

Returning home / fitness

When you return home, continue to walk 2-3 times per day until you feel slightly breathless, increasing your distance every day. You can start light activities, taking care not to lift anything heavier than 1kg.

Gradually over the next 6-8 weeks you can increase the amount of exercise to 20mins, 2-3 times a week. You can lift up to 5kg. Do not lift more than 5kg for 6 months.

Exercise progression

You can start light sports / gym work / gardening 2-3 months after the operation. For specific sports / heavy activity please discuss with your consultant.

Driving

Do not drive a car for 6-8 weeks (unless advised by your consultant). It is a good idea to inform your insurance company following major surgery, so you do not invalidate your insurance policy.

Back to work

Do not return to work until after your consultant outpatient appointment. You may be advised to refrain from work for an extended period if you have a manual job



This leaflet is available in large print and other formats and languages

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Physiotherapy Advice

For patients undergoing
Gastro-Oesophagectomy

Introduction

Physiotherapy is an essential part of recovery following your operation. There are 3 main areas of physiotherapy involvement:

- Chest care
- Mobility
- Returning home / fitness

Chest care

There are many factors associated with Thoracic surgery which can lead to chest complications. These can occur regardless of whether you have existing chest conditions or a smoking history.

- Anaesthesia can increase the amount of phlegm produced and make it thicker and stickier. It can temporarily reduce the strength of your cough
- During the operation your lungs may be partially deflated and will take time to re-inflate
- Discomfort from your wound or drains can limit your ability to take a deep breath or cough
- Smoking or recent coughs/colds can increase the amount of phlegm produced after the operation
- Reduced activity levels following your operation can lead to shallow breathing. This will make clearing your phlegm more difficult and may lead to a build up.

Breathing Exercises

Breathing exercises help to expand your lungs and remove secretions after surgery.

It is very important that you practice these regularly as a build up of phlegm can lead to a chest infection.

Before starting breathing exercises ensure that: -

- your pain is well controlled (you can take a deep breath without feeling too uncomfortable). You can support your wound. Contact your nurse if you still have pain
- make sure you are sitting comfortably in an upright position

Start the exercises by practising normal relaxed breathing. If you place your hands on your abdomen you should feel it rise and fall gently. Then: -

- take a slow gentle long breath in through your nose (if able). Hold this for 3-5 seconds, sniff in, then gently breathe out. Repeat twice more
- then take 2 supported huffs (short sharp breath with your mouth open) and a supported cough
- return to relaxed breathing and repeat if you feel you have more phlegm to clear.

Mobility

The physiotherapist will help you to mobilise the day after the operation. It is very important to mobilise because

- it encourages you to breathe more naturally, taking deeper breaths which re-expand your lungs and make the clearance of phlegm easier.
- it boosts your circulation, reducing the risk of clots
- it encourages your gut to function normally reducing the risk of constipation and bloating

The physiotherapists will continue to work with you until you are safe to mobilise on your own. Before you go home they will usually assess your ability to climb the stairs.

Do not attempt stairs without a member of staff unless told otherwise.

You may find that your shoulder on the side of the surgery can become stiff. Make sure you are regularly stretching your shoulder in all directions. Stop if this becomes painful.