

REDUCING PERINEAL TEARS DURING CHILDBIRTH

East Grampians Health Service (EGHS) midwives are working with women to reduce severe perineal tears during childbirth.

What is a perineal tear?

During labour, the skin and muscles around your vagina stretch to allow your baby to be born. Sometimes the area between your vagina and anus (the perineum) gets torn. This is known as a perineal tear.

Tears are usually graded from one to four according to how much of the area is affected, with four being the worst. Perineal tears are common and most heal well either naturally or with stitches. Some perineal tears are more serious and require surgery to fix them.

Reducing the risk of a tear

During pregnancy:

- Regular pelvic floor exercises in the later stages
- Perineal massage from 35 weeks may help protect your perineum and prevent injury

Refer to [RCOG – Reducing your risk of perineal tears](#) or visit www.rcog.org.uk.

During labour and birth:

Midwives will offer the following:

- A warm compress applied to your perineum when your baby's head is starting to show. This will help the muscle to stretch
- Help with breathing techniques to slow down how quickly your baby's head emerges during birth
- To gently support your perineum with their hands during the birth of your baby's head

Episiotomy

An episiotomy is a cut (incision) of the perineum from the vaginal opening downwards on a 45 degree angle. This helps reduce third and fourth degree tears during birth. There may be times where an episiotomy may be required. This includes:

- If forceps or a vacuum cup is required in an assisted birth
- Delayed second stage of labour
- Suspected or confirmed distress of the baby
- Where a severe perineal tear is considered likely



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What will happen if I need stitches?

If you need stitches:

- They are done soon after your baby is born
- The doctor will discuss the procedure with you
- Local anaesthetic is used to make sure you do not feel any pain. If you have an epidural, then you may not need any local anaesthetic as the area may still be numb
- The stitches are dissolvable and do not need to be removed. You may notice some of the stitches fall out. This is normal.

What can you do to help a tear heal?

The tear or cut usually heals within a few weeks. To help a tear heal:

- Rest and lie on your side as much as you can
- Keep the tear as clean and dry as possible by changing pads frequently, showering at least daily and patting the area dry. This helps to prevent infection
- Avoid positions and activities that place pressure on the muscles or restrict blood flow to the area (e.g. avoid sit ups, lifting, and high impact exercise)
- Start gentle pelvic floor muscle exercises 2 to 3 days after you have your baby
- Put ice wrapped in a cloth on your tear for 20 minutes. Do this as often as you want over the first few days
- If you need to cough, sneeze, blow your nose or empty your bowels, you might like to support your perineum with your hand or a flannel to help prevent stretching
- Keep bowel motions soft by drinking at least 2 litres of fluid a day, eating fruits and vegetables often, and taking laxatives if prescribed
- Take pain relief as required
- You can have sex after birth whenever it feels right for you (may take up to 6 weeks)

What should I discuss with my healthcare team during pregnancy?

Things to discuss with your healthcare team during pregnancy include:

- Your birth history and risk factors including a previous third or fourth degree perineal tear
- What can be done during pregnancy, labour and birth to reduce your risk of a tear
- Your birth plan and the care that might be offered to you during labour and birth, including what might be involved if you are offered:
 - Induction
 - Epidural
 - Episiotomy
 - Instrumental delivery (forceps or vacuum)
 - Caesarean section
 - Pain relief or anaesthetic.

EGHS would like to thank our consumers for reviewing this information.



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