Tower Bridge Hospital London

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT
020 7916 0029 · Open 7 days, 9am–7pm
towerbridgehospital.co.uk

PATIENT INFORMATION · WOMEN'S HEALTH

Physical recovery after birth
what is normal, and what has been normalised

Recovery from birth takes considerably longer than the six weeks the postnatal check implies. Some things are expected and settle. Others — leaking urine, painful sex, a heavy dragging sensation — are extremely common, are routinely dismissed as the price of having a baby, and are treatable.

Call 999 or seek urgent care if you have

- **bleeding soaking a pad in under an hour**, or passing large clots
- a **fever, shivering, or offensive-smelling discharge**
- **severe headache with visual changes**, or sudden swelling — pre-eclampsia can occur after birth
- **calf pain and swelling**, or chest pain and breathlessness
- **severe abdominal pain**, or a wound that opens or discharges pus
- **thoughts of harming yourself or your baby**

The risk of blood clots is raised for six weeks after birth, and pre-eclampsia can develop after delivery. Both are emergencies. For mental health support at any hour: Samaritans 116 123, PANDAS 0808 1961 776, or NHS 111 selecting the mental health option.

Bleeding and the first weeks

- **Lochia** — bleeding for two to six weeks, gradually changing from red to pink to brown to yellowish-white. Doing too much often makes it redden again, which is a useful signal to rest.
- **Afterpains** — cramping during feeds, worse with each subsequent baby. Painkillers before a feed help.
- **Perineal soreness** — ice packs in the first 48 hours, then warm baths, regular pain relief, and a peri bottle of warm water while passing urine.
- **The first bowel movement** is dreaded by everyone. Use a laxative, support the perineum with a clean pad while going, and drink plenty.
- **Caesarean scar** — numbness around it is normal and can persist for a year. Once healed, massaging the scar daily reduces tethering and sensitivity.

These are common, and none of them is 'just how it is now'

Leaking urine when you cough, laugh or run. **Pain during sex** months later. **A dragging or bulging sensation** in the vagina. **Any loss of bowel control or urgency**, or difficulty controlling wind. All of these are common after birth, all are treatable, and all are routinely met with 'that's normal after a baby'. It is common; it is not something you have to accept. **Bowel symptoms in particular should always be reported** — they may indicate an anal sphincter injury that was missed, and treatment is far more effective early.

Pelvic floor

- Start gentle pelvic floor exercises **as soon as you feel able**, usually within a day or two, even with stitches.
- Squeeze as though stopping wind and urine, lift inwards, **without** clenching the buttocks, thighs or holding your breath.
- Long holds and short squeezes, three sets a day, for at least three months.
- **Squeeze before you cough, sneeze or lift** — this alone reduces leaking substantially.
- If leaking persists at three months, ask for referral to a women's health physiotherapist rather than waiting it out.

Abdominal separation

Some separation of the abdominal muscles occurs in every pregnancy and most closes over the first few months. What matters is **how well you can generate tension** across the gap rather than the width itself. Avoid sit-ups, crunches and planks early on; start with breathing, deep abdominal activation and gradual loading. A physiotherapist assessment is worthwhile if there is still a visible dome or bulge at three months.

Returning to exercise

0–6 weeks
walking, breathing, pelvic floor

6–12 weeks
gradual strength work, low impact

12 weeks+
running and impact, if symptom-free

Returning to running before around twelve weeks is associated with more pelvic floor problems. The test is not the calendar but symptoms: any leaking, heaviness or pain means going back a stage. This applies equally after a caesarean, where the abdominal wall needs time regardless of the perineum being intact.

> **Why come to us.** The six-week check is often six minutes, focused on the baby, and rarely covers any of this. We offer an unhurried postnatal appointment for **you** — examination including the perineum or scar if you want it, blood tests for anaemia and thyroid function in-house, contraception discussion and fitting, honest assessment of pelvic floor and abdominal recovery, and referral to women's health physiotherapy. A female clinician is available on request, babies are welcome, and we are open at weekends.

A postnatal appointment that is actually about you

Female clinician available, babies welcome, weekends included.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**
info@mhwclinic.co.uk
Open 7 days, 9am–7pm

In an emergency
Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency
Call NHS 111 or visit 111.nhs.uk.

Related: **Women's Health** · **Physiotherapy** · **Mental Health** · **Blood Tests** · **All patient leaflets**

Written and reviewed by Dr H Bolat, GP & Clinical Director **Review date: 26 July 2026** **Next review due: July 2028**

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This leaflet is based on current NHS and NICE NG194 guidance on postnatal care. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.