



A/Prof. James Lee

SPECIALIST GENERAL AND ENDOCRINE SURGEON



Hernia Repair

DISCHARGE INFORMATION

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General Information

Symptoms after hernia surgery:

It is common to experience one or more of the following symptoms following hernia surgery. These symptoms are usually mild to moderate, improving over weeks to months. So if you experience prolonged symptoms, please discuss with Mr Lee or your GP.

- ➔ **Pain or funny sensations around the wound - usually settles within 1 to 2 weeks**
- ➔ **Numbness and / or mild swelling around the wound**
- ➔ **Muscle stiffness**
- ➔ **Tiredness is common after general anaesthesia**
- ➔ **Scrotal swelling or bruising after inguinal hernia repair**

If you experience severe pain or rapid swelling around the wound, please go to the nearest emergency department immediately, or call the ambulance.

Wound Care

When you are discharged from hospital, you will have some water-proof dressing over your wound. Please leave it in place until you return for your first review appointment in 1 - 2 weeks' time. You can shower with the dressing in place, just gently dab dry. Please do not be alarmed if it becomes a little blood stained. It is common for the skin around the wound to become swollen over the week after surgery. However, if it becomes red, hot and painful, it may have become infected. This is very uncommon but potentially serious. If it occurs, please see your GP or Mr Lee to see if you need antibiotics.

The dressing on your wound will be replaced or simply removed at your first follow-up appointment with Mr Lee. Usually, the stitches are dissolvable. This means there is usually no need for any stitches to be removed. However, if you had a drain tube in place after surgery, there is often 1 - 2 stitches that might need to be removed after about 1 week after removal of the drain.

An infection can compromise the healing of the hernia repair, especially if the repair is achieved by placement of a mesh. Therefore, it is important that any signs of infection are detected early and treated adequately to prevent the mesh from getting infected. Simple things you can do to help prevent infection include keeping the area clean and dry, not smoking, keeping good blood sugar control, and having a healthy and nutritious diet.

Specific Instructions

After Key Hole Surgery

Despite small incisions, it is important that you do not rush into too much physical activity after surgery. The repair takes as much time to heal as open surgery.

After Inguinal Hernia Repair

A very common “surprise” for men after this procedure, whether done open or key-hole, is swelling and bruising of the scrotum. This can sometimes be quite significant. There is no need to be alarmed, as long as it is not associated with significant pain, it will slowly subside without further active treatment. Beware that it can sometimes take weeks to go away. For comfort, supportive jocks is recommended.

Some men can also have difficulty passing urine after this procedure. If that is the case, please alert your doctor. If you are able to pass urine before being discharged, this is very unlikely to happen when you are home.

After Umbilical Hernia Repair

Surgery near the belly button are prone to infection. Please seek medical advice if the wound becomes tender, swollen and red, or if the dressing becomes soaked with fluid and emits a foul smell.

After Large Abdominal Hernia Repair

If you have been fitted with an abdominal binder, please keep wearing it for 3 weeks, only taking it off for showering/changing.

After Multiple Hernia Repairs

You can experience increased levels of discomfort if you have had multiple hernias repaired at the same time. Therefore it is important that you discuss with your doctor the amount of pain killers you need, so that you can maintain your mobility and movements. sugar control, and having a healthy and nutritious diet.

Diet

There are no specific restrictions to your diet. You can resume your usual diet after the operation. However, you are encouraged to have a balanced diet high in fibre and drink plenty of fluids to facilitate regular bowel habits.

Activities

Vigorous activities and lifting of more than a couple of kilograms should be avoided for at least 6 weeks after surgery. You are encouraged to go for walks at a leisurely pace up to 20 minutes at a time. You should be doing this on a daily basis, starting with once a day, increasing the frequency as you start to feel more comfortable. Driving should be avoided until you are off pain killers and can comfortably use the brake pedal without pain, usually 2 weeks. After 6 weeks, gradually build back up to your previous level of exercise intensity.

There is no hard and fast rule on how quickly you can get back to your normal activities. A good rule of thumb is to listen to your body. If something you are doing is causing discomfort during or after the activity, you are probably not ready for it yet.

You may need to consider consulting a fitness professional to help adapt to the kind of activities you are able to do in the future. facilitate regular bowel habits.

Avoiding recurrence

After any hernia repair, there is a very small risk of the hernia coming back, called recurrence. The risk factors for recurrence are similar to those that might have contributed to the development of the hernia in the first instance. Any factor that chronically increases the pressure inside the abdominal cavity can be a risk - such as constipation, enlarged prostate for men, chronic cough of a smoker, heavy lifting at work/ gym. See the Activities section regarding exercise after surgery.

Other factors that impair the healing process may also increase the risk of recurrence. These factors include poorly controlled diabetes, smoking, long-term steroid medications, other immunosuppressants, connective tissue disorders, poor nutrition.

Some of these factors are beyond the control of an individual. However, there are many that can be modified through lifestyle adjustments/medical treatment. Therefore, the modifiable factors should be as well controlled as possible to avoid recurrence.

NB Please note that the information in this pamphlet is provided for the purpose of general reference & education. Mr Lee cannot be held liable for any deviations from the information contained within this pamphlet. Always discuss your specific circumstances with your surgeon Mr Lee.

Medications

- ➔ **For pain:** If you need stronger pain medications than those you can get without a prescription, you will be discharged with them. They can be weaned off as soon as possible.
- ➔ **Other medications:** You may also need to take other medications as necessary, such as laxatives if you experience constipation with the pain medications. You should also go back to your usual medications. Please discuss with Mr Lee when to restart your blood thinners if you normally take them.

Follow-up Appointments

- ➔ **With your GP:** Your GP plays an important role in your postoperative care. They can help you adjusting your medications, answer any questions you might have, or check your wound/ dressing if you have any concerns. They are your first port of call if you have any issues. Details of your surgery and hospital admission will be forwarded to them.
- ➔ **With Mr Lee:** Your first appointment to see Mr Lee will be made approximately 2 weeks after surgery. Please ring the rooms on (03) 9246 6466 to confirm your appointment. Any subsequent appointments will be made after your first follow-up visit.

Country Patients

If you are unable to return to Melbourne for follow-up, you will need to arrange all follow-up appointments with your GP. Please discuss this with Mr Lee prior to discharge.



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