Recovering from Major Abdominal Surgery

Physiotherapy and exercise guide for patients, relatives and carers

ℹ️ For more information, please contact:

Physiotherapy Department

The York Hospital
Tel: 01904 725390
Wigginton Road, York, YO31 8HE

Scarborough Hospital
Tel: 01723 342645
Woodlands Drive, Scarborough, YO12 6QL
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What is this leaflet about?

This is a guide about physiotherapy and exercise which will help you in your recovery after major abdominal surgery.

Major abdominal surgery is when you have had either a large cut (incision) in your abdomen or complex keyhole surgery on your bowel or abdominal wall.

This leaflet covers the most common questions patients have about physiotherapy and exercises.

The advice covers exercises:
- Before your operation
- After your operation
- After you return home

Your doctor or physiotherapist can answer any questions you might still have which are not covered in this leaflet.
What exercises do I need to do before my operation?

**General exercise**

You should try to be as active as possible before your operation. This helps your recovery after surgery. Start exercising as soon as you know you are having an operation.

Aim to do **at least** 30 minutes of exercise daily, or as much as you are able. Examples of exercise are brisk walking, swimming or cycling. If you need to you can break the 30 minutes into smaller sessions.

Doing these general exercises before your operation can help to reduce the risk of complications after surgery such as chest infection and blood clots (known as deep vein thrombosis or DVT).

**Deep breathing exercises**

It would be helpful to practice “deep breathing exercises” so you are familiar with them. You will be expected to do them regularly after the operation as this helps in your recovery. We have outlined how to do these on page 7.
Core stability exercises

Having major abdominal surgery will affect your abdominal muscles and therefore the strength and stability of your trunk (known as core stability).

To improve your core stability you should start specific exercises before your operation. Aim to do them these three times a day. Details are on page 17.
What exercises do I need to do after my operation?

Getting in and out of bed and walking

You should aim to sit out of bed on the first day after your operation. The first time you get out of bed there will be with a member of staff with you to help you. You can reduce the pain in your wound when getting in and out of bed by doing the following:

- Bending your knees
- Rolling onto your side keeping your knees together
- Pushing yourself up to a sitting position using your hands and allowing your legs to swing down to the floor.

When sitting in a chair it is important to be comfortable so you may want to use a pillow to support your back.

When you first stand up or start walking around you may be tempted to stoop. It is normal to feel your wound stretch when trying to stand straight. Try to walk tall and relax your shoulders. This will not harm your wound.

You should start the following exercises as soon as possible after your operation.
Deep breathing exercises

Regular “deep breathing exercises” will help to:

- keep your chest clear
- reduce the risk of chest infection
- ease nausea (sickness)
- relax and calm you
- ease wind pains

The technique for “deep breathing exercises” is described below.

Place a rolled up towel over the dressing or pad that covers your wound. Place both hands over the towel so you are supporting your wound. It will help if you hold yourself in the same way when you cough, laugh or sneeze.

- Take a slow, deep, comfortable breath in allowing your tummy to rise
- Hold for a moment, and then sigh out
- Do five of these deep breaths
- Then take a few normal breaths
- After that do five more deep breaths

Try to do these every hour during the day.
Exercises for clearing secretions

If you have the need to cough ‘something up’ (secretions/phlegm/sputum), the least painful and most effective way is to “huff”.

- Start with your deep breathing exercises as above
- After your fifth deep breath do a short, forced breath out through an open mouth as if steaming up a mirror (this is a huff).

Circulation exercises

These help to maintain the blood circulation in your legs whilst you are not so active. This reduces the risk of getting a blood clot (DVT).

- Keep your legs and ankles uncrossed at all times
- With your legs stretched out, briskly circle your feet and bend them up and down.

Do these every hour while you are awake. You can do these when lying down or sitting in a chair.
Core stability exercises

It is safe to begin core stability exercises the first day after your operation. Please refer to page 17 for details.

Aim to do them three times a day.

In addition to improving core stability the ‘deep abdominals’ and ‘pelvic tilting’ exercise can help to ease low backache, wind, and constipation.

When beginning these exercises after your operation, remember:

- Exercise should not cause pain, though you may feel some discomfort
- Do not exercise if you feel unwell or you are in pain
- Start gently and progress as you feel comfortable
What exercises do I need to do after I return home?

After major abdominal surgery with a large incision it takes about two to three months to be able to move around comfortably. If you have had complex keyhole surgery your recovery will be quicker.

If you have had a large incision in your abdomen you should avoid lifting anything heavier than 2-3kg. This is about the weight of a full kettle. A general rule is that if lifting an object causes pain, then do not do it.

You can seek the advice of your surgeon on what is enough exercise and what is too much exercise for you.

It takes about two years for the strength of your abdominal wall to return to the strength you had before the operation. To achieve this you should continue your core stability exercises three times daily remembering that the exercises may cause discomfort but should not cause pain.

Your strength and stamina will slowly improve. In addition to your normal daily activity you can also do some basic exercises to build strength.
Basic exercises

Start with exercises sat in a chair:

- March your knees alternately for 30 seconds.

- Bend and straighten your knees. Hold your knee straight for 10 seconds, keeping toes pulled up. Repeat 5 times with each leg as you are able.
- Lift your heels and toes alternately for 30 seconds.

Once you can do these exercises comfortably, progress to exercises in a standing position. Place your hands on a supportive surface like a kitchen worktop or back of a chair. Make sure your shoulders are not hunched and that you’re standing tall:

- March for 30 seconds.
• Small squats. Aim to repeat 10 times keeping the movement slow and controlled.

• Push up onto your toes 10 times.
Complete these exercises as often as is comfortable, aiming to increase to three times daily.

Remember to sit or stand straight when completing these exercises. Avoid slouching.

We strongly advise you to avoid exercises like sit ups as they put undue pressure on the abdominal wall. Although the wall has been stitched back together with strong sutures it will take a while to regain its original strength; whilst healing it will be weak and prone to a hernia developing.

Regular Activity

Aim to walk every day gradually increasing the distance. You should aim to be able to walk 30 minutes daily by two to three months after your operation. Start walking on level ground and gradually build up to inclines and uneven ground such as cobble paths. Walking on uneven surfaces requires small changes of direction which can cause some discomfort in the healing abdominal muscles.

After two to three months you could consider moderate exercise like swimming or cycling. To progress your core stability exercises you could attend a Yoga or Pilates group. However, seek advice from the group’s instructor about an appropriate level of exercise.

If you wish to return to a specific sporting activity please discuss this with your consultant.
Frequently Asked Questions FAQs

Who will look after my wound once I am at home?
Initially you will need daily dressings. When you are discharged, the nursing staff will advise you on the frequency of dressings and who will do this for you. It is likely to be either a district nurse or practice nurse depending on your ability to attend your GP practice. They can give you advice about when your skin staples or sutures need to be removed,

When can I have a bath or shower?
If your wound has healed well you will be able to take a shower within a week of the operation. You can have a bath if you prefer.

When can I return to driving?
You can return to driving when you are comfortable and pain free. You will need to be able to complete an emergency stop before returning to driving. You will need to discuss returning to driving with your insurance company.
When can I return to work?

When you are able to return to work depends on the type of surgery you have had and your job. If your job is of a physical nature you should expect it to take longer to return to work than a job that is more sedentary. Please discuss this with your surgeon.

Will I regain muscle control and sensation in my abdomen?

You will find that gradually you will recover the function of the abdominal wall over a few months. In the initial few months you will notice a considerable area of numbness of the abdominal wall. This will slowly improve and with time may recover completely. It is not unusual to have some persistent numbness all your life.
Core Stability Exercises

Having major abdominal surgery will affect your abdominal muscles and hence your core stability.

To improve your core stability, please do the exercises outlined in the following pages.

The best position to do these exercises is lying on the floor. However, if you are unable to do so, you could do them lying on a bed.

Aim to do them three times a day.
1. Deep Abdominals

- Lie on your back, knees bent, at hip width apart, feet flat
- Put one pillow under your head
- Breathe in, gently letting your tummy rise
- As you breathe out, gently draw your tummy button towards your spine
- Hold for a few seconds, then relax
- Rest for a few seconds
- Repeat 3-5 times

Remember:

- Keep your back still
- Don’t hold your breath
- Build up gradually - holding your tummy in for a maximum of 10 seconds, repeating it 10 times
2. Pelvic Tilting

Lie in the same position as exercise 1.

- As you breathe out and draw your tummy in, gently tilt your pelvis and flatten the small of your back into the bed.
- Hold for a few seconds, and then relax
- Repeat 3-5 times and gradually build up to 10 times
3. Knee Rolling

- Lie on your back, knees bent and together, feet flat
- Draw and hold your tummy in
- Slowly lower your knees to one side, making sure that your shoulders remain on the floor
- Return to the starting position
- Lower your knees to the other side making sure that your shoulders remain on the floor
- Keep breathing normally
- Repeat 3-5 times and gradually build up to 10 times
4. Pelvic floor exercises

- Lie on your back, knees bent, at hip width apart, feet flat
- Put one pillow under your head
- Squeeze the muscles at the back passage as if trying to stop wind, then squeeze forwards and up as if trying to stop the passage of urine
- Aim to achieve your maximum squeeze and hold the squeeze for 10 seconds
- Do not hold your breath
- Repeat 10 times with a short break between each repetition

As the muscles get stronger you will find that you can hold for longer and do more repetitions. Once you feel confident with your technique you can also practice this exercise in sitting or standing.
Exercise summary

Exercises before your operation:
- General exercise
- Deep breathing exercise
- Core stability exercises

Exercises after your operation:
- Getting in and out of bed and walking
- Deep breathing exercises
- Exercises for clearing secretions
- Circulation exercises
- Core stability exercises

Exercises after you have returned home:
- Core stability exercises
- Exercises sat in a chair
- Once comfortable, exercises in standing
- General exercise
Tell us what you think

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Rebecca Hall, Senior Physiotherapist Respiratory, The York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 725528.

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Our Trust is committed to teaching, training and research to support the development of staff and improve health and healthcare in our community. Staff or students in training may attend consultations for this purpose. You can opt-out if you do not want trainees to attend. Staff may also ask you to be involved in our research.

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PALS can be contacted on 01904 726262, or via email at pals@york.nhs.uk.

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01904 725566
email: access@york.nhs.uk

Braille
Audio e.g. CD
Large print
Electronic

Owner
Rebecca Hall, Senior Physiotherapist, Respiratory
Date first issued
May 2017
Review Date
June 2019
Version
1 (issued July 2017)
Approved by
Mr Chintapatla, Consultant Surgeon
Document Reference
PIL 1119 v1

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