetaminophen or ibuprofen
- Try a breast shield.
- Apply lanolin ointment between feeds to keep nipples moist.
- For cracked nipples, antibiotic ointments can be applied to prevent infection.
- If nipples appear infected, visit your doctor.



What are Uterine Cramps & How to Manage Them



Immediately after delivery, your uterus begins to return to its non-pregnant size. To do this, the muscular wall of your uterus contracts. These contractions cause uterine cramps.

Cramping is often most intense for the first few days after birth, but often lessens after.

To manage the pain of uterine cramps, try:

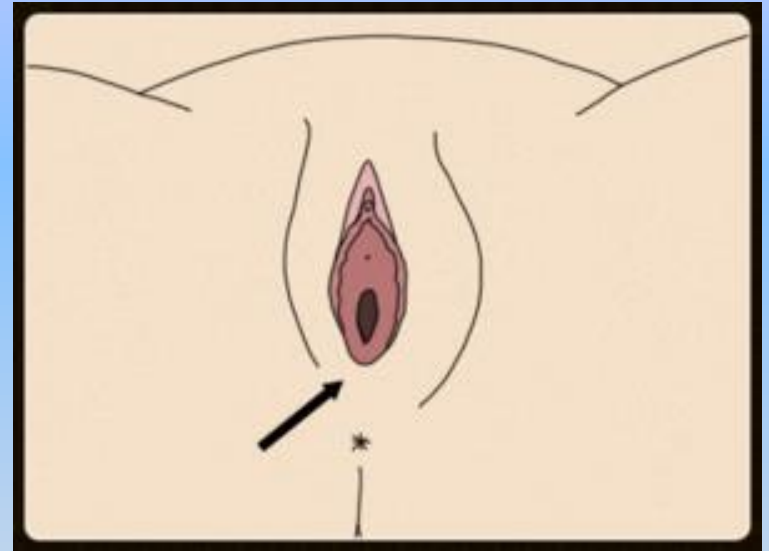
- Heating pads
- Ibuprofen

Although cramps can be very uncomfortable, uterine contraction helps to shrink your uterus to a normal size more quickly and reduce the risk of bleeding.

What are Perineal Pains?

The perineum is the area near your vagina and anus. Perineal pain, swelling, and bruising are common for the first 7-10 days, then typically improve.

Perineal tears (or lacerations) can occur during birth. Repairing tears often require stitches. Depending on the severity of the tear, women may experience pain or sensitivity for a longer time.



Common Concerns about Perineal Pain

Do the stitches for tear repairs need to be removed and will this hurt?

Will bowel movements be painful or damage the repair?

Will perineal damage affect my sexual function?



Stitches are self-absorbing and do not require a procedure to removal them.

Pain management and constipation prevention can help ease mothers' distress.

The perineal area usually heals well. Most women are able to resume sexual activity by 6 weeks after delivery.

How to Care for Perineal Pain

Hygiene

- It's important to keep your perineal area clean. Using a squirt bottle with warm water or warm sitz baths clean the perineum and can reduce pain and swelling.



Constipation Prevention

- Eat foods high in fiber or take fiber supplements.
- Drink plenty of water.
- Try a stool softener or laxative if you continue to have constipation.
- Talk with your doctor if you do not have a bowel movement by the 4th day after delivery.



Pain Management

- Cold packs for 10-20 minutes within the first 24-48 hours after birth
- Benzocaine spray may reduce pain
- For more severe pain
 - Step 1: Ibuprofen
 - Step 2: Acetaminophen
 - Step 3: If you continue to experience pain, talk with your doctor.





What are Hemorrhoids?

Hemorrhoids are painful swellings of the veins in the rectum. After delivery, many women develop hemorrhoids.

Hemorrhoids can cause pain, rectal itching, bleeding after having a bowel movement, or swelling around the anus.

How to Manage Hemorrhoid Discomfort

Preventing constipation improves symptoms and may shrink hemorrhoids (see *How to Care for Perineal Pain*).

Topical ointments containing steroids and pain relief medications (example, hydrocortisone and lidocaine) help improve pain. Also, hydrocortisone may shrink the hemorrhoid and relieve itching. Hydrocortisone and other steroids should not be used for more than 7 days.

Antispasmodic ointments, such as nitroglycerin ointment, relax the anal muscles and can reduce pain.

Warm sitz baths reduce inflammation and swelling, and relax anal muscles. They also relieve irritation and itching.

Bleeding usually stops on its own. Talk with your doctor if the bleeding continues.



Pain After Cesarean Sections (C-section)

C-section delivery is a major surgery, so most women require medication to control their pain after birth.

In addition to many of the pains common after vaginal birth, after C-sections, most women will experience pain related to their surgical wound.



Step 1: non-opioids
(acetaminophen, ibuprofen)

Step 2: Add mild opioids

Step 3: Add stronger
opioids

In order to best manage your pain with medications, your doctor will introduce pain-reducing medications in steps.

Your pain should gradually get better.

Call your doctor if:

- Your pain is getting worse
- You have a fever 101 F (38.3 C)
- The skin around your incision is turning red or becomes tender
- Your incision opens
- Blood or any fluid is draining from your incision

