

What is an Anterior/Posterior Repair?

An anterior/posterior repair is the surgical repair of the supportive tissue around the vagina. The following terms may also be used to refer to the same procedure.

- Cystocele/rectocele repair
- Bladder repair

What should I expect after my anterior/posterior repair?

When you wake up after your surgery, you will feel a pressure feeling around your vagina and rectum. The amount of discomfort is different for each person. The nurse can give you some medication to relieve the discomfort. The anaesthetic may cause you to feel dizzy or sleepy for the first 24 hours.

You will have an intravenous or I.V. If you have no nausea the I.V. will be removed in about 24 hours.

You may have a drain and/or strip of gauze packing in your vagina. You may also have a tube called a catheter in your bladder. On your first or second post-operative day the catheter, vaginal packing and drain are usually removed.

A sanitary pad will be in place to absorb the reddish discharge from your vagina.

Your nurse will help you to get out of bed the evening of your surgery. Getting out of bed as soon as possible will help your recovery. The first few times you get out of bed a nurse will help you until you are able to manage yourself.

How can I assist my recovery while in the hospital?

- If you are able and unless your doctor has ordered otherwise, drink plenty of clear fluids.
- Gradually increase your activity level. Get up and moving about in your room until you are able to walk in the halls. Get plenty of rest and nap as needed.
- You will need to do deep breathing and coughing exercises. These exercises help to clear your lungs and prevent chest infections after surgery. You will need to do these exercises each hour, for several days after your surgery. You may find it helpful to cross

your legs while you do your deep breathing and coughing exercises.

- Once your I.V. is removed, shower daily.
- On your first post-operative day your nurse will show you how to do perineal care. You will need to do perineal care twice a day until you are discharged from the hospital.

Call your Surgeon if you...

- Have a temperature higher than 38.5 C or 101 F
- Redness, increased swelling and discharge from any small abdominal incision
- Pain that is not controlled by pain medication
- Bright red vaginal discharge that requires a soaked sanitary pad to be changed every hour.
- Foul smelling vaginal discharge
- Pain or a burning sensation when you pass urine
- Difficulty emptying your bladder

If you cannot contact your Surgeon go to the nearest Emergency Department.

How Do I care for myself when I go home?

Surgical Area

- Keep your incision clean by showering or bathing daily

Nutrition

- Drink 6-8 glasses of fluid every day this will help to prevent constipation.
- Eat a well-balanced diet, which includes fruit, vegetables, meat, grains and dairy products.
- Activity
- Rest and Nap periods are encouraged as needed
- Do not lift objects weighing more than 5kg or 10lbs for 4-6 weeks
- Avoid vigorous exercises or abdominal straining.
- Walking is encouraged
- Follow your doctor's instruction about when to resume work.
- Follow your doctor's instructions as to when to resume sexual activity.