

Scar tissue mobilisation for perineal scars and Caesarean scars

This leaflet gives you information and advice about scar tissue mobilisation (massage) for childbirth scars (tears and episiotomy). If you have any questions, please speak to your physiotherapist.

What are perineal and Caesarean scars?

A perineal scar is a scar on the perineum – the skin and muscles between your vagina and your anus (back passage). You will have one of these scars if you had to have a cut there to help your baby to be born, or if the tissues in that area tore while your baby was being born. A Caesarean scar is a scar from where you had a Caesarean operation to deliver your baby – this will be on your lower tummy.

How is scar tissue formed?

Scar tissue is harder, lumpier and less stretchy than normal tissue. It is formed as a result of the body repairing the damage from where you tore or were cut. To repair tissue, the body produces collagen fibres at a faster rate than normal. Due to the rate at which these fibres are laid down, this can lead to the fibres being "crossed over" – and this leads to scar tissue. The role of mobilisation, or massage, is to break down the scar tissue and encourage the collagen fibres to realign into a better position, allowing the tissue to function more normally.

What are the benefits of scar tissue mobilisation?

- Reduces/relieves discomfort or pain in the area of the scar.
- Can help reduce any pain experienced when opening bowels (perineal scars).
- Softens and flattens scars and improves their appearance.
- Increases flexibility and mobility of scars.
- Improves quality of life.

How can scar tissue mobilisation help?

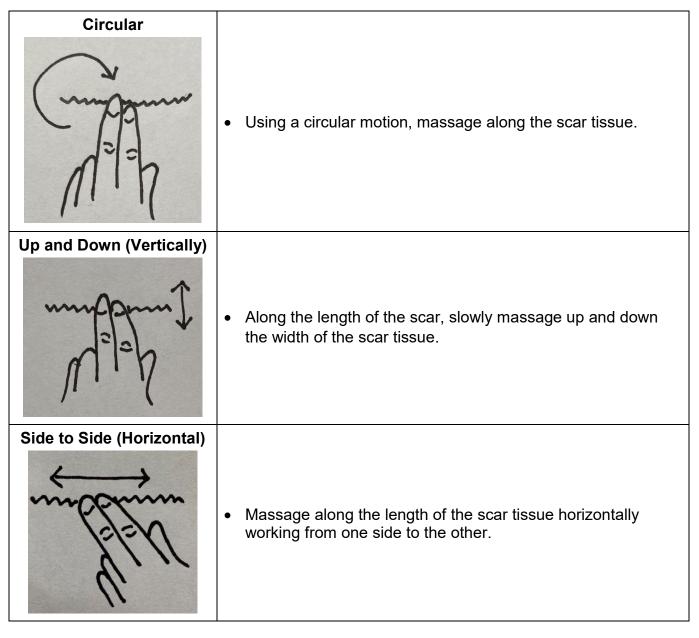
The increase in blood flow to the area from the massage leads to an increase in temperature of the tissue. This can increase the elasticity of the tissue and allow the scar tissue to be broken down more easily. In turn, this should decrease any restriction caused by the scar tissue.

General tips

• Only begin scar tissue mobilisation once the wound has completely healed: stitches are dissolved/have been taken out, all scabs have fallen off, there is no oozing or weeping from the wound and the surrounding area is not swollen or red. This will usually be at least 6-8 weeks after your baby was born.

- Begin by washing your hands and getting into a comfortable position to be able to reach the scar easily.
- Use an intimate lubricant for perineal scars, and a moisturising cream such as E45, or massage oil for Caesarean scars.
- Begin the massage, slowly working through each technique (as seen below).
- Apply as much pressure as you feel comfortable with start gently and go deeper as it becomes more comfortable.
- A partner can help as needed.
- Try to complete this 2-3 times daily for up to 10 minutes.

Methods:



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When should you stop massaging?

Stop massaging and contact your GP if you experience any of the following:

- Excessive redness (a little redness from where you have been massaging is normal).
- Bleeding or swelling.
- Scar feels a lot warmer than the skin around it.
- Site of scar is more painful than normal.
- Any discharge from the site of the scar.

Further information

POGP <u>https://thepogp.co.uk/patient_information/default.aspx</u> <u>www.britishskinfoundation.org.uk/blog/the-benefits-of-scar-massage</u> <u>www.physio.co.uk/treatments/massage/benefits-of-massage/breakdown-of-scar-tissue.php</u> <u>www.bio-oilprofessional.co.uk/scarmassage/</u>

Contact us

Women's and Men's Health Physiotherapists RBFT Physiotherapy Department 0118 322 7811 or 7812

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

Jenni Churches, Physiotherapy, January 2022 Next review due: January 2024

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