

## Patient information factsheet

# Information and advice if you have had a third or fourth degree perineal tear

You have been given this factsheet because during the birth of your baby, you have experienced injury to your vagina and perineum. Your perineum is the area between your vagina and rectum (also referred to as your back passage). This injury has also involved the muscles around the rectum (the internal and external anal sphincter muscles) and may have involved the rectum itself.

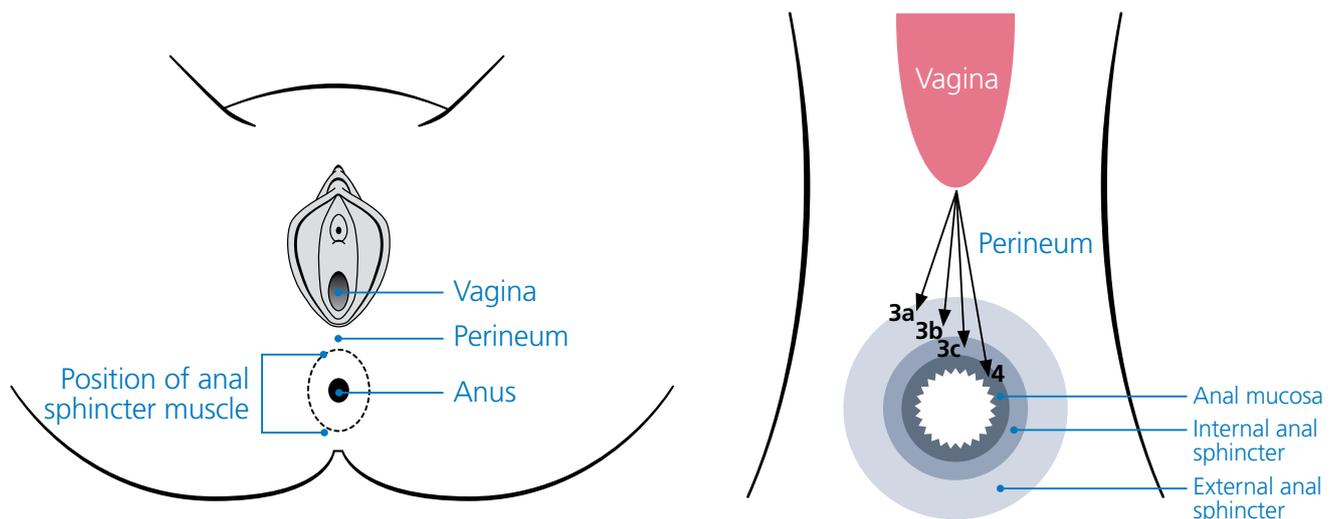
A tear involving the external anal sphincter (EAS) muscle is known as a third degree tear. A tear involving the sphincter muscles and the rectum is known as a fourth degree tear (see diagram below).

Third degree tears are labelled according to the extent of the injury:

- 3a is a tear involving less than 50% of the EAS muscle
- 3b is a tear involving more than 50% of the EAS muscle
- 3c is a tear involving the whole of the EAS muscle and the internal anal sphincter muscle

A 4th degree is a tear involving the rectal mucosa (lining of the bowel).

### The position of a third and fourth degree tear



Nationally up to 9% (nine in 100) of women are reported to have experienced a third or fourth degree perineal tear, however, this figure is lower here at University Hospital Southampton NHS Foundation Trust. In 2013, 3.6% of women experienced a third degree tear and 0.2% a fourth degree tear following the birth of their first baby. For women having a second baby, the figures were significantly lower with 1.6% experiencing a third degree tear and 0.14% a fourth degree tear.

## The likelihood of you having a third or fourth degree tear is increased if:

- this is your first vaginal birth
- your baby is born facing upwards
- your perineum (the distance between your vaginal opening and anus) is short
- you need help with the birth by forceps or ventouse
- you have a large baby
- you have a long labour
- you have an episiotomy (a surgical cut in your perineum used to enlarge the opening of your vagina to help with the birth of your baby) as this can extend into a third or fourth degree tear.

## Treatment of third and fourth degree tears

A third or fourth degree tear requires precise surgery to repair it. The repair is done in an operating theatre and is usually performed under an epidural or spinal anaesthetic or very occasionally a general anaesthetic.

During the procedure, antibiotics are given to prevent infection and a urinary catheter (a thin tube) is passed into the bladder to allow drainage of urine.

## Aftercare of third and fourth degree tears

After your repair it is recommended that you take the following medication:

- regular pain relieving medication. Do not wait until you are in pain, but take them on a regular basis for the first few days (as per the instructions on the box) and subsequently as you require them
- antibiotics for one week following the birth to prevent infection that could lead to breakdown of the repair
- the medicine lactulose (a stool softener) and Fybogel™ (a high fibre drink) for approximately two weeks, as required. This will help you have your bowels open without straining and avoid constipation. Drinking plenty of fluids and eating a well-balanced diet that includes fresh fruit and vegetables as well as fibre will also help you to avoid constipation.

None of the medication offered will prevent you from breastfeeding your baby, however, if you have any questions or concerns please speak to your midwife.

## You are also advised to:

- wash your hands before and after you go to the toilet and/or change your sanitary towel, especially when you go home. You should change your sanitary towel at least every four hours. Ensure it is secured in place so it doesn't move around and cause further irritation
- pat the area dry from front to back to avoid introducing germs from the rectum into the perineal and vaginal area
- pour warm water on your perineum when you pass urine. The warm water will dilute the urine so it doesn't sting the wound. Drinking plenty of water will also keep your urine diluted, this will also help reduce stinging when you pass urine
- begin doing gentle pelvic floor exercises as soon as you can after the birth to increase your blood supply to the area and help the healing process. These exercises will also help your pelvic floor regain its tone and control. Please discuss these with your midwife and ensure you have a copy of the booklet entitled 'shape up after pregnancy'
- avoid standing or sitting for long periods and ensure you are comfortable when sitting to feed your baby. Try lying on your side to feed your baby.
- check your perineum for signs of infection. If the area becomes hot, swollen, weepy, smelly, very painful or starts to open, or you develop a temperature or flu-like symptoms please let your midwife or GP know. You may be developing an infection and need treatment with antibiotics.

## Follow-up care

The follow-up care you receive will depend on the degree of injury.

### If you have had a 3a third degree tear you should:

- arrange to see your own GP six to eight weeks after birth when you have your postnatal appointment
- contact your midwife or GP if you experience any problems prior to this appointment as an appointment with a specialist consultant can be arranged

### If you have had a 3b, 3c or fourth degree tear you should:

- arrange to see your own GP six to eight weeks after the birth of your baby, for your postnatal appointment
- you will also be sent an appointment to be seen in the perineal tear clinic six to eight months after the birth of your baby

During the appointment you will be seen by a consultant colorectal surgeon or a consultant gynaecologist to discuss how well the tear has healed and if there is any ongoing injury. This appointment will include an endoanal ultrasound scan to check you have healed completely.

The endoanal ultrasound scan involves placing a small probe just inside the entrance of the anus so that the anal sphincter (muscular ring around the anus) can be examined and assessed. This can be slightly uncomfortable but should not be painful.

Once you have been examined you will be given the opportunity to discuss future pregnancies and births; the likelihood of you experiencing similar problems in the future and how any of your future babies might best be born.

It's extremely important that you attend this appointment. Please contact the ward clerk on Burley Ward, at the Princess Anne Hospital (**023 8120 6030**) if you have not received your appointment for the perineal repair clinic during the first six to eight weeks following the birth of your baby.

## The consequences of having a third or fourth degree tear

Tears and episiotomies will cause pain and discomfort following birth. Sometimes, passing urine or having a bowel action can be painful. However, you should experience continual improvement. It may also be painful to resume sexual intercourse for quite some time. You are advised to use a lubricating jelly and try out different positions to find one that is comfortable for you.

Most women recover very well and have no problems. Some women will continue to have symptoms of bowel urgency (the need to rush to the toilet to have your bowels open) or faecal incontinence (inability to control bowel movements). Related symptoms include passing wind and/or liquid or solid stools without meaning to. If you are experiencing any bowel leakage, urgency or problems related to your pelvic floor exercises please contact the women's health physiotherapy team at Princess Anne Hospital on **023 8120 4351** between 8.30am to 4.30pm, Monday to Friday to arrange an appointment.

Sometimes the healing may not be complete and there may be a weakness in the anal sphincter after repair. This may not necessarily result in you having symptoms, but you may develop problems such as faecal incontinence in later life. If you develop any of these symptoms or there are any ongoing problems, you should consult your doctor to organise further treatment and investigation.

## Future pregnancy

If you have another pregnancy, you will be referred to either a consultant obstetrician or consultant midwife for further discussion about the type of delivery that is best for you and your baby. This referral will also give you a chance to talk about any concerns you may have.

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## Further sources of information and support

This factsheet is intended to give you information and answer any of your immediate questions. Please feel free to discuss any further questions and concerns with your midwife or doctor.

Factsheets offering advice on the care of your perineum and recovery after having an assisted birth are also available. Please ask your midwife if you would like one of these.

## Useful contact numbers

### Birth Afterthoughts

If you would like to discuss the birth of your baby in more detail, please contact Birth Afterthoughts on **023 8120 6834**.

### Continence advisory service

The continence service aims to promote continence and the management of incontinence. For more information please contact **023 8071 8833**.

### Women's health physiotherapy team

If you require any further information or advice within the first six weeks following birth please contact the women's health physiotherapy team at Princess Anne Hospital on **023 8120 4351** between 8.30am to 4.30pm Monday to Friday to arrange an appointment.

**If you need a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone 023 8120 4688 for help.**