



After the first week

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CONCLUDING THE MATERNITY CARE

After the first week you and your baby will no longer fall under our care and you will be referred back to your GP. If you or your baby has a temperature you need to contact your GP. For any midwifery related queries (such as blood loss, abdominal cramps or problems with stitches) you can of course still give us a ring. The child healthcare organisation (part of the Centre for Youth and Family) will take over the care of your baby. There you can ask questions about (breast) feeding, health and parenting. On the Centre for Youth and Family Utrecht [website](#) you can find a clinic in your area. At the clinic, you can also have the baby weighed; usually the clinic will have specific times for this. Please check with the health clinic reception desk or ask the nurse visiting you at home after the maternity week.

POST NATAL CHECK

If you feel the need, you can schedule a debriefing appointment with the midwife by calling the assistant. She will schedule it approximately 6 weeks after delivery. No physical checks are usually done during this appointment, but if you want to have a conversation, you are welcome to come. You can also indicate your preference for a midwife. Here are some situations where we would like you to make an appointment:

- You are not feeling well and haven't received help yet
- You have physical complaints you'd like to discuss. We can do physical checks if needed, such as checking stitches or measuring your iron levels.
- You feel that the birth still affects you deeply, and this keeps resurfacing
- You are not satisfied with the care and haven't mentioned it to us yet
- Any other reason you'd like to speak with us

If you had heavier blood loss during delivery and want to have your iron levels checked, feel free to stop by the assistant's office during weekdays between 8:30-13:00 and 14:00-16:00 for a finger-prick test.

BREASTFEEDING

Around the tenth day newborns often have an increased appetite and become a little restless. Have your baby latch on regularly during this time, this will stimulate the milk production and therefore satisfy the baby's increased appetite. Women who breastfeed are subject to the chance of a blocked milk duct or mastitis. This may feel like a red, hard, sore area in your breast. If you notice this, continue with your usual feeding schedule. It is good to cool the breast with a cold compress after each feeding. Do not massage the breast, try not to stimulate it extra. Start with paracetamol (3x1000mg per day) and ibuprofen (3x400mg per day). In case of a raised temperature, please consult your doctor. If you have more questions about breastfeeding or are experiencing problems you can request advice from a lactation consultant (www.borstvoedingenmeer.nl) or visit the website www.borstvoeding.com. Here you can also find information on breastfeeding while at work.

VITAMINS K AND D

In both cases of breast and bottle feeding it is recommended to give your baby from day 8 a vitamin D supplement (drops). If you breastfeed solely or swap between bottle and breast (where the total bottle feed amount is less than 500 ml a day), then it is advised to give your baby vitamin K drops also.

When you breastfeed you are in need of extra vitamin D yourself. Many multivitamin supplements already contain vitamin D. If you decide against the use of multivitamins, we recommend a daily dose of 10 micrograms of vitamin D.

PELVIC FLOOR EXERCISES

Pelvic floor exercises are essential to protect against leaking urine (stress incontinence) after birth. It is important to strengthen these before you begin to do lots of tummy muscle work or sit-ups, or you may find that you begin to leak during exercising. You can check out our website for pelvic floor exercises. Leaking a little urine when you cough, sneeze or laugh is common after having a baby. It can be hard not to leak when you're doing exercises too. That's why you should start strengthening your pelvic floor before returning to exercise. If difficulties persist, please consult with a pelvic floor physiotherapist or go see your GP again.

EXERCISING

After the first few weeks you can gently start with general exercise again. Try to wait until after your postnatal check, at between six weeks and eight weeks after the birth, before exercising your abdominal muscles. As a result of the pregnancy the abdominal muscles are still quite stretched but after six weeks they will contract back into their natural state. Begin with exercising the oblique muscles, in all cases you must listen to your body and build it up slowly. For running, the advice is to only build this up from 6 months after giving birth.

SEX AND CONTRACEPTION

During the first 4 to 6 weeks after the birth you will still experience a little blood loss as result of the delivery. After which your menstrual cycle will often quickly go back to normal, but it is also possible that your 1st period after childbirth might take a few months. Approximately 2 weeks prior to your bleed, ovulation occurs and thus you are already fertile before you've even had your first period. It is impossible to predict when your sexual urges will return, this could be around 2 weeks but sometimes even as long as a year after the birth. A sensitive pelvic floor, changes to your daily life, but also all the memories surrounding childbirth and the maternity period play a role, both for the mother and her partner. Especially with the mother breastfeeding is it common to experience 'dryness' during intercourse, the use of a lubricant is recommended. Many women are extra sensitive during the first time they have intercourse since the birth. Over the course of time your sex life will return to normal. Should this not be the case, we advise you to contact the midwife or GP.

Consider the use of contraception without much delay. If you are breastfeeding, not all forms of contraception are suitable; many contain hormones that affect breastfeeding. To be used while breastfeeding, you have three options:

- Condom
- Coil; there are two different types of coils. One contains the synthetic progesterone-like hormone levonorgestrel, such as the Mirena coil, or the copper coil. Consult with your GP what the best option is for you, both types are suitable for use while breastfeeding.
- Minipill, also known as Cerazette, this pill does not contain any oestrogen which makes it suitable for use while breastfeeding. This type of contraception must be taken daily. Once you stop breastfeeding you can start taking the combined pill again.

It is important to know that it is possible to become pregnant while you are breastfeeding! So always use one of the above mentioned forms of contraception if you do not want to get pregnant.

If you chose *not* to breastfeed other types of contraception can be used as well. (condom, coil, combined pill, vaginal ring). The GP can inform you further.

MENTAL HEALTH

It may be that after giving birth you don't quite feel yourself. In a short amount of time so much has happened, you are now a mother (for the first time or again), your sleep is regularly disturbed, physically you are not back to yourself yet and also both the relationship with your partner and your new family are wanting equal attention. If you believe you are suffering from depression, please do not hesitate to ask for help. Your GP would be the best person to provide advice but we are here if you need us! Another possibility is post-partum thyroiditis, this condition may cause depression. It is therefore useful to consult with your GP to eliminate causes.

NEXT PREGNANCY

If you and your partner are planning to conceive (your next child) It is recommended to start taking folium acid supplements at least 4 weeks before your planned pregnancy and continue until the tenth week. Folic acid is an important vitamin for the healthy development of the upper lip, palate and the spine of the foetus. With a next pregnancy it is of course still important to have a healthy lifestyle. If you are a smoker, try to quit before you become pregnant. Try to moderate your alcohol intake (alcohol during pregnancy is strongly discouraged) and ensure that you eat healthy. For information about pregnancy and nutrition visit www.voedingcentrum.nl.

COMPLAINTS

Should you be dissatisfied with our services or have complaints, then it is always advisable to discuss this with us. Only then can we resolve any issues. You will then provide us with the opportunity to review and improve our care.

Should we fail to resolve your complaint, you can contact the complaints officer of the CKBZ via www.klachtverloeskunde.nl

If a complaint does not offer a solution, a dispute can be submitted to the Obstetrics Disputes Committee. For more information, visit www.geschillencommissieverloeskunde.nl