



Childbirth & Postpartum

Labor, Delivery & the First Few Weeks

Postpartum Visit Checklist

All new mothers are told that they should schedule their first postpartum visit with their obstetrician six weeks after giving birth but few, if any, know what questions they should ask at that visit.

New moms are often so overwhelmed with responsibilities after giving birth that they dismiss prolonged postpartum "blues" as normal and don't discuss them. They may be too embarrassed to address sexual disinterest and may not be immediately concerned about their contraceptive needs.

According to Ob/Gyn Judith Reichman, M.D., having a postpartum checklist will ensure that a new mom reviews these issues during her first post-delivery check-up.

Breast Health

Breast health engenders specific concerns, especially for nursing mothers. According to the Surgeon General, breastfeeding promotes both infant and maternal health and is more beneficial than formula feeding. Sixty-four percent of new moms choose to breast feed in the early postpartum period and many may experience painful breast engorgement or improper milk drainage. In some cases, this may lead to infection (mastitis) or even abscess. New moms often think that lumps and pain "come with the territory" and don't seek treatment until they develop serious complications. Also, new moms who are having difficulty breastfeeding often don't seek instruction.

Breast health may also be a concern for women when they decide to stop breastfeeding. These new moms, and moms who choose not to breastfeed at all, should undergo a regular breast exam at their doctor's visit and discuss any difficulties they may be having discontinuing lactation.

Contraception

Resumption of menstruation after delivery is extremely variable. It can begin as early as six weeks or as late as one year or more (in women who breastfeed). Many new moms falsely assume that because they haven't started menstruating or are breastfeeding that they don't ovulate and won't get pregnant. This misconception can lead to an unplanned conception! All women should be encouraged to use some form of birth control as soon as they resume having sexual intercourse whether or not they have begun menstruating.

Contraceptive needs can also change dramatically after the birth of a child. According to a survey from the Emory University School of Medicine, 43 percent of new and expectant mothers report that they use or are considering using a different method of birth control than they used prior to becoming pregnant. That study also revealed that the most valued qualities of a birth control method for new mothers are high efficacy, convenience and one that allows for spontaneity during intimate moments. Women should talk to their doctors about the method that will best suit their individual postpartum needs.

Post-Pregnancy Weight Loss

Losing the weight gained during pregnancy can be frustrating, and many new moms are unsure when they can begin an exercise routine or, if breastfeeding, how many calories they should consume.

Most women can safely begin exercising as soon as they are comfortable. Typically, they can begin walking for exercise after one or two weeks and engage in more vigorous exercise programs by six weeks. With exercise and appropriate diet, the usual weight loss is one to two pounds per week. On average, a new mother should consume between 1,800 to 2,000 calories per day, and a nursing mom should add 500 calories. Breastfeeding can help new moms lose weight faster, because nursing burns extra calories.

A postpartum exercise regimen coupled with appropriate caloric intake is important to the future weight and health of every new mom. Statistics show that women who do not lose their pregnancy weight within six months of giving birth are likely to become overweight or obese in the future. New moms should talk with their doctor to determine an appropriate weight loss plan for their individual needs.

Postpartum Sex

New moms often question when they can resume intimate sexual relations with their partner. Most professionals recommend that women wait four to six weeks to allow proper healing of an episiotomy incision or vaginal tear. However, this time may vary based on the mode of delivery. Vaginal dryness due to low estrogen levels associated with breastfeeding may cause painful intercourse. Women experiencing this problem should speak with their doctors about soothing topical creams and lubricants.

Diminished libido is also a frequent silent concern for new mothers. Hormonal changes, stress, lack of sleep, altered body image and breastfeeding can all play a role in decreased sexual interest. New moms and their partners need to give themselves time to adjust to the extraordinary demands of parenthood. If after several months, however, a new mom still has a low libido, then she should talk to her doctor in order to rule out medical or psychological problems that can and should be treated.

Emotional Issues

The first six weeks after the birth of a baby are particularly trying times for new moms. Studies have shown that up to 85 percent of new moms experience feelings of sadness, or the "postpartum

blues". These feelings typically last less than two weeks; new mother support groups and family members can often help alleviate these feelings.

However, 15 percent of new moms (approximately 600,000 women per year) have persistent symptoms that are the hallmark of postpartum depression. These include strong feelings of sadness, despair, anxiety, irritability and poor concentration. These women are no longer able to feel pleasure or joy and become unable to participate in the daily tasks of their lives.

Women who experience these serious symptoms of depression for more than two weeks should consult their doctor and obtain treatment.

Postpartum Exams

The postpartum exam should include a breast and pelvic exam. Six weeks after delivery the uterus should have returned to pre-pregnancy size and episiotomy repair, vaginal tears and/or incisions from a Cesarean section should have healed.

If indicated, a Pap smear will be done and a blood test to check for possible anemia or thyroid irregularities may be warranted.

Judith Reichman, M.D., is a gynecologist specializing in gynecology and menopausal care at Cedars Sinai Medical Center in Los Angeles, CA, and an assistant clinical professor at the David Geffen School of Medicine at The University of California at Los Angeles. In addition to her practical experience, Dr. Reichman is the best-selling author of three books, a regular health contributor to NBC's "Today" show and was the medical commentator for KCET's public television show "Life & Times." Dr. Reichman is a Magna Cum Laude graduate of Barnard College, Columbia University with a Bachelor of Arts in Zoology. She earned her medical degree from Tel-Aviv University's Sackler School of Medicine in Tel-Aviv, Israel and completed her residency in Obstetrics and Gynecology at the Chicago Lying-In Hospital in Chicago, Illinois. She is a Fellow of The American College of Obstetricians and Gynecologists.

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