

Physiotherapy Department

Physiotherapy advice after abdominal surgery

Information for patients



If you normally suffer from breathing problems, or if you have had an operation that involved a large incision (cut), then a physiotherapist may come and see you after your operation.

Not everyone will need to be seen by the physiotherapist, so this booklet will give you some easy exercises and actions you can do yourself to help you recover from your operation.

Helping your lungs recover

The general anaesthetic you have had affects your lungs and, together with the pain from your wound, makes taking a deep breath and coughing difficult. This means that phlegm (thick mucus) can collect in your lungs. Deep breathing, coughing and moving about after surgery are important to help clear any phlegm and prevent you from developing a chest infection.

It is important that you start to clear any phlegm as soon as possible after your operation. This coughing will not damage your stitches or staples.

If you are in pain, use your pain relief button (if you have one). If not, ask your nurse for more pain relief. It is vitally important that you are comfortable enough to breathe deeply, move and cough. If you cannot do this because you are in pain you must tell someone.

Breathing exercises

Do the following deep breathing exercises while sitting as upright as possible in bed or, preferably, in a chair.

1. Relax your shoulders and upper chest.
2. Take a slow, deep breath in (through your nose, if possible) to fill your lungs as fully as you can.
3. Hold this breath for three seconds.
4. Breathe out slowly through your mouth.

Take three to six of these deep breaths then rest – doing more than this may make you light-headed. Practice your breathing exercises frequently, making sure you do them at least three to four times an hour when you are awake. You can start as soon as you wake up after your operation.

Coughing

Coughing is the normal way to clear phlegm from your lungs. You will need to do this more often in the first few days following your operation.

To help you cough, support your wound firmly with a towel or pillow – this will ease any discomfort from your wound. Alternatively you can loosen any phlegm by doing a 'huff'. This is a forced breath out through your open mouth, as if steaming up a mirror.



Sitting out of bed

The best activity for your lungs is to get back up on your feet as soon after your operation as possible. Gentle activity will also help your gut start working again and helps to keep your circulation moving.

The nursing and physiotherapy staff will help you to sit out of bed either on the first morning after your operation or on the same day as your operation. They will continue to help you until you are able to do this yourself. Drips or drains can move with you and will not stop you getting out of bed. You should aim to sit out of bed twice a day, at first for one hour then gradually increasing the time each day.

Walking

The best exercise after surgery is walking and this will start on the first day after your operation. The nursing or physiotherapy staff will help you until you can walk safely by yourself. Once you can do so, you will be responsible for walking regularly and increasing the distance that you can go. To help you increase your walking distance we have marked every 10m on the ward with a sign. Please note down your walking distances in your exercise diary.

You may feel some weakness and tiredness when you first start walking, but this is normal. Most people are moving around freely within 3-5 days after surgery. Regular short walks are best, e.g. around your bed space, to the toilet, or just walking to look out of

the window. By the time you are ready to go home you should aim to walk once every hour during the day. You will not routinely be taken to try the stairs, unless you have a particular concern about your stairs at home.

Benefits of walking:

- promotes independence
- prevents chest infections
- prevents wound and urine infections
- decreases the risk of developing blood clots
- increases your strength, fitness and endurance.

Exercises

Ankles

Bend and stretch your ankles up and down firmly and quickly. Repeat 10 times.



Knees

Tighten your thigh by pushing the back of your knee down against the bed. Hold for 5 seconds. Repeat 5 times with each leg.



Pull your toes up, tighten your thigh muscle and straighten your knee. Hold for 5 seconds and slowly relax. Repeat 5 times with each leg.

Buttocks

Tighten your buttocks regularly to relieve pressure from your bottom.

Abdominal exercises

Start all abdominal (tummy) exercises by lying with your head on a pillow, your knees bent and feet flat on the bed.

1. Abdominal exercise

Gently place your hands on your lower tummy or hips. Breathe in through your nose and as you breathe out, gently pull your tummy button down towards your spine. Feel the muscles tighten, try to hold for a count of 3 and then relax. Breathe in and out normally.



2. Pelvic tilting

Place your hands in the hollow of your back. Tighten your tummy muscles (as in exercise 1), flatten your lower back onto your hands and tilt your bottom up and back towards your chest. Breathe normally. Hold for 3 seconds and release gently.



3. Knee rolling

Tighten your tummy muscles (as in exercise 1) and gently lower both knees to one side as far as is comfortable. Bring them back to the middle and relax. Repeat to the other side. This has the added benefit of helping to release trapped wind.



Aim to do each of these exercises 5 times, 3 times a day. Do more repetitions as you feel able.

Week 1-2

Take it easy for the first two weeks at home. You will probably tire easily so have plenty of rest, but you do not need to stay in bed. After being at home for a few days you can build up your strength and stamina by having a short walk each day. Start with 5-10 minutes and gradually try to add to your distance every day. It is safe for you to go up and down stairs from the day you go home.

Week 2-3

You can start to make light meals and carry out light chores, such as wiping-up and dusting. When possible, sit rather than stand. Increase your walking time and distance each week. Use street furniture such as lampposts and trees as markers of your progress. Some days you will feel better than others, this is quite normal. Remember – **DO NOT DO TOO MUCH, TOO SOON!**

Week 4-6

You can gradually do more household jobs such as ironing and cooking. Break tasks down into smaller parts and ask other people to help. Your tummy muscles will gradually strengthen over this period and you will then be able to get back to normal. Aim to be walking between 30-45 minutes by 6 weeks. **YOU MUST STILL AVOID HEAVY LIFTING AND STANDING FOR LONG PERIODS OF TIME.**

Week 6-12

You can usually begin more strenuous tasks such as vacuuming, so that by week 12 you are **back to normal!** Please discuss getting back to more strenuous forms of exercise with your GP or Surgeon.

Driving

You should not drive for 6 weeks after your surgery. You need to be sure that you can concentrate, move freely enough to have full visibility and be able to perform an emergency stop. You will also need to check with your insurance company that you have insurance cover before you start driving again.

Different rules apply to HGV and PSV licence holders – you will need to contact the DVLA for further information.

Further information

For help and advice on exercise and your recovery when you have been discharged home from hospital, please contact your GP. For further advice please contact the local Surgical Physiotherapy Team.

Churchill Surgical Physiotherapy Team

Tel: 01865 741 841 and ask for bleep 5006 or 5116

John Radcliffe Surgical Physiotherapy Team

Tel: 01865 741 166 and ask for bleep 1909 or 1758

Horton General Hospital Physiotherapy Team

Tel: 01295 275 500 and ask for bleep 322

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALSJR@ouh.nhs.uk**

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