



Information for
patients and
carers

Physiotherapy advice following
abdominal surgery

Introduction

This leaflet provides information and advice to help aid recovery of patients following abdominal surgery.

After your surgery

Following surgery, you may have abdominal pain around the area of your wound that makes it difficult to take deep breaths, cough and mobilise. This means you are more at risk of developing a chest infection. A physiotherapist may come and see you on the ward if you suffer from breathing problems.

You must use regular pain relief to aid your ability to take deep breaths, cough and mobilise.

All patients need to exercise to help aid recovery. Some easy exercises are shown further on in this leaflet.

Early mobilisation

When you feel ready, waking is the best exercise following surgery. The ward staff will help you until you feel confident to walk safely by yourself. It is important to continue to progress the distance you walk whilst on the ward. You may feel tired and weak at first, but this is normal following surgery. Regular short walks are essential to reduce the risk of chest infections and to start building up your strength ready for returning home (e.g. to the toilet or to the chair to sit out).

Benefits of walking:

- Reduces risk of chest infections
- Promotes independence
- Reduces the risk of developing blood clots
- Helps build strength, endurance and balance
- Reduces the risk of wound and urine infection

Side lying bed transfer

Getting out of bed following abdominal surgery can be difficult and painful. Using the following side lying technique may be beneficial and less painful.

Getting out of bed:

- Roll towards the side of the bed you wish to get out of. Use the arm and leg that is furthest away from the side you're rolling to by bending the knee and reaching for the side of the bed
- Let your feet dangle over the edge of the bed so gravity can assist
- Use your arms and elbows to raise your upper body
- Use your legs again to bring yourself up into a sitting position
- Still sitting, stabilise your balance by placing your feet on the floor and steady yourself with your arms on the bed or your lap. Stand up when you feel ready

Getting into bed:

- Sit on the edge of the bed on the side you wish to get in
- Use your arms and elbow to take your upper body onto the bed
- Simultaneously bring your legs up onto the bed and therefore into a side lying position
- Once on the bed, roll from your side to flat on the bed

Supported cough

It is really important to clear any phlegm that may be sat within your lungs. This will reduce the risk of chest infections. Coughing is the normal way to clear phlegm (mucus) from your lungs. Pain, fatigue and the increased effort needed to take a deep breath can make this difficult after surgery.

To help you cough, support your wound with a pillow or towel by applying gentle pressure to your stomach. This will help ease any discomfort your wound is giving you. It should allow you to cough more easily with less pain.

Breathing exercises

You need to complete the set of Active Cycle of Breathing Technique (ACBT) breathing exercises shown in the diagram below between 3-5 times a day. Sit as upright as possible on a bed or in a chair whilst doing so.

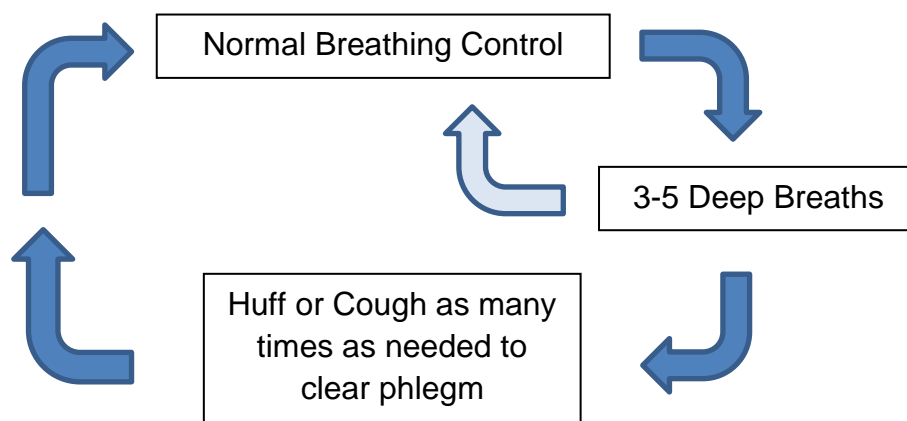
Active Cycle of Breathing Technique (ACBT)

Start with “Breathing Control”, which involves breathing gently using as little effort as possible.

- Breathe in and out gently through your nose if possible, or your mouth if not
- If you breathe out through your mouth, you can use breathing control with ‘pursed lips breathing’. To do this, purse your lips as if blowing on hot food. Breathe air out slowly, trying to let go of any tension in your body with each breath out
- Gradually try to make the breaths slower
- Try closing your eyes to help you relax and focus on your breathing

After this, start “Deep Breathing”. This consists of taking a long, slow, deep breath in. Try to keep your chest and shoulders relaxed. Breathe out like a sigh, gently and relaxed. You should do 3-5 deep breaths in a cycle. Before breathing out, some people find it helpful to hold their breath for about 2-3 seconds at the end of the breath in. Try the deep breathing exercises both with and without holding your breath and see which works best for you. Once completed go back to normal breathing control, until ready to complete further deep breaths, ready for huffing or coughing.

Complete the cycle by “Huffing” You need to exhale by forcing air out of your lungs with an open mouth and throat. This helps move phlegm up your airways so that you can clear it in a controlled way. To ‘huff’, you squeeze air quickly from your lungs, out through your open mouth and throat, as if you were trying to mist up a mirror. Use your stomach muscles as pain allows, to help you squeeze the air out. Do not force it so much that you cause wheezing or tightness in your chest. Huffing should always be followed by normal breathing control. As an alternative to Huffing, you can just complete a strong cough as appropriate. (ACPRC, 2011). Complete this full ACBT cycle once, and then take a break. Also use the ACBT cycle whenever you feel you need assistance to clear any phlegm from your lungs.



Additional exercises

You can also begin to do some exercises alongside walking in both the bed and chair to aid your recovery process and start to rebuild your strength and endurance. If you are experiencing any severe pain or if you know of any restrictions your surgeon would like you to abide by – do not force or push these exercises and seek advice from the relevant health professionals if you have concerns.

Bed exercises

Ankle Pumps

Whilst lying down bring your toes towards you and then point them towards the end of the bed.

Repeat 8-12 repetitions and complete them every hour.



Knee Slides

Slide your heel along the bed towards your bottom. Straighten your leg.

Repeat 8-12 repetitions and complete them every hour.



Static Bottom/Thigh

Whilst lying down squeeze your bottom muscles and your thigh muscles at the same time and hold for 5-10 secs.

Repeat 8-12 repetitions and complete them every hour.



Straight Leg Raise

With your legs straight. Pull your toes up towards you, straighten the knee and lift your leg off the bed.

Repeat 8-12 repetitions and complete them every hour.



Chair exercises

Heel Raises

Start with your feet flat on the floor. Slowly lift your heels up off the floor keeping your toes in contact.

Repeat 8-12 repetitions and complete them every hour.



Toe Raises

Start with your feet flat on the floor. Lift your toes up keeping your heels on the ground.

Repeat 8-12 repetitions and complete them every hour.



Marching

In a sitting position with your feet on the floor. Lift your knees up as though you are marching on the spot.

Repeat 8-12 repetitions and complete them every hour.



Straight Leg Raise

Pull your toes up towards you, straighten the knee and lift your leg off the floor. Hold for 5 secs and slowly relax.

Repeat 8-12 repetitions and complete them every hour.



Contact details

Should you require further advice or information please contact:

Physiotherapy Department. Elective Orthopaedics (Chorley Hospital):
Physiotherapy Department Surgery (Royal Preston Hospital):

01257 245754
01772 523399

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.patient.co.uk

www.accessable.co.uk

https://www.acprc.org.uk/Data/Publication_Downloads/GL-05ACBT.pdf

All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets

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Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

Gujarati:

આ માહિતીને સમજવામાં સહાયતા જોઈતી હોય તો કૃપા કરીને પૂછો. આ માહિતી મોટા છપાણ માં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે.

Romanian:

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi.”

Polish:

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostępnić dużym drukiem oraz w innych językach

Punjabi:

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵਿੱਚ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਿੰਟ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

Urdu:

دوسری زبانوں اور ریڈی اگر آپ کو ہی معلومات سمجھنے کے لئے مدد کی ضرورت ہے تو
یہی چھپا جی ایبھی دست ہو یسکت ہے براے مہر بیان پوے چھدی۔ معلومات

Arabic:

مطوبعة بأحرف كبيرة و بلغات إذا كنت تريد مساعدة في فهم هذه المعلومات يُرجى أن تطلب
أخرى يمكن تو فسير هذه المعلومات

Department: Core Therapies

Division: Diagnostics & Clinical Services (DCS)

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