After a Hysterectomy: Coping with Changes

After your surgery, our goal is to aid your recovery so you can return to your normal activities. This includes maintaining satisfying sexual and intimate relations. The following information will help answer your questions about coping after a hysterectomy.

If you have any questions or concerns, please ask your doctor or nurse.

Women who have had a hysterectomy may undergo some physical and emotional changes. These vary depending on the person and the type of surgery.

To understand your surgery, it is helpful to review the female anatomy.

Anatomy

The normal female reproductive system lies in the lower abdomen. It consists of:

- 2 ovaries (produce hormones; store and release eggs).
- 2 fallopian tubes (channels that transport eggs to the uterus).
- Uterus (womb).
- Cervix (at the end end of the uterus, connects to the vagina).
- Vagina (hollow tube from the outside of body to the cervix).
Hysterectomy

There are 3 types of hysterectomies.

- In **sub total hysterectomy**, the uterus is removed and the cervix is left in place.
- The uterus and cervix are removed in a **total hysterectomy**. When the cervix is removed, the vaginal canal may be somewhat shorter.
- The uterus, cervix, fallopian tubes and both ovaries are removed in a **total hysterectomy with bilateral salpingo-oopherectomy**. Because the ovaries are removed, all women will go through menopause.

Commonly Asked Questions

**How Soon Can I Have Sexual Intercourse?**

Right after surgery, intercourse must be delayed for 6 weeks. This allows your body time to heal. Talk to your doctor about when you can resume sexual activity. With vaginal incisions, you should wait until there is no vaginal bleeding or discharge.

In the meantime, consider kissing, touching and massaging. Experiment with your partner. The goal is to keep intimacy part of your relationship without intercourse.

**Will I Have Pain When I Resume Intercourse?**

The fear of pain is a common concern for women and for their partners. When sexual activity is resumed, you may still feel tired or have some incision pain. If you are feeling tired, plan an afternoon nap. If you have pain, ask your doctor if pain medications will help.

There may be some pain or discomfort with intercourse. Find a position that eases discomfort: woman on top, side-lying or positioning pillows behind the knees or the small of the back.

After surgery, the vagina may be shorter. At first, this can cause discomfort. The vagina can still stretch with intercourse. Regular vaginal intercourse will help:

- Conserve vaginal length.
- Lessen discomfort.

The use of water-soluble lubricants (K-Y Jelly®) and moisturizers (Replens®) can improve comfort and pleasure.

**Can I Still Have an Orgasm?**

An orgasm begins in the vagina. The nerves related to orgasm are not affected by surgery. If the ovaries were removed during surgery, you will have some vaginal dryness and decreased fullness of the labia (folds around the vagina). Water-soluble lubricants and foreplay can help.
**What Can I Do About Other Related Side-Effects?**

If the ovaries were removed, women may have:

- Mood swings.
- Hot flashes.
- Sleeping problems.

Consider an exercise routine and relaxation techniques. Avoid caffeine before bedtime.

Identify what triggers your hot flashes. Then take steps to avoid these triggers. Dress in layers and remove clothing as needed. Talk to your doctor about hormone replacement.

**What Can You Do to Increase Sexuality and Intimacy After the Surgery?**

You and your partner can take certain steps to regain satisfying intimate relations.

- Schedule a “date.” This is something both partners can look forward to and plan.
- Set a romantic mood with candles, a bubble bath, slow music or a romantic movie.
- Talk with your doctor about medicine that will help increase your libido (sex drive).
- Communicate with your partner. Ask each other questions like: What touch is most pleasing? Do you like it when I do this? How does this feel? Practice touching each other to find what your partner enjoys most.

Be sure to talk with your partner about any concerns you have about feelings, such as self-image or stress, etc. Open communication is a good way to reduce fears and anxiety. If unwanted feelings persist, talk with your doctor. Steps can be taken that can help with fatigue, depression or anxiety.

If you have any questions or concerns, please call your doctor or nurse.

**Northwestern Medicine – Health Information Resources**

For more information, contact Northwestern Memorial Hospital’s Alberto Culver Health Learning Center (HLC) at hlc@nm.org, or by calling 312.926.5465. You may also visit the HLC on the 3rd floor, Galter Pavilion at 251 E. Huron St., Chicago, IL. Health information professionals can help you find the information you need and provide you with personal support at no charge.

For more information about Northwestern Medicine, please visit our website at nm.org.