

AFTER THE DEATH OF A *baby*

Following the death of your baby, particularly if you have been breastfeeding or pumping, your body will produce milk. If you follow a plan that limits the amount of breast stimulation you receive, your body will know quickly that it does not need to produce milk. The following suggestions are designed to help reduce your physical discomfort and reduce or stop milk production.

IF YOUR MILK PRODUCTION HAS NOT (OR ONLY RECENTLY) INCREASED

Do not express any milk from your breasts; the pressure of too much milk inside the milk ducts causes milk production to stop. If you decrease that pressure by expressing milk, the breasts will make more milk. This pressure and the accompanying lumpy feel of milk and tissue swelling may be uncomfortable for three to four days for most women and as long as ten days for some. Although you may or may not continue to have some milk after this time, your breasts will not feel as painful and your body will gradually reabsorb the milk. You may occasionally notice a few drops of milk for up to several months after stopping.

IF YOU HAVE BEEN USING A BREAST PUMP FOR SEVERAL WEEKS

Stopping the pumping abruptly may make your breasts too uncomfortable. Adjust your schedule so that over time, you pump less and less. For example, if you have been pumping six times a day, drop to five times for a day or two, then to four times, continuing until you are no longer pumping.

If you have breast milk stored at the hospital or at home and would like to donate it in memory of your baby, please contact the Texas Children's Mothers' Milk Bank at 832-824-6455. A representative will help you to make the necessary arrangements. If you have any other questions or concerns, please do not hesitate to call Texas Children's Lactation/Milk Bank Services at 832-824-6120 (8 a.m. - 5 p.m. daily).

HELPFUL TIPS TO STOP BREAST MILK PRODUCTION

- Do not bind your breast. This can lead to plugged ducts, mastitis, and increased pain.
- Wear a supportive bra day and night. Nursing pads are helpful for leaking milk.
- Ice packs or cold cabbage leaves on the breast can help decrease swelling and pain. Use 3-4 times per day for 15-20 minutes.
- Talk to your provider about over the counter pain relievers such as ibuprofen or acetaminophen to help relieve pain.
- When showering, stand with your back to the water flow - avoid heat on your breasts.
- Drink when you are thirsty. Drinking less fluids does not help and can make you dehydrated.
- If the pressure feels unbearable, you can relieve it somewhat without bringing in more milk by leaning over the sink or a bowl filled with warm water and submerging your nipples only. This will allow some milk to flow out.

It can take some women up to 10 days or longer for the breasts to stop making milk. Please contact your primary care provider for questions or concerns. For further help call Texas Children's Hospital Lactation Services at 832-824-6120 daily 8am -5pm or breastfeeding@texaschildrens.org.

AFTER THE DEATH OF A *baby* CONTINUED

CARING FOR YOURSELF AFTER GIVING BIRTH

Activity

In the first few days at home, get lots of rest and take care of yourself. Caring for your body during the grieving process is important for healing. Try to maintain consistent rest patterns and avoid increased work. The return to normal activity should be gradual, leaving non-essential things until you are feeling stronger. Check with your healthcare provider about when driving will be appropriate.

Bladder

A full bladder may keep your uterus from contracting properly, thereby increasing bleeding. Urinate often, particularly on the first day home. If you have difficulty, try pouring warm water over your perineum (the part of your body between your genitals and your anus) or urinating in the shower. If you have stitches, the water will relieve the burning caused by urine running over the stitches.

Breasts

You may experience changes to your breasts during the first few days at home. These changes are absolutely normal and will pass in a few days. Breast swelling (engorgement) is very common and can be uncomfortable. To increase your comfort, wear a bra that fits well and use ice packs applied to the breasts several times a day for at least 20 minutes to help reduce the swelling. Cabbage leaves applied to the breast can also be very soothing and help reduce milk production. Mild pain relievers, such as ibuprofen or acetaminophen, may help relieve discomfort. You may notice that your breasts are leaking a clear sticky substance; this is perfectly normal. Try not to stimulate your breasts; the swelling, tenderness and leaking will stop after a few days. If you have any concerns, please contact your healthcare provider.

Bowels

You should be able to move your bowels in a day or two. Drink plenty of fluids, especially water and juices. Prune juice is a natural laxative and may be taken to prevent constipation. After a cesarean, bloating and gas may cause you some discomfort. Walking around and placing a hot water bottle on your belly can help these discomforts.

Bleeding

You may experience a period-like flow of bleeding which may be relatively heavy and red on your first day home and may continue to be red for two to four days. After that, the flow becomes brown or pink and may decrease in amount each day and stop around the tenth day. A slight white or yellow discharge may be noticeable for several days afterward. A persistent red flow or sudden gush may be a warning sign that you are doing too much. If you have been lying down for a while, you may experience a heavy release of flow when you change your position to standing or sitting. If a heavy flow persists and you are consistently saturating (wetting through to the other side) your pads in one to two hours at home, or you notice a foul odor or have a fever greater than 100.4°F, please contact your healthcare provider.

Menstruation

It usually takes four to eight weeks for periods to resume. Ovulation returns before menstruation begins, so you could become pregnant even if you have not had a period. Usually conception is not recommended until at least two cycles have passed since your return home. Any plans for conception and contraception should be discussed with your healthcare provider.

AFTER THE DEATH OF A *baby* CONTINUED

CARING FOR YOURSELF AFTER GIVING BIRTH CONTINUED

Cramping

Some cramping is normal as you return home. Severe or persistent cramping in the first 24 hours may indicate that clots have gathered inside your uterus; this is not uncommon and you may pass a few small clots at home. Using a hot water bottle or heating pad on your abdomen can help ease the discomfort. Cramping will gradually become less intense, but can last seven to ten days. Your healthcare provider may prescribe pain medications such as acetaminophen or ibuprofen to help relieve the cramping. If the cramping is severe or if you are passing large clots, please contact your healthcare provider.

Nutrition and Weight Loss

As you are trying to cope with your feelings of loss, you may not feel like eating very much or alternatively, you may be eating too much. It is important to maintain a healthy diet so that you will have the physical and emotional energy you need to heal. Try to drink eight glasses of water or juices each day. The traditional food pyramid of grains, vegetables, fruits, oils, milk, meats and beans is an ideal guide for good nutrition. Try to avoid caffeine and alcohol. Also, this is not the right time to begin a diet. Any weight reduction you experience should be gradual. Please talk to your healthcare provider if you have any questions about nutrition and/or weight loss.

Perineum Care

After coming home from the hospital, your perineum (the part of your body between your genitals and your anus) may need some extra care to heal. Every time you change your pad or go to the bathroom, do the following: (a) wipe yourself from front to back to avoid bringing bacteria from the rectal area forward to the perineum, and (b) squirt warm water from a peri bottle over the vaginal opening. This care promotes cleanliness in the perineum, soothes tissue discomfort and helps prevent infection.

Postpartum Depression

Every woman reacts to the death of her baby in a unique way. Most women find the first weeks at home to be very emotionally difficult. Intense feelings of sadness, depression, exhaustion, fatigue, confusion, loneliness, disappointment, anger, and fear are all common during this time, or you may feel numb. Some of what you are feeling may be related in part to the enormous hormonal changes that occur during your first few days at home as well as to fatigue, lack of sleep, and/or physical discomforts.

It is estimated that 10 - 20% percent of women experience postpartum depression. This can be more worrisome after a pregnancy loss because you are not only dealing with normal hormonal and physical changes, you are dealing with the death of your baby as well. Women with postpartum depression often have feelings of irritability, anxiety, worthlessness, or hopelessness and may feel anger towards their partner. You may feel unable to cope with day-to-day activities or you may have physical symptoms such as headaches, chest pain, rapid heart rate, inability to sleep and a loss of appetite, or perhaps you may overeat. Like some women, you may not want to be with people or fear being alone, have nightmares or scary thoughts, feel as though you were in a deep dark pit, or feel like you are "going crazy." Grief includes feelings of depression. If the feelings of depression are severe (trouble sleeping, appetite changes, frequently feeling angry or irritated, daily hopelessness, continuous anxiety/panic, and withdrawing from others), last longer than a week, get consistently worse instead of better, or make it difficult to function at home or at work, it is important that you contact your healthcare provider.

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Sexual Relations

Many healthcare providers recommend that after labor and delivery, nothing should go in the vagina for six weeks, which would require not having sex as well as not using tampons or douches. This six-week time period is usually suggested to allow time for all bleeding to stop and for stitches to heal. It is normal to not feel like having sex during this time. Reduced vaginal lubrication can be eased by the use of KY Jelly or other water-based lubricant products. Never use Vaseline as a lubricant for sex. Check with your healthcare provider for more information about having sex.

Stitches

Any stitches you may have received are self-dissolving and no removal is necessary. Most of them are internal so you will not be able to see them. Applying ice to the vaginal area is often recommended in the first 24 hours to decrease swelling. Warm soaks in a clean tub are soothing and promote healing. Be sure to ask your healthcare provider when tub baths are permitted. Your healthcare provider may prescribe perineal pads or a spray to soothe any vaginal or rectal discomfort. Witch hazel

compresses may also be applied for relief. If you had a cesarean birth and notice any drainage, swelling or separation at the edges of the incision line, report this to your healthcare provider.

Uterus

The uterus can sometimes be felt as a hard ball located midway between your belly button (umbilicus) and your pubic bone. Each day, it will become smaller and smaller until it can no longer be felt by around the tenth day. It may take approximately six weeks for the uterus to return to its normal size.

The uterus should be firm, with some bleeding expected. Gentle massage in a circular motion over the uterus should be performed if the uterus is not firm or if bleeding is severe. Massaging the uterus may be helpful. If the top part of the uterus (fundus) is very high or off to one side, you may need to urinate before you continue with a massage.

SYMPTOMS THAT COULD INDICATE A POSSIBLE INFECTION:

Contact your health care provider if you:

- Have heavy bleeding, enough to soak through a large pad in an hour or less
- Extreme tiredness and body aches, as if you have the flu
- Have a fever greater than 100.4°F or chills
- Feel a sudden onset of severe pain in your incision, perineum, or belly
- Pass a clot larger than a lemon followed by heavy bleeding
- Are unable to urinate or have pain, burning, or urgency when urinating
- Notice a foul-smelling vaginal discharge
- See your cesarean incision open or foul or bloody discharge from the incision
- Have a swollen, red, painful area on your leg (especially in the calf) that is hot to the touch
- Have a tender, red-streaked, warm, hard, or lumpy area on your breast
- Burning or pain in one or both breasts
- Have shooting pain down your legs or difficulty walking
- Have a severe headache, especially when sitting or standing, that is relieved when you lie down
- Have any questions or concerns about caring for yourself after delivery