Post-Operative Hysterectomy Recovery Guidelines

This hysterectomy recovery article is by Michelle Kenway, Pelvic Floor Physiotherapist. Michelle is the author of the internationally acclaimed exercise guide to pelvic floor safe exercise for women “Inside Out - the essential women’s guide to pelvic support”, along with Dr Judith Goh Urogynaecologist.

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Always seek approval from your medical specialist before commencing exercise after hysterectomy surgery. Contact your medical caregiver with any exercise-related concerns during hysterectomy recovery.

1. Walking guidelines - how much walking after a hysterectomy?

During the first 6–8 weeks after a hysterectomy post-operative walking exercise aims to maintain general condition and minimize decrease in fitness during recovery.

Walking tips:

- Walk in the morning when well rested.
- Wear support underwear for abdominal and pelvic support
- Walk on flat surfaces, avoid hills
- Wear well-cushioned footwear
- Aim for a couple of short walks rather than one long walk when starting to build up endurance.

Commence walking on flat surfaces and follow your gynecologists’ instructions for how much walking you should be doing. Most women commence walking for 5 minutes in the first week, and increase by approximately 5 minutes every week after surgery however this will depend upon initial fitness levels and whether any complications occur post operatively.

If you have discomfort associated with walking you have probably done too much. In this case reduce and/or slow down your walking program.

2. Posture and strength exercises after hysterectomy

Good posture after a hysterectomy involves:

- Standing tall
- Gently activating deep abdominal core muscles (discussed next section)
- Lifting the crown of the head towards the ceiling when sitting, standing and walking
- Avoiding the tendency to bend forward to protect the abdomen with movement.
Strength exercises after week 6.

When you have your gynaecologists' approval, you may be ready to commence a strength training program using light weights as outlined and illustrated in Inside Out by Michelle Kenway.

3. Abdominal core exercises after surgical recovery

The deep abdominal muscles should work with your pelvic floor muscles to protect and support your insides. Weak abdominal muscles do not support an abdominal wound and can contribute to discomfort with movement. If you can keep these muscles working well, they will also help you prevent and/or manage back pain and improve your posture. Appropriate exercises include gentle abdominal hysterectomy recovery exercises lying down with exercises such as heel slides or bent knee roll outs.

Avoid sit up exercises after a hysterectomy - Sit ups increase downward pressure on the pelvic floor and the internal surgical site.

4. Kegel exercises (pelvic floor muscle exercises) after hysterectomy

Pelvic floor muscles support the pelvic organs (bladder, vagina and rectum). The pelvic floor muscles will provide better support for hysterectomy wound repair if they are strong and functioning well. Try to maintain strong healthy pelvic floor muscles after a hysterectomy through regular Kegel exercises. Refer to kegel exercises after hysterectomy free video for guidelines.

General opinion varies widely as to the best time to commence Kegel exercises after hysterectomy, so always check with your gynecologists' preferences before starting. Try to ensure that you understand how to perform pelvic floor exercises correctly to avoid risk of internal strain with the wrong technique.

Exercise can promote hysterectomy recovery with improved:

- ability to return to your everyday work and activities
- confidence in moving
- strength, energy and well being
- posture and deep abdominal (core) muscle control
- pelvic floor strength to support your surgery long-term.

Exercise can address hysterectomy side effects

These include:

- Decreased fitness, strength and tone
- Lung problems or blood clots in the deep veins in your calf muscles
- Back pain and stiffness with prolonged bed rest and decreased movement
- Decreased bladder control
- Feelings of sadness, stress and anxiety.

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