

Maternity period

from birth to 6 weeks after delivery

Emotions in the maternity period

It varies from family to family, but between day 7 and day 10 your midwives conclude the maternity week. The maternity nurse usually ends her care around day 8 or 10 as well, and then you and the family are really together for the first time. For some parents this can be exciting, but have confidence in your role as parent(s). The midwife is your point of contact until 6 weeks after delivery; we are your contact for all midwifery questions.

Whether you have become parents for the first time, or you have had a baby before, having a baby is an intense experience. In the beginning it is all very new to you, what does the baby need and this can make you feel insecure. Over time you will come to understand each other better and you will get a better sense of what to do.

Your own role also changes. Until now, as a woman, you have been, for example, the partner of, the daughter of, the friend of and now also the mother of. And that last role as a mother sometimes transcends all roles! Due to little sleep, this first period can sometimes be tough, talk to those around you and give yourself time to discover your new role and support each other even in difficult moments. Openness, transparency and asking for help helps tremendously in this area!

Tips:

- *Build a network, ask for help if you can. It is nice if you get enough rest and sleep.*
- *Don't expect too much of yourself, focus only on the important things. Let others clean, do laundry, cook and take care of older children.*
- *Talk to family and friends, let others know you are struggling or feeling overwhelmed.*
- *It's okay to say no. It is wise to put a limit on visits in the first few weeks. Have friends and family help plan or organize a special event such as a maternity party.*
- *Rest and sleep when the baby is sleeping.*

It is normal to feel many different emotions after birth. You need to pay attention and care for your baby. Lack of sleep, drop in hormone levels and the stress of caring for a baby can cause mood swings. Many mothers experience heaviness (depression) during this time. Mood swings are normal during this time, but severe depression that lasts longer than 2-3 weeks or begins later (even up to months after birth) does require specialized help. About 10% of mothers develop postpartum depression. You don't choose depression and you have no control over it; sometimes it just happens.

Perhaps we can have a conversation with you about why you feel this way and help you further by, for example, looking for a coach. Arjenne Hoeksema can give you good guidance in this if needed. <http://www.ahvc.nl/> The sooner you address postpartum depression, the better it is. Try to admit and accept that something is going on. If you take your feelings and symptoms seriously, recovery will be faster.

Bonding with your baby

Building a bond with your baby begins during pregnancy and continues throughout the first years of life. Bonding with your baby in the first year of life is very important for the psychological and emotional development of the baby. The simplest way is to hold your baby as much as possible. All the senses, touch, sight, smell, hearing, and taste help your baby get to know you. It is good to know that sometimes babies can have days when they want to drink a lot and don't seem satiated. We call these regulation days. These days happen when the baby makes a jump in development and therefore needs a little extra energy through feeding. Try to give in on these days and remember that these days will pass. Clustering is when babies want to drink extra before going to bed so they can sleep longer at night. A baby cries to communicate discomfort. This discomfort can have a variety of causes. From two weeks after birth, many babies start to cry increasingly, sometimes up to three hours a day. Especially in the evening and early at night, babies may show very restless behavior. This is normal. The "crying peak" is around the age of six to eight weeks, after that the restlessness in babies usually subsides on its own.

Physical changes

After giving birth, a lot of things may have changed physically as well. Your uterus that first carried the baby, for example, now has to go back to its normal size and slowly descends, from under your ribs to below your pubic bone. During the maternity week, we have already done checks for this, but much more recovery takes place after the maternity week!

After releasing the placenta, there is a wound in the uterus that causes blood loss. As your uterus shrinks again and becomes smaller, the wound will become smaller and therefore the blood loss will decrease. This blood loss may persist for up to 6 weeks after delivery. as you become more active, there may be some more bleeding again, but it mustn't be more than what is a normal period for you. If you are not fully breastfeeding, you can also expect your first period within those 6 weeks.

Sometimes you will also have stitches after delivery. These dissolve on their own. Sutures or scar tissue can sometimes remain sensitive. If you are still bothered by this after six weeks, be sure to mention it at your follow-up check-up or contact your midwife, family doctor, or gynaecologist. With a C-section, be sure to take it easy and not lift heavy things. A C-section is a major abdominal operation and rest is the best medicine! After being discharged from the hospital, you will be given a list of "rules of life after a C-section."

It is also recommended that you walk small distances to regain fitness. Keep in mind not to walk too far from home, because you always have to walk back! You may have trouble holding up your urine or stool after delivery. This is a more common symptom, but you don't have to accept it.

To prevent incontinence symptoms, doing pelvic floor exercises is highly recommended! Discuss complaints of incontinence with us during maternity week or at follow-up checkups. Sometimes we can help you with exercises.

If you notice that you still have a lot of problems with incontinence after six months, contact your doctor or a pelvic floor physiotherapist!

From day 4 after delivery you can do pelvic floor exercises. This can prevent pelvic floor problems, such as prolapse, involuntary loss of urine or stool. Don't tighten your pelvic floor all day and don't exercise too often, as this can actually cause symptoms such as pain or cramping. Relax the muscles well during and after the exercises.

It is important not to do these exercises while urinating. By holding up your urine, you cause urine to remain in the bladder and this can cause a bladder infection.

Exercises from day 4 in the maternity week:

- 3x a day, tighten the muscles around your vagina, anus, and urethra for 6 seconds without tightening your glutes and legs. You tighten these muscles by pretending to hold up your pee or flatulence.
- Is this going well? Pull your pelvic floor like an "elevator" in 3 steps to your navel and release.
- Do this exercise lying down first. Does this go well? Then you can do it while sitting or standing.
- Pass your urine in one go.

Points of interest 10 days to 6 weeks after delivery:

- 20% of your strength is back.
- Consciously tighten your pelvic floor when lifting and carrying your baby.
- Consciously tighten your abdominal muscles when you change positions, such as standing up, sitting, or walking (stairs).
- Try to avoid prolonged standing and heavy household activities, such as mopping and vacuuming.
- Try not to lift more than the baby's weight (max. 5 kg).
- Build up your fitness with leisurely walking and cycling.

Points of interest 6 weeks to 6 months after delivery:

- Pelvic floor muscles may now be trained after total rupture
- 50% of your strength is back
- Avoid prolonged lifting of the Maxi Cosi® and use the stroller for longer distances.

Points of interest after 6 months and beyond:

- 75% of your strength is back
- When training, start with a low weight.
- Start at a slow pace when running

Other points of interest:

If at 6 months after childbirth, you are still suffering from the points listed below, it is advisable to contact your family doctor or a pelvic physiotherapist specializing in pelvic and pelvic floor pain.

<https://fysiotherapie-dehoven.nl/> or <https://timfysiotherapie.nl/bekkenfysiotherapie/>

Complaints such as:

- Urinary leakage when you sneeze, laugh, or jump.
- Often feeling like you have to pee even though you don't need to.
- Difficulty or inability to hold stools.
- Suffering from a heavy, pressing feeling in the lower abdomen, a "ball feeling" in the vagina.
- Difficulty passing urine or stools.
- Pain during intercourse.
- Pain in the pelvis and lower back when standing, sitting, or walking.

Sexuality

After childbirth, sexual intercourse can be scary and several questions may arise. When can you have intercourse again? Which form of contraception suits me/us? Which symptoms are normal?

It is important to have intercourse when it feels good for both of you and to take time for each other. Sometimes it can be nice to arrange to babysit for the baby so that you have full time and attention for each other. If you have had stitches this area can be more sensitive/harder. Sometimes it can be nice to explore for yourself beforehand how it feels inside and out. When it no longer hurts you can try to start having intercourse. Are you still experiencing pain? Contact your midwife or doctor.

Hormone changes can cause you to produce less vaginal fluid. Water-based lubricant can help. You may also experience a letdown reflex during intercourse. This is because the hormone produced during breastfeeding is also the hormone produced when you have intercourse. If you are bothered by your breasts leaking, to counteract this, you can feed the baby or pump your milk before intercourse.

When you start intercourse again, it is a good idea to think about birth control. It is important to know that breastfeeding does not protect against pregnancy. Within the practice, we also place IUDs and can prescribe the pill. Unsure about which form of birth control is right for you? Then schedule an appointment or visit the website www.anticonceptie.nl