

Walderslade Post Natal Information

The midwife and health visitor will care for you and your baby in the early days after your discharge from hospital.

Maternal postnatal check

At 6-8 weeks we offer a postnatal check for you. This is an opportunity for you to discuss any concerns that you may have relating to your physical and emotional wellbeing. It is an opportunity for us to check that everything is returning to normal after the birth of your baby. We do not routinely examine you vaginally unless there are any concerns.

We usually discuss options for future contraception. Further information about the options available can be found on the back of this sheet.

Please book your appointment with Sr Julie Daughtry who is our nurse practitioner.

However if you are considering Implanon (the contraceptive implant) or an intrauterine device (coil) please book your appointment with Dr Lockwood.

When booking your appointment please tell the receptionist that it is for your postnatal check so that an appointment of the appropriate length can be allocated.

Baby Check

At 6-8 weeks your baby also needs a routine check with the doctor.

Please book this with the receptionist and tell her that it is for a baby check so that an appointment of the appropriate length can be allocated. Please remember to bring your red book (child health record). It is also helpful if you have up to date records of your baby's weight so please see the health visitor a few days before attending for this check.

If you have any further questions please contact the surgery.

CONTRACEPTION AFTER HAVING A BABY

The time for fertility to return is very variable between women. However it is important not to take any risks if you do not want to become pregnant again. You will need contraception from 21 days after your baby is born.

Combined pill

This is often just called "the pill". It is more than 99% effective if used properly. It contains oestrogen and progestogen and works mainly by stopping ovulation.

It can be started from 21 days after the birth but is not recommended if you are breast feeding because it can affect your milk supply.

Progesterone-only pill

POP or mini pill contains just a progestogen hormone. If it is used properly it is more than 99% effective. It works mainly by causing a plug of mucus in the cervix that blocks the sperm and also by thinning the lining of the uterus. It may also stop ovulation. This pill can be started from 21 days after the birth and can be used if you are breast feeding. You need to remember to take it within 3 hours of the same time every day or you lose protection.

Barrier methods

These include male condoms, female condoms, diaphragms and caps. They prevent sperm entering the uterus. Male condoms are about 98% effective if used properly and the other barrier methods are slightly less effective than this.

You can usually start using a cap or diaphragm around 6 weeks after giving birth so please contact the family planning clinic regarding this.

Male condoms are readily available at the surgery from the nurse or doctor.

Long-acting contraceptives

These are most suitable for women who do not wish to become pregnant in the near future.

Contraceptive injection - Depoprovera

This contains a progestogen hormone which slowly releases into the body. It is more than 99% effective and works by preventing ovulation and also has similar action to POP. An injection is needed every 12 weeks into your buttock area. It is usually not given until 6 weeks after the birth of your baby.

Contraceptive implant

This contains a progestogen hormone and is placed under the skin during a minor operation using local anaesthetic. It is 99% effective and lasts for 3 years. Please speak to Dr Lockwood to discuss this further.

Intrauterine device –IUD

This is placed into the uterus and works by stopping the egg and sperm from meeting as well as by preventing the fertilized egg attaching to the lining of the uterus. It usually lasts 5 or more years and is fitted 6-8 weeks after giving birth.

Intrauterine system

This is put into the uterus in a similar way to the IUD but it contains a progestogen hormone. It is more than 99% effective and works by making the lining of the uterus thinner so it is less likely to accept an egg and it also thickens the mucus from your cervix. It can be fitted 6-8 weeks after giving birth and can be used to treat heavy periods.

Emergency contraception

This can be used if you have had sex without contraception. The pills are usually effective up to 72 hours after unprotected sex but we would recommend contacting the surgery sooner if possible.

An IUD fitted by the family planning clinic can be used up to 5 days after unprotected sex.

Further information about all the methods can be obtained from the surgery or at www.fpa.org.uk