

# New mums

## *In this fact sheet*

After the birth

Coming home

The early weeks

What you can do for yourself

Medical problems

Eating and drinking

Body changes after pregnancy

Weight worries

Exercise

Having sex again

Contraception

Further reading

Remember, the information on this fact sheet should not be used or relied on as an alternative to professional care. If you have a particular problem, see your health care professional.

## **Coming home**

Bringing your baby home for the first time can feel rather scary. There is so much to think about and organise and you worry about what to do first, or what will happen if the baby won't stop crying.

- Try to have somebody with you for the first day or two, at least.
- Keep a list of phone numbers handy so you can ring to talk things over with someone if you need to.

The feeling of responsibility for your baby's life can be overwhelming at first. However remember that every first baby survived a new mum, and yours will too.

Breastfeeding is a new skill for you and your baby. It may take some time for you both to learn how best to manage. Early problems can usually be easily overcome, so do get help if you need it.

New babies need feeding every few hours, day and night. You will feel very tired from broken sleep, so it is important to rest, or sleep if you can, during the day. The housework will keep until later.

It is great to have visitors, but it can be tiring too.

- Put a notice on the door if you are having a rest.
- Encourage the sort of visitor who does some jobs around the house or minds the baby, and discourage those who want to just sit while you provide a fancy afternoon tea!

It is true that after your first baby is born your life changes forever. Physically your body has changed a lot, and not all the changes are reversible. Mentally and emotionally, you are now a mother, and even though your child will not always be dependent on you to meet every need as a new baby is, he or she will always be your child.

## **After the birth**

If all is well, you may only stay a couple of days in hospital. It will be a very busy time with a lot to learn, and can seem quite confusing. The staff may seem busy, but they are there to help you so make sure to ask any questions you have about yourself or your baby.

You are likely to feel very excited at first, and relieved that the long wait of pregnancy and hard work of giving birth are over. There will be phone calls and visitors and congratulations as everyone greets the new arrival.

After the first day or so, though, you may start to feel quite flat and let down. You may be physically uncomfortable, quite exhausted, worried about managing feeding and overwhelmed with all you need to do for the baby. Massive hormone changes don't help either. Not surprisingly, many mothers have mood swings and lots of tears at this time. This is what is meant by "the baby blues".

You will notice changes in your breasts as your milk comes in. If your baby attaches and sucks well, they may become fuller fairly gradually, but sometimes they get hard, full and uncomfortable quite quickly. This is called engorgement, and there are things to do to help.

It is common for nipples to feel a bit tender as they get used to the baby feeding. This will be helped by making sure your baby attaches properly. If they feel very sore, or cracks appear, do get help.



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For more information on this topic or any issues related to pregnancy, birth or babies, call the free 24 hour helpline:

**1800 882 436**



If you have an episiotomy (cut), or tear, or caesarean section wound, you will feel some soreness as it heals, especially as you start being more active. This discomfort should gradually lessen over the next couple of weeks. If it seems to be getting worse rather than better, or if it is suddenly more painful, check with your doctor.

You will be bleeding at first.

- This blood loss may be quite heavy in the first week, and also get a little worse when you first get home and are more active. You may pass some clots.
- After the first week, your loss (called lochia) should gradually get lighter and change from red to dark red to brown to yellowish white.
- It may clear up in 10 to 14 days, or there may be some loss for several weeks.
- If the bleeding is getting heavier rather than lighter, or if you have a sudden heavy loss or large clots after the first few days, check with your doctor or midwife.

When you are breastfeeding, the hormone that lets down your milk will also cause the uterus (womb) to contract. You may feel some discomfort low in your tummy (these are called 'afterpains' and are more commonly felt with second or third children), and may notice you bleed a little more during feeds. This is all normal.

### **The early weeks**

You and your baby will gradually get to know each other, and you (and your partner) will gain confidence as the weeks go by. There is a lot of information about getting to know your baby, coping with crying or unsettled behaviour elsewhere on this website. The topics in this section are especially for you.

Most mums find the 'baby blues' stage only lasts a week or two, then they gradually get back to normal.

- However it is not unusual for the 'blues' to continue, or for you to start feeling tearful, anxious and depressed at any stage in the first few months.
- If you are feeling bad much of the time, do talk to someone about it. Postnatal depression is common, and can be helped. See the topic Postnatal depression.

Looking after yourself is very important if you are to have enough energy to look after your baby.

- Don't be afraid to ask for help; babies weren't meant to be brought up by just one person.
- Get rest, exercise and some time out, even for a short time.
- Physically you should gradually feel stronger over the first few weeks, but it can take some time to feel you are back to normal energy levels.
- Make sure you have a postnatal check at about 6-8 weeks with your doctor, an ideal time to discuss any concerns you have.

If you are breastfeeding you may not get your period until the baby is 4 to 6 months old or later. This can vary a lot, though. Some women start their periods at 2 or 3 months and others not for a year or more. If you are not breastfeeding, your period will usually return in a few weeks.

Whenever it comes, your first period after having a baby may well be heavier and more uncomfortable than usual. Don't worry, the next one should be better.

### **What you can do for yourself**

All new parents need support and if you are parenting on your own this is even more important. Don't be ashamed to say yes when anyone offers to help you.

Make sure you take some time out for yourself and to do some things with your partner or a friend.

Take care of yourself. Make sure to do some things you enjoy regularly, get some exercise and eat well.

If you feel desperate when your baby is crying, make sure she is safe and then leave the room until you feel better, play some music, make a cup of tea, ring someone who understands or do whatever helps you. Have a look at the topic 'Crying baby'.

If you find you are feeling "down" and irritable most of the time, talk it over with your doctor or someone at your local community health centre.

### **Medical problems**

Signs that there may be a medical problem include:

- bleeding or pain getting worse instead of better
- sudden heavy bright red bleeding or large clots
- severe cramps, or pain where you have stitches
- smelly or itchy discharge from the vagina
- discharge or bleeding from a caesarean wound
- discomfort or stinging when you pass urine (do a wee)
- pain or bleeding when you use your bowels (do a poo)
- firm, painful or red lumps in your breasts
- feeling ill with a fever.

**You need to see your doctor if you have any of these.** Here is a list of the most common causes of these symptoms, but only your doctor can tell what the problem is in your particular case.

- Infection in the uterus (womb) is fairly common. Signs include pain, bleeding, smelly discharge and fever. A swab can be taken (from the vagina) to check the cause of the problem, then it is usually treated with antibiotics.
- Pain and swelling in the area of your stitches may mean an infection also. Sometimes antibiotics are needed, but if it is mild, local treatment may be suggested, such as Betadine\*\* (on a caesarean wound) or salt baths (for an episiotomy).
- There is a small gland near your vagina called a Bartholin's gland. This sometimes gets infected after childbirth, causing severe discomfort in that area. This is treated with antibiotics.
- Bladder or urinary infections may occur, and will produce painful urination (wee-ing) and frequency (needing to wee very often). Your doctor can check your urine and give antibiotics if necessary.
- An itchy discharge may mean a vaginal infection such as thrush, which can be fairly easily treated with creams or pessaries.
- A red, sore lump in the breast may mean mastitis, especially if you have a fever.
- Persistent heavy bleeding and crampy pains may be due to 'retained products'.
  - This term means some parts of the placenta (afterbirth) have been left in the uterus.
  - Your doctor may find your uterus is not getting smaller as quickly as it should, and can check for retained products with an ultrasound.

- If these are found, you may need a 'curette', which means the doctor will scrape out the inside of the womb (with an anaesthetic for you!). This is done via the vagina, so is not a big operation, usually only day surgery.
- Sometimes the bits of placenta produce hormones that make it harder for your breasts to produce milk, so your breastmilk supply may be much better after the curette.
- Bowel problems are very common at the end of pregnancy and over the next several weeks.
  - Constipation, haemorrhoids (swollen veins at the anus which you may feel as lumps) and fissures (small tears in the lining of the anus) all occur because of pressure and stretching in the area, and can cause pain and bleeding when you use your bowels.
  - Your doctor may be able to give you some cream to lessen the pain and help healing, but the most important thing is to get your bowel action (poo) soft so it doesn't keep damaging the area.
  - Have plenty of fluids and a lot of fibre in your diet (fruit and vegetables, wholegrain cereals and bran). Exercise is helpful too. Metamucil\*\* and similar bowel softeners are good, but avoid stronger laxatives unless your doctor recommends them.

### **Eating and drinking**

Although it is hard to find the time, if you can manage to eat well you will feel better and have more energy. Eat at least three times a day, following the guide below to make sure you get all the nutrients you need to recover from the birth and make milk for your baby.

Breastfeeding mothers don't need to eat a lot of extra food or any special foods. Your appetite and thirst will be a good guide. Drinking extra fluids will not increase your milk supply, but you do need enough fluids. Try to have a drink yourself each time you feed the baby.

Here is a guide to eating well, whether or not you are breastfeeding.

- Eat a variety of foods each day.
- Eat plenty of breads and cereals (including some whole grains), rice and pasta.
- Eat several different vegetables and fruits each day.
- Eat protein foods every day - meat, fish, chicken, eggs, cheese, legumes (dried peas, beans, lentils).
- Eat foods containing calcium every day (a lot of calcium from your body will go into breast milk). Milk and dairy products (eg cheese, yoghurt, and custards) are the easiest way to get calcium. You can also get calcium from soymilk that has had calcium added (check the label), tinned fish with bones such as salmon and sardines, tofu, legumes, almonds, hommos, and smaller amounts from green vegetables.

There are many "old wives tales" about foods you should not eat for fear of upsetting your baby. Some mothers find that if they eat a lot of rich or spicy foods, or particular fruits or vegetables their babies may be upset, but others can eat anything, so it is a matter of trial and error. If you find you need to avoid several foods from one of the groups listed above, check to be sure that you are still getting all the important nutrients.

Drugs, tobacco or medicines you take may reach your baby through your milk. Alcohol and nicotine passes freely into the milk.

### Body changes after pregnancy

About 3 months after child birth many mothers notice that a lot of their hair is falling out. During pregnancy less hair falls out and the hair is often thicker than usual.

- After child birth, hormone levels change, many hairs stop growing and fall out about 3 months later.
- Hair lost because of pregnancy will grow back to be normal.
- This hair loss is not caused by breastfeeding and weaning will not help.

### Weight worries

Most women put on weight during pregnancy (more than the baby and placenta), as this is nature's way of making sure there is a good store of energy for making milk. Some do lose the extra weight over the months of breastfeeding. However, in western countries where there is a lot of food around, many women find it hard to get back to their previous weight.

It is possible to deliberately lose weight while breastfeeding without affecting the milk supply, but it needs to be gradual. Aim for about ½ kg a week.

Avoid very restrictive or crash diets, which may affect your milk and will certainly lower your energy levels. You still need a healthy diet.

The best way is to avoid fatty, fried and sugary foods, have low-fat dairy products, lean meat, plenty of fruit and vegetables, bread and cereals. Cakes, biscuits, pastries and chocolate are high in fat, so go easy on the treats if you really want to lose weight.

All this doesn't work very well unless you get some exercise. The combination of

healthy eating and activity is important for weight control and general health. See the Exercise section below.

If you are not breastfeeding, the same guidelines for healthy low-fat eating (combined with exercise) will work. However it doesn't matter if you lose weight a little faster.

Some women have the opposite problem. They tend to lose weight while breastfeeding and can get very thin, although the baby usually grows well. These women need to make sure they have three good meals and snacks each day. Foods like cheese, nuts and full-cream yoghurt can help.

Although it is not common, it is possible for a thyroid problem to affect weight after you have had a baby. Too much thyroid hormone tends to make people lose weight despite eating a lot, and too little can be associated with low energy levels and weight gain. If you are concerned there may be a problem, talk to your doctor. If there are other signs of thyroid problems, a simple blood test can be done to check it out.

### Exercise

Exercise is a great way to get back into shape after your baby is born and also helps you feel good. Walking the baby in the pram does all this and puts the baby to sleep (usually), so is an ideal way to start being active after giving birth.

Build up exercise gradually, but avoid vigorous exercise until after your postnatal check (at about 6 weeks) to be sure everything is OK.

As well as general exercise, you need to do some specific exercises to help your tummy muscles and pelvic floor get back their shape and strength. You will probably be shown some exercises in hospital, or there may be a physiotherapy class you can attend.

Moderate exercise does not usually interfere with breastfeeding.

- Have a balance of exercise and rest, and be sure you drink plenty of fluid, especially if you've been sweating.
- Some babies don't like the taste of milk just after vigorous exercise. This is not common, but if you find your baby refuses the breast at that stage, just make sure you feed just before your work-out, then not again until you've cooled down.

Some mothers find vigorous or long exercise does affect their milk supply. You may need some trial and error to find out how much is right for you.

### Having sex again

When you have a new baby, this may seem impossible, especially if you have stitches. However you will heal, and normal feelings will return. This may happen quickly or may take some time, especially if you had a difficult birth, are feeling exhausted or depressed.

You don't need to wait until the postnatal check if you and your partner feel you are ready for sex. If you feel comfortable and bleeding has just about stopped, it is OK, unless your doctor has advised otherwise.

However the first try may be a little difficult, especially if you feel anxious, which is likely. Take it slowly and use some lubrication if you need to. If it is too painful, try again in a week or so, when healing is more complete.

Sometimes, even when an episiotomy has fully healed, a tender spot remains, making intercourse painful. You will need to speak to your doctor if this is an ongoing problem. Pain may also be due to muscle spasm caused by tension and anxiety. There is help available for this, too.

Some women find their muscles are too loose rather than too tight after being stretched during birth, so they (and their partner) find sex less satisfying. Pelvic floor exercises will help this.

While you are breastfeeding, your vagina may feel more dry than usual because of the change in hormones. Plenty of preparation can help, and many women use a lubricant to help things go smoothly. You can buy lubricating gel at a chemist's shop.

Breastfeeding mothers may also notice milk leaking or even spurting during sex. This is because the hormone oxytocin which causes milk to let down is involved in sexual arousal as well. Most people find this part of the fun, but if it is a problem, try to ensure your breasts are not too full, by feeding the baby or expressing first.

Because of this hormone, some mothers feel not only sensual but also sexual while feeding the baby. This is normal, so you don't need to feel guilty about it: why not enjoy it?

Some new mums feel more sexual than usual in the first few months after the baby is born, but many do not. The main reason for this is not usually pain, dryness or milk, but sheer tiredness. Feeling that you are giving all you have to your baby day and night can leave you drained, with nothing left for your partner.

It is good if your partner can be understanding and loving in other ways, and share more of the baby care, but if you are feeling really flat much of the time, it is important to work on regaining some energy. Taking care of yourself is not being selfish; the whole family will benefit.

## Contraception

If you've just had a baby, having another is probably the last thing on your mind. To make sure this doesn't happen until you are ready you do need to give it some thought, and talk about it with your doctor and your partner.

Breastfeeding itself is a good contraceptive when several conditions are met. The hormones involved in lactation (making milk) tend to stop you ovulating (producing an egg) for the first few months.

- As long as you are fully breastfeeding **day and night** (not giving any other foods or fluids to your baby), have not had a period, and your baby is less than 6 months old, you have little chance of falling pregnant.
- This is called the Lactational Amenorrhoea Method, and works as well as the mini-pill or condoms but it can "fail" and often it will be suggested that you use the mini-pill while you are still fully breastfeeding.

Once you have a period, or your baby reaches 6 months, or you start giving other foods (eg a bottle of milk, or solids), that is, once any one of these three happens, you need to use some other method of contraception.

The **combined** oral contraceptive pill is not the best choice when breastfeeding as it can decrease your milk supply. However, progesterone-only pills (or mini-pills) are usually safe to use.

Condoms and diaphragms are quite OK, whether or not you are breastfeeding. An IUD (intra-uterine device) is another possibility. See your doctor if you are interested in this.

If you are not breastfeeding, or as soon as you stop, your body gets

ready to make another baby. You will probably get a period within a couple of months of giving birth, or within a few weeks of weaning. Unlike when fully breastfeeding, though, you may ovulate, and therefore possibly get pregnant, **before** your first period. So you need to decide on a contraceptive method as soon as you decide not to breastfeed. In this case you have a lot of choice, including the combined pill or implant such as implanon.

## Further reading

Australian Breastfeeding Association  
"Looking After Yourself"  
[www.breastfeeding.asn.au](http://www.breastfeeding.asn.au)

Help for people and their families to understand depression and its treatment  
[www.depnet.com.au](http://www.depnet.com.au)

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