



Fact sheet Sex during and after pregnancy

Normally it is quite safe to continue making love while you are pregnant. Many women and their partners are concerned for the wellbeing of their baby/babies, thinking that sexual intercourse may be harmful in some way. This is not the case.

You may need to consider the positions you use, as some (eg. lying flat on your back with your partner on top) may not be comfortable later in pregnancy. Comfortable positions may be lying on your side with both partners facing each other, lying on your side with your back towards your partner, in a hands and knees position with your partner entering from behind or sitting. Books and magazines can assist you with other ideas for comfortable positions, or create your own, depending on what is comfortable for you.

It is not safe or recommended to continue sexual intercourse if you have had some spotting (bleeding), have gone into premature labour, or if your waters have broken. Spotting or bleeding at any time during pregnancy should be checked out by your doctor or midwife before you resume intercourse again. Intercourse can stimulate more contractions of the uterus, so seek advice from your doctor or midwife regarding your particular situation. If your waters break, your baby is no longer protected, so it is not safe to have sexual intercourse then until after your baby is born. Otherwise it can be safe to continue sexual intercourse right up to the time you go into labour. In fact, midwives recommend sex to bring on labour as the prostaglandins in the semen can actually trigger contractions. So if you are overdue, 'go for it', using this as one way of trying to kick-start your labour. There is no harm in trying.

Can orgasm start labour? The answer is no, unless you were ready to go into labour anyway. However, it is normal after intercourse to feel some uterine contractions (tightening), which usually go away after a few minutes.

When can we resume sexual intercourse again after the birth?

This varies widely and is very much a personal choice, depending on how you and your partner are feeling after your baby is born.

Many women do not consider this early on after the birth as there are so many other things going on. Being tired due to the demands of looking after the baby and altered sleep patterns mean that there may be little desire for sexual intercourse.

If you had stitches during your labour, or a caesarean section, you will want to wait until your stitches are healed and you are no longer tender over them.

The time when people resume sexual intercourse again varies from days to weeks, to months, depending on the above and other factors. There is no 'normal' or recommended time to start again, but you may want to consider the following factors in influencing your decision of when you are ready again.

- Advice given to you by your doctor or midwife.
- How tired you feel.
- How your partner feels about starting again.
- Physically how you feel, eg. if you have any soreness you need to wait for it to settle before you attempt making love again, or seek advice if it has not settled within a few weeks. See the 'Should my stitches feel uncomfortable after the birth or during intercourse?' section later in this fact sheet.
- You may need to use some lubricant when you do start again, as often the first few times after the birth, you may be anxious about how it will feel, so your natural lubrication doesn't always occur as easily as normal.
- If you are breastfeeding, this can also mean that you are 'drier', as the hormonal changes mean you don't produce your normal lubrication as easily. You may need to use some lubricant gel.

Fact sheet Sex during and after pregnancy

- Consider the needs of your partner too. Although you are experiencing a lot of changes to your body and routine, it is important to protect and nurture your relationship also, and spend time together. You may prefer initially just close contact leading up to sexual intercourse over time when you feel more ready.
- Some women also feel 'touched out' due to their baby needing a lot of close contact and attention.

All of these and many other factors will influence when you are ready to try intercourse again.

A few exploratory sessions are recommended before intercourse, so that your partner is aware of any areas that may be a little tender although not painful. It is not uncommon to feel an achy or tender feeling over the suture line after intercourse if you did have stitches. This should fade and become less the more times you try intercourse, but should not continue long term. You may also want to experiment with different positions, as you may find some positions more comfortable than others for a while.

Remember if you experience pain or discomfort when you try, this is not normal. Seek further advice from your midwife, doctor or a continence and women's health physiotherapist. They will be able to assist you so that this does not continue to be a problem long term.

Should my stitches feel uncomfortable after the birth or during intercourse?

If you have stitches after the birth of your baby, it is not unusual for them to feel uncomfortable initially, but this pain or discomfort should not continue long term.

Initially stitches may mean that your perineum area may also be swollen or bruised. Using ice pads or packs in the first 24–48 hours and for longer as needed, can help to reduce the swelling and can make you feel more comfortable. As charming as it sounds putting ice over your perineum area, it really does make a difference to how your stitches and perineum feels. Ice pads or packs can be used regularly while in hospital in those initial few days. They can be easily made at home if you do continue to need them. Simply dampen a sanitary pad with a little bit of water, and place it in the freezer until you need it. These can only be used once, for hygiene reasons, as you are usually still bleeding at this stage.

Starting your pelvic floor muscle exercises will actually help your stitches to heal. Make sure that you are doing

your exercises properly. Refer to 'How NOT to do your pelvic floor exercises!' in the fact sheet *About pelvic floor muscles*, or get your midwife or physiotherapist to check for you if you are unsure. The exercises will help to improve the circulation in the perineal area, which can help to reduce the swelling. Providing you are doing your exercises correctly, they will not place any strain on your stitches, as doing your exercises lifts your perineum upwards. Often women think that it will hurt to do the exercises, but it actually helps and usually feels quite comfortable to do. Just start gently and it will also help your pelvic floor muscles to recover more quickly after the birth. Doing your exercises 'little and often' at this stage can be more helpful than doing a lot in one session.

While in hospital or in those early weeks at home, ultrasound treatment by a physiotherapist can help to reduce the swelling and tenderness around the stitches. This usually makes a difference to how you feel quite quickly, so if you do have ultrasound available, make the most of the opportunity to have this done. It does not hurt during the treatment either, and is actually quite soothing because of the cold gel that is used.

Everyone heals and scars differently. As you can imagine having a scar at your vaginal opening means it is in quite a sensitive area. Normally your vaginal opening is quite supple and stretches easily. Sometimes a scar can mean that it doesn't stretch so easily, so when you start to try and make love again, it can be sensitive and sometimes uncomfortable. Some couples are unable to actually start intercourse because of the discomfort from the scar site, whereas others may be able to continue, but it is not comfortable for the woman during intercourse. Sometimes discomfort can be felt over the scar tissue from the stitches after intercourse. If any of this happens, it is NOT normal, although it is common, and you should not continue to put up with the pain.

Sometimes there is a little bit of discomfort initially and then it gets less with each time you try making love. If this occurs, it is likely that it will get better by itself. But if the pain continues, or intercourse is 'no go' because of the pain, you should seek further advice and treatment.

Something you can try yourself at home is perineal massage, which you may have heard about in antenatal classes or read about in pregnancy books. You can try massaging over the scar, starting gently and pressing as hard as you can tolerate, using some sort of lubricant gel or natural oil to massage with. If you cannot tolerate the

Fact sheet Sex during and after pregnancy

massage, or it does not get better after a few weeks, you should seek advice from a continence and women's health physiotherapist.

A physiotherapist can use ultrasound which can be applied directly over the scar at the opening of the vagina, and over any tender area of the scar. Again, it sounds charming and also embarrassing thinking about this, but it is a treatment that works really well. The ultrasound softens and breaks down the scar tissue, and over a course of treatments, the scar tissue becomes less painful and stretches more easily. Perineal massage is sometimes easier to do after the ultrasound, so that you can do this at home between treatments to help speed the recovery process. It is better to have treatment which will sort out the problem, rather than to be put off intercourse because you know it is going to hurt. There are enough other factors like having a new baby in the house and being more tired that make intercourse a challenge for new parents.

Sometimes the scar tissue from stitches can hurt just sitting down, or going to the toilet, particularly to use your bowel. The scar rubbing against your underwear may also be uncomfortable at times. If this occurs, ultrasound in those first few weeks or months can help to reduce the sensitivity and discomfort.

If you think that your scar might hurt when you try intercourse, you can have some ultrasound treatment before you even try. Then you will know that you are going to be comfortable, and there is more chance of relaxing when you do try.

Continuing with your pelvic floor exercises at this stage is still important. They will help to improve the circulation in the area, and will also help to keep on strengthening your muscles after the birth.

Women in the past have put up with the pain even up to a year or more because:

- They didn't know that intercourse shouldn't be painful after having a baby.
- They didn't realise that it wasn't normal or were told that the pain would go away.
- They were too embarrassed to come in for treatment and just hoped that the problem would go away by itself.
- They just didn't know that treatment was available.

We encourage you to seek help early if you need it, rather than continue to put up with pain and discomfort.

