

Hernia

Information for Patients

Your doctor has referred you to us because you may have a groin (inguinal or femoral), umbilical or epigastric hernia.

What is a hernia?

The most common hernias, usually in men, appear in the groin and can be on the right or left side. The hernia appears as a bulge caused by a weakness in the muscle wall of the abdomen. Another common type of hernia occurs around the belly button (umbilical).

What causes a groin hernia?

Above the groin is a small hole in the muscle wall of the abdomen where arteries and veins pass to the testicle. A weakness may result in a part of the bowel bulging (inguinal or femoral hernia). You may feel discomfort when coughing, standing for long periods, or carrying out some vigorous activity.

What are the alternatives?

You may at first find relief by lying down, which stops the hernia from bulging, but the only cure is an operation. The hernia is not dangerous but the discomfort will continue if not seen to. If left too long, it may become strangulated. This is when the loop of the bowel, which forms the hernia, twists on itself. Some people have hernias for years, but they have to be aware not to strain themselves which may stifle their lifestyle unnecessarily. It can be better to have the operation.

What is the procedure?

A hernia operation can be performed under either local or general anaesthetic. The surgeon will advise what is best for you. At

Probus Surgical Centre this operation is performed under local anaesthetic.

An incision is made measuring six to ten centimetres long above the groin. Local anaesthetic is injected into the area of the cut. One of the muscle layers is opened and the hernia is then carefully put back in place and a repair is made to strengthen the weakened area. The repair can consist of two or more layers of stitches or by stitching a plastic mesh over the whole area. Both of these methods give very good lasting results. Once again the surgeon will decide what is required depending on what type of hernia he finds.

The procedure will last anywhere from 30 to 80 minutes.

If you are on warfarin, clopidogrel or dipyridamole (persantin) please contact our surgical team for further information prior to your operation



POST-OP CARE

Removal of stitches

You will be advised about the closure of the wound as to whether you have dissolving stitches, sutures or clips that need to be removed after 4 -10 days.



Pain control



You will be given some pain killers to take home as there may be a feeling of tightness around the stitches which may cause some discomfort.

We recommend taking them as soon as you get home and then regularly for the first 48 hours, as instructed by the nurse.

Bathing

Don't bathe or shower for 2 days after the operation. In some cases, a waterproof dressing will have been used. This will protect the wound even while washing or bathing. It is best to wait for the wound to become nice and "dry" before activity such as swimming.

Driving

It is best to wait until you are comfortable and confident. You must be confident that you can keep control during an emergency. (Check with your Insurance Company to make sure you are covered).

Work and heavy lifting

You can return to work when you feel strong enough. In case of heavy lifting, this should be avoided for at least one month after the operation or as advised by your surgeon.

Will the hernia return

The possibility of recurrence of the hernia is small, especially if you follow your surgeon's advice about taking care of yourself after the operation.

COMPLICATIONS AND RISKS



Any surgical procedure has an element of risk attached to it and occasionally things do not turn out as well as expected. Possible complications include:

- excessive bleeding and injury to nearby areas (tissue)
- infection
- allergic reaction to drugs or anaesthetic
- a recurrence of the problem.

The likelihood of complications increases in:

- people over 60 years
- people who are overweight, smokers or heavy drinkers
- people who take certain medicinal or mind altering drugs.

Your doctor will help you decide between the advantages and risks.

WHERE TO GET ADVICE



If you have any concerns during the post-op period you can get advice or help from one these sources.

- Try your own doctor or nurse
- Contact one of the surgical team.
- Out of Hours Service – contact the emergency number provided by your surgery
- Your local Emergency Department

Severe pain, excessive swelling or bleeding should prompt you to seek advice. Take this letter with you and insist that the dressings are removed and the wound inspected before redressing.

TRAINING OF STUDENTS



We are a teaching and training practice. Sometimes medical students or doctors in training may wish to observe or participate in procedures or operations. They will always be supervised by a senior doctor and will only participate with your approval.

If you do not wish to be seen by trainees or students you are perfectly entitled to withhold your consent.

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